

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) (Area Code) (Telephone Number)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) (Area Code) (Telephone Number)

Internet Website Address _____ 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.....



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

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,477	0	0	0	3,477
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		3,477	0	0	0	3,477
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		8,800	0	0	0	8,800
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		8,800	0	0	0	8,800
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	242	0	0	0	0	0	0	0	242
17. Incurred during current year	1	8,828	0	0	0	0	0	0	1	8,828
Settled during current year:										
18.1 By payment in full	1	8,800	0	0	0	0	0	0	1	8,800
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	8,800	0	0	0	0	0	0	1	8,800
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	8,800	0	0	0	0	0	0	1	8,800
19. Unpaid Dec. 31, current year (16+17-18.6)	0	270	0	0	0	0	0	0	0	270
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	347,987	0	(a) 0	0	0	0	0	12	347,987
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(17,202)	0	0	0	0	0	0	(2)	(17,202)
23. In force December 31 of current year	10	330,785	0	(a) 0	0	0	0	0	10	330,785

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Alaska

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,603	0	0	0	2,603
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,603	0	0	0	2,603
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		98,608	0	0	0	98,608
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		98,608	0	0	0	98,608
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.304	0	.0	0	0	0	0	0	304
17. Incurred during current year	0	34	0	.0	0	0	0	0	0	34
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	339	0	0	0	0	0	0	0	339
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	13	435,786	0	(a) 0	0	0	0	0	13	435,786
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(15,067)	0	0	0	0	0	0	(1)	(15,067)
23. In force December 31 of current year	12	420,719	0	(a) 0	0	0	0	0	12	420,719

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Arkansas

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		683	0	0	0	683
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		683	0	0	0	683
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		8,832	0	0	0	8,832
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		8,832	0	0	0	8,832
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.57	0	0	0	0	0	0	0	.57
17. Incurred during current year	1	8,841	0	0	0	0	0	0	1	8,841
Settled during current year:										
18.1 By payment in full	1	8,832	0	0	0	0	0	0	1	8,832
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	8,832	0	0	0	0	0	0	1	8,832
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	8,832	0	0	0	0	0	0	1	8,832
19. Unpaid Dec. 31, current year (16+17-18.6)	0	66	0	0	0	0	0	0	0	66
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	91,679	0	(a) 0	0	0	0	0	3	91,679
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	9	0	0	0	0	0	0	0	9
23. In force December 31 of current year	3	91,688	0	(a) 0	0	0	0	0	3	91,688

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF California

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	95,354		0	0	0	95,354
2. Annuity considerations	462		0	0	0	462
3. Deposit-type contract funds	0		XXX	0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	95,816		0	0	0	95,816
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0		0	0	0	0
6.2 Applied to pay renewal premiums	0		0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0		0	0	0	0
6.4 Other	0		0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0		0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit	0		0	0	0	0
7.2 Applied to provide paid-up annuities	0		0	0	0	0
7.3 Other	0		0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0		0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0		0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	203,164		0	0	0	203,164
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	0		0	0	0	0
12. Surrender values and withdrawals for life contracts	158,173		0	0	0	158,173
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0		0	0	0	0
14. All other benefits, except accident and health	0		0	0	0	0
15. Totals	361,337		0	0	0	361,337
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0		0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0		0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	11,320	0	0	0	0	0	0	0	11,320
17. Incurred during current year	3	202,982	0	0	0	0	0	0	3	202,982
Settled during current year:										
18.1 By payment in full	3	203,164	0	0	0	0	0	0	3	203,164
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	3	203,164	0	0	0	0	0	0	3	203,164
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	3	203,164	0	0	0	0	0	0	3	203,164
19. Unpaid Dec. 31, current year (16+17-18.6)	0	11,138	0	0	0	0	0	0	0	11,138
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	163	16,039,406	0	(a) 0		0	0	0	163	16,039,406
21. Issued during year	0	0	0	0		0	0	0	0	0
22. Other changes to in force (Net)	(16)	(2,206,867)	0	0		0	0	0	(16)	(2,206,867)
23. In force December 31 of current year	147	13,832,539	0	(a) 0		0	0	0	147	13,832,539

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Colorado

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.558	0	.0	0	0	0	0	0	.558
17. Incurred during current year	0	30	0	.0	0	0	0	0	0	.30
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	588	0	0	0	0	0	0	0	588
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	14	812,156	0	(a) 0	0	0	0	0	14	.812,156
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(49,553)	0	0	0	0	0	0	(1)	(49,553)
23. In force December 31 of current year	13	762,603	0	(a) 0	0	0	0	0	13	762,603

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Connecticut

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	173	0	0	0	0	0	0	0	173
17. Incurred during current year	0	27	0	0	0	0	0	0	0	27
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	201	0	0	0	0	0	0	0	201
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	250,000	0	(a) 0	0	0	0	0	3	250,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	3	250,000	0	(a) 0	0	0	0	0	3	250,000

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Delaware

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2019

NAIC Group Code 0707

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX			
4. Other considerations					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID		NONE				
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF Florida

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		35,857	0	0	0	35,857
2. Annuity considerations		6,155	0	0	0	6,155
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		42,012	0	0	0	42,012
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		3,142	0	0	0	3,142
12. Surrender values and withdrawals for life contracts		63,561	0	0	0	63,561
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		66,703	0	0	0	66,703
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	2,414	0	0	0	0	0	0	0	2,414
17. Incurred during current year	1	24,897	0	0	0	0	0	0	1	24,897
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	1	27,311	0	0	0	0	0	0	1	27,311
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.55	3,463,942	0	(a) 0	0	0	0	0	.55	3,463,942
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(474,206)	0	0	0	0	0	0	(1)	(474,206)
23. In force December 31 of current year	54	2,989,736	0	(a) 0	0	0	0	0	54	2,989,736

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Georgia
NAIC Group Code 0707

DURING THE YEAR 2019
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		10,242	0	0	0	10,242
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		10,242	0	0	0	10,242
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	810	0	0	0	0	0	0	0	810
17. Incurred during current year Settled during current year:	0	171	0	0	0	0	0	0	0	171
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	981	0	0	0	0	0	0	0	981
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	28	1,028,669	0	(a) 0	0	0	0	0	28	1,028,669
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	46,681	0	0	0	0	0	0	0	46,681
23. In force December 31 of current year	28	1,075,350	0	(a) 0	0	0	0	0	28	1,075,350

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.37	0	.0	0	0	0	0	0	.37
17. Incurred during current year	0	(5)	0	.0	0	0	0	0	0	(5)
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	32	0	0	0	0	0	0	0	32
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	50,000	0	(a)	0	0	0	0	1	50,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	1	50,000	0	(a)	0	0	0	0	1	50,000

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Idaho

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		608	0	0	0	608
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		608	0	0	0	608
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	187	0	0	0	0	0	0	0	187
17. Incurred during current year	0	30	0	0	0	0	0	0	0	30
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	217	0	0	0	0	0	0	0	217
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	246,500	0	(a) 0	0	0	0	0	2	246,500
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	2	246,500	0	(a) 0	0	0	0	0	2	246,500

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Illinois

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		6,557	0	0	0	6,557
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		6,557	0	0	0	6,557
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		168,808	0	0	0	168,808
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		168,808	0	0	0	168,808
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	406	0	0	0	0	0	0	0	406
17. Incurred during current year	0	(7)	0	0	0	0	0	0	0	(7)
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	400	0	0	0	0	0	0	0	400
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	19	597,027	0	(a)	0	0	0	0	19	597,027
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(3)	(90,244)	0	0	0	0	0	0	(3)	(90,244)
23. In force December 31 of current year	16	506,783	0	(a)	0	0	0	0	16	506,783

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		9,429	0	0	0	9,429
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		9,429	0	0	0	9,429
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		22,699	0	0	0	22,699
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		22,699	0	0	0	22,699
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	885	0	0	0	0	0	0	0	885
17. Incurred during current year	0	32	0	0	0	0	0	0	0	32
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	917	0	0	0	0	0	0	0	917
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.37	1,341,931	0	(a) 0	0	0	0	0	.37	1,341,931
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(4)	(117,707)	0	0	0	0	0	0	(4)	(117,707)
23. In force December 31 of current year	33	1,224,224	0	(a) 0	0	0	0	0	33	1,224,224

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	183	0	0	0	0	0	0	0	183
17. Incurred during current year	0	30	0	0	0	0	0	0	0	30
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	213	0	0	0	0	0	0	0	213
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	269,151	0	(a) 0	0	0	0	0	7	269,151
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	491	0	0	0	0	0	0	0	491
23. In force December 31 of current year	7	269,642	0	(a) 0	0	0	0	0	7	269,642

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,123	0	0	0	2,123
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,123	0	0	0	2,123
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		1,952	0	0	0	1,952
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		1,952	0	0	0	1,952
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	120	0	0	0	0	0	0	0	120
17. Incurred during current year	0	(43)	0	0	0	0	0	0	0	(43)
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	77	0	0	0	0	0	0	0	77
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	181,776	0	(a) 0	0	0	0	0	8	181,776
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(71,630)	0	0	0	0	0	0	(2)	(71,630)
23. In force December 31 of current year	6	110,146	0	(a) 0	0	0	0	0	6	110,146

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Kentucky

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		34,381	0	0	0	34,381
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		34,381	0	0	0	34,381
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		41,000	0	0	0	41,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		12,129	0	0	0	12,129
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		53,129	0	0	0	53,129
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	1	2,034	0	0	0	0	0	0	1	2,034
17. Incurred during current year	3	41,202	0	0	0	0	0	0	3	41,202
Settled during current year:										
18.1 By payment in full	4	41,000	0	0	0	0	0	0	4	41,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	41,000	0	0	0	0	0	0	4	41,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	4	41,000	0	0	0	0	0	0	4	41,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	2,236	0	0	0	0	0	0	0	2,236
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	130	3,282,351	0	(a) 0	0	0	0	0	130	3,282,351
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(6)	(151,463)	0	0	0	0	0	0	(6)	(151,463)
23. In force December 31 of current year	124	3,130,888	0	(a) 0	0	0	0	0	124	3,130,888

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	363	363	0	7	.51
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies/certificates (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	363	363	0	7	.51

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



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

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		15,450	0	0	0	15,450
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		15,450	0	0	0	15,450
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		3,000	0	0	0	3,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		51,510	0	0	0	51,510
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		54,510	0	0	0	54,510
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.837	0	.0	0	0	0	0	0	.837
17. Incurred during current year	1	3,087	0	.0	0	0	0	0	1	3,087
Settled during current year:										
18.1 By payment in full	1	3,000	0	.0	0	0	0	0	1	3,000
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	1	3,000	0	.0	0	0	0	0	1	3,000
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	1	3,000	0	.0	0	0	0	0	1	3,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	924	0	.0	0	0	0	0	0	924
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.45	1,250,643	0	(a) 0	0	0	0	0	.45	1,250,643
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(43,960)	0	0	0	0	0	0	(2)	(43,960)
23. In force December 31 of current year	43	1,206,683	0	(a) 0	0	0	0	0	43	1,206,683

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Maryland

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,131	0	0	0	1,131
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,131	0	0	0	1,131
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		9,496	0	0	0	9,496
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		9,496	0	0	0	9,496
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.99	0	0	0	0	0	0	0	.99
17. Incurred during current year	0	(65)	0	0	0	0	0	0	0	(65)
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	34	0	0	0	0	0	0	0	34
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	152,270	0	(a) 0	0	0	0	0	3	152,270
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(100,000)	0	0	0	0	0	0	(1)	(100,000)
23. In force December 31 of current year	2	52,270	0	(a) 0	0	0	0	0	2	52,270

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Massachusetts

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,077	0	0	0	1,077
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,077	0	0	0	1,077
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.55	0	.0	0	0	0	0	0	.55
17. Incurred during current year Settled during current year:	0	8	0	.0	0	0	0	0	0	8
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	63	0	0	0	0	0	0	0	63
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	94,477	0	(a) 0	0	0	0	0	2	94,477
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	2	94,477	0	(a) 0	0	0	0	0	2	94,477

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Michigan

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		28,199	0	0	0	28,199
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		28,199	0	0	0	28,199
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		350,000	0	0	0	350,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		1,275	0	0	0	1,275
12. Surrender values and withdrawals for life contracts		34,404	0	0	0	34,404
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		385,679	0	0	0	385,679
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	1,522	0	0	0	0	0	0	0	1,522
17. Incurred during current year	1	349,506	0	0	0	0	0	0	1	349,506
Settled during current year:										
18.1 By payment in full	1	350,000	0	0	0	0	0	0	1	350,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	350,000	0	0	0	0	0	0	1	350,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	350,000	0	0	0	0	0	0	1	350,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,028	0	0	0	0	0	0	0	1,028
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.36	2,205,305	0	(a) 0	0	0	0	0	.36	2,205,305
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(3)	(828,461)	0	0	0	0	0	0	(3)	(828,461)
23. In force December 31 of current year	33	1,376,844	0	(a) 0	0	0	0	0	33	1,376,844

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	1,489		0	0	0	1,489
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,489	0	0	0	0	1,489
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	117,705	0	0	0	0	117,705
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	117,705	0	0	0	0	117,705
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	164	0	0	0	0	0	0	0	164
17. Incurred during current year Settled during current year:	0	20	0	0	0	0	0	0	0	20
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	184	0	0	0	0	0	0	0	184
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	11	259,379	0	(a) 0	0	0	0	0	11	259,379
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(9,533)	0	0	0	0	0	0	(1)	(9,533)
23. In force December 31 of current year	10	249,846	0	(a) 0	0	0	0	0	10	249,846

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Mississippi

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		7,966	0	0	0	7,966
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		7,966	0	0	0	7,966
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.379	0	.0	0	0	0	0	0	.379
17. Incurred during current year	0	.67	0	.0	0	0	0	0	0	.67
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	445	0	0	0	0	0	0	0	445
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	581,468	0	(a) 0	0	0	0	0	8	.581,468
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	.528	0	0	0	0	0	0	0	.528
23. In force December 31 of current year	8	581,996	0	(a) 0	0	0	0	0	8	581,996

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Missouri
NAIC Group Code 0707

DURING THE YEAR 2019
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	1,144		0	0	0	1,144
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	1,144		0	0	0	1,144
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	56,179	0	0	0	0	56,179
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	56,179	0	0	0	0	56,179
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	101	0	0	0	0	0	0	0	101
17. Incurred during current year Settled during current year:	0	16	0	0	0	0	0	0	0	16
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	116	0	0	0	0	0	0	0	116
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	3	150,622	0	(a) 0	0	0	0	0	3	150,622
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	(149)	0	0	0	0	0	0	0	(149)
23. In force December 31 of current year	3	150,473	0	(a) 0	0	0	0	0	3	150,473

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Montana

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF Nebraska

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		540	0	0	0	540
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		540	0	0	0	540
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		5,199	0	0	0	5,199
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		5,199	0	0	0	5,199
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.28	0	.0	0	0	0	0	0	.28
17. Incurred during current year	0	2	0	.0	0	0	0	0	0	2
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	30	0	0	0	0	0	0	0	30
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	4	55,100	0	(a) 0	0	0	0	0	4	55,100
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	4	55,100	0	(a) 0	0	0	0	0	4	55,100

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Nevada

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		9,395	0	0	0	9,395
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		9,395	0	0	0	9,395
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.556	0	.0	0	0	0	0	0	.556
17. Incurred during current year	0	.99	0	.0	0	0	0	0	0	.99
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	656	0	0	0	0	0	0	0	656
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	12	772,564	0	(a) 0	0	0	0	0	12	772,564
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net) .....	.1	13,089	0	0	0	0	0	0	.1	13,089
23. In force December 31 of current year	13	785,653	0	(a) 0	0	0	0	0	13	785,653

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF New Hampshire

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.77	0	.0	0	0	0	0	0	.77
17. Incurred during current year Settled during current year:	0	12	0	.0	0	0	0	0	0	12
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	89	0	0	0	0	0	0	0	89
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	114,718	0	(a) 0	0	0	0	0	2	114,718
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	.827	0	0	0	0	0	0	0	.827
23. In force December 31 of current year	2	115,545	0	(a) 0	0	0	0	0	2	115,545

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF New Jersey

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF New Mexico

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,625	0	0	0	1,625
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,625	0	0	0	1,625
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		10,064	0	0	0	10,064
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		10,064	0	0	0	10,064
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	178	0	0	0	0	0	0	0	178
17. Incurred during current year	0	(14)	0	0	0	0	0	0	0	(14)
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	164	0	0	0	0	0	0	0	164
POLICY EXHIBIT										
20. In force December 31, prior year	7	278,250	0	(a) 0	0	0	0	0	7	278,250
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(56,000)	0	0	0	0	0	0	(1)	(56,000)
23. In force December 31 of current year	6	222,250	0	(a) 0	0	0	0	0	6	222,250

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF New York

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	409		0	0	0	409
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0	XXX		0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	409	0	0	0	0	409
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	0	0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	22	0	0	0	0	0	0	0	22
17. Incurred during current year Settled during current year:	0	3	0	0	0	0	0	0	0	3
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	25	0	0	0	0	0	0	0	25
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	34,277	0	(a) 0	0	0	0	0	2	34,277
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	(659)	0	0	0	0	0	0	0	(659)
23. In force December 31 of current year	2	33,618	0	(a) 0	0	0	0	0	2	33,618

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF North Carolina

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		13,517	0	0	0	13,517
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		13,517	0	0	0	13,517
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		143,823	0	0	0	143,823
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		143,823	0	0	0	143,823
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.944	0	.0	0	0	0	0	0	.944
17. Incurred during current year Settled during current year:	0	.217	0	.0	0	0	0	0	0	.217
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,160	0	0	0	0	0	0	0	1,160
POLICY EXHIBIT										
	20. In force December 31, prior year	17	1,344,018	0	(a) 0	0	0	0	17	1,344,018
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	.79,918	0	0	0	0	0	0	0	.79,918
23. In force December 31 of current year	17	1,423,936	0	(a) 0	0	0	0	0	17	1,423,936

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF North Dakota

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		550	0	0	0	550
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		550	0	0	0	550
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.14	0	.0	0	0	0	0	0	.14
17. Incurred during current year	0	2	0	.0	0	0	0	0	0	2
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	16	0	0	0	0	0	0	0	16
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	31,008	0	(a) 0	0	0	0	0	1	31,008
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	1	31,008	0	(a) 0	0	0	0	0	1	31,008

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Ohio

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	223,348		0	0	0	223,348
2. Annuity considerations	35,484		0	0	0	35,484
3. Deposit-type contract funds	0		XXX	0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	258,832		0	0	0	258,832
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	604,856		0	0	0	604,856
10. Matured endowments	0		0	0	0	0
11. Annuity benefits	3,557		0	0	0	3,557
12. Surrender values and withdrawals for life contracts	346,270		0	0	0	346,270
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	954,683		0	0	0	954,683
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	1	15,616	0	0	0	0	0	0	1	15,616
17. Incurred during current year	20	640,664	0	0	0	0	0	0	20	640,664
Settled during current year:										
18.1 By payment in full	20	604,856	0	0	0	0	0	0	20	604,856
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	20	604,856	0	0	0	0	0	0	20	604,856
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	20	604,856	0	0	0	0	0	0	20	604,856
19. Unpaid Dec. 31, current year (16+17-18.6)	1	51,424	0	0	0	0	0	0	1	51,424
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	826	24,786,649	0	(a) 0	0	0	0	0	826	24,786,649
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(73)	(2,013,873)	0	0	0	0	0	0	(73)	(2,013,873)
23. In force December 31 of current year	753	22,772,776	0	(a) 0	0	0	0	0	753	22,772,776

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	560	560	0	156	0
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies/certificates (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	560	560	0	156	0

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



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

DIRECT BUSINESS IN THE STATE OF Oklahoma

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,176	0	0	0	1,176
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,176	0	0	0	1,176
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	190	0	0	0	0	0	0	0	190
17. Incurred during current year	0	30	0	0	0	0	0	0	0	30
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	220	0	0	0	0	0	0	0	220
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	151,470	0	(a) 0	0	0	0	0	2	151,470
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	2	151,470	0	(a) 0	0	0	0	0	2	151,470

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Oregon
NAIC Group Code 0707

DURING THE YEAR 2019
NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,907	0	0	0	2,907
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,907	0	0	0	2,907
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	159	0	0	0	0	0	0	0	159
17. Incurred during current year Settled during current year:	0	25	0	0	0	0	0	0	0	25
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	184	0	0	0	0	0	0	0	184
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	6	236,276	0	(a) 0	0	0	0	0	6	236,276
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	6	236,276	0	(a) 0	0	0	0	0	6	236,276

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Pennsylvania

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,890	0	0	0	2,890
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,890	0	0	0	2,890
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		10,000	0	0	0	10,000
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		10,000	0	0	0	10,000
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.53	0	0	0	0	0	0	0	.53
17. Incurred during current year	1	10,005	0	0	0	0	0	0	1	10,005
Settled during current year:										
18.1 By payment in full	1	10,000	0	0	0	0	0	0	1	10,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	10,000	0	0	0	0	0	0	1	10,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	10,000	0	0	0	0	0	0	1	10,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	58	0	0	0	0	0	0	0	58
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	7	82,032	0	(a) 0	0	0	0	0	7	82,032
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(5,222)	0	0	0	0	0	0	(1)	(5,222)
23. In force December 31 of current year	6	76,810	0	(a) 0	0	0	0	0	6	76,810

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2019

NAIC Group Code 0707

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						
2. Annuity considerations						
3. Deposit-type contract funds			XXX			
4. Other considerations					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit						
6.2 Applied to pay renewal premiums						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period						
6.4 Other						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit						
7.2 Applied to provide paid-up annuities						
7.3 Other						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID		NONE				
9. Death benefits						
10. Matured endowments						
11. Annuity benefits						
12. Surrender values and withdrawals for life contracts						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid						
14. All other benefits, except accident and health						
15. Totals						
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF South Carolina

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,036	0	0	0	3,036
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		3,036	0	0	0	3,036
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		16,026	0	0	0	16,026
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		9,302	0	0	0	9,302
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		25,328	0	0	0	25,328
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	223	0	0	0	0	0	0	0	223
17. Incurred during current year	1	15,919	0	0	0	0	0	0	1	15,919
Settled during current year:										
18.1 By payment in full	1	16,026	0	0	0	0	0	0	1	16,026
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	16,026	0	0	0	0	0	0	1	16,026
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	16,026	0	0	0	0	0	0	1	16,026
19. Unpaid Dec. 31, current year (16+17-18.6)	0	116	0	0	0	0	0	0	0	116
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	13	352,727	0	(a) 0	0	0	0	0	13	352,727
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(5)	(184,026)	0	0	0	0	0	0	(5)	(184,026)
23. In force December 31 of current year	8	168,701	0	(a) 0	0	0	0	0	8	168,701

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF South Dakota

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		608	0	0	0	608
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		608	0	0	0	608
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.44	0	.0	0	0	0	0	0	.44
17. Incurred during current year	0	(3)	0	.0	0	0	0	0	0	(3)
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	42	0	0	0	0	0	0	0	42
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	5	66,223	0	(a)	0	0	0	0	5	66,223
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(11,000)	0	0	0	0	0	0	(1)	(11,000)
23. In force December 31 of current year	4	55,223	0	(a)	0	0	0	0	4	55,223

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Tennessee

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		35,955	0	0	0	35,955
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		35,955	0	0	0	35,955
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	604	0	0	0	0	0	0	0	604
17. Incurred during current year	0	90	0	0	0	0	0	0	0	90
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	694	0	0	0	0	0	0	0	694
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	17	898,971	0	(a) 0	0	0	0	0	17	898,971
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	3,020	0	0	0	0	0	0	0	3,020
23. In force December 31 of current year	17	901,991	0	(a) 0	0	0	0	0	17	901,991

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Texas

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		28,067	0	0	0	28,067
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		28,067	0	0	0	28,067
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		12,500	0	0	0	12,500
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		605	0	0	0	605
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		13,105	0	0	0	13,105
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	2,893	0	0	0	0	0	0	0	2,893
17. Incurred during current year	1	12,929	0	0	0	0	0	0	1	12,929
Settled during current year:										
18.1 By payment in full	1	12,500	0	0	0	0	0	0	1	12,500
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1	12,500	0	0	0	0	0	0	1	12,500
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	1	12,500	0	0	0	0	0	0	1	12,500
19. Unpaid Dec. 31, current year (16+17-18.6)	0	3,322	0	0	0	0	0	0	0	3,322
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.49	2,715,601	0	(a) 0	0	0	0	0	.49	2,715,601
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(35,627)	0	0	0	0	0	0	(1)	(35,627)
23. In force December 31 of current year	48	2,679,974	0	(a) 0	0	0	0	0	48	2,679,974

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	0		0	0	0	0
2. Annuity considerations	0		0	0	0	0
3. Deposit-type contract funds	0		XXX	0	XXX	0
4. Other considerations	0		0	0	0	0
5. Totals (Sum of Lines 1 to 4)	0		0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit	0	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	0	0	0	0	0	0
6.4 Other	0	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit	0	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0	0
7.3 Other	0	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	0	0	0	0	0	0
10. Matured endowments	0	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	1,150	0	0	0	0	1,150
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0	0
15. Totals	1,150	0	0	0	0	1,150
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	52	0	0	0	0	0	0	0	52
17. Incurred during current year	0	4	0	0	0	0	0	0	0	4
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	56	0	0	0	0	0	0	0	56
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	77,000	0	(a) 0	0	0	0	0	2	77,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(5,000)	0	0	0	0	0	0	(1)	(5,000)
23. In force December 31 of current year	1	72,000	0	(a) 0	0	0	0	0	1	72,000

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Vermont
NAIC Group Code 0707

DURING THE YEAR 2019
NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		18,751	0	0	0	18,751
2. Annuity considerations		26	0	0	0	26
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		18,777	0	0	0	18,777
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		1,159	0	0	0	1,159
12. Surrender values and withdrawals for life contracts		94,621	0	0	0	94,621
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		95,780	0	0	0	95,780
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	1,697	0	0	0	0	0	0	0	1,697
17. Incurred during current year	1	28,736	0	0	0	0	0	0	1	28,736
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	1	30,433	0	0	0	0	0	0	1	30,433
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....	.30	2,620,665	0	(a) 0	0	0	0	0	.30	2,620,665
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	202,960	0	0	0	0	0	0	(1)	202,960
23. In force December 31 of current year	29	2,823,625	0	(a) 0	0	0	0	0	29	2,823,625

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Washington

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		1,092	0	0	0	1,092
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		1,092	0	0	0	1,092
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		290	0	0	0	290
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		290	0	0	0	290
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	152	0	0	0	0	0	0	0	152
17. Incurred during current year Settled during current year:	0	24	0	0	0	0	0	0	0	24
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	177	0	0	0	0	0	0	0	177
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	4	213,523	0	(a) 0	0	0	0	0	4	213,523
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	4	213,523	0	(a) 0	0	0	0	0	4	213,523

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF West Virginia

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		2,649	0	0	0	2,649
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		2,649	0	0	0	2,649
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		3,210	0	0	0	3,210
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		3,210	0	0	0	3,210
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.365	0	0	0	0	0	0	0	365
17. Incurred during current year	0	(124)	0	0	0	0	0	0	0	(124)
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	241	0	0	0	0	0	0	0	241
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	8	513,019	0	(a) 0	0	0	0	0	8	.513,019
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1)	(208,204)	0	0	0	0	0	0	(1)	(208,204)
23. In force December 31 of current year	7	304,815	0	(a) 0	0	0	0	0	7	304,815

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		3,022	0	0	0	3,022
2. Annuity considerations		0	0	0	0	0
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		3,022	0	0	0	3,022
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuites:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		0	0	0	0	0
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		0	0	0	0	0
12. Surrender values and withdrawals for life contracts		0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	0	.355	0	.0	0	0	0	0	0	.355
17. Incurred during current year	0	.26	0	.0	0	0	0	0	0	.26
Settled during current year:										
18.1 By payment in full	0	0	0	.0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	.0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	.0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	.0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	.0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	.0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	381	0	0	0	0	0	0	0	381
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	11	519,506	0	(a) 0	0	0	0	0	11	.519,506
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(34,092)	0	0	0	0	0	0	(2)	(34,092)
23. In force December 31 of current year	9	485,414	0	(a) 0	0	0	0	0	9	485,414

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

ACCIDENT AND HEALTH INSURANCE

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

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

NONE



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

DIRECT BUSINESS IN THE STATE OF Wyoming

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

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

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

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

ACCIDENT AND HEALTH INSURANCE

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

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



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

DIRECT BUSINESS IN THE STATE OF Grand Total

NAIC Group Code 0707

DURING THE YEAR 2019

NAIC Company Code 69647

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance		625,296	0	0	0	625,296
2. Annuity considerations		42,127	0	0	0	42,127
3. Deposit-type contract funds		0	XXX	0	XXX	0
4. Other considerations		0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)		667,423	0	0	0	667,423
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit		0	0	0	0	0
6.2 Applied to pay renewal premiums		0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period		0	0	0	0	0
6.4 Other		0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit		0	0	0	0	0
7.2 Applied to provide paid-up annuities		0	0	0	0	0
7.3 Other		0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits		1,258,178	0	0	0	1,258,178
10. Matured endowments		0	0	0	0	0
11. Annuity benefits		9,133	0	0	0	9,133
12. Surrender values and withdrawals for life contracts		1,409,758	0	0	0	1,409,758
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health		0	0	0	0	0
15. Totals		2,677,069	0	0	0	2,677,069
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of Line 13 from overflow page		0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No. of Pols. & Certifs.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
16. Unpaid December 31, prior year	2	47,109	0	0	0	0	0	0	2	47,109
17. Incurred during current year .....	.35	1,348,336	0	0	0	0	0	0	.35	1,348,336
Settled during current year:										
18.1 By payment in full .....	.34	1,258,178	0	0	0	0	0	0	.34	1,258,178
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid .....	.34	1,258,178	0	0	0	0	0	0	.34	1,258,178
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements .....	.34	1,258,178	0	0	0	0	0	0	.34	1,258,178
19. Unpaid Dec. 31, current year (16+17-18.6)	3	137,268	0	0	0	0	0	0	3	137,268
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1,629	68,998,372	0	(a) 0	0	0	0	0	1,629	68,998,372
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(129)	(6,382,222)	0	0	0	0	0	0	(129)	(6,382,222)
23. In force December 31 of current year	1,500	62,616,150	0	(a) 0	0	0	0	0	1,500	62,616,150

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	923	923	0	163	.51
24.1 Federal Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies/certificates (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	923	923	0	163	.51

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Optum Insurance of Ohio, Inc.
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE

	1 Amount
1. Reserve as of December 31, Prior Year	71,210
2. Current year's realized pre-tax capital gains/(losses) of \$ 0 transferred into the reserve net of taxes of \$ 0	0
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	71,210
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	13,327
6. Reserve as of December 31, current year (Line 4 minus Line 5)	57,883

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2019	13,327	0	0	13,327
2. 2020	12,703	0	0	12,703
3. 2021	10,019	0	0	10,019
4. 2022	8,182	0	0	8,182
5. 2023	6,311	0	0	6,311
6. 2024	4,817	0	0	4,817
7. 2025	3,946	0	0	3,946
8. 2026	2,799	0	0	2,799
9. 2027	1,890	0	0	1,890
10. 2028	1,666	0	0	1,666
11. 2029	1,457	0	0	1,457
12. 2030	1,229	0	0	1,229
13. 2031	1,001	0	0	1,001
14. 2032	794	0	0	794
15. 2033	587	0	0	587
16. 2034	362	0	0	362
17. 2035	120	0	0	120
18. 2036	0	0	0	0
19. 2037	0	0	0	0
20. 2038	0	0	0	0
21. 2039	0	0	0	0
22. 2040	0	0	0	0
23. 2041	0	0	0	0
24. 2042	0	0	0	0
25. 2043	0	0	0	0
26. 2044	0	0	0	0
27. 2045	0	0	0	0
28. 2046	0	0	0	0
29. 2047	0	0	0	0
30. 2048	0	0	0	0
31. 2049 and Later	0	0	0	0
32. Total (Lines 1 to 31)	71,210	0	0	71,210

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

ASSET VALUATION RESERVE

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

NONE

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.	1	Exempt Obligations	2,604,977	XXX	XXX	2,604,977	0.0000	0	0.0000	0	0.0000	
2.		Highest Quality	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
3.		High Quality	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	
4.		Medium Quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	
5.		Low Quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	
6.		Lower Quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	
7.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	
8.		Total Unrated Multi-class Securities Acquired by Conversion	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
9.		Total Long-Term Bonds (Sum of Lines 1 through 8)	2,604,977	XXX	XXX	2,604,977	XXX	0	XXX	0	XXX	
PREFERRED STOCK												
10.	1	Highest Quality	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
11.		High Quality	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	
12.		Medium Quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	
13.		Low Quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	
14.		Lower Quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	
15.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	
16.		Affiliated Life with AVR	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
SHORT - TERM BONDS												
18.	1	Exempt Obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	
19.		Highest Quality	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
20.		High Quality	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	
21.		Medium Quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	
22.		Low Quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	
23.		Lower Quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	
24.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	
25.		Total Short - Term Bonds (Sum of Lines 18 through 24)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
DERIVATIVE INSTRUMENTS												
26.	1	Exchange Traded	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
27.		Highest Quality	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	
28.		High Quality	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	
29.		Medium Quality	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	
30.		Low Quality	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	
31.		Lower Quality	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	
32.		In or Near Default	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	
33.		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	2,604,977	XXX	XXX	2,604,977	XXX	0	XXX	0	XXX	

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
31		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality	0	0	XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm Mortgages - CM2 - High Quality	0	0	XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm Mortgages - CM3 - Medium Quality	0	0	XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm Mortgages - CM4 - Low Medium Quality	0	0	XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm Mortgages - CM5 - Low Quality	0	0	XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0003	0	0.0007	0	0.0011	0
41.		Residential Mortgages - All Other	0	0	XXX	0	0.0015	0	0.0034	0	0.0046	0
42.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality	0	0	XXX	0	0.0011	0	0.0057	0	0.0074	0
44.		Commercial Mortgages - All Other - CM2 - High Quality	0	0	XXX	0	0.0040	0	0.0114	0	0.0149	0
45.		Commercial Mortgages - All Other - CM3 - Medium Quality	0	0	XXX	0	0.0069	0	0.0200	0	0.0257	0
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality	0	0	XXX	0	0.0120	0	0.0343	0	0.0428	0
47.		Commercial Mortgages - All Other - CM5 - Low Quality	0	0	XXX	0	0.0183	0	0.0486	0	0.0628	0
Overdue, Not in Process:												
48.		Farm Mortgages	0	0	XXX	0	0.0480	0	0.0868	0	0.1371	0
49.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Residential Mortgages - All Other	0	0	XXX	0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial Mortgages - All Other	0	0	XXX	0	0.0480	0	0.0868	0	0.1371	0
In Process of Foreclosure:												
53.		Farm Mortgages	0	0	XXX	0	0.0000	0	0.1942	0	0.1942	0
54.		Residential Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Residential Mortgages - All Other	0	0	XXX	0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial Mortgages - Insured or Guaranteed	0	0	XXX	0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial Mortgages - All Other	0	0	XXX	0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
59.		Schedule DA Mortgages	0	0	XXX	0	0.0034	0	0.0114	0	0.0149	0
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

Asset Valuation Reserve - Equity Component
N O N E

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

Schedule F - Claims
N O N E

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

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

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

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

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0	0	0	0	0	0	0	0	0
2. Premiums earned	0	0	0	0	0	0	0	0	0
3. Incurred claims	0	0	0	0	0	0	0	0	0
4. Commissions	0	0	0	0	0	0	0	0	0
B. Reinsurance Ceded:									
1. Premiums written	923	923	0	0	0	0	0	0	0
2. Premiums earned	923	923	0	0	0	0	0	0	0
3. Incurred claims .....	.51	.51	0	0	0	0	0	0	0
4. Commissions	0	0	0	0	0	0	0	0	0

(a) Includes \$0 premium deficiency reserve.

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

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims	0	0	51	51
2. Beginning Claim Reserves and Liabilities	0	0	163	163
3. Ending Claim Reserves and Liabilities	0	0	51	51
4. Claims Paid	0	0	163	163
B. Assumed Reinsurance:				
5. Incurred Claims.....	0	0	0	0
6. Beginning Claim Reserves and Liabilities	0	0	0	0
7. Ending Claim Reserves and Liabilities	0	0	0	0
8. Claims Paid	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....	0	0	51	51
10. Beginning Claim Reserves and Liabilities	0	0	163	163
11. Ending Claim Reserves and Liabilities	0	0	51	51
12. Claims Paid	0	0	163	163
D. Net:				
13. Incurred Claims.....	0	0	0	0
14. Beginning Claim Reserves and Liabilities	0	0	0	0
15. Ending Claim Reserves and Liabilities	0	0	0	0
16. Claims Paid	0	0	0	0
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses	0	0	0	0
18. Beginning Reserves and Liabilities	0	0	0	0
19. Ending Reserves and Liabilities	0	0	0	0
20. Paid Claims and Cost Containment Expenses	0	0	0	0

Schedule S - Part 1 - Section 1

N O N E

Schedule S - Part 1 - Section 2

N O N E

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

SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
0399999. Total Life and Annuity - U.S. Affiliates					0	0
0699999. Total Life and Annuity - Non-U.S. Affiliates					0	0
0799999. Total Life and Annuity - Affiliates					0	0
68136 ... 63-0169720 ... 04/30/1997 ... Protective Life Insurance Company				TN	0	137,269
0899999. Life and Annuity - U.S. Non-Affiliates					0	137,269
1099999. Total Life and Annuity - Non-Affiliates					0	137,269
1199999. Total Life and Annuity					0	137,269
1499999. Total Accident and Health - U.S. Affiliates					0	0
1799999. Total Accident and Health - Non-U.S. Affiliates					0	0
1899999. Total Accident and Health - Affiliates					0	0
68136 ... 63-0169720 ... 04/30/1997 ... Protective Life Insurance Company				TN	0	.51
1999999. Accident and Health - U.S. Non-Affiliates					0	51
2199999. Total Accident and Health - Non-Affiliates					0	51
2299999. Total Accident and Health					0	51
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					0	137,320
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					0	0
9999999 Totals - Life, Annuity and Accident and Health					0	137,320

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

SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/30/1997 .. Protective Life Insurance Company	TN	CO/I..	OL	62,616,150	9,552,192	8,886,371	625,296	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/30/1997 .. Protective Life Insurance Company	TN	CO/I..	OA..	0	6,491,338	7,225,745	42,127	0	0	0	0	0	0	0
68136 .. 63-0169720 .. 04/30/1997 .. Protective Life Insurance Company	TN	CO/I..	SC	0	160,760	200,087	0	0	0	0	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0
1199999. Total General Account Authorized				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
2299999. Total General Account Unauthorized				0	0	0	0	0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates				0	0	0	0	0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
3399999. Total General Account Certified				0	0	0	0	0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized				0	0	0	0	0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates				0	0	0	0	0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized				0	0	0	0	0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates				0	0	0	0	0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates				0	0	0	0	0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates				0	0	0	0	0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified				0	0	0	0	0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified				0	0	0	0	0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)				0	0	0	0	0	0	0	0	0	0	0
9999999 - Totals				62,616,150	16,204,290	16,312,203	667,423	0	0	0	0	0	0	0

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

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
.....68136 ..63-0169720 ..04/30/1997 ..Protective Life Insurance Company ..TN.....SS/I.....A.....							923	0	46	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							923	0	46	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							923	0	46	0	0	0	0
1199999. Total General Account Authorized							923	0	46	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified							923	0	46	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified							0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified							0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							923	0	46	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							0	0	0	0	0	0	0
9999999 - Totals							923	0	46	0	0	0	0

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

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

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business

	1 2019	2 2018	3 2017	4 2016	5 2015
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	668	695	835	833	971
2. Commissions and reinsurance expense allowances	28	0	0	0	0
3. Contract claims	1,358	1,019	772	842	1,355
4. Surrender benefits and withdrawals for life contracts	1,410	0	0	0	0
5. Dividends to policyholders and refunds to members	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserve for life and accident and health contracts	(108)	(1,070)	(1,045)	(989)	(529)
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9. Aggregate reserves for life and accident and health contracts	16,204	16,312	18,338	19,384	20,373
10. Liability for deposit-type contracts	0	0	0	0	0
11. Contract claims unpaid	137	47	95	10	269
12. Amounts recoverable on reinsurance	0	0	0	0	0
13. Experience rating refunds due or unpaid	0	0	0	0	0
14. Policyholders' dividends and refunds to members (not included in Line 10)	0	0	0	0	0
15. Commissions and reinsurance expense allowances due	0	0	0	0	0
16. Unauthorized reinsurance offset	0	0	0	0	0
17. Offset for reinsurance with Certified Reinsurers	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F)	0	0	0	0	0
19. Letters of credit (L)	0	0	0	0	0
20. Trust agreements (T)	0	0	0	0	0
21. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple Beneficiary Trust	0	0	0	0	0
23. Funds deposited by and withheld from (F)	0	0	0	0	0
24. Letters of credit (L)	0	0	0	0	0
25. Trust agreements (T)	0	0	0	0	0
26. Other (O)	0	0	0	0	0

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

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	380,543,734	0	380,543,734
2. Reinsurance (Line 16)	0	0	0
3. Premiums and considerations (Line 15)	0	0	0
4. Net credit for ceded reinsurance	XXX	16,341,656	16,341,656
5. All other admitted assets (balance)	126,206,773	0	126,206,773
6. Total assets excluding Separate Accounts (Line 26)	506,750,507	16,341,656	523,092,163
7. Separate Account assets (Line 27)	0	0	0
8. Total assets (Line 28)	506,750,507	16,341,656	523,092,163
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	0	16,043,576	16,043,576
10. Liability for deposit-type contracts (Line 3)	0	160,760	160,760
11. Claim reserves (Line 4)	0	137,320	137,320
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7)	0	0	0
13. Premium & annuity considerations received in advance (Line 8)	0	0	0
14. Other contract liabilities (Line 9)	57,883	0	57,883
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount)	0	0	0
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount)	0	0	0
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount)	0	0	0
19. All other liabilities (balance)	440,505,816	0	440,505,816
20. Total liabilities excluding Separate Accounts (Line 26)	440,563,699	16,341,656	456,905,355
21. Separate Account liabilities (Line 27)	0	0	0
22. Total liabilities (Line 28)	440,563,699	16,341,656	456,905,355
23. Capital & surplus (Line 38)	66,186,808	XXX	66,186,808
24. Total liabilities, capital & surplus (Line 39)	506,750,507	16,341,656	523,092,163
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves	16,043,576		
26. Claim reserves	137,320		
27. Policyholder dividends/reserves	0		
28. Premium & annuity considerations received in advance	0		
29. Liability for deposit-type contracts	160,760		
30. Other contract liabilities	0		
31. Reinsurance ceded assets	0		
32. Other ceded reinsurance recoverables	0		
33. Total ceded reinsurance recoverables	16,341,656		
34. Premiums and considerations	0		
35. Reinsurance in unauthorized companies	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers	0		
37. Reinsurance with Certified Reinsurers	0		
38. Funds held under reinsurance treaties with Certified Reinsurers	0		
39. Other ceded reinsurance payables/offsets	0		
40. Total ceded reinsurance payable/offsets	0		
41. Total net credit for ceded reinsurance	16,341,656		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		Direct Business Only					
	States, Etc.	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1.	Alabama	AL	3,477	0	0	0	3,477
2.	Alaska	AK	0	0	0	0	0
3.	Arizona	AZ	2,603	0	0	0	2,603
4.	Arkansas	AR	683	0	0	0	683
5.	California	CA	95,354	462	0	0	95,816
6.	Colorado	CO	5,789	0	0	0	5,789
7.	Connecticut	CT	6,160	0	0	0	6,160
8.	Delaware	DE	0	0	0	0	0
9.	District of Columbia	DC	0	0	0	0	0
10.	Florida	FL	35,857	6,155	0	0	42,012
11.	Georgia	GA	10,242	0	0	0	10,242
12.	Hawaii	HI	1,047	0	0	0	1,047
13.	Idaho	ID	608	0	0	0	608
14.	Illinois	IL	6,557	0	0	0	6,557
15.	Indiana	IN	9,429	0	0	0	9,429
16.	Iowa	IA	4,469	0	0	0	4,469
17.	Kansas	KS	2,123	0	0	0	2,123
18.	Kentucky	KY	34,381	0	363	0	34,744
19.	Louisiana	LA	15,450	0	0	0	15,450
20.	Maine	ME	0	0	0	0	0
21.	Maryland	MD	1,131	0	0	0	1,131
22.	Massachusetts	MA	1,077	0	0	0	1,077
23.	Michigan	MI	28,199	0	0	0	28,199
24.	Minnesota	MN	1,489	0	0	0	1,489
25.	Mississippi	MS	7,966	0	0	0	7,966
26.	Missouri	MO	1,144	0	0	0	1,144
27.	Montana	MT	0	0	0	0	0
28.	Nebraska	NE	540	0	0	0	540
29.	Nevada	NV	9,395	0	0	0	9,395
30.	New Hampshire	NH	524	0	0	0	524
31.	New Jersey	NJ	0	0	0	0	0
32.	New Mexico	NM	1,625	0	0	0	1,625
33.	New York	NY	409	0	0	0	409
34.	North Carolina	NC	13,517	0	0	0	13,517
35.	North Dakota	ND	550	0	0	0	550
36.	Ohio	OH	223,348	35,484	560	0	259,392
37.	Oklahoma	OK	1,176	0	0	0	1,176
38.	Oregon	OR	2,907	0	0	0	2,907
39.	Pennsylvania	PA	2,890	0	0	0	2,890
40.	Rhode Island	RI	0	0	0	0	0
41.	South Carolina	SC	3,036	0	0	0	3,036
42.	South Dakota	SD	608	0	0	0	608
43.	Tennessee	TN	35,955	0	0	0	35,955
44.	Texas	TX	28,067	0	0	0	28,067
45.	Utah	UT	0	0	0	0	0
46.	Vermont	VT	0	0	0	0	0
47.	Virginia	VA	18,751	26	0	0	18,777
48.	Washington	WA	1,092	0	0	0	1,092
49.	West Virginia	WV	2,649	0	0	0	2,649
50.	Wisconsin	WI	3,022	0	0	0	3,022
51.	Wyoming	WY	0	0	0	0	0
52.	American Samoa	AS	0	0	0	0	0
53.	Guam	GU	0	0	0	0	0
54.	Puerto Rico	PR	0	0	0	0	0
55.	U.S. Virgin Islands	VI	0	0	0	0	0
56.	Northern Mariana Islands	MP	0	0	0	0	0
57.	Canada	CAN	0	0	0	0	0
58.	Aggregate Other Alien	OT	0	0	0	0	0
59.	Total		625,296	42,127	923	0	668,346

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	98-1308130			1070715 B.C. Unlimited Liability Company	.CAN.	.N/A.	OptumRx Group Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	20-2904092			1st Avenue Pharmacy, Inc.	.WA.	.N/A.	Genoa Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-2624551			310 Canyon Medical, LLC	.CA.	.N/A.	Monarch Management Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	45-2402948			4C Medical Group, PLC	.AZ.	.N/A.	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4	
		00000	84-1900997			4C MSO LLC	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership	70.00	UnitedHealth Group Incorporated		.2	
		00000	35-2607738			5995 Minnetonka, LLC	.DE.	.N/A.	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-0515438			ABCO International Holdings, LLC	.DE.	.N/A.	The Advisory Board Company	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	74-2819189			Access Administrators, Inc.	.TX.	.N/A.	Access HealthSource, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	74-2943370			Access HealthSource Administrators, Inc.	.TX.	.N/A.	Access HealthSource, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	74-2843073			Access HealthSource, Inc.	.TX.	.N/A.	HealthScope Benefits, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	41-1913523			ACN Group IPA of New York, Inc.	.NY.	.N/A.	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-0015861			ACN Group of California, Inc.	.CA.	.IA.	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	98-1446128			Administradora Clínica La Colina S.A.S.	.COL.	.N/A.	Bannmédica Internacional SpA	Ownership	50.00	UnitedHealth Group Incorporated			
		00000	98-1446128			Administradora Clínica La Colina S.A.S.	.COL.	.N/A.	CDC Holdings Colombia S.A.S.	Ownership	50.00	UnitedHealth Group Incorporated			
		00000	98-1446125			Administradora Country S.A.	.COL.	.N/A.	Bannmédica Internacional SpA	Ownership	50.00	UnitedHealth Group Incorporated			
		00000	98-1446125			Administradora Country S.A.	.COL.	.N/A.	CDC Holdings Colombia S.A.S.	Ownership	50.00	UnitedHealth Group Incorporated			
0707		00000	98-1451601			Administradora Médica Centromed S.A.	.CHL.	.N/A.	VidaIntegra S.A.	Ownership	74.250	UnitedHealth Group Incorporated		.2	
0707		00000	20-2598653			Advanced Pharma, Inc.	.TX.	.N/A.	Apothecary Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707		00000	26-4093335			Advanced Surgical Hospital, LLC	.PA.	.N/A.	SCA Southwestern PA, LLC	Ownership	53.450	UnitedHealth Group Incorporated		.2	
0707		00000	74-2642393			Advantage Care Network, Inc.	.DE.	.N/A.	Access HealthSource, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-5337115			Advocate Condell Ambulatory Surgery Center, LLC	.IL.	.N/A.	Advocate-SCA Partners, LLC	Ownership	.59.645	UnitedHealth Group Incorporated		.2	
		00000	82-3113379			Advocate Sherman Ambulatory Surgery Center, LLC	.IL.	.N/A.	Advocate-SCA Partners, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	36-4437931			Advocate Southwest Ambulatory Surgery Center, LLC	.IL.	.N/A.	Advocate-SCA Partners, LLC	Ownership	53.450	UnitedHealth Group Incorporated		.2	
		00000	47-4012497			Advocate-SCA Partners, LLC	.DE.	.N/A.	SCA-Illinois, LLC	Ownership	.51.000	UnitedHealth Group Incorporated		.2	
0707		00000	47-4171713			Aeromil Táxi Aéreo Ltda.	.BRA.	.N/A.	Anil Assistência Médica Internacional S.A.	Influence	20.00	UnitedHealth Group Incorporated		.5	
0707		00000	45-4171713			AHN Accountable Care Organization, LLC	.IN.	.N/A.	American Health Network of Indiana, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
0707		00000	35-2109566			AHN Central Services, LLC	.IN.	.N/A.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
0707		00000	35-2582899			AHN Target Holdings, LLC	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership	.80.100	UnitedHealth Group Incorporated		.2	
		00000	92-0175856			Alaska Spine Center, LLC	.AK.	.N/A.	Alaska Spine Center, LLC	Influence	100.00	UnitedHealth Group Incorporated		.5	
		00000	92-0080881			Alaska Surgery Center, Inc.	.AK.	.N/A.	SCA Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	93-0982396			Alaska Surgery Center, Limited Partnership	.AK.	.N/A.	SCA Alaska Surgery Center, Inc.	Ownership	.40.462	UnitedHealth Group Incorporated			
		00000	98-1447435			Aliansalud Entidad Promotora de Salud S.A.	.COL.	.IA.	Bannmédica S.A.	Ownership	.76.290	UnitedHealth Group Incorporated			
0707		00000	98-1447435			Aliansalud Entidad Promotora de Salud S.A.	.COL.	.IA.	Constructora e Inmobiliaria Magapog S.A.	Ownership	.23.710	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	82406	35-1665915			All Savers Insurance Company	.IN.	.IA.	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	73130	35-1744596			All Savers Life Insurance Company of California	.CA.	.IA.	Golden Rule Financial Corporation	Ownership	.100.00	UnitedHealth Group Incorporated			
		00000	27-1367127			Alliance Surgical Center, LLC	.FL.	.N/A.	SCA-Alliance, LLC	Ownership	.51.290	UnitedHealth Group Incorporated		.2	
		00000	63-1231942			Aloha Surgical Center, LLC	.TN.	.N/A.	Surgery Center of Maui, LLC	Ownership	.74.000	UnitedHealth Group Incorporated		.2	
0707		00000	65-1095227			Ambient Healthcare, Inc.	.FL.	.N/A.	Ambient Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	45-2161438			Ambient Holdings, Inc.	.DE.	.N/A.	BriovaRx Infusion Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
0707		00000	45-4770582			American Health Network of Indiana Care Organization, LLC	.IN.	.N/A.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
0707		00000	35-1930805			American Health Network of Indiana II, LLC	.IN.	.N/A.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
0707	UnitedHealth Group Incorporated	52623	35-2108729			American Health Network of Indiana, LLC	.IN.	.IA.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	45-4132160			American Health Network of Ohio Care Organization, LLC	.OH.	.N/A.	AHN Target Holdings, LLC	Ownership	.100.00	UnitedHealth Group Incorporated			
		00000	31-1424956			American Health Network of Ohio II, LLC	.OH.	.N/A.	AHN Target Holdings, LLC	Ownership	.100.00	UnitedHealth Group Incorporated			
		00000	31-1424957			American Health Network of Ohio, LLC	.OH.	.N/A.	AHN Target Holdings, LLC	Ownership	.100.00	UnitedHealth Group Incorporated			
		00000	54-1743136			AmeriChoice Corporation	.DE.	.N/A.	UnitedHealth Group Incorporated	Ownership	.100.00	UnitedHealth Group Incorporated			

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
0707	UnitedHealth Group Incorporated	00000	54-1743141			AmeriChoice Health Services, Inc.		DE	NIA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		95497	22-3368602			AmeriChoice of New Jersey, Inc.		NJ	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1108620			Amico Saúde Ltda.		BRA	NIA	Santa Helena Assistência Médica S.A.	Ownership	99.030	UnitedHealth Group Incorporated		2
		00000	98-1108620			Amico Saúde Ltda.		BRA	NIA	Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership	0.960	UnitedHealth Group Incorporated		2
		00000	98-1138212			Amil Assistência Médica Internacional S.A.		BRA	IA	Polar II Fundo de Investimento em Participações Multiestratégia	Ownership	91.810	UnitedHealth Group Incorporated		2
		00000	98-1454564			AMIL International		LUX	NIA	Amil Assistência Médica Internacional S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	82-5124069			Analisis Clínicos ML S.A.C.		PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	99.990	UnitedHealth Group Incorporated		1
		00000	82-4763728			Angiografia e Hemodinâmica Madre Theodora Ltda.		BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Influence	50.000	UnitedHealth Group Incorporated		5
0707		00000	82-4763728			Anne Arundel-SCA Holdings, LLC		MD	NIA	SCA-Anne Arundel, LLC	Influence	33.400	UnitedHealth Group Incorporated		5
0707		00000	36-4210293			Anne Arundel-SCA Surgicenter, LLC		MD	NIA	Anne Arundel-SCA Holdings, LLC	Influence	66.760	UnitedHealth Group Incorporated		5
		00000	26-3913051			Antelope Valley Surgery Center, L.P.		CA	NIA	NSC Lancaster, LLC	Ownership	90.490	UnitedHealth Group Incorporated		2
		00000	86-0960334			Apothecary Holdings, Inc.		DE	NIA	OptumRx Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	14-1890491			Apothecary Shop of Phoenix, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-2852872			AppleCare Hospitalists Medical Group, Inc.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	33-0845269			AppleCare Medical ACO, LLC		CA	NIA	AppleCare Medical Group, Inc.	Influence	100.000	UnitedHealth Group Incorporated		5
		00000	33-0898174			AppleCare Medical Group St. Francis, Inc.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	27-2068687			AppleCare Medical Group, Inc.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000				AppleCare Medical Management, LLC		DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000				APS – Assistência Personalizada à Saúde Ltda.		BRA	IA	Santa Helena Assistência Médica S.A.	Ownership	99.990	UnitedHealth Group Incorporated		
		00000				APS – Assistência Personalizada à Saúde Ltda.		BRA	IA	Amil Assistência Médica Internacional S.A.	Ownership	0.010	UnitedHealth Group Incorporated		
0707		00000	98-1399975			Aquitania Chilean Holding SpA		CHL	NIA	Bordeaux UK Holdings II Limited	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2285078			Arcadia Outpatient Surgery Center, L.P.		CA	NIA	Surgicenters of Southern California, Inc.	Influence	37.000	UnitedHealth Group Incorporated		5
0707		00000	46-4843100			Arise Physician Group		TX	NIA	SCA Austin Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-0813232			Arizona Physicians IPA, Inc.		AZ	IA	UnitedHealthcare, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2055800		3202702	Arlington Surgery Center, LLC		TX	NIA	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	46-1772418			ARTA Health Network, P.C.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	33-0658815			ARTA Western California, Inc.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	46-3907136			ASC Holdings of New Jersey, LLC		NJ	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	95-4348431			ASC Network, LLC		DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-8970704			ASC Operators, LLC		CA	NIA	Surgery Centers-West Holdings, LLC	Influence	49.000	UnitedHealth Group Incorporated		5
		00000	90-0369702			ASI Global, LLC		TX	NIA	FrontierMEDEX, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	04-3403101			Aspectus, Inc.		MA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	26-3878957			AssuranceRx, LLC		AL	NIA	Optum Pharmacy 705, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-4014891			Athens ASC Holdings, LLC		GA	NIA	SCA Athens, LLC	Ownership	58.420	UnitedHealth Group Incorporated		2
		00000	47-0990056			Audax Health Solutions, LLC		DE	NIA	Rally Health, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	58-2028767			Austin Center for Outpatient Surgery, L.P.		GA	NIA	SHC Austin, Inc.	Ownership	54.000	UnitedHealth Group Incorporated		2
		00000	27-2869469			Avella of Austin, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	14-1971726			Avella of Columbus, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	13-4318552			Avella of Deer Valley, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-5239373			Avella of Denver, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-1044713			Avella of Gilbert, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-4214158			Avella of Las Vegas II, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-0609947			Avella of Orlando, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-0583808			Avella of Phoenix III, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-0121303			Avella of Sacramento, Inc.		CA	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	86-0819588			Avella of Scottsdale, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-1688911			Avella of St. Louis, Inc.		AZ	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	36-4435924			Avella of Tampa, LLC		FL	NIA	Apothecary Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	20-3253658				Avella of Tucson II, Inc.	.AZ.	.N/A.	Apothecary Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	86-1044712				Avella of Tucson, Inc.	.AZ.	.N/A.	Apothecary Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2563332				Avella Patient Access Program, Inc.	.AZ.	.N/A.	Apothecary Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707		00000	20-4057813				Aveta Inc.	.DE.	.N/A.	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707		00000	30-0842394				AxelaCare Intermediate Holdings, LLC	.DE.	.N/A.	AxelaCare Intermediate Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	61-1708598				AxelaCare, LLC	.DE.	.N/A.	AxelaCare Intermediate Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	72-1097827				B.R.A.S.S. Partnership in Commendam	.LA.	.N/A.	Surgery Center Holding, LLC	Ownership	67.940	UnitedHealth Group Incorporated		2
		00000	98-1462787				Bannmédica Colombia SpA	.COL	.N/A.	Bannmédica Internacional SpA	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1444151				Bannmédica Internacional SpA	.CHL	.N/A.	Bannmédica S.A.	Ownership	.99.00	UnitedHealth Group Incorporated		
		00000	98-1444151		3410132		Bannmédica Internacional SpA	.CHL	.N/A.	Saden S.A.	Ownership	1.00	UnitedHealth Group Incorporated		
		00000	98-1444127				Bannmédica S.A.	.CHL	.N/A.	Bordeaux Holding SpA	Ownership	.98.229	UnitedHealth Group Incorporated		2
		00000	47-2083076				Beach Surgical Holdings II LLC	.CA.	.N/A.	SCA Surgicare of Laguna Hills, LLC	Influence	.49.00	UnitedHealth Group Incorporated		.5
		00000	47-4504390				Beach Surgical Holdings III, LLC	.CA.	.N/A.	Surgicare of La Veta, Inc.	Ownership	.63.870	UnitedHealth Group Incorporated		2
		00000	88-0267857				Behavioral Healthcare Options, Inc.	.NV.	.N/A.	Sierra Health Services, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	75-2196889				Belleville Surgical Center, Ltd., an Illinois Limited Partnership	.IL.	.N/A.	Surgicare of Belleville, LLC	Ownership	.61.200	UnitedHealth Group Incorporated		2
		00000	42-1485537				Benefit Administration for the Self Employed, L.L.C.	.IA.	.N/A.	HealthMarkets, LLC	Ownership	.80.00	UnitedHealth Group Incorporated		2
0707		00000	46-1134506	4665014	0000731766		Benefitter Insurance Solutions, Inc.	.DE.	.N/A.	HealthMarkets Insurance Agency, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-8671994				Bergan Mercy Surgery Center, LLC	.NE.	.N/A.	H.I. Investments Holding Company, LLC	Influence	.4.800	UnitedHealth Group Incorporated		.5
		00000	47-4349079				Better Health Value Network, LLC	.WA.	.N/A.	Physician(s) owned	Influence	.0.00	UnitedHealth Group Incorporated		.4
		00000	22-3858211				Bexar Imaging Center, LLC	.TX.	.N/A.	WellMed Networks, Inc.	Influence	.100.00	UnitedHealth Group Incorporated		.5
		00000	63-0984076				Birmingham Outpatient Surgery Center, Ltd.	.AL.	.N/A.	Birmingham Outpatient Surgical Center, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-0984076				Birmingham Outpatient Surgery Center, Ltd., an Alabama Limited Partnership	.AL.	.N/A.	Birmingham Outpatient Surgical Center, LLC	Influence	.30.220	UnitedHealth Group Incorporated		.5
0707		00000	63-0847380				Birmingham Outpatient Surgical Center, LLC	.DE.	.N/A.	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	05-0359457				Blackstone Valley Surgicare GP, LLC	.DE.	.N/A.	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707		00000	62-1530122				Blue Ridge Day Surgery Center, L.P.	.TN.	.N/A.	Blue Ridge GP, LLC	Influence	.38.210	UnitedHealth Group Incorporated		.5
0707		00000	27-2241593				Blue Ridge GP, LLC	.NC.	.N/A.	SCA-Blue Ridge, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707		00000	37-1945431				Blue Ridge Properties, LLC	.DE.	.N/A.	Blue Ridge GP, LLC	Ownership	.38.208	UnitedHealth Group Incorporated		
		00000	65-0241934				Boca Raton Outpatient Surgery & Laser Center, Ltd.	.FL.	.N/A.	Surgery Center of Boca Raton, Inc.	Influence	.30.000	UnitedHealth Group Incorporated		.5
0707		00000	98-1336690				Bordeaux (Barbados) Holdings I, SRL	.BRB.	.N/A.	FrontierMEDEX US, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	98-1396559				Bordeaux (Barbados) Holdings II, SRL	.BRB.	.N/A.	Bordeaux (Barbados) Holdings I, SRL	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	98-1403634				Bordeaux (Barbados) Holdings III, SRL	.BRB.	.N/A.	Bordeaux (Barbados) Holdings II, SRL	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	98-1398490				Bordeaux Holding SpA	.CHL.	.N/A.	Aquitania Chilean Holding SpA	Ownership	.100.00	UnitedHealth Group Incorporated		
0707		00000	82-1347824				Bordeaux International Holdings, Inc.	.DE.	.N/A.	UnitedHealth Group Incorporated	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	98-1390574				Bordeaux UK Holdings I Limited	.GBR.	.N/A.	Bordeaux International Holdings, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
0707		00000	98-1391914				Bordeaux UK Holdings II Limited	.GBR.	.N/A.	Bordeaux UK Holdings I Limited	Ownership	.100.00	UnitedHealth Group Incorporated		
0707		00000	98-1389224				Bordeaux UK Holdings III Limited	.GBR.	.N/A.	Bordeaux UK Holdings II Limited	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	98-1112673				Bosque Medical Center Ltda.	.BRA.	.N/A.	Anil Assistência Médica Internacional S.A.	Ownership	.82.880	UnitedHealth Group Incorporated		2
0707		00000	98-1112673				Bosque Medical Center Ltda.	.BRA.	.N/A.	Esho - Empresa de Serviços Hospitalares S.A.	Ownership	.17.110	UnitedHealth Group Incorporated		.2
0707		00000	20-2387834				Brandon Ambulatory Surgery Center, LC	.FL.	.N/A.	SCA-Brandon, LLC	Ownership	.54.540	UnitedHealth Group Incorporated		.2
		00000	90-0884047				BriovaRx Infusion Services 102, LLC	.DE.	.N/A.	BriovaRx Infusion Services, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
0707		00000	57-0861358				BriovaRx Infusion Services 102, Inc.	.SC.	.N/A.	Ambient Healthcare, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	55-0802774				BriovaRx Infusion Services 204, Inc.	.FL.	.N/A.	Ambient Healthcare, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	55-0802779				BriovaRx Infusion Services 209, Inc.	.GA.	.N/A.	Ambient Healthcare, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	26-2565032				BriovaRx Infusion Services 305, LLC	.DE.	.N/A.	BriovaRx Infusion Services, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	26-4312858				BriovaRx Infusion Services 402, LLC	.CA.	.N/A.	SCP Specialty Infusion, LLC	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	27-3918706				BriovaRx Infusion Services, Inc.	.DE.	.N/A.	AxelaCare, LLC	Ownership	.100.00	UnitedHealth Group Incorporated		
		00000	20-4515146				BriovaRx of California, Inc.	.CA.	.N/A.	Salveo Specialty Pharmacy, Inc.	Ownership	.100.00	UnitedHealth Group Incorporated		

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

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		.00000	11-3647935				BriovaRx of Florida, Inc.	.DE.	.N/A.	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	27-1930321				BriovaRx of Georgia, LLC	.AL.	.N/A.	Optum Pharmacy 705, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	46-2790537				BriovaRx of Louisiana, L.L.C.	.LA.	.N/A.	Optum Pharmacy 705, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	01-0516051				BriovaRx of Maine, Inc.	.ME.	.N/A.	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	27-3331130				BriovaRx of Massachusetts, LLC	.MA.	.N/A.	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	74-3103518				BriovaRx of New York, Inc.	.NY.	.N/A.	Salveo Specialty Pharmacy, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	20-2719823				BriovaRx of Texas, Inc.	.TX.	.N/A.	BriovaRx of Florida, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	82-4030553				BriovaRx Specialty, LLC	.DE.	.N/A.	OptumRx Administrative Services, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	47-4278378				Cabin Enterprises, LLC	.DE.	.N/A.	Cabin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	47-4264867		3119994		Cabin Holdings, LLC	.DE.	.N/A.	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	20-1711131				California Medical Group Insurance Company, Risk Retention Group	.AZ.	.N/A.	OptumCare Management, LLC	Ownership	.67.000	UnitedHealth Group Incorporated		2
		.00000	61-1732160				California MedTrans Network IPA LLC	.CA.	.N/A.	California MedTrans Network MSO LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	36-4780748				California MedTrans Network MSO LLC	.CA.	.N/A.	National MedTrans, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	81-0881243				California Spring Holdings, PC	.CA.	.N/A.	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	52-1597478				Camp Hill Ambulatory Centers	.PA.	.N/A.	Camp Hill-SCA Centers, LLC	Influence	.49.000	UnitedHealth Group Incorporated		.5
		.00000	52-1597484				Camp Hill-SCA Centers, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	27-3955254				Capital City Medical Group, L.L.C.	.LA.	.N/A.	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	46-1981651				Cardio Management, Inc.	.DE.	.N/A.	Ortholet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	20-8375685				Care Improvement Plus Group Management, LLC	.MD.	.N/A.	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	12558	45-4976934			Care Improvement Plus of Texas Insurance Company	.TX.	.IA.	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	12567	20-3888112			Care Improvement Plus South Central Insurance Company	.AR.	.IA.	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	14041	27-5038136			Care Improvement Plus Wisconsin Insurance Company	.WI.	.IA.	XLHealth Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	98-1328471				Casa de Saúde Santa Therezinha Ltda.	.BRA.	.N/A.	Hospital Alvorada de Taguatinga Ltda.	Ownership	.99.990	UnitedHealth Group Incorporated		2
		.00000	98-1328471				Casa de Saúde Santa Therezinha Ltda.	.BRA.	.N/A.	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	0.000	UnitedHealth Group Incorporated		.2
		.00000	82-5207935				Castle Rock SurgiCenter, LLC	.CO.	.N/A.	SCA-Castle Rock, LLC	Ownership	.62.080	UnitedHealth Group Incorporated		.2
		.00000	20-5807941	3057283			Catalyst360, LLC	.DE.	.N/A.	Optum Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000					Catamaran Finance (Ireland) Unlimited Company	.IRL	.N/A.	Catamaran S.á.r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	98-1069737				Catamaran S.á.r.l.			UnitedHealthcare International II S.á.r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	82-1715584				CCEC Anesthesia Management, LLC	.LUX.	.N/A.	Corpus Christi Endoscopy Center, L.L.P.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000					CDC Holdings Colombia S.A.S.	.TX.	.N/A.	Bordeaux UK Holdings II Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	27-2533497				Cedar Park Surgery Center, LLC	.COL.	.N/A.	SCA Cedar Park Holdings, LLC	Ownership	.53.520	UnitedHealth Group Incorporated		.2
		.00000	98-1111491				Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	.IN.	.N/A.	Anil Assistência Médica Internacional S.A.	Ownership	99.990	UnitedHealth Group Incorporated		.2
		.00000	98-1111491				Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	.BRA.	.N/A.	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	0.000	UnitedHealth Group Incorporated		.2
		.00000	33-0483510				Centers for Family Medicine, GP	.CA.	.N/A.	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	98-1448150				Central de Compras SpA	.CHL.	.N/A.	Inversiones Clínicas Santa María S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	45-4131797				Central Indiana Care Organization, LLC	.IN.	.N/A.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	45-5600514				Central Ohio Care Organization, LLC	.OH.	.N/A.	AHN Target Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	30-1080342				CentrifyHealth, LLC	.DE.	.N/A.	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000	98-1390073				CentriHealth Corporation	.CAN.	.N/A.	CentrifyHealth, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000					CentriHealth UK Limited	.GBR.	.N/A.	CentrifyHealth, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		.00000					Centro de Entrenamiento en Reanimación y Prevención Limitada (CERP)	.CHL.	.N/A.	Clínica Dávila y Servicios Médicos S.A.	Ownership	.99.000	UnitedHealth Group Incorporated		
		.00000					Centro de Entrenamiento en Reanimación y Prevención Limitada (CERP)	.CHL.	.N/A.	Servicios Integrados de Salud Ltda.	Ownership	.1.000	UnitedHealth Group Incorporated		

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	98-1450490				Centro de Servicios Compartidos Bannmédica S.A.	CHL	NIA	Bannmédica S.A. Esho - Empresa de Serviços Hospitalares S.A.	Ownership	99.900	UnitedHealth Group Incorporated		.1
		00000					Centro Médico Hospitalar Pitangueiras Ltda.	BRA	NIA		Ownership	100.000	UnitedHealth Group Incorporated		
		00000					Centro Médico Hospitalar Pitangueiras Ltda.	BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership	0.001	UnitedHealth Group Incorporated		
		00000	98-1457197				Centro Médico Odontológico Americano S.A.C.	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	80.000	UnitedHealth Group Incorporated		
		00000	98-1451635				Centromed Quilpué S.A.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership	93.450	UnitedHealth Group Incorporated		.1
		00000					Centros Médicos y Dentales Multimed Ltda.	CHL	NIA	Omesa S.A.	Ownership	99.990	UnitedHealth Group Incorporated		
		00000					Centros Médicos y Dentales Multimed Ltda.	CHL	NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership	0.010	UnitedHealth Group Incorporated		
		00000	42-1194107				Centurion Casualty Company	IA	IA	Specialty Benefits, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-1454664				Channel Islands Surgicenter Properties, LLC	DE	NIA	SCA Holding Company, Inc.	Ownership	62.743	UnitedHealth Group Incorporated		.2
		00000	58-1709761				Charleston Surgery Center Limited Partnership	SC	NIA	SCA-Charleston, LLC	Influence	20.340	UnitedHealth Group Incorporated		.5
		00000	82-3973199				Charleston Surgery Properties, LLC	DE	NIA	SCA-Charleston, LLC	Ownership	50.850	UnitedHealth Group Incorporated		.2
		00000	56-1449531				Charlotte Surgery Center, LLC	NC	NIA	Charlotte-SC, LLC	Influence	16.509	UnitedHealth Group Incorporated		.5
		00000	56-1449532				Charlotte Surgery Properties, Limited Partnership	NC	NIA	SCA-Mecklenburg Development Corp.	Influence	14.000	UnitedHealth Group Incorporated		.5
		00000	56-1449532				Charlotte Surgery Properties, Limited Partnership	NC	NIA	SC Affiliates, LLC	Influence	4.000	UnitedHealth Group Incorporated		.5
		00000	62-1262567				Charlotte-SC, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-2399638				Childrens Surgery Center, LLC	FL	NIA	SCA-Central Florida, LLC	Ownership	52.202	UnitedHealth Group Incorporated		.2
		00000	98-1093539				ChinaGate (Hong Kong) Limited	CHN	NIA	Optum, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	62-1510209				Citrus Regional Surgery Center, L.P.	TN	NIA	SCA-Citrus, Inc.	Ownership	57.000	UnitedHealth Group Incorporated		.2
		00000	20-3742012				Cleburne Surgical Center, LLC	TX	NIA	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	98-1459640				Clínica Alameda S.A.	CHL	NIA	VidaIntegra S.A.	Ownership	99.841	UnitedHealth Group Incorporated		
		00000	98-1459640				Clínica Alameda S.A.	CHL	NIA	Saden S.A.	Ownership	0.159	UnitedHealth Group Incorporated		
		00000	98-1443171				Clínica Bío Bío S.A.	CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1442191				Clínica Ciudad del Mar S.A.	CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1446132				Clínica Dávila y Servicios Médicos S.A.	CHL	NIA	Bannmédica S.A.	Ownership	99.991	UnitedHealth Group Incorporated		
		00000	98-1446132				Clínica Dávila y Servicios Médicos S.A.	CHL	NIA	Clínica Santa María S.A.	Ownership	0.009	UnitedHealth Group Incorporated		
		00000					Clínica del Country S.A.	COL	NIA	Bannmédica Internacional SpA	Ownership	50.000	UnitedHealth Group Incorporated		
		00000					Clínica del Country S.A.	COL	NIA	CDC Holdings Colombia S.A.S.	Ownership	50.000	UnitedHealth Group Incorporated		
		00000					Clínica Iquique S.A.	CHL	NIA	Bannmédica S.A.	Influence	13.080	UnitedHealth Group Incorporated		.5
		00000	98-1350667				Clínica Médico Cirúrgica de Santa Tecla, S.A.	PRT	NIA	Lusíadas, SGPS, S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000					Clínica Portoazul S.A.	COL	NIA	Clínica del Country S.A.	Influence	27.700	UnitedHealth Group Incorporated		.5
		00000					Clínica San Borja (La Esperanza del Perú S.A.)	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	99.990	UnitedHealth Group Incorporated		.1
		00000	98-1462343				Clínica San Felipe S.A.	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	93.740	UnitedHealth Group Incorporated		.1
		00000	98-1455936				Clínica Sánchez Ferrer S.A.	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	99.990	UnitedHealth Group Incorporated		.1
		00000	98-1442754				Clínica Santa María S.A.	CHL	NIA	Bannmédica S.A.	Ownership	99.433	UnitedHealth Group Incorporated		.2
		00000	98-1442745				Clínica Vespucio S.A.	CHL	NIA	Inversiones Clínicas Santa María S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-2879718				Clinical Partners of Colorado Springs, LLC	CO	NIA	OptumCare Colorado, LLC	Ownership	50.000	UnitedHealth Group Incorporated		.2
		00000	20-2236024				Clinton Partners, LLC	MI	NIA	HFHS-SCA Holdings, LLC	Ownership	52.740	UnitedHealth Group Incorporated		
		00000	98-1350671				CLISA - Clínica de Santo Antônio, S.A.	PRT	NIA	Lusíadas, SGPS, S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1337968				CMO - Centro Médico de Oftalmología S/S Ltda.	BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership	99.000	UnitedHealth Group Incorporated		
		00000	98-1337968				CMO - Centro Médico de Oftalmología S/S Ltda.	BRA	NIA	Lotten-Eyes Oftalmología Clínica e Cirúrgica Ltda.	Ownership	1.000	UnitedHealth Group Incorporated		
		00000	98-1277015				CMS - Central de Manipulação e Serviços Farmacêuticos S.A.	BRA	NIA	COI - Clínicas Oncológicas Integradas S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	71-0873411				CNIC Health Solutions, Inc.	CO	NIA	Rocky Mountain Health Maintenance Organization, Incorporated	Ownership	100.000	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	56-2674371				Coachella Valley Physicians of PrimeCare, Inc.	CA	NIA	PrimeCare of Riverside, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-1193028				Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx Health Solutions, LLC	Ownership	93.266	UnitedHealth Group Incorporated		
		00000	27-1193028				Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx PBM of Maryland, LLC	Ownership	5.341	UnitedHealth Group Incorporated		
		00000	27-1193028				Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	Optum Hospice Pharmacy Services, LLC	Ownership	1.277	UnitedHealth Group Incorporated		
		00000	27-1193028				Coalition for Advanced Pharmacy Services, Inc.	DE	NIA	OptumRx Home Delivery of Ohio, LLC	Ownership	0.116	UnitedHealth Group Incorporated		
		00000	33-0714414				Coastal Physicians Management, Inc.	CA	NIA	OptumCare Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1276040				COI – Clínicas Oncológicas Integradas S.A.	BRA	NIA	COI Participações S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2337616				Collaborative Care Holdings, LLC	DE	NIA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2337487				Collaborative Care Services, Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-2614005				Collaborative Realty, LLC	NY	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Colmedica Medicina Prepagada	COL	NIA	Banmédica S.A.	Ownership	76.270	UnitedHealth Group Incorporated		
		00000					Colmedica Medicina Prepagada	COL	NIA	Constructora e Inmobiliaria Magapooq S.A.	Ownership	23.730	UnitedHealth Group Incorporated		
		00000	83-1529015				Colonial Outpatient Surgery Center, LLC	FL	NIA	SCA-Colonial Partners, LLC	Ownership	53.000	UnitedHealth Group Incorporated		
		00000	37-1636677				Colorado Innovative Physician Solutions, Inc.	CO	NIA	OptumCare Colorado, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	84-1160450				Colorado Springs Surgery Center, Ltd.	CO	NIA	SCA-Colorado Springs, LLC	Ownership	95.000	UnitedHealth Group Incorporated	2	
		00000	11-3647007				Comfort Care Transportation, LLC	TX	NIA	WellMed Medical Management, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Connecticut Surgery Center, Limited Partnership	CT	NIA	Connecticut Surgical Center, LLC	Ownership	51.000	UnitedHealth Group Incorporated		2
		00000	06-1592173				Connecticut Surgery Properties, LLC	DE	NIA	Connecticut Surgical Center, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-1313646				Connecticut Surgical Center, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	62.250	UnitedHealth Group Incorporated		2
		00000	06-1156342				Constructora e Inmobiliaria Magapooq S.A.	CHL	NIA	Banmédica S.A.	Ownership	99.900	UnitedHealth Group Incorporated		
		00000	98-1448720				Constructora e Inmobiliaria Magapooq S.A.	CHL	NIA	Immobiliaria Apoquindo 3600 Ltda.	Ownership	0.100	UnitedHealth Group Incorporated		
		00000	98-1448720				Consumer Wellness Solutions, Inc.	DE	NIA	Optum Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-0231080				Convenio Regenero S.A.	CHL	NIA	Clínica Dávila y Servicios Médicos S.A.	Influence	20.000	UnitedHealth Group Incorporated		5
		00000	83-2599969				Cornell Surgicenter, LLC	OR	NIA	Providence & SCA Off-Campus Holdings, LLC	Ownership	55.000	UnitedHealth Group Incorporated		
		00000	20-2595593				Corpus Christi Endoscopy Center, L.L.P.	TX	NIA	SCA Pacific Holdings, Inc.	Ownership	18.500	UnitedHealth Group Incorporated		
		00000					Country Scan Ltda.	COL	NIA	Patrimonio Autónomo Nueva Clínica – PANC.	Ownership	51.800	UnitedHealth Group Incorporated	2	
		00000	26-0080565				Cypress Care, Inc.	DE	NIA	Healthcare Solutions, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-2678686				Damon Dialysis, LLC	DE	NIA	AHN Target Holdings, LLC	Influence	0.045	UnitedHealth Group Incorporated		5
		00000	63-1263704				Danbury Surgical Center, L.P.	GA	NIA	SCA Danbury Surgical Center, LLC	Ownership	50.419	UnitedHealth Group Incorporated		2
		00000	81-5101448				David Moen, M.D. P.C.	NY	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	45-2380022				David R. Ferrell, M.D., P.C.	NV	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	11-2811353				Day-OP Center Of Long Island Inc.	NY	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	75-2790863				Day-Op Surgery Consulting Company, LLC	DE	NIA	ProHEALTH Medical Management, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	52-1811176				DBP Services of New York IPA, Inc.	NY	NIA	Dental Benefit Providers, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							Dental Benefit Providers of California, Inc.	CA	IA	Dental Benefit Providers, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	52-1452809				Dental Benefit Providers of Illinois, Inc.	IL	IA	Dental Benefit Providers, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		52053	36-4008355				Dental Benefit Providers, Inc.	DE	NIA	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	41-2014834				Denton Endoscopy Surgery Center, LLC	TX	NIA	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	47-0926556				Denton Surgery Center, LLC	TX	NIA	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	82-1436601				Derry Surgical Center, LLC	NH	NIA	SCA-Derry, LLC	Ownership	71.000	UnitedHealth Group Incorporated		2
		00000	98-1460401				Diagnóstico Ecotomográfico Centromed Ltda.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership	50.000	UnitedHealth Group Incorporated		2
		00000	98-1460347				Diagnóstico por Imágenes Centromed Ltda.	CHL	NIA	Administradora Médica Centromed S.A.	Ownership	93.340	UnitedHealth Group Incorporated		
		00000	98-1460347				Diagnóstico por Imágenes Centromed Ltda.	CHL	NIA	Centromed Quilpué S.A.	Ownership	6.660	UnitedHealth Group Incorporated		
		00000	33-0292435				Digestive Disease Center, L.P.	CA	NIA	Beach Surgical Holdings LLC	Ownership	51.000	UnitedHealth Group Incorporated		
		00000	98-1285762				Dilab Medicina Nuclear Ltda.	BRA	NIA	S.A.	Ownership	95.000	UnitedHealth Group Incorporated		2

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

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		00000	30-0238641				Distance Learning Network, Inc.	DE	NIA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Doctor + S.A.C.	PER	NIA	Pacifico S.A. Entidad Prestadora de Salud	Ownership	99.90	UnitedHealth Group Incorporated		1
		00000	82-5264853				Dry Creek Surgery Center, LLC	CO	NIA	SCA-DRY CREEK, LLC	Ownership	55.00	UnitedHealth Group Incorporated		2
		00000	82-5181311				DTC Surgery Center, LLC	CO	NIA	SCA-Denver Physicians Holdings, LLC	Ownership	55.00	UnitedHealth Group Incorporated		2
		00000	27-2103713				Dublin Surgery Center, LLC	OH	NIA	SCA-Dublin, LLC	Ownership	58.80	UnitedHealth Group Incorporated		2
		00000	04-3106404				Duncan Printing Services, LLC	SC	NIA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	59-3625966				Durable Medical Equipment, Inc.	MA	NIA	Reliant Medical Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	59-3705426				DWIC of Tampa Bay, Inc.	FL	NIA	MedExpress Development, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	95-4660712				E Street Endoscopy, LLC	FL	NIA	West Coast Endoscopy Holdings, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2
		00000	02-0593133				Ear Professionals International Corporation	DE	NIA	Specialty Benefits, LLC	Ownership	0.00	UnitedHealth Group Incorporated		2
		00000	71-0923682				East Brunswick Surgery Center, LLC	NJ	NIA	ASC Holdings of New Jersey, LLC	Ownership	51.00	UnitedHealth Group Incorporated		2
		00000	84-1162764				eCode Solutions, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Electronic Network Systems, Inc.	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
										Amil Assistência Médica Internacional S.A.					
		00000	98-1339173				Elual Participações S.A.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	60.00	UnitedHealth Group Incorporated		
		00000	98-1339173				Elual Participações S.A.	BRA	NIA	SCA-New Jersey, LLC	Ownership	40.00	UnitedHealth Group Incorporated		
		00000	83-1806511				Emmaus Holdings, LLC	NJ	NIA	North American Medical Management	Influence	29.940	UnitedHealth Group Incorporated		5
		00000	33-0181426				Empire Physician Management Company, LLC	CA	NIA	California, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0181426				Empire Physicians' Medical Group, Inc.	CA	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		4
		00000	26-4682368				Employers' Health Choice PPO, Inc.	AR	NIA	HealthScope Benefits, Inc.	Ownership	50.00	UnitedHealth Group Incorporated		2
		00000	47-3495605				Empremedica S. A.	PER	NIA	Banmédica S.A.	Ownership	99.990	UnitedHealth Group Incorporated		1
		00000	89087	75-1617708			Endoscopy Center Affiliates, Inc.	DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2607738				Enterprise Life Insurance Company	TX	IA	Freedom Life Insurance Company of America	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-0732646				EP Campus I, LLC	DE	NIA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-0083277				Equian Parent Corp.	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							Equian, LLC	IN	NIA	Equian Parent Corp.	Ownership	100.00	UnitedHealth Group Incorporated		
							Esho – Empresa de Serviços Hospitalares S.A.	BRA	NIA	Amil Assistência Médica Internacional S.A.	Ownership	99.667	UnitedHealth Group Incorporated		2
		00000	98-1122399				Etho – Empresa de Tecnologia Hospitalar Ltda.	BRA	NIA	Amil Assistência Médica Internacional S.A.	Ownership	90.060	UnitedHealth Group Incorporated		2
		00000	86-0964571				Evercare Collaborative Solutions, Inc.	DE	NIA	Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1070402				Everett MSO, Inc.	WA	NIA	OptumCare Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1625636				Everett Physicians, Inc. P.S.	WA	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		4
		00000	98-1111239				Excellion Serviços Biomédicos Ltda.	BRA	NIA	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	99.690	UnitedHealth Group Incorporated		2
		00000	20-0087132				Excelsior Insurance Brokerage, Inc.	DE	NIA	HealthMarkets Insurance Agency, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	11-3669765				Executive Health Resources, Inc.	PA	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0701899				Executive Surgery Center, LLC	TX	NIA	SCA-Houston Executive, LLC	Ownership	53.850	UnitedHealth Group Incorporated		2
		00000	98-1259260				Exploration for Mine Clearance LLC	JRQ	NIA	UnitedHealthcare Global Medical (UK) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
							Eye Clinic Oftalmologia Clínico Cirúrgica e Diagnóstico Ltda.	BRA	NIA	Hospital Alvorada de Taguatinga Ltda.	Ownership	99.990	UnitedHealth Group Incorporated		
							Eye Clinic Oftalmologia Clínico Cirúrgica e Diagnóstico Ltda.	BRA	NIA	Lotten-Eyes Oftalmologia Clínica e Cirúrgica Ltda.	Ownership	0.010	UnitedHealth Group Incorporated		
		00000	88-0223385				Family Health Care Services	NV	NIA	Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0257036				Family Home Hospice, Inc.	NV	NIA	Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	56-1754482				Fayetteville Ambulatory Surgery Center, L.P.	NC	NIA	NSC Fayetteville, LLC	Influence	46.240	UnitedHealth Group Incorporated		5
		00000	FA-517				Fideicomiso Clínica Barranquilla Portozul	COL	NIA	Clínica del Country S.A.	Influence	28.360	UnitedHealth Group Incorporated		5
		00000	47-2066485				First Hill Surgery Center, LLC	WA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	62-1551098				Florence Surgery Center, L.P.	TN	NIA	SCA-Florence, LLC	Ownership	30.000	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	32-0432993				Florida MedTrans Network LLC	FL	NIA	Florida MedTrans Network MSO LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4778512				Florida MedTrans Network MSO LLC	FL	NIA	Metropolitan Medical Transportation IPA, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2456267				FMG Holdings, LLC	DE	NIA	UnitedHealth Group Incorporated	Ownership	98.704	UnitedHealth Group Incorporated		
		00000	35-2456267				FMG Holdings, LLC	DE	NIA	Hygeia Corporation	Ownership	1.296	UnitedHealth Group Incorporated		
		00000	86-0908902				For Health of Arizona, Inc.	AZ	NIA	For Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0766617				For Health, Inc.	DE	NIA	Inspiris, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	68-0116391				Fort Sutter Surgery Center, a California Limited Partnership	CA	NIA	ASC Operators, LLC	Influence	53.00	UnitedHealth Group Incorporated		5
		00000	77-0368346				Fort Worth Endoscopy Centers, LLC	TX	NIA	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	86-0901608				Fortified Provider Network, Inc	AZ	NIA	Equian Buyer Corp.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	86-0901608				Fortified Provider Network, Inc.	AZ	NIA	Equian Parent Corp.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-0695411				Fortify Technologies Asia, LLC	PHL	NIA	Savvysherpa, LLC	Ownership	99.990	UnitedHealth Group Incorporated		2
		00000	75-2193766				Fortify Technologies, LLC	MN	NIA	Savvysherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3412606				Foundation Financial Services, Inc.	NV	NIA	USHEALTH Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		0707	UnitedHealth Group Incorporated	62324			Franklin Surgical Center, LLC	NJ	NIA	SCA-Franklin, LLC	Ownership	52.640	UnitedHealth Group Incorporated		2
		00000	61-1096685				Freedom Life Insurance Company of America	TX	IA	USHEALTH Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3453993				Freeway Surgicenter of Houston, LLC	TX	NIA	SCA-Freeway Holdings, LLC	Ownership	59.320	UnitedHealth Group Incorporated		2
		00000	98-1172769				Frontier Medex Tanzania Limited	TZA	NIA	Limited	Ownership	99.00	UnitedHealth Group Incorporated		2
		00000	68-0679514				FrontierMEDEX (RMS), Inc.	DE	NIA	FMG Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-5339512				FrontierMEDEX Government Services, LLC	DE	NIA	FMG Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1147103				FrontierMEDEX Kenya Limited	KEN	NIA	Limited	Ownership	99.90	UnitedHealth Group Incorporated		
		00000	98-1147103				FrontierMEDEX Kenya Limited	KEN	NIA	UnitedHealthcare International I B.V.	Ownership	0.100	UnitedHealth Group Incorporated		
		00000	98-1101521				FrontierMEDEX Limited	JRQ	NIA	Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-1219808				FrontierMEDEX US, Inc.	DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-1219808				FrontierMEDEX US, Inc.	DE	NIA	UnitedHealth Group Incorporated	Ownership	35.277	UnitedHealth Group Incorporated		
		00000	33-1219808				FrontierMEDEX US, Inc.	DE	NIA	FMG Holdings, LLC	Ownership	14.723	UnitedHealth Group Incorporated		
		00000	52-2230470				FrontierMEDEX, Inc.	MN	NIA	FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-0833765				Fundación Bannédica	CHL	NIA	Bannédica S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1488653				Gadsden Surgery Center, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1600268				Gadsden Surgery Center, Ltd.	AL	NIA	Gadsden Surgery Center, LLC	Ownership	58.500	UnitedHealth Group Incorporated		2
		00000	27-0556097				Gainesville Surgery Center, L.P.	TN	NIA	SCA-Northeast Georgia Health, LLC	Ownership	87.000	UnitedHealth Group Incorporated		2
		00000	45-3010132				Gainesville Surgery Properties, LLC	DE	NIA	Gainesville Surgery Center, L.P.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4703295				Genoa Healthcare LLC	PA	NIA	Specialized Pharmaceuticals, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-0920164				Genoa Healthcare, Inc.	DE	NIA	OptumRx Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	65-1025514				Genoa of Arkansas, LLC	AR	NIA	Genoa Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3851949				Genoa Technology (Canada) Inc.	CAN	NIA	Genoa Technology, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	38-4034308				Genoa Technology, Inc.	DE	NIA	Geno Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-3010132				Genoa Telepsychiatry, Inc.	DE	NIA	Genoa Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0595220				Genoa Qd Wholesale, LLC	DE	NIA	Genoa Healthcare LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1601450				gethealthinsurance.com Agency Inc.	IN	NIA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3420886				Gladiolus Surgery Center, L.L.C.	FL	NIA	SCA-Gladiolus, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-0855360				Gladiolus Surgery Center, LLC	FL	NIA	SCA-Gladiolus, LLC	Influence	46.000	UnitedHealth Group Incorporated		5
		00000	33-0595220				GLBESC, LLC	DE	NIA	Beach Surgical Holdings LLC	Ownership	51.282	UnitedHealth Group Incorporated		
		00000	62-1601450				Glenwood Surgical Center, L.P.	CA	NIA	Glenwood-SC, Inc.	Ownership	56.730	UnitedHealth Group Incorporated		2
		00000	20-3420886				Glenwood-SC, Inc.	TN	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-0855360				Golden Outlook, Inc.	CA	NIA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0529450				Golden Rule Financial Corporation	DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	37-6028756	3057283			Golden Rule Insurance Company	IN	IA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-1597483				Golden Triangle Surgicenter, L.P.	CA	NIA	Surgery Centers-West Holdings, LLC	Ownership	72.000	UnitedHealth Group Incorporated		2
		00000	52-1597483				Grandview Surgery Center, LTD.	PA	NIA	Camp Hill Ambulatory Centers	Influence	41.990	UnitedHealth Group Incorporated		5

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

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		.00000	93-1237063				GRANTS PASS SURGERY CENTER, LLC	.OR.	.N/A.	SCA-GRANTS PASS, LLC	Ownership	.51.000	UnitedHealth Group Incorporated		2
		.00000					Grapevine Finance LLC	.DE.	.N/A.	HealthMarkets, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000					Greater Hartford ASC, LLC	.CT.	.N/A.	SCA-Palm Beach MSO Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	27-2337725				Greater Phoenix Collaborative Care, P.C.	.AZ.	.N/A.	Physician(s) owned	Influence	.0.000	UnitedHealth Group Incorporated		.4
		.00000	36-4053840				Greensboro Specialty Surgery Center, LLC	.NC.	.N/A.	NSC Greensboro West, LLC	Influence	.50.100	UnitedHealth Group Incorporated		.5
		.00000	74-241643				Greenville Surgery Center, LLC	.TX.	.N/A.	THR-SCA Holdings, LLC	Ownership	.0.000	UnitedHealth Group Incorporated		
		.00000	33-0749339				Grossmont Surgery Center, L.P.	.CA.	.N/A.	Medical Surgical Centers of America, Inc.	Influence	.33.280	UnitedHealth Group Incorporated		.5
		.00000	33-0749339				Grossmont Surgery Center, L.P.	.CA.	.N/A.	SunSurgery, LLC	Influence	.1.000	UnitedHealth Group Incorporated		.5
		.00000	01-0619096				Grove Place Surgery Center, L.L.C.	.FL.	.N/A.	SCA-Grove Place, LLC	Ownership	.70.710	UnitedHealth Group Incorporated		.2
		.00000	98-0213198				H&W Indemnity (SPC), Ltd.	.CYM.	.N/A.	UnitedHealth Group Incorporated	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	26-1227494				H.I. Investments Holding Company, LLC	.DE.	.N/A.	Health Inventures, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.0707	UnitedHealth Group Incorporated	79480	35-1279304		Harken Health Insurance Company	.WI.	.IA.	UnitedHealthcare, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	58-2065044				Hawthorn Place Outpatient Surgery Center, L.P.	.GA.	.N/A.	SHC Hawthorn, Inc.	Ownership	.38.000	UnitedHealth Group Incorporated		
		.00000	82-3834685				Hayes-Strub, LLC	.OH.	.N/A.	Formation Documents Pending	Ownership	.0.000	UnitedHealth Group Incorporated		
		.00000	27-4579547				Hays Surgery Center, LLC	.TX.	.N/A.	SCA Hays Holdings, LLC	Ownership	.27.861	UnitedHealth Group Incorporated		
		.00000	27-0549481				HCentive Technology India Private Limited	.IND.	.N/A.	HCentive, Inc.	Ownership	.9.999	UnitedHealth Group Incorporated		.2
		.00000	27-0549481				HCentive Technology India Private Limited	.IND.	.N/A.	UnitedHealth International, Inc.	Ownership	.0.001	UnitedHealth Group Incorporated		.2
		.00000	27-0549481				hCentive, Inc.	.DE.	.N/A.	Optum Government Solutions, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	45-3007213				HCP ACO California, LLC	.CA.	.N/A.	OptumCare ACO Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	45-3007484				HCP ACO Nevada, LLC	.NV.	.N/A.	OptumCare ACO Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	33-0673883				Health Care-ONE Agency, Inc.	.CA.	.N/A.	USHEALTH Career Agency, Inc.	Ownership	.50.000	UnitedHealth Group Incorporated		.2
		.00000	20-5944768				Health Care-ONE Insurance Agency, Inc.	.CA.	.N/A.	USHEALTH Career Agency, Inc.	Ownership	.50.000	UnitedHealth Group Incorporated		.2
		.00000	04-3723090				Health Inventures Employment Solutions, LLC	.DE.	.N/A.	Health Inventures, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.0707	UnitedHealth Group Incorporated	96342	88-0201035		Health Inventures, LLC	.DE.	.N/A.	SC Affiliates, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	95-4763349				Health Plan of Nevada, Inc.	.NV.	.IA.	Sierra Health Services, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000					HealthAllies, Inc.	.DE.	.N/A.	OptumHealth Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000					HealthCare Partners Affiliates Medical Group	.CA.	.N/A.	Physician(s) owned	Influence	.0.000	UnitedHealth Group Incorporated		.4
		.00000	95-4526112				HealthCare Partners ASC-LB, LLC	.CA.	.N/A.	OptumCare Management, LLC	Ownership	.99.000	UnitedHealth Group Incorporated		.2
		.00000	95-4628842				HealthCare Partners Associates Medical Group, P.C.	.CA.	.N/A.	Physician(s) owned	Influence	.0.000	UnitedHealth Group Incorporated		.4
		.00000	45-5273760				HealthCare Partners Management Services California, LLC	.CA.	.N/A.	OptumCare Management, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	47-5274363				HealthCare Partners Medical Group (Coats), Ltd.	.NV.	.N/A.	Physician(s) owned	Influence	.0.000	UnitedHealth Group Incorporated		.4
		.00000	88-0213519				HealthCare Partners Medical Group, P.C.	.CA.	.N/A.	Physician(s) owned	Influence	.0.000	UnitedHealth Group Incorporated		.4
		.00000	95-4340584				Healthcare Partners Plan of Nevada, Inc.	.NV.	.N/A.	OptumCare Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	46-5349193				HealthCare Partners RE, LLC	.DE.	.N/A.	OptumCare Holdings, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	81-1080535				Healthcare Solutions, Inc.	.DE.	.N/A.	OptumRx Administrative Services, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	77-0693060				HealthEast Surgery Center-Maplewood, LLC	.MN.	.N/A.	H.I. Investments Holding Company, LLC	Influence	.25.962	UnitedHealth Group Incorporated		.5
		.00000	20-3349887				HealthFirst IPA, Inc.	.CO.	.N/A.	New West Physicians, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	47-2570595				HealthMarkets Group, Inc.	.DE.	.N/A.	HealthMarkets, LLC	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	27-0277771				HealthMarkets Insurance Agency, Inc.	.DE.	.N/A.	HealthMarkets Group, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	81-3774112				HealthMarkets NewCo, Inc.	.DE.	.N/A.	HealthMarkets, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	46-1131431				HealthMarkets Services, Inc.	.DE.	.N/A.	HealthMarkets Group, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	75-2044750	4346649			HealthMarkets, Inc.	.DE.	.N/A.	Golden Rule Financial Corporation	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	71-0847266				HealthMarkets, LLC	.DE.	.N/A.	HealthMarkets, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	47-1409110				HealthSCOPE Benefits, Inc.	.DE.	.N/A.	HealthSCOPE Holdings, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	83-2722254				HealthSCOPE Holdings, Inc.	.DE.	.N/A.	UNR, Inc.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000	98-1443161				Heartland Heart and Vascular, LLC	.DE.	.N/A.	SCA Heartland Holdings, LLC	Ownership	.80.000	UnitedHealth Group Incorporated		.2
		.00000					Help S.A.	.CHL.	.N/A.	Bannédica S.A.	Ownership	.100.000	UnitedHealth Group Incorporated		
		.00000					Help Service S.A.	.CHL.	.N/A.	Bannédica S.A.	Ownership	.100.000	UnitedHealth Group Incorporated		

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000				Hemonefro - Hemodialise e Nefrologia Ltda	BRA	NIA		Esho - Empresa de Serviços Hospitalares	Influence.....	28.500	UnitedHealth Group Incorporated		.5
		00000	46-5291602			HFHS-SCA Holdings, LLC	MI	NIA		SC Affiliates, LLC	Ownership.....	49.000	UnitedHealth Group Incorporated		
		00000	84-1472832			Highlands Ranch Healthcare, LLC	CO	NIA		Urgent Care MSO, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000				HMI NewCo, LLC	DE	NIA		HealthMarkets NewCo, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1452260			Home Medical S.A.	CHL	NIA		Help S.A.	Ownership.....	99.998	UnitedHealth Group Incorporated		
		00000	98-1452260			Home Medical S.A.	CHL	NIA		Saden S.A.	Ownership.....	0.002	UnitedHealth Group Incorporated		
		00000				Homecare Dimensions of Florida, Inc.	TX	NIA		Physician(s) owned	Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000				Homecare Dimensions, Inc.	TX	NIA		Physician(s) owned	Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000	20-8910978			Hospice Inspiris Holdings, Inc.	TN	NIA		Inspiris, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1286038			Hospitais Associados de Pernambuco Ltda.	BRA	NIA		Esho - Empresa de Serviços Hospitalares	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1286038			Hospitais Associados de Pernambuco Ltda.	BRA	NIA		Hospital Alvorada de Taguatinga Ltda.	Ownership.....	0.000	UnitedHealth Group Incorporated		
		00000				Hospital Alvorada de Taguatinga Ltda.	BRA	NIA		Amil Assistência Médica Internacional S.A.	Ownership.....	83.870	UnitedHealth Group Incorporated		.2
		00000				Hospital Alvorada de Taguatinga Ltda.	BRA	NIA		Bosque Medical Center Ltda.	Ownership.....	8.620	UnitedHealth Group Incorporated		.2
		00000	98-1389272			Hospital Alvorada de Taguatinga Ltda.	BRA	NIA		Esho - Empresa de Serviços Hospitalares	Ownership.....	7.490	UnitedHealth Group Incorporated		.2
		00000	98-1389272			Hospital Ana Costa S.A.	BRA	NIA		S.A.	Ownership.....	99.700	UnitedHealth Group Incorporated		.2
		00000	98-1389272			Hospital Ana Costa S.A.	BRA	NIA		Plano de Saúde Ana Costa Ltda.	Ownership.....	0.204	UnitedHealth Group Incorporated		.2
		00000	98-1310065			Hospital de Clínicas de Jacarepaguá Ltda.	BRA	NIA		Esho - Empresa de Serviços Hospitalares	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1310065			Hospital de Clínicas de Jacarepaguá Ltda.	BRA	NIA		Cemed Care - Empresa de Atendimento Clínico Geral Ltda.	Ownership.....	0.000	UnitedHealth Group Incorporated		
		00000	98-1332673			Hospital Santa Helena S.A.	BRA	NIA		Elual Participações S.A.	Ownership.....	65.210	UnitedHealth Group Incorporated		.2
		00000	98-1332673			Hospital Santa Helena S.A.	BRA	NIA		Esho - Empresa de Serviços Hospitalares	Ownership.....	33.600	UnitedHealth Group Incorporated		.2
		00000	26-2912304			Humedica, Inc.	DE	NIA		UnitedHealthcare Services, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	36-4331825			Hygeia Corporation	DE	NIA		UnitedHealth International, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1106075			Hygeia Corporation (Ontario)	CAN	NIA		FrontierMEDEX US, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	82-1341098			Illinois Independent Care Network	DE	NIA		Surgical Care Affiliates, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1122694			Imed Star - Serviços de Desempenho	BRA	NIA		Optum Health & Technology Serviços do Brasil Ltda.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1122694			Organizacional Ltda.	BRA	NIA		Optum360, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	20-4351923			Organizacional Ltda.	BRA	NIA		UHG Brasil Participações S.A.	Ownership.....	0.000	UnitedHealth Group Incorporated		
		00000	75-2574317			Impel Consulting Experts, L.L.C.	TX	NIA		Impel Management Services, L.L.C.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	27-3296953			Impel Management Services, L.L.C.	TX	NIA		USMD Holdings, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	62-1484043			IN Style OPTICAL, LLC	MA	NIA		Physician(s) owned	Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000	26-0711388			Indian River Surgery Center, Ltd.	FL	NIA		Endoscopy Center Affiliates, Inc.	Ownership.....	1.000	UnitedHealth Group Incorporated		
		00000	45-4132005			Indian River Surgery Properties, LLC	FL	NIA		Surgery Center of Vero Beach, Inc.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	62-1641102			Indiana Care Organization, LLC	IN	NIA		AHN Target Holdings, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	33-0618077			Ingram & Associates, LLC	TN	NIA		Optum360, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	33-0018673			Inland Faculty Medical Group, Inc.	CA	NIA		Physician(s) owned	Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000				Inland Surgery Center, L.P.	CA	NIA		Redlands Ambulatory Surgery Center	Influence.....	51.000	UnitedHealth Group Incorporated		.5
		00000				Immobiliária Apoquindo 3001 S.A.	CHL	NIA		Immobiliária Apoquindo S.A.	Ownership.....	99.999	UnitedHealth Group Incorporated		
		00000				Immobiliária Apoquindo 3001 S.A.	CHL	NIA		Vida Tres Internacional S.A.	Ownership.....	0.001	UnitedHealth Group Incorporated		
		00000	98-1458683			Immobiliária Apoquindo 3600 Ltda.	CHL	NIA		Bannmédia S.A.	Ownership.....	99.700	UnitedHealth Group Incorporated		
		00000	98-1458683			Immobiliária Apoquindo 3600 Ltda.	CHL	NIA		Immobiliária Apoquindo 3001 S.A.	Ownership.....	0.300	UnitedHealth Group Incorporated		
		00000	98-1443174			Immobiliária Apoquindo S.A.	CHL	NIA		Bannmédia S.A.	Ownership.....	100.000	UnitedHealth Group Incorporated		
		00000	98-1458682			Immobiliária Clínica Santa María S.A.	CHL	NIA		Bannmédia S.A.	Ownership.....	99.433	UnitedHealth Group Incorporated		
		00000	98-1454653			Immobiliária e Inversiones Alameda S.A.	CHL	NIA		Bannmédia S.A.	Ownership.....	99.980	UnitedHealth Group Incorporated		
		00000	98-1454653			Immobiliária e Inversiones Alameda S.A.	CHL	NIA		Saden S.A.	Ownership.....	0.020	UnitedHealth Group Incorporated		
		00000	98-1460922			Immobiliária Viñamed Ltda.	CHL	NIA		Administradora Médica Centromed S.A.	Ownership.....	99.900	UnitedHealth Group Incorporated		
		00000	47-5640889			INOV8 Surgical at Memorial City, LLC	TX	NIA		Memorial City Partners, LLC	Ownership.....	100.000	UnitedHealth Group Incorporated		.2

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	88-0482274				inPharmative, Inc. Inspiris Medical Services of New Jersey, P.C.	NV.... NJ....	NIA.... NIA....	OptumRx Health Solutions, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	45-2563134				INSPIRIS of Michigan Medical Services, P.C.	MI....	NIA....	Physician(s) owned	Influence....	0.000	UnitedHealth Group Incorporated		4
		00000	27-1561674				INSPIRIS of New York IPA, Inc.	NY....	NIA....	Physician(s) owned	Influence....	0.000	UnitedHealth Group Incorporated		4
		00000	13-4138668				INSPIRIS of New York Management, Inc.	NY....	NIA....	Inspiris, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	13-4138665				INSPIRIS of New York Medical Services, P.C.	NY....	NIA....	Inspiris, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	13-4168739				INSPIRIS of Pennsylvania Medical Services, P.C.	PA....	NIA....	Physician(s) owned	Influence....	0.000	UnitedHealth Group Incorporated		4
		00000	26-2895670				INSPIRIS of Texas Physician Group	TX....	NIA....	Optum Care Services Company	Ownership....	100.000	UnitedHealth Group Incorporated		4
		00000	26-2885572				Inspiris, Inc.	DE....	NIA....	Collaborative Care Holdings, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	33-0766366				Instituto do Radium de Campinas Ltda	BRA....	NIA....	COI – Clínicas Oncológicas Integradas S.A.	Ownership....	99.990	UnitedHealth Group Incorporated		
		00000					Instituto do Radium de Campinas Ltda	BRA....	NIA....	Esho – Empresa de Serviços Hospitalares S.A.	Ownership....	0.010	UnitedHealth Group Incorporated		
		00000	98-1452273				Inversiones Clínicas Santa María S.A.	CHL....	NIA....	Bannmédica S.A.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000					Ironman Holdco II, LLC	DE....	NIA....	OptumHealth Holdings, LLC	Influence....	41.300	UnitedHealth Group Incorporated		5
		00000	98-1448096				Isapre Bannmédica S.A.	CHL....	IA....	Bannmédica S.A.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000					Isapre Vida Tres S.A.	CHL....	IA....	Bannmédica S.A.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	20-5337793				Johnston Surgicare, L.P.	RI....	NIA....	Blackstone Valley Surgicare GP, LLC	Ownership....	99.000	UnitedHealth Group Incorporated		
		00000	20-5337793				Johnston Surgicare, L.P.	RI....	NIA....	Surgery Center Holding, LLC	Ownership....	1.000	UnitedHealth Group Incorporated		
		00000	74-2544709				Joliet Surgery Center Limited Partnership	IL....	NIA....	Surgicare of Joliet, Inc.	Ownership....	55.030	UnitedHealth Group Incorporated		2
		00000	92-0179889				Knox Diagnostic Imaging Center, LLC	OH....	NIA....	American Health Network of Ohio, LLC	Influence....	42.000	UnitedHealth Group Incorporated		5
		00000	98-1456202				Laboratorio ROE S.A.	PER....	NIA....	Pacifico S.A. Entidad Prestadora de Salud	Ownership....	99.990	UnitedHealth Group Incorporated		.1
		00000					Laboratorios Médicos Amed Quilpué S.A.	CHL....	NIA....	Centromed Quilpué S.A.	Ownership....	99.900	UnitedHealth Group Incorporated		
		00000					Laboratorios Médicos Amed Quilpué S.A.	CHL....	NIA....	Servicios Médicos Amed Quilpué S.A.	Ownership....	0.100	UnitedHealth Group Incorporated		
		00000	61-1028180				Lexington Surgery Center, Ltd.	KY....	NIA....	Surgery Center of Lexington, LLC	Influence....	73.000	UnitedHealth Group Incorporated		5
		00000	36-3468942				LGH-A/GOLF ASTC, L.L.C.	IL....	NIA....	Advocate-SCA Partners, LLC	Influence....	36.950	UnitedHealth Group Incorporated		
		00000	81-4465348				Liberty Anesthesia Services, LLC	IL....	NIA....	SCA-Winchester, LLC	Influence....	25.000	UnitedHealth Group Incorporated		5
							Life Styles Marketing Group, Inc.	DE....	NIA....	USHEALTH Career Agency, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
							Lifeprint Accountable Care Organization, LLC	DE....	NIA....	Collaborative Care Holdings, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	32-0409538				Lifeprint East, Inc.	DE....	NIA....	Collaborative Care Holdings, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	45-3143218				LifePrint Health, Inc.	DE....	NIA....	Collaborative Care Holdings, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	27-2309024				LifeStyles Marketing Group, Inc.	DE....	NIA....	USHEALTH Career Agency, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	75-2225187				Lifewell, Ltd. Co.	GA....	NIA....	HealthScope Benefits, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	58-2305878				Lifewell, Ltd. Co.	GA....	NIA....	HealthScope Benefits, Inc.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	58-2305878				Litomédica S.A.	COL....	NIA....	Clínica do Country S.A.	Influence....	0.930	UnitedHealth Group Incorporated		5
		00000	39-1974851				Logistics Health, Inc.	WI....	NIA....	OptumHealth Holdings, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	98-1337963				Lotten-Eyes Oftalmología Clínica e Cirúrgica Ltda.	BRA....	NIA....	Hospital Alvorada de Taguatinga Ltda.	Ownership....	99.990	UnitedHealth Group Incorporated		2
		00000	98-1337963				Lotten-Eyes Oftalmología Clínica e Cirúrgica Ltda.	BRA....	NIA....	Esho – Empresa de Serviços Hospitalares S.A.	Ownership....	0.000	UnitedHealth Group Incorporated		2
		00000	62-1179566				Louisville S.C., Ltd.	KY....	NIA....	Surgery Center of Louisville, LLC	Ownership....	59.400	UnitedHealth Group Incorporated		2
		00000	62-1179538				Louisville-SC Properties, Inc.	KY....	NIA....	SC Affiliates, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	36-4119519				Loyola Ambulatory Surgery Center at Oakbrook, Inc.	IL....	NIA....	ASC Network, LLC	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	36-4119522				Loyola Ambulatory Surgery Center at Oakbrook, L.P.	IL....	NIA....	Loyola Ambulatory Surgery Center at Oakbrook, Inc.	Influence....	45.000	UnitedHealth Group Incorporated		5
		00000	98-1137620				Lusíadas – Parcerias Cascais, S.A.	PRT....	NIA....	Lusíadas, SGPS, S.A.	Ownership....	100.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	PRT....	NIA....	Lusíadas, SGPS, S.A.	Ownership....	55.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	PRT....	NIA....	Lusíadas, S.A.	Ownership....	20.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	PRT....	NIA....	CLISA – Clínica de Santo António, S.A.	Ownership....	10.000	UnitedHealth Group Incorporated		
		00000	98-1139095				Lusíadas A.C.E.	PRT....	NIA....	Lusíadas – Parcerias Cascais, S.A.	Ownership....	10.000	UnitedHealth Group Incorporated		

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0707	UnitedHealth Group Incorporated	00000	98-1139095			Lusíadas A.C.E.		PRT	NIA	Clínica Médico Cirúrgica de Santa Teca, S.A.	Ownership	5.000	UnitedHealth Group Incorporated		
		00000	98-1139089			Lusíadas, S.A.		PRT	NIA	Lusíadas, SGPS, S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1138570			Lusíadas, SGPS, S.A.		PRT	NIA	AMIL International	Ownership	100.000	UnitedHealth Group Incorporated		
		60321	52-1803283			MAMSI Life and Health Insurance Company		MD	IA	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	14-1782475			Managed Physical Network, Inc.		NY	NIA	OptumHealth Care Solutions, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-2880404			March Holdings, Inc.		CA	NIA	Specialty Benefits, LLC	Ownership	7.353	UnitedHealth Group Incorporated		2
		00000	95-4874334			March Vision Care Group, Incorporated		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	27-3115058			March Vision Care IPA, Inc.		NY	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	20-3042852			March Vision Care, Inc.		CA	NIA	March Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	94-3377073			Marin Health Ventures, LLC		CA	NIA	Marin Specialty Surgery Center, LLC	Influence	100.000	UnitedHealth Group Incorporated		5
		00000	26-2637247			Marin Specialty Surgery Center, LLC		CA	NIA	MGH/SCA, LLC	Influence	51.000	UnitedHealth Group Incorporated		5
		00000	26-2601943			Marin Surgery Holdings, Inc.		DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	52-1456812			Maryland Ambulatory Centers		MD	NIA	Maryland-SCA Centers, LLC	Ownership	50.000	UnitedHealth Group Incorporated		2
		00000	52-1401791			Maryland-SCA Centers, LLC		DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-0815305			Massachusetts Assurance Company, Ltd. PIC		CYV	NIA	H&W Indemnity (SPC), Ltd.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	43-1967820			Massachusetts Avenue Surgery Center, LLC		MD	NIA	SCA-Bethesda, LLC	Ownership	56.690	UnitedHealth Group Incorporated		2
		00000	42-1600267			MAT-RX DEVELOPMENT, L.L.C.		TX	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	McKenzie Surgery Center, L.P.					TN	NIA	SCA-Eugene, Inc.	Ownership	27.000	UnitedHealth Group Incorporated		
		00000	42-1741594							North American Medical Management					
		96310	52-1169135			MD Ops, Inc.		CA	NIA	California, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	83-1183650			MD-Individual Practice Association, Inc.		MD	IA	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	81-0936574			ME AHS UC LLC		DE	NIA	Urgent Care MSO, LLC	Ownership	70.000	UnitedHealth Group Incorporated		2
		00000	81-0936574			ME Urgent Care Nebraska, Inc.		NE	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
.0707	UnitedHealth Group Incorporated	00000	98-1286220			Medalliance Net Ltda.		BRA	NIA	Optum Health & Technology Serviços do Brasil Ltda.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1286220			Medalliance Net Ltda.		BRA	NIA	UHG Brasil Participações S.A.	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	52-2178531			MEDEX Insurance Services, Inc.		MD	NIA	FrontierMEDEX, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-3824377			MedExpress Development, LLC		FL	NIA	Urgent Care MSO, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	81-4550969			MedExpress Primary Care Arizona P.C.		AZ	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-3384324			MedExpress Primary Care Maryland, P.C.		MD	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-1096099			MedExpress Primary Care Massachusetts, P.C.		MA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	81-4396738			MedExpress Primary Care Minnesota P.C.		MN	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	83-1077265			MedExpress Primary Care Oklahoma, P.C.		OK	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	83-0764858			MedExpress Primary Care South Carolina, P.C.		SC	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-3395792			MedExpress Primary Care Virginia, P.C.		VA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-4401181			MedExpress Primary Care West Virginia, Inc.		WV	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	81-4563448			MedExpress Primary Care Wisconsin, S.C.		WI	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	45-5388778			MedExpress Urgent Care - New Jersey, P.C.		NJ	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	83-2089623			MedExpress Urgent Care - Northern New Jersey PC		NJ	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	32-0533926			MedExpress Urgent Care Alabama, LLC		AL	NIA	Urgent Care Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	81-4030280			MedExpress Urgent Care Arizona, P.C.		AZ	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	46-4348120			MedExpress Urgent Care Arkansas, P.A.		AR	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-0930142			MedExpress Urgent Care California, P.C.		CA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	81-1956812			MedExpress Urgent Care Connecticut, P.C.		CT	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-1135336			MedExpress Urgent Care Idaho, P.C.		ID	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	47-4308614			MedExpress Urgent Care Illinois, P.C.		IL	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	81-5353472			MedExpress Urgent Care Iowa, P.C.		IA	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	47-1919283			MedExpress Urgent Care Kansas, P.A.		KS	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	82-1719888			MedExpress Urgent Care Maine, Inc.		ME	NIA	Urgent Care Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	81-1125396			MedExpress Urgent Care Minnesota P.C.		MN	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	47-3132625			MedExpress Urgent Care Missouri P.C.		MO	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4

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

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

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	80-0507474				MHCH, Inc.	CA	N/A	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		4
		00000	36-4600281				MIAMI SURGERY CENTER, LLC	DE	N/A	SCA-Doral, LLC	Ownership	50.180	UnitedHealth Group Incorporated		2
		00000	20-3345412				Midlands Orthopaedics Surgery Center, LLC	SC	N/A	SCA-Midlands, LLC	Ownership	49.000	UnitedHealth Group Incorporated		2
		00000	20-8103522				Midwest Center for Day Surgery, LLC	IL	N/A	Advocate-SCA Partners, LLC	Ownership	53.880	UnitedHealth Group Incorporated		2
							Mid-West National Life Insurance Company of Tennessee	TX	IA	HealthMarkets, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Mile High SurgiCenter, LLC	CO	N/A	SCA-Denver Physicians Holdings, LLC	Ownership	55.000	UnitedHealth Group Incorporated		2
							Mississippi Surgery Holdings, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Mississippi Surgical Center Limited Partnership	MS	N/A	Mississippi Surgery Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Mobile Medical Services, P.C.	NY	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Mobile-SC, LTD.	AL	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Modality Accountable Care Organisation Limited	GBR	N/A	Optum UK Solutions Group Limited	Influence	100.000	UnitedHealth Group Incorporated		5
							Modern Medical, Inc.	OH	N/A	Healthcare Solutions, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							Monarch Health Plan, Inc.	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Monarch HealthCare, A Medical Group, Inc.	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Monarch Hospice, LLC	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Monarch Management Services, Inc.	DE	N/A	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Montgomery Surgery Center Limited Partnership	MD	N/A	Maryland Ambulatory Centers	Ownership	77.000	UnitedHealth Group Incorporated		2
							Mosaic Management Services, Inc.	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Mountain View Medical Group, LLC	CO	N/A	OptumCare Holdings Colorado, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							MSLA Management LLC	DE	N/A	Logistics Health, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							Mt. Pleasant Surgery Center, L.P.	TN	N/A	SCA-MT. Pleasant, LLC	Ownership	99.000	UnitedHealth Group Incorporated		2
							Multiangiio Ltda.	BRA	N/A	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	93.000	UnitedHealth Group Incorporated		2
							Muskogee Surgical Investors, LLC	OK	N/A	Surgery Center of Muskogee, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Mustang Razorback Holdings, Inc.	DE	N/A	OptumInsight, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							My Wellness Solutions, LLC	DE	N/A	OptumHealth Care Solutions, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							NAMM Holdings, Inc.	DE	N/A	Aveta Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							NAMM Medical Group Holdings, Inc.	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							NAMM MGH, Inc.	CA	N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
							Nashville-SCA Surgery Centers, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							National Foundation Life Insurance Company	TX	IA	Enterprise Life Insurance Company	Ownership	100.000	UnitedHealth Group Incorporated		
							National MedTrans, LLC	NY	N/A	Specialty Benefits, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							National Pacific Dental, Inc.	TX	IA	Dental Benefit Providers, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							National Surgery Centers, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Naviguard, Inc.	DE	N/A	UnitedHealth Group Ventures, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Neighborhood Health Partnership, Inc.	FL	IA	UnitedHealthcare, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							Netwerkes, LLC	TN	N/A	Optum360 Solutions, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Nevada Pacific Dental	NV	N/A	Dental Benefit Providers, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							New Orleans Regional Physician Hospital Organization, L.L.C.	LA	N/A	UnitedHealthcare, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							New West Physicians, Inc.	CO	N/A	Newton Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							New York Proton Management, LLC	NY	N/A	ProHealth Proton Center Management, LLC	Influence	33.570	UnitedHealth Group Incorporated		5
							Newton Holdings, LLC	DE	N/A	Collaborative Care Holdings, LLC	Ownership	80.100	UnitedHealth Group Incorporated		2
							North American Medical Management California, Inc.	TN	N/A	NAMM Holdings, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							North Dallas Surgical Center, LLC	DE	N/A	THR-SCA Holdings, LLC	Influence	0.000	UnitedHealth Group Incorporated		5
							North Puget Sound Center for Sleep Disorders, LLC	WA	N/A	Everett MSO, Inc.	Ownership	71.250	UnitedHealth Group Incorporated		2
							North Puget Sound Oncology Equipment Leasing Company, LLC	WA	N/A	Everett MSO, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0707	UnitedHealth Group Incorporated	.00000	88-0245121			Northern Nevada Health Network, Inc.	NV	NIA	Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	63-1240726			Northern Rockies Surgery Center, L.P.	IN	NIA	Northern Rockies Surgicenter, Inc.	Influence	40.00	UnitedHealth Group Incorporated		.5	
		.00000	81-0399251			Northern Rockies Surgicenter, Inc.	MT	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	95-4748023			Northridge Medical Group, Inc.	CA	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4	
		.00000	37-1007387			Northwest Surgicare, LLC	DE	NIA	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	75-2494046			Northwest Surgicare, Ltd.	IL	NIA	Northwest Surgicare, LLC	Ownership	62.00	UnitedHealth Group Incorporated		.2	
		.00000	61-1855159			NPN IPA Washington, PLLC	WA	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4	
		.00000	56-1754480			NSC Fayetteville, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	56-1963226			NSC Greensboro West, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	49.00	UnitedHealth Group Incorporated			
		.00000	56-1775016			NSC Greensboro, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	36-4210296			NSC Lancaster, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	91-1553479			NSC Seattle, Inc.	WA	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	33-0812824			NSC Upland, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	46-5025690			NYSCA, LLC	NY	NIA	Surgical Care Affiliates, LLC	Influence	33.00	UnitedHealth Group Incorporated		.5	
		.00000	83-4364718			OC Cardiology Practice Partners, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1454609			Omesa S.A.	CHL	NIA	Vidaintegra S.A.	Ownership	99.99	UnitedHealth Group Incorporated			
		.00000	98-1454609			Omesa S.A.	CHL	NIA	Saden S.A.	Ownership	0.010	UnitedHealth Group Incorporated			
		.00000	27-0062838			OmniClaim, LLC	DE	NIA	Equian Parent Corp.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1456252			Onocare S.A.C.	PER	NIA	Pacifico S.A. Entidad Prestadora de Salud	Ownership	80.00	UnitedHealth Group Incorporated		.2	
		.00000	52-2129786			OneNet PPO, LLC	MD	NIA	UHC Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	26-1914835			OPHTHALMOLOGY SURGERY CENTER OF DALLAS, LLC	TX	NIA	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated			
		.00000	96940	52-1518174	3202702	Optimum Choice, Inc.	MD	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	47-0858534			Optum Bank, Inc.	UT	NIA	OptumHealth Financial Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	36-3437660			Optum Biometrics, Inc.	IL	NIA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	26-0683057			Optum Care Services Company	TN	NIA	Inspiris, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	83-1959511			Optum Care, Inc.	DE	NIA	Collaborative Care Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	75-2778455			Optum Clinic, P.A.	TX	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated			
		.00000	37-1782217			Optum Clinics Holdings, Inc.	DE	NIA	Collaborative Health Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		.4	
		.00000	38-3969193			Optum Clinics Intermediate Holdings, Inc.	DE	NIA	Optum Clinics Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1325466			Optum Digital Health Holdings, LLC	DE	NIA	Consumer Wellness Solutions, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1103015			Optum Finance (Ireland) Unlimited Company	IRL	NIA	UnitedHealthcare International VIII S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated			
		.00000	98-1103015			Optum Global Solutions (India) Private Limited	IND	NIA	Optum Global Solutions International B.V.	Ownership	99.99	UnitedHealth Group Incorporated			
		.00000	98-1103015			Optum Global Solutions (India) Private Limited	IND	NIA	UnitedHealth International, Inc.	Ownership	0.001	UnitedHealth Group Incorporated			
		.00000	98-1097776			Optum Global Solutions (Philippines), Inc.	PHL	NIA	Optum Global Solutions International B.V.	Ownership	99.991	UnitedHealth Group Incorporated		.2	
		.00000	98-1201187			Optum Global Solutions International B.V.	NLD	NIA	Optum Technology, LLC	Ownership	97.480	UnitedHealth Group Incorporated			
		.00000	98-1201187			Optum Global Solutions International B.V.	NLD	NIA	OptumHealth International B.V.	Ownership	2.520	UnitedHealth Group Incorporated			
		.00000	04-3574101			Optum Government Solutions, Inc.	DE	NIA	OptumInsight, Inc.	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000	84-3719654			Optum Growth Partners, LLC	DE	NIA	Optum, Inc.	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000				Optum Health & Technology (Hong Kong) Limited	CHN	NIA	OptumHealth International B.V.	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000	98-1095799			Optum Health & Technology (India) Private Limited	IND	NIA	OptumHealth International B.V.	Ownership	99.999	UnitedHealth Group Incorporated			
		.00000	98-1095799			Optum Health & Technology (India) Private Limited	IND	NIA	United Behavioral Health	Ownership	0.001	UnitedHealth Group Incorporated			
		.00000	98-1097886			Optum Health & Technology (Singapore) Pte. Ltd.	SGP	NIA	OptumHealth International B.V.	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000	20-2149493			Optum Health & Technology (US), LLC	MO	NIA	OptumHealth Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000	43-1747235			Optum Health & Technology Holdings (US), Inc.	MO	NIA	Optum, Inc.	Ownership	100.000	UnitedHealth Group Incorporated			
		.00000	98-1184561			Optum Health & Technology Serviços do Brasil Ltda.	BRA	NIA	Optum Global Solutions International B.V.	Ownership	99.998	UnitedHealth Group Incorporated			

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	98-1184561			Optum Health & Technology Serviços do Brasil Ltda.	BRA Optum Health and Technology FZ-LLC	NIA ARE	NIA	OptumInsight, Inc. Optum Global Solutions International B.V. Optum Health & Technology Holdings (US), Inc.	Ownership Ownership	0.002 100.000	UnitedHealth Group Incorporated UnitedHealth Group Incorporated		
		00000	98-1276517												
		00000	98-1097921			Optum Health Services (Canada) Ltd.	CAN	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1406274			Optum Health Solutions (Australia) Pty Ltd	AUS	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1147355			Optum Health Solutions (UK) Limited	GBR	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	58-2068880			Optum Healthcare of Illinois, Inc.	GA	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-0212381			Optum Hospice Pharmacy Services, LLC	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	11-2997132			Optum Infusion Services 100, Inc.	NY	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	11-3485985			Optum Infusion Services 101, Inc.	NY	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-1533840			Optum Infusion Services 103, LLC	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	55-0802777			Optum Infusion Services 201, Inc.	FL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-4881413			Optum Infusion Services 202, Inc.	FL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	33-1012700			Optum Infusion Services 203, Inc.	FL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	26-3738273			Optum Infusion Services 205, Inc.	FL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	63-1284325			Optum Infusion Services 206, Inc.	AL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	63-0964525			Optum Infusion Services 207, Inc.	AL	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-4963945			Optum Infusion Services 208, Inc.	NC	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	75-2196224			Optum Infusion Services 301, LP	OK	NIA			Ownership	99.950	UnitedHealth Group Incorporated		
		00000	75-2196224			Optum Infusion Services 301, LP	OK	NIA			Ownership	0.050	UnitedHealth Group Incorporated		
		00000	27-0668812			Optum Infusion Services 302, LLC	NE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-3741084			Optum Infusion Services 308, LLC	AZ	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	02-0653265			Optum Infusion Services 401, LLC	CA	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-0941801			Optum Infusion Services 403, LLC	CA	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	93-1103256			Optum Infusion Services 404, LLC	OR	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	84-2822134			Optum Infusion Services 501, Inc.	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	69647	31-0628424			Optum Insurance of Ohio, Inc.	OH	RE			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-4734521			Optum Labs Dimensions, Inc.	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1249178			Optum Labs International (UK) Ltd.	GBR	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	46-1615964			Optum Labs, Inc.	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1209730			Optum Life Sciences (Canada) Inc.	CAN	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
						Optum Management Consulting (Shanghai) Co., Ltd.	CHN	NIA			Optum Health & Technology Holdings (US), Inc.				
											Ownership	100.000	UnitedHealth Group Incorporated		
						Optum Medical Services of California, P.C.	CA	NIA			Influence	0.000	UnitedHealth Group Incorporated		4
						Optum Medical Services, P.C.	NC	NIA			Influence	0.000	UnitedHealth Group Incorporated		4
0707	UnitedHealth Group Incorporated	11068	30-0029448			Optum Networks of New Jersey, Inc.	DE	IA			Ortholet Holdings, Inc.				
		00000	58-1873062			Optum of New York, Inc.	NY	NIA			Optum Women's and Children's Health, LLC				
		00000	98-1097761			Optum Operations (Ireland) Unlimited Company	IRL	NIA			UnitedHealthcare International VII S.à r.l.				
		00000	20-8911466			Optum Palliative and Hospice Care of Pennsylvania, Inc.	TN	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	20-8911303			Optum Palliative and Hospice Care of Texas, Inc.	TN	NIA			Hospice Inspiris Holdings, Inc.				
		00000	30-0226127			Optum Palliative and Hospice Care, Inc.	DE	NIA			Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-3629080			Optum Perks LLC	DE	NIA			Collaborative Care Holdings, LLC				
		00000	45-3629080			Optum Perks LLC	DE	NIA			OptumRx PBM of Illinois, Inc.				
		00000	84-2827343			Optum Pharmacy 701, LLC	DE	NIA			OptumRx Health Solutions, LLC				
		00000	46-2731176			Optum Pharmacy 702, LLC	IN	NIA			OptumRx PBM of Illinois, Inc.				
		00000	45-2532834			Optum Pharmacy 703, LLC	NV	NIA			OptumRx PBM of Illinois, Inc.				
		00000	55-0824381			Optum Pharmacy 705, LLC	AL	NIA			BriovaRx of Maine, Inc.				
		00000	20-4581265			Optum Public Sector Solutions, Inc.	DE	NIA			OptumInsight, Inc.				
		00000	46-3328009			Optum Rocket, Inc.	DE	NIA			OptumInsight, Inc.				
		00000	26-0543382			Optum Senior Services, LLC	AL	NIA			Optum Hospice Pharmacy Services, LLC				
											Ownership	100.000	UnitedHealth Group Incorporated		

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	98-1307821				Optum Services (Ireland) Limited	IRL	NIA	Optum Operations (Ireland) Unlimited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	66-0870003				Optum Services (Puerto Rico) LLC	PR	NIA	Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-4683454				Optum Services, Inc.	DE	NIA	UnitedHealthcare International III B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1284698				Optum Solutions de Brasil – Tecnologia e Serviços de Suporte Ltda.	BRA	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1284698				Optum Solutions de Brasil – Tecnologia e Serviços de Suporte Ltda.	BRA	NIA	Amil Assistência Médica Internacional S.A.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-0644599				Optum Solutions UK Holdings Limited	GBR	NIA	Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-5713629				Optum Technology, LLC	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1097769				Optum UK Solutions Group Limited	GBR	NIA	Optum Solutions UK Holdings Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-2205984				Optum Women's and Children's Health, LLC	DE	NIA	My Wellness Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0580620	3119994			Optum, Inc.	DE	UIP	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-3983926				Optum360 Services, Inc.	DE	NIA	Optum Rocket, Inc.	Ownership	69.00	UnitedHealth Group Incorporated		2
		00000	82-3446942				Optum360 Solutions, LLC	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-3328307				Optum360, LLC	DE	NIA	Optum Rocket, Inc.	Ownership	69.00	UnitedHealth Group Incorporated		2
		00000	45-3007684				OptumCare ACO Florida, LLC	FL	NIA	OptumCare ACO Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-3006976				OptumCare ACO Holdings, LLC	CA	NIA	OptumCare Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0940296				OptumCare ACO New Mexico, LLC	DE	NIA	OptumCare New Mexico, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1422097				OptumCare Clinical Trials, LLC	DE	NIA	OptumCare Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2597463				OptumCare Colorado ASC, LLC	CO	NIA	OptumCare Colorado, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-2218380				OptumCare Colorado Springs, LLC	CO	NIA	OptumCare Holdings Colorado, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-2196783				OptumCare Colorado, LLC	CO	NIA	OptumCare Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-1508741				OptumCare Endoscopy Center New Mexico, LLC	NM	NIA	OptumCare New Mexico, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-2227280				OptumCare Florida CI, LLC	DE	NIA	OptumCare Florida, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	87-0408859				Intermountain Medical Holdings Nevada, Inc.								
		00000	46-2385459				OptumCare Florida, LLC	DE	NIA	OptumCare Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0999065				OptumCare Health Plan of California, Inc.	DE	NIA	OptumCare Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-8571405				OptumCare Holdings Colorado, LLC	CO	NIA	OptumCare Colorado, LLC	Ownership	85.00	UnitedHealth Group Incorporated		2
		00000	56-2592163				OptumCare Holdings New Mexico, LLC	NM	NIA	OptumCare Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	95-4509662				OptumCare Holdings, LLC	CA	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-4043287				OptumCare Management, LLC	CA	NIA	OptumCare Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	13-4138668				OptumCare New Mexico, LLC	DE	NIA	OptumCare Holdings New Mexico, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-3462809				OptumCare New York IPA, Inc.	NY	NIA	Inspiris, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1591944				OptumCare South Florida, LLC	FL	NIA	OptumCare Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-0858530				OptumHealth Care Solutions, LLC	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1192395				OptumHealth Financial Services, Inc.	DE	NIA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1106868				OptumHealth Holdings, LLC	DE	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1401978				OptumHealth International B.V.	NLD	NIA	Catamaran S.á.r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1401978				OptumInsight Holdings, LLC	DE	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	04-3383745				OptumInsight India Private Limited	IND	NIA	ABCO International Holdings, LLC	Ownership	99.065	UnitedHealth Group Incorporated		
		00000	41-1858498				OptumInsight India Private Limited	IND	NIA	The Advisory Board Company	Ownership	0.935	UnitedHealth Group Incorporated		
		00000	75-2578509				OptumInsight Life Sciences, Inc.	DE	NIA	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	31-1728846				OptumInsight, Inc.	DE	NIA	OptumInsight Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-4734235				OptumRx Administrative Services, LLC	TX	UIP	OptumRx Holdings I, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-0666840				OptumRx Discount Card Services, LLC	DE	NIA	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	80-0870454				OptumRx Group Holdings, Inc.	DE	UIP	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	34-1472211				OptumRx Health Solutions, LLC	DE	UIP	OptumRx Administrative Services, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-0218027				OptumRx Holdings I, LLC	DE	UIP	OptumRx Group Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-0151096				OptumRx Holdings, LLC	DE	NIA	Optum, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	OptumRx Home Delivery of Ohio, LLC				OptumRx Home Delivery of Ohio, LLC	OH	NIA	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	OptumRx IPA III, Inc.				OptumRx IPA III, Inc.	NY	NIA	OptumRx PBM of Maryland, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	OptumRx NY IPA, Inc.				OptumRx NY IPA, Inc.	NY	NIA	OptumRx, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	27-3419292				OptumRx of Pennsylvania, LLC	DE	N/A	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	11-2531812				OptumRx PBM of Illinois, Inc.	DE	N/A	OptumRx Administrative Services, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0361447				OptumRx PBM of Maryland, LLC	NV	UDP	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	03-0592263				OptumRx PBM of Pennsylvania, LLC	PA	N/A	OptumRx of Pennsylvania, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-1424534				OptumRx PBM of Puerto Rico, LLC	NV	N/A	OptumRx PBM of Maryland, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	38-3693753				OptumRx PBM of Wisconsin, LLC	WI	N/A	OptumRx PBM of Illinois, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	16-1767416				OptumRx PD of Pennsylvania, LLC	PA	N/A	OptumRx of Pennsylvania, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0373347				OptumRx Pharmacy of Nevada, Inc.	NV	N/A	OptumRx Health Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3146510				OptumRx Pharmacy, Inc.	DE	N/A	OptumRx, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0441200				OptumRx, Inc.	CA	N/A	OptumRx Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-2016292				OptumServe Technology Services, Inc.	MD	N/A	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	22-3883387				OREGON OUTPATIENT SURGERY CENTER, LLC	OR	N/A	Providence & SCA Off-Campus Holdings, LLC	Influence	51.180	UnitedHealth Group Incorporated		.5
		00000	59-3125869				Orlando Center for Outpatient Surgery, L.P.	GA	N/A	Surgical Health of Orlando, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
		00000	46-2881462				Orthology Mid-Atlantic, Inc.	DE	N/A	Orthology, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-2742615				Orthology, Inc.	DE	N/A	UnitedHealth Group Ventures, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	13-3960641				OrthoNet Holdings, Inc.	DE	N/A	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	13-3818652				OrthoNet LLC	NY	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	13-4025898				OrthoNet New York IPA, Inc.	NY	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-2884306				OrthoNet of the South, Inc.	DE	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-1581769				OrthoNet Services, Inc.	DE	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-0221966				OrthoNet West, Inc.	DE	N/A	OrthoNet Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							ORTHOPEDIC SURGERY CENTER OF PALM BEACH COUNTY, LLC	FL	N/A	SCA-Palm Beach, LLC	Influence	18.500	UnitedHealth Group Incorporated		.5
							OSB – Tecnologia e Serviços de Suporte Ltda.	BRA	N/A	Anil Assistência Médica Internacional S.A.	Ownership	99.990	UnitedHealth Group Incorporated		
							OSB – Tecnologia e Serviços de Suporte Ltda.	BRA	N/A	Cemed Care – Empresa de Atendimento Clínico Geral Ltda.	Ownership	0.010	UnitedHealth Group Incorporated		
							Ovations, Inc.	DE	N/A	UnitedHealthcare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Benefit Management, Inc.	CT	N/A	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Health Insurance, Inc.	NY	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Health Plans (CT), Inc.	CT	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Health Plans (NJ), Inc.	NJ	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Health Plans (NY), Inc.	NY	IA	Oxford Health Plans LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Oxford Health Plans LLC	DE	N/A	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
							P2P Link, LLC	DE	N/A	SPRS, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Pacific Casualty Company, Inc.	HI	IA	USHEALTH Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare Life and Health Insurance Company	IN	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare Life Assurance Company	CO	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare of Arizona, Inc.	AZ	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare of Colorado, Inc.	CO	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare of Nevada, Inc.	NV	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PaciFiCare S.A. Entidad Prestadora de Salud	PER	N/A	Empremédica S. A.	Ownership	50.000	UnitedHealth Group Incorporated		.2
							Paoli Ambulatory Surgery Center	PA	N/A	SCA-Paoli, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
							Paoli Surgery Center, L.P.	TN	N/A	Paoli Ambulatory Surgery Center	Ownership	64.250	UnitedHealth Group Incorporated		.2
							Park Hill Surgery Center, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
							Parkway Surgery Center, LLC	DE	N/A	SCA-Hagerstown, LLC	Ownership	73.690	UnitedHealth Group Incorporated		.2
							Pasteur Plaza Surgery Center GP, Inc.	DE	N/A	ASC Network, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							PatientsLikeMe LLC	DE	N/A	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							Patrimonio Autónomo Nueva Clínica - PANC	COL	N/A	Clinica del Country S.A.	Ownership	65.170	UnitedHealth Group Incorporated		.2
							Patrimonio Autónomo Nueva Clínica - PANC	COL	N/A	Banmédica Internacional SpA	Ownership	9.590	UnitedHealth Group Incorporated		.2
							Payment Resolution Services, LLC	TN	N/A	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
							PCCV, Inc.	CA	N/A	PrimeCare Medical Network, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0707	UnitedHealth Group Incorporated	13607	20-5662149			Peoples Health, Inc. Perimeter Center for Outpatient Surgery, L.P.		LA	IA	New Orleans Regional Physician Hospital Organization, L.L.C.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	58-1978405					GA	NIA	SHC Atlanta, LLC	Influence.....	26.643	UnitedHealth Group Incorporated		.5
		00000	23-2171049			Pharmacy Software Holdco, Inc.		PA	NIA	OptumRx Administrative Services, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	35-2288416			PHC Subsidiary Holdings, LLC		TX	NIA	United HealthCare Services, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	81-2902954			Physician Alliance of the Rockies, LLC		CO	NIA	New West Physicians, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	30-0516435			Physician Partners Medical Group, Inc.		CA	NIA	Physician(s) owned	Influence.....	0.00	UnitedHealth Group Incorporated		.4
		00000	00-0000000			Physicians Care Network, L.L.C.		WA	NIA	The PolicyClinic, PLLC	Influence.....	0.010	UnitedHealth Group Incorporated		.4
		00000	59-3438026			PHYSICIANS DAY SURGERY CENTER, LLC		FL	NIA	SCA-Naples, LLC	Ownership.....	51.000	UnitedHealth Group Incorporated		.2
.0707	UnitedHealth Group Incorporated	11494	04-3677255			Physicians Health Choice of Texas, LLC		TX	IA	PHC Subsidiary Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	52-1162824			Physicians Health Plan of Maryland, Inc.		MD	NIA	United HealthCare Services, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1388873			Plano de Saúde Ana Costa Ltda.		BRA	IA	Amil Assistência Médica Internacional S.A.	Ownership.....	74.860	UnitedHealth Group Incorporated		
		00000	98-1388873			Plano de Saúde Ana Costa Ltda.		BRA	IA	Santos Administração e Participações S.A.	Ownership.....	25.140	UnitedHealth Group Incorporated		
		00000	66-0742844			Plus One Health Management Puerto Rico, Inc.		PR	NIA	Plus One Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	13-3613705					DE	NIA	OptumHealth Care Solutions, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	80-0670247			PMI Acquisition, LLC		DE	NIA	Progressive Enterprises Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	26-3148744			PMSI Holdings, LLC		DE	NIA	Progressive Enterprises Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	59-3166848			PMSI Settlement Solutions, LLC		FL	NIA	PMSI Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	56-2422696			PMSI, LLC		FL	NIA	PMSI Holdings, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	98-1083164			Polar II Fundo de Investimento em Participações Multiestrategia		BRA	NIA	UnitedHealthcare International IV S.á r.l.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	47-5563848			Polo Holdco, LLC		DE	NIA	Collaborative Care Holdings, LLC	Ownership.....	80.100	UnitedHealth Group Incorporated		.2
		00000	46-5415205			POMCO Network, Inc.		NY	NIA	POMCO, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	15-0581348			POMCO, Inc.		NY	NIA	UNR, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0261822			Pomerado Outpatient Surgical Center, Inc.		CA	NIA	ASC Network, LLC	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0752699			Pomerado Outpatient Surgical Center, L.P.		CA	NIA	Pomerado Outpatient Surgical Center, Inc.	Ownership.....	57.500	UnitedHealth Group Incorporated		.2
		00000	27-1454121			PPH Holdings, LLC		DE	NIA	Practice Partners in Healthcare, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	75-2225186			Precision Dialing Services, Inc.		DE	NIA	USHEALTH Career Agency, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	65-0683927			Preferred Care Partners Holding, Corp.		FL	NIA	United HealthCare Services, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	26-1845018			Preferred Care Partners Medical Group, Inc.		FL	NIA	Preferred Care Partners Holding, Corp.	Ownership.....	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	11176	65-0885993			Preferred Care Partners, Inc.		FL	IA	Preferred Care Partners Holding, Corp.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	75-3265059			Premier Choice ACO, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	72-1378216			SCA Premier Surgery Center of Louisville,		TN	NIA	SCA Premier Surgery Center of Louisville,	Ownership.....	51.000	UnitedHealth Group Incorporated		.2
		00000	33-0527335			Premier Surgery Center of Louisville, L.P.		LLC			Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000	30-0516440			Primary Care Associated Medical Group, Inc.		CA	NIA	Physician(s) owned	Influence.....	0.000	UnitedHealth Group Incorporated		.4
		00000	88-0253112			Prime Community Care, Inc.		CA	NIA	Physician(s) owned	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0607478			Prime Health, Inc.		NV	NIA	Sierra Health Services, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	87-0757397			PrimeCare Medical Network, Inc.		CA	NIA	NAMM Holdings, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674407			PrimeCare of Citrus Valley, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	80.000	UnitedHealth Group Incorporated		.2
		00000	33-0674401			PrimeCare of Corona, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674408			PrimeCare of Hemet Valley, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674402			PrimeCare of Inland Valley, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674400			PrimeCare of Moreno Valley, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674404			PrimeCare of Redlands, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	14-1915328			PrimeCare of Riverside, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0698439			PrimeCare of San Bernardino, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	33-0674409			PrimeCare of Sun City, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	14-1873402			PrimeCare of Temecula, Inc.		CA	NIA	PrimeCare Medical Network, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	27-4371197			Procura Management, Inc.		DE	NIA	Healthcare Solutions, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		
		00000	31-1192384			Progressive Enterprises Holdings, Inc.		OH	NIA	OptumRx, Inc.	Ownership.....	100.00	UnitedHealth Group Incorporated		

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

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

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		00000	45-4469117				ProHEALTH Accountable Care Medical Group, PLLC	NY	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	11-3447394				ProHEALTH Ambulatory Surgery Center, Inc.	NY	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	11-3355604				ProHEALTH Care Associates LLP	NY	NIA	ProHEALTH Medical NY, P.C.	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	11-3355604				ProHEALTH Care Associates, L.L.P.	NY	NIA	ProHEALTH Medical NY, P.C.	Ownership	51.00	UnitedHealth Group Incorporated		
		00000	32-0229091				ProHEALTH Fitness of Lake Success, LLC	NY	NIA	ProHEALTH Medical Management, LLC	Ownership	82.62	UnitedHealth Group Incorporated		.2
		00000	47-1049961				ProHEALTH Medical Management, LLC	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	45-5470737				ProHealth Physicians ACO, LLC	CT	NIA	ProHealth Physicians, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	06-1446075				ProHealth Physicians, Inc.	CT	NIA	Polo Holdco, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	06-1469068				ProHealth Physicians, P.C.	CT	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	32-0455430				ProHealth Proton Center Management, LLC	DE	NIA	ProHEALTH Medical Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-5661535				ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	46-1883579				ProHEALTH Urgent Care Medicine, PLLC	NY	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	22-3493126				Promotora Country S.A.	COL	NIA	Banmédica S.A.	Ownership	50.00	UnitedHealth Group Incorporated		.3
		00000	98-1444638				Pronounced Health Solutions, Inc.	DE	NIA	My Wellness Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-4217561				Prosemédic S.A.C.	PER	NIA	Pacífico S.A. Entidad Prestadora de Salud	Ownership	80.00	UnitedHealth Group Incorporated		.1
		00000	82-3765555				Prospero Health, LLC	DE	NIA	Optum Growth Partners, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3270499				Prospero Management Services, LLC	DE	NIA	Optum Growth Partners, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1591205				Providence & SCA Off-Campus Holdings, LLC	DE	NIA	SCA-Portland, LLC	Ownership	40.00	UnitedHealth Group Incorporated		
		00000	90-0876656				Providence & SCA On-Campus Holdings, LLC	DE	NIA	SCA-Portland, LLC	Ownership	20.00	UnitedHealth Group Incorporated		
		00000	93-1068319				Providence & SCA Outreach Markets Holdings, LLC	DE	NIA	SCA-Portland, LLC	Ownership	49.00	UnitedHealth Group Incorporated		
		00000	90-0876656				PS Center, LLC	CA	NIA	SCA-Portland, LLC	Ownership	100.00	UnitedHealth Group Incorporated		.5
		00000	93-1068319				Pueblo-SCA Surgery Center, LLC	DE	NIA	Beach Surgical Holdings II, LLC	Influence	100.00	UnitedHealth Group Incorporated		
		00000	46-3901920				Pulse Platform, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2493256				QoL Acquisition Holdings Corp.	DE	NIA	Rally Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	80-0947972				Rally Health, Inc.	DE	NIA	Genoa Healthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	80-0947972				Real Appeal, Inc.	DE	NIA	Optum Digital Health Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	94-3115625				Recaudación y Cobranzas Honodav Ltda.	CHL	NIA	Rally Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	56-2627067				Recaudación y Cobranzas Honodav Ltda.	CHL	NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership	99.00	UnitedHealth Group Incorporated		
		00000	94-3115627				Redlands Ambulatory Surgery Center	CA	NIA	Servicios Integrados de Salud Ltda.	Ownership	1.00	UnitedHealth Group Incorporated		
		00000	94-3323051				Redlands Family Practice Medical Group, Inc.	CA	NIA	Redlands-SCA Surgery Centers, Inc.	Ownership	54.00	UnitedHealth Group Incorporated		.2
		00000	82-3745100				Redlands-SCA Surgery Centers, Inc.	CA	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	32-0543788				Redwood City Endoscopy Suite, LLC	CA	NIA	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3161933				Reliant MSO, LLC	DE	NIA	SCA Pacific Holdings, Inc.	Influence	50.00	UnitedHealth Group Incorporated		.5
		00000	82-3130872				Renai Health Holdings, Inc.	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-0758315				Renai Health IPA, LLC	DE	NIA	UnitedHealth Group Ventures, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3420379				Renai Health Management, LLC	DE	NIA	Renai Health Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	32-0500242				River Valley ASC, LLC	CT	NIA	Renai Health Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	22-3624559				Riverside Electronic Healthcare Resources, Inc.	CA	NIA	SCA-River Valley, LLC	Ownership	55.360	UnitedHealth Group Incorporated		.2
		00000	86-0857176				Riverside Medical Management, LLC	NJ	NIA	Riverside Community Healthplan Medical Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-2662506				Riverside Medical Management, LLC	DE	NIA	ProHEALTH Medical Management, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0310956				Riverside Pediatric Group, P.C.	NJ	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	-----				Riverside Surgical Center of Meadowlands, LLC	NJ	NIA	Riverside Medical Management, LLC	Influence	49.00	UnitedHealth Group Incorporated		.5
		00000	-----				Riverside Surgical Center of Newark, LLC	NJ	NIA	Riverside Medical Management, LLC	Influence	44.100	UnitedHealth Group Incorporated		.5
		00000	-----				Robert B. McBeath, M.D. II, P.C.	NV	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	-----				Robert B. McBeath, M.D. III, P.C.	NV	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	-----				Robert B. McBeath, M.D., Professional Corporation	NV	NIA	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	-----				Rocky Mountain Health Maintenance Organization, Incorporated	CO	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
00707	UnitedHealth Group Incorporated	95482	84-0614905												

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

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	84-1224718				Rocky Mountain HealthCare Options, Inc.	CO	NIA	Rocky Mountain Health Maintenance Organization, Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-0521940				Sacred Heart ASC, LLC	FL	NIA	Formation Documents Pending	Ownership	0.00	UnitedHealth Group Incorporated		
		00000					Saden S.A.	CHL	NIA	Banmédica S.A.	Ownership	99.920	UnitedHealth Group Incorporated		
		00000					Saden S.A.	CHL	NIA	Clínica Dávila y Servicios Médicos S.A.	Ownership	0.080	UnitedHealth Group Incorporated		
		00000					Sahtu Medical Ltd.	CAN	NIA	UnitedHealthcare Global Canada Limited	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	74-2462470				Salem Surgery Center, LLC	OR	NIA	Surgicare of Salem, LLC	Ownership	70.000	UnitedHealth Group Incorporated		2
		00000	45-2219585				Salveo Specialty Pharmacy, Inc.	DE	NIA	OptumRx Administrative Services, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	77-0322251				San Diego Endoscopy Center	CA	NIA	Endoscopy Center Affiliates, Inc.	Ownership	39.000	UnitedHealth Group Incorporated		
		00000	27-3787593				Sand Lake SurgiCenter, LLC	FL	NIA	SCA-Sand Lake, LLC	Ownership	51.450	UnitedHealth Group Incorporated		2
		00000	91-2127820				Santa Cruz Endoscopy Center, LLC	CA	NIA	SCA Pacific Holdings, Inc.	Ownership	50.000	UnitedHealth Group Incorporated		2
		00000					Santa Helena Assistência Médica S.A.	BRA	NIA	Elvual Participações S.A.	Ownership	77.301	UnitedHealth Group Incorporated		2
		00000					Santa Helena Assistência Médica S.A.	BRA	NIA	Amil Assistência Médica Internacional S.A.	Ownership	22.292	UnitedHealth Group Incorporated		2
		00000					Santos Administração e Participações S.A.	BRA	NIA	Amil Assistência Médica Internacional S.A.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	84-1754732				Sanvello Behavioral Health Services, P.A.	DE	NIA	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		4
		00000	83-3057919				Sanvello Health Holdings, LLC	DE	NIA	Sanvello Health Ventures, LLC	Ownership	85.790	UnitedHealth Group Incorporated		
		00000	47-1920345				Sanvello Health Inc.	DE	NIA	Sanvello Health Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-4028885				Savvysherpia Administrative Services, LLC	MN	NIA	Savvysherpia, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000					Savvysherpia, Inc.	PHL	NIA	Savvysherpia, LLC	Ownership	99.996	UnitedHealth Group Incorporated		2
		00000	41-1934238				Savvysherpia, LLC	DE	NIA	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	62-1149229				SC Affiliates, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	92-0080881				SCA Alaska Surgery Center, inc.	AK	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-5537316				SCA Athens, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-5014406				SCA Austin Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-4230864				SCA BOSC Holdings, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230864				SCA BOSC Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230864				SCA BOSC Holdings, LLC	DE	NIA	SunSurgery, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230864				SCA BOSC Holdings, LLC	DE	NIA	Surgery Center Holding, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-2110605				SCA California Surgical Holdings, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-3916468				SCA Capital, LLC	DE	NIA	Surgical Care Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-5030792				SCA Cedar Park Holdings, LLC	DE	NIA	SCA Austin Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	04-3170801				SCA Danbury Surgical Center, LLC	DE	NIA	SunSurgery, LLC	Ownership	63.010	UnitedHealth Group Incorporated		2
		00000	62-1535981				SCA Development, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1372069				SCA eCode Solutions Private Limited	IND	NIA	eCode Solutions, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	98-1372069				SCA eCode Solutions Private Limited	IND	NIA	eCode Solutions, LLC	Ownership	99.990	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	NIA	SunSurgery, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4230987				SCA EHSC Holdings, LLC	DE	NIA	Surgery Center Holding, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	NIA	SunSurgery, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-5512838				SCA EWASC Holdings, LLC	DE	NIA	Surgery Center Holding, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	47-5064834				SCA Hays Holdings, LLC	DE	NIA	SCA Austin Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	83-2735871				SCA Heartland Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	36-4869243				SCA HoldCo, Inc	DE	NIA	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	27-1664837				SCA Holding Company, Inc.	DE	NIA	SCA Surgery Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	47-1256943				SCA Holdings, Inc.	CA	NIA	National Surgery Centers, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	NIA	National Surgery Centers, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	NIA	SC Affiliates, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	NIA	SunSurgery, LLC	Ownership	25.000	UnitedHealth Group Incorporated		
		00000	45-4240475				SCA IEC Holdings, LLC	DE	NIA	Surgery Center Holding, LLC	Ownership	25.000	UnitedHealth Group Incorporated		

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

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- ciliary Loca- tion	10 Relation- ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	45-2684108				SCA Indiana Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
		00000	20-8116987				SCA Nashville ASC, LLC	TN	N/A	Nashville-SCA Surgery Centers, Inc.	Ownership	99.00	UnitedHealth Group Incorporated		
		00000	20-8116987				SCA Nashville ASC, LLC	TN	N/A	SC Affiliates, LLC	Ownership	1.00	UnitedHealth Group Incorporated		
		00000	62-1505276				SCA of Clarksville, Inc.	TN	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-1707364				SCA Pacific Holdings, Inc.	CA	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-1686425				SCA Pennsylvania Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Premier Surgery Center of Louisville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Rockledge JV, LLC	DE	N/A	SCA-Merritt, LLC	Ownership	97.00	UnitedHealth Group Incorporated		2
							SCA ROCS Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA ROCS Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA ROCS Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA Sage Medical, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Southwestern PA, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Specialists of Florida, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	10.00	UnitedHealth Group Incorporated		
							SCA SSC Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSC Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSSC Holdings, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSSC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSSC Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA SSSC Holdings, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	25.00	UnitedHealth Group Incorporated		
							SCA Stonegate Holdings, LLC	DE	N/A	SCA Austin Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Surgery Center of Culman, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Surgery Holdings, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Surgery Partners, LLC	DE	N/A	National Surgery Centers, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Surgicare of Laguna Hills, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA Teammate Support Network	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Abq Albuquerque Surgery Properties, Inc.	NM	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Alliance, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Anne Arundel, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Applecare Partners, LLC	DE	N/A	SCA-Downey, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Bethesda, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Blue Ridge, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Bonita Springs, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Brandon, LLC	DE	N/A	SC Affiliates, LLC	Ownership	50.980	UnitedHealth Group Incorporated		2
							SCA-Castle Rock, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Central Florida, LLC	FL	N/A	SC Affiliates, LLC	Ownership	55.360	UnitedHealth Group Incorporated		2
							SCA-Charleston, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Chatham, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Cherry Creek, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Chevy Chase, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Citrus, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-1541326	DE	N/A	SCA-Ft. Myers, LLC	Ownership	69.698	UnitedHealth Group Incorporated		
							SCA-Colonial Partners, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Colorado Springs, LLC	DE	N/A	SunSurgery, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Connecticut Partners, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Davenport, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							SCA-Denver Physicians Holdings, LLC	DE	N/A	SCA-Denver, LLC	Ownership	55.000	UnitedHealth Group Incorporated		
							SCA-Denver, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

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		00000	82-1470227				SCA-Derry, LLC	DE	N/A	SC Affiliates, LLC	Ownership	78.873	UnitedHealth Group Incorporated		2
		00000	81-3734814				SCA-Doral, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-3055579				SCA-Downey, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1093886				SCA-DRY CREEK, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1102015				SCA-DTC Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1594261				SCA-Dublin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3301305				SCA-Encinitas, Inc.	DE	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1541235				SCA-Eugene, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-2805878				SCA-First Coast, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1551099				SCA-Florence, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	93-1067967				SCA-Fort Collins, Inc.	CO	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1502719				SCA-Fort Walton, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3641516				SCA-Franklin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2727879				SCA-Frederick, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3535257				SCA-Freeway Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4907566				SCA-Ft. Myers, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1547690				SCA-Gainesville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1956407				SCA-Gladiolus, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-1488326				SCA-GRANTS PASS, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2376695				SCA-Grove Place, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3466283				SCA-Hagerstown, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4605501				SCA-Haden, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-5229514				SCA-Hilton Head, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506650				SCA-Honolulu, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3445356				SCA-Houston Executive, LLC	DE	N/A	SCA Pacific Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4905342				SCA Holdings, LLC	DE	N/A	SCA HoldCo, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1666861				SCA-Illinois, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3930052				SCA-IT Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-3090526				SCA-JPM Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1102109				SCA-Kissing Camels Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-42292506				SCA-Main Street, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1751165				SCA-Marina del Rey, LLC	CA	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1367813				SCA-MC VBP, Inc.	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1184188				SCA-Mecklenburg Development Corp.	NC	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-4616104				SCA-Memorial City, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1771410				SCA-Merritt, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-2455773				SCA-Midlands, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2976543				SCA-Midway Management, LLC	IL	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1093787				SCA-Mile High Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	80-0070617				SCA-Mobile, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1320467				SCA-Mokena Properties, LLC	DE	N/A	SCA-Mokena, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1065674				SCA-Mokena, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506655				SCA-Morris County, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-2850365				SCA-Mt. Pleasant, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3002171				SCA-Naperville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1347328				SCA-Naples, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-4418919				SCA-ND VBP, Inc.	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-1760663				SCA-New Jersey, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1589343				SCA-Newport Beach, LLC	CA	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3445510				Scanner Centromed S.A.	CHL	N/A	Administradora Médica Centromed S.A.	Ownership	84.50	UnitedHealth Group Incorporated		2
		00000	82-3050836				SCA-Northeast Georgia Health, LLC	TN	N/A	SCA-Gainesville, LLC	Ownership	50.10	UnitedHealth Group Incorporated		2
		00000	62-1538850				SCA-Palm Beach MSO Holdings, LLC	DE	N/A	SunSurgery, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3050836				SCA-Palm Beach, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1538850				SCA-Paoli, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi- ciliary Loca- tion	Rela- tionship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner- ship Provide Per- cen- tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re- quired? (Y/N)	*
		00000	47-2785908			SCA-Phoenix, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-1620189			SCA-Pocono, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-4139195			SCA-PORTLAND, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000				SCA-Practice Partners Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-4304317			SCA-River Valley, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	83-2111732			SCA-Riverside Partners, LLC	DE	N/A	SCA-Riverside, LLC	Ownership	51.00	UnitedHealth Group Incorporated			2
		00000	83-2721919			SCA-Riverside, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-1647512			SCA-Rockville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-2963561			SCA-San Diego, Inc.	DE	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	94-3138088			SCA-San Luis Obispo, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-1685878			SCA-Sand Lake, LLC	FL	N/A	SC Affiliates, LLC	Ownership	83.480	UnitedHealth Group Incorporated			2
		00000	88-0185362			SCA-Santa Rosa, Inc.	NV	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	62-1179532			SCA-Shelby Development Corp.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-3300613			SCA-Somerset, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	22-3117714			SCA-South Jersey, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-2676325			SCA-Sparta, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-4499088			SCA-Spartanburg Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-4106989			SCA-St. Louis, LLC	DE	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-3270591			SCA-St. Lucie, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-4371453			SCA-SurgiCare, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-2455241			SCA-Swiftpath, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-1987225			SCA-VERTA, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-2294882			SCA-Wake Forest, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-1449412			SCA-Western Connecticut, LLC	DE	N/A	SC Affiliates, LLC	Ownership	67.00	UnitedHealth Group Incorporated			2
		00000	82-3689825			SCA-Westover Hills, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	83-3082789			SCA-Wilmington, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	47-2890788			SCA-Wilson, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	81-1159878			SCA-Winchester, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	62-1525777			SCA-Winter Park, Inc.	TN	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	82-3528300			SCA-Woodlands Holdings, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	27-2635371			SCP Specialty Infusion, LLC	DE	N/A	BriovaRx Infusion Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated			
		00000	98-1097822			ScriptSwitch Limited	GBR	N/A	Optum UK Solutions Group Limited	Ownership	100.00	UnitedHealth Group Incorporated			
						Am1 Assistancia Medica Internacional S.A.									
						Seisa Serviços Integrados de Saúde Ltda.	BRA	N/A		Ownership	100.00	UnitedHealth Group Incorporated			
						Cemed Care – Empresa de Atendimento Clínico Geral Ltda.									
						Seisa Serviços Integrados de Saúde Ltda.	BRA	N/A		Ownership	0.000	UnitedHealth Group Incorporated			
						Senate Street Surgery Center, LLC	IN	N/A	SCA SSSC Holdings, LLC	Ownership	50.720	UnitedHealth Group Incorporated			2
						Senior Benefits, L.L.C.	AZ	N/A	USHEALTH Career Agency, Inc.	Ownership	100.000	UnitedHealth Group Incorporated			
						Serquinox Holdings LLC	DE	N/A	BriovaRx Infusion Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated			
						Servicios de Entrenamiento en Competencias Clínicas Ltda.	CHL	N/A	Clínica Santa María S.A.	Ownership	99.900	UnitedHealth Group Incorporated			
						Servicios de Entrenamiento en Competencias Clínicas Ltda.	CHL	N/A	Sociedad de Inversiones Santa María S.A.	Ownership	0.100	UnitedHealth Group Incorporated			
						Servicios Integrados de Salud Ltda.	CHL	N/A	Clínica Dávila y Servicios Médicos S.A.	Ownership	99.900	UnitedHealth Group Incorporated			
						Servicios Integrados de Salud Ltda.	CHL	N/A	Clínica Santa María S.A.	Ownership	0.100	UnitedHealth Group Incorporated			
						Servicios Médicos Amed Quilpué S.A.	CHL	N/A	Centromed Quilpué S.A.	Ownership	99.900	UnitedHealth Group Incorporated			
						Servicios Médicos Amed Quilpué S.A.	CHL	N/A	Laboratorios Médicos Amed Quilpué S.A.	Ownership	0.100	UnitedHealth Group Incorporated			
						Servicios Médicos Bío Bío Limitada	CHL	N/A	Clínica Bío Bío S.A.	Ownership	99.000	UnitedHealth Group Incorporated			
						Servicios Médicos Bío Bío Limitada	CHL	N/A	Saden S.A.	Ownership	1.000	UnitedHealth Group Incorporated			
						Servicios Médicos Ciudad del Mar Ltda.	CHL	N/A	Clínica Ciudad del Mar S.A.	Ownership	99.000	UnitedHealth Group Incorporated			
						Servicios Médicos Ciudad del Mar Ltda.	CHL	N/A	Saden S.A.	Ownership	1.000	UnitedHealth Group Incorporated			
						Servicios Médicos Santa María Limitada	CHL	N/A	Sociedad de Inversiones Santa María S.A.	Ownership	99.176	UnitedHealth Group Incorporated			
						Servicios Médicos Santa María Limitada	CHL	N/A	Clínica Santa María S.A.	Ownership	0.824	UnitedHealth Group Incorporated			
						Servicios Médicos Vespucio Ltda.	CHL	N/A	Clínica Vespucio S.A.	Ownership	99.000	UnitedHealth Group Incorporated			

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

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

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		00000				Servicios Médicos Vespucio Ltda.	CHL	NIA		Saden S.A.	Ownership	1.00	UnitedHealth Group Incorporated		
		00000	45-4233576			SharedClarity LLC	DE	NIA		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-1978974			SHC Atlanta, LLC	DE	NIA		Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-2013443			SHC Austin, Inc.	GA	NIA		Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-2062812			SHC Hawthorn, Inc.	GA	NIA		Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	58-2101924			SHC Melbourne, Inc.	GA	NIA		Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1223273			Shelby Surgery Properties, Inc.	TN	NIA		SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
						Sierra Health and Life Insurance Company, Inc.	NV	IA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	71420	94-0734860		Sierra Health Services, Inc.	NV	NIA		UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0200415			Sierra Health-Care Options, Inc.	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0254322			Sierra Home Medical Products, Inc.	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0385705			Sierra Nevada Administrators, Inc.	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0264562			Sistema de Administración Hospitalaria S.A.C.	PER	NIA		Pacífico S.A. Entidad Prestadora de Salud	Ownership	99.870	UnitedHealth Group Incorporated		
		00000	20-1004228			Small Business Insurance Advisors, Inc.	TX	NIA		USHEALTH Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000				Sobam - Centro Médico Hospitalar S.A.	BRA	IA		Santa Helena Assistência Médica S.A.	Ownership	98.080	UnitedHealth Group Incorporated		2
						Sobam - Centro Médico Hospitalar S.A.	BRA	IA		CMO - Centro Médico de Oftalmología S/S Ltda.	Ownership	1.910	UnitedHealth Group Incorporated		2
		00000	98-1453235			Sociedad de Inversiones Santa María S.A.	CHL	NIA		Clínica Santa María S.A.	Ownership	99.743	UnitedHealth Group Incorporated		
		00000	98-1453235			Sociedad de Inversiones Santa María S.A.	CHL	NIA		Clínica Dávila y Servicios Médicos S.A.	Ownership	0.257	UnitedHealth Group Incorporated		
		00000	98-1462570			Sociedad Editorial para la Ciencia Limitada.	COL	NIA		Banmédica S.A.	Ownership	76.290	UnitedHealth Group Incorporated		2
		00000	20-8433398			Somerset Outpatient Surgery, L.L.C.	NJ	NIA		SCA-Somerset, LLC	Ownership	59.520	UnitedHealth Group Incorporated		2
		00000	30-0743767			Southern California Medical Practice Concepts, LLC	CA	NIA		Riverside Electronic Healthcare Resources, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	88-0201420			Southwest Medical Associates, Inc.	NV	NIA		Sierra Health Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-2609888			Southwest Michigan Health Network Inc.	MI	NIA		UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	36-4369359			Southwest Surgery Center, LLC	IL	NIA		SCA-Mokena, LLC	Ownership	54.300	UnitedHealth Group Incorporated		2
		00000	75-2516426			Space Coast Surgical Center, Ltd.	FL	NIA		SCA Rockledge JV, LLC	Ownership	52.190	UnitedHealth Group Incorporated		2
		00000	57-0953005			Spartanburg Surgery Center, LLC	SC	NIA		SCA-Spartanburg Holdings, LLC	Ownership	10.700	UnitedHealth Group Incorporated		
		00000	55-0790742			Specialists in Urology Surgery Center, LLC	FL	NIA		SCA Specialists of Florida, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	25-1868213			Specialized Pharmaceuticals, Inc.	PA	NIA		QdL Acquisition Holdings Corp.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1921983			Specialty Benefits, LLC	DE	NIA		United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-3412545			Specialty Surgical Center, LLC	NJ	NIA		SCA-Sparta, LLC	Ownership	51.000	UnitedHealth Group Incorporated		2
		00000	71-0886811			Spectra of New York, IPA, Inc.	NY	NIA		Spectra, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-1260282			Spectra, Inc.	MD	NIA		Spectra, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-1387232			SPINETRACK 20/20, Inc.	CA	NIA		Specialty Benefits, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-4615218			Sports and Spinal Physical Therapy, Inc.	DC	NIA		SCA-ND VBP, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-5587702			Spotlite, Inc.	DE	NIA		Orthology, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1770924			SRPS, LLC	DE	NIA		Rally Health, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2201400			St. Cloud Outpatient Surgery, Ltd., a Minnesota Limited Partnership	MN	NIA		Progressive Enterprises Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		5
		00000	41-1348916			St. Cloud Surgical Center, LLC	DE	NIA		St. Cloud Surgical Center, LLC	Influence	23.947	UnitedHealth Group Incorporated		
		00000	20-1211544			Stonegate Surgery Center, L.P.	TX	NIA		Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	27-2944223			Streamlines Health, LLC	MN	NIA		SCA-Stonegate Holdings, LLC	Ownership	58.670	UnitedHealth Group Incorporated		2
		00000	06-1082848			SunSurgery, LLC	DE	NIA		SavvySherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-5164277			Surgery Center at Cherry Creek, LLC	CO	NIA		Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-5207693			Surgery Center at Kissing Camels, LLC	CO	NIA		SCA-Denver Physicians Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	81-3129674			Surgery Center at St. Vincent, LLC	OR	NIA		SCA-Kissing Camels Holdings, LLC	Ownership	55.000	UnitedHealth Group Incorporated		2
		00000	62-1739361			Surgery Center Holding, LLC	DE	NIA		Providence & SCA On-Campus Holdings, LLC	Ownership	57.700	UnitedHealth Group Incorporated		
		00000	62-1509341			Surgery Center of Boca Raton, Inc.	FL	NIA		Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	62-1506370			Surgery Center of Clarksville, L.P.	TN	NIA		Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1214140			Surgery Center of Colorado Springs, LLC	DE	NIA		SC Affiliates, LLC	Ownership	99.900	UnitedHealth Group Incorporated		2

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SCHEDULE Y
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		00000	42-1166764				Surgery Center of Des Moines, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	72-1349752				Surgery Center of Easton, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1212213				Surgery Center of Ellicott City, Inc.	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	20-1733152				Surgery Center of Fairfield County, LLC	DE	N/A	SunSurgery, LLC	Ownership	47.032	UnitedHealth Group Incorporated		
		00000	62-1179539				Surgery Center of Lexington, LLC	DE	N/A	SC Affiliates, LLC	Influence	49.00	UnitedHealth Group Incorporated		.5
		00000	62-1179537				Surgery Center of Louisville, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1231944				Surgery Center of Maui, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1194204				Surgery Center of Muskogee, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	11-3701564				Surgery Center of Rockville, L.L.C.	MD	N/A	SCA-Rockville, LLC	Ownership	59.00	UnitedHealth Group Incorporated		2
		00000	63-1212214				Surgery Center of Southern Pines, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1178497				Surgery Center of Spokane, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	63-1184216				Surgery Center of Summerlin, LLC	DE	N/A	SC Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-3448050				Surgery Center of The Woodlands, LLC	TX	N/A	SCA-Woodlands Holdings, LLC	Ownership	55.790	UnitedHealth Group Incorporated		.2
		00000	62-1491963				Surgery Center of Vero Beach, Inc.	TN	N/A	Surgical Health, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgery Center of Wilmington Properties, LLC	NC	N/A	Surgery Center of Wilmington, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgery Center of Wilmington, LLC	NC	N/A	SCA-Wilmington, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgery Centers of Des Moines, Ltd., an Iowa Limited Partnership	IA	N/A	Surgery Center Holding, LLC	Ownership	67.950	UnitedHealth Group Incorporated		.2
							Surgery Centers-West Holdings, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Care Affiliates Political Action Committee	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Care Affiliates, LLC	DE	N/A	SCAI Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Care Partners of Melbourne, LLC	DE	N/A	SHC Melbourne, Inc.	Ownership	72.750	UnitedHealth Group Incorporated		.2
							Surgical Caregivers of Fort Worth, LLC	TX	N/A	THR-SCA Holdings, LLC	Influence	0.00	UnitedHealth Group Incorporated		.5
							Surgical Center of Greensboro, LLC	NC	N/A	NSC Greensboro, LLC	Influence	35.716	UnitedHealth Group Incorporated		.5
							Surgical Center of South Jersey, Limited Partnership	NJ	N/A	SCA-South Jersey, LLC	Ownership	61.853	UnitedHealth Group Incorporated		.2
							Surgical Center of Tuscaloosa Holdings, LLC	AL	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Health of Orlando, LLC	FL	N/A	Surgical Health, LLC	Ownership	81.760	UnitedHealth Group Incorporated		.2
							Surgical Health, LLC	DE	N/A	Surgical Care Affiliates, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgical Hospital Holdings of Oklahoma, LLC	DE	N/A	SCA Surgery Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Belleville, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Jackson, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Jackson, Ltd., a Mississippi Limited Partnership	MS	N/A	Surgicare of Jackson, LLC	Influence	40.000	UnitedHealth Group Incorporated		.5
							Surgicare of Joliet, Inc.	IL	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of La Veta, Inc.	CA	N/A	Surgery Centers-West Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of La Veta, Ltd., a California Limited Partnership	CA	N/A	Beach Surgical Holdings III, LLC	Ownership	28.333	UnitedHealth Group Incorporated		
							Surgicare of Minneapolis, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Minneapolis, Ltd., a Minnesota Limited Partnership	MN	N/A	Surgicare of Minneapolis, LLC	Influence	20.305	UnitedHealth Group Incorporated		.5
							Surgicare of Mobile, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Mobile, Ltd.	AL	N/A	Surgicare of Mobile, LLC	Influence	20.000	UnitedHealth Group Incorporated		.5
							Surgicare of Oceanside, Inc.	CA	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Owensboro, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare of Salem, LLC	DE	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Surgicare, LLC	IN	N/A	SCA-SurgiCare, LLC	Ownership	53.680	UnitedHealth Group Incorporated		.2
							SurgiCenter of San Antonio at Westover Hills, LLC	TX	N/A	SCA-Westover Hills, LLC	Ownership	48.105	UnitedHealth Group Incorporated		
							Surgicenters of Southern California, Inc.	CA	N/A	Surgery Center Holding, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
							Symphonix Health Holdings, LLC	DE	N/A	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	84549	38-2044243				Symphonix Health Insurance, Inc.	IL	IA	Symphonix Health Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		

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		00000	98-1260384				Taidene Medical Ltd.	CAN	N/A	UnitedHealthcare Global Canada Limited	Influence	49.00	UnitedHealth Group Incorporated		.5
		00000	93-1172065				Talbert Medical Group, P.C.	CA	N/A	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	47-4751035				TeamMD Holdings, Inc.	DE	N/A	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-4850893				TeamMD Iowa, Inc.	DE	N/A	TeamMD Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	35-2584893				TeamMD Physicians of Texas, Inc.	TX	N/A	TeamMD Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0445773				TeamMD Physicians, P.C.	IA	N/A	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	82-1019055				TeamUP Insurance Services, Inc.	CA	N/A	HealthMarkets Insurance Agency, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					Tecnologías de Información en Salud S.A.	CHL	N/A	Clinica Santa María S.A.	Ownership	50.00	UnitedHealth Group Incorporated		
		00000					Tecnologías de Información en Salud S.A.	CHL	N/A	Clinica Dávila y Servicios Médicos S.A.	Ownership	50.00	UnitedHealth Group Incorporated		
		00000	38-3897811				Texas Health Craig Ranch Surgery Center, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	80-0866449				Texas Health Flower Mound Orthopedic Surgery Center, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	81-4977249				Texas Health Orthopedic Surgery Center Alliance, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	82-2296081				Texas Health Surgery Center Alliance, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	82-1307876				Texas Health Surgery Center Bedford, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	83-0781259				Texas Health Surgery Center Las Colinas, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	20-3991622				Texas Health Surgery Center Preston Plaza, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	47-4425996				Texas Health Surgery Center Rockwall, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	83-1464243				Texas Health Surgery Center Waxahachie, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	84-1953918				Texas Health Surgery Center Willow Park, LLC	TX	N/A	THR-SCA Holdings, LLC	Ownership	0.00	UnitedHealth Group Incorporated		
		00000					The Advisory Board (Chile) SpA	CHL	N/A	The Advisory Board Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	52-1468699				The Advisory Board Company	DE	N/A	OptumInsight, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	61832	52-0676509				The Chesapeake Life Insurance Company	OK	IA	HealthMarkets Group, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	91-0214500				The Everett Clinic, PLLC	WA	N/A	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	20-5562797				The Eye Surgery Center of the Carolinas, L.P.	NC	N/A	Surgery Center of Southern Pines, LLC	Influence	46.00	UnitedHealth Group Incorporated		
		00000	56-1970224				The Lewin Group, Inc.	NC	N/A	Optum Public Sector Solutions, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000					The Magan Medical Group	CA	N/A	DaVita Magan Management, Inc.	Ownership	50.00	UnitedHealth Group Incorporated		.2
		00000	61-1409045				The Outpatient Surgery Center of Hilton Head, LLC	SC	N/A	SCA-Hilton Head, LLC	Ownership	50.00	UnitedHealth Group Incorporated		.2
		00000	91-0369070				The Polyclinic MSO, LLC	DE	N/A	Collaborative Care Holdings, LLC	Ownership	80.100	UnitedHealth Group Incorporated		.2
		00000	72-1349755				The Polyclinic, PLLC	WA	N/A	Physician(s) owned	Influence	0.00	UnitedHealth Group Incorporated		.4
		00000	63-1184215				The Surgery Center of Easton, L.P.	TN	N/A	Surgery Center of Easton, LLC	Ownership	42.00	UnitedHealth Group Incorporated		
		00000	06-1552689				The Surgical Center at Tenaya, L.P.	TN	N/A	Surgery Center of Summerlin, LLC	Influence	20.00	UnitedHealth Group Incorporated		.5
		00000	37-1446353				The Surgical Center of Connecticut, LLC	CT	N/A	SCA-Main Street, LLC	Influence	20.00	UnitedHealth Group Incorporated		.5
		00000	26-1479919				THE SURGICAL CENTER OF THE TREASURE COAST, L.L.C.	FL	N/A	SCA-St. Lucie, LLC	Ownership	51.00	UnitedHealth Group Incorporated		.2
		00000	77-0367271				Thomas Johnson Surgery Center, LLC	MD	N/A	SCA-Frederick, LLC	Ownership	65.00	UnitedHealth Group Incorporated		.2
		00000	25-1825549				Thousand Oaks Endoscopy Center, LLC	CA	N/A	Endoscopy Center Affiliates, Inc.	Ownership	99.00	UnitedHealth Group Incorporated		.2
		00000	63-1194203				Three Rivers Holdings, Inc.	DE	N/A	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-1096461				Three Rivers Surgical Care, L.P.	TN	N/A	Muskogee Surgical Investors, LLC	Ownership	72.530	UnitedHealth Group Incorporated		.2
		00000	59-3143128				THR-SCA Holdings, LLC	TX	N/A	Texas Health Resources	Ownership	0.00	UnitedHealth Group Incorporated		
		00000	98-1287904				Timesys, LLC	FL	N/A	PMI Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	83-1528858				Topimagem Diagnóstico por Imagem Ltda.	BRA	N/A	Esho – Empresa de Serviços Hospitalares S.A.	Ownership	89.00	UnitedHealth Group Incorporated		.2
		00000	46-5482620				Trails Edge Surgery Center, LLC	FL	N/A	SCA-Bonita Springs, LLC	Ownership	59.00	UnitedHealth Group Incorporated		.2
		00000	52-1431155				Trauma Surgery Affiliates, LLC	TX	N/A	National Surgery Centers, LLC	Influence	49.00	UnitedHealth Group Incorporated		.5
							Travel Express Incorporated	MD	N/A	FrontierMEDEX, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
		00000	46-2613170			Treasure Valley Emerald Properties, LLC Treasure Valley Hospital Limited Partnership		DE	NIA	Treasure Valley Hospital Limited Partnership	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	33-0592165					ID	NIA	Surgical Health, LLC	Ownership	40.375	UnitedHealth Group Incorporated		
		00000	47-5088596					UT	NIA	National MedTrans, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-5530255					DE	NIA	Savvysherpa, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	82-4692800					AZ	NIA	Formation Documents Pending	Ownership	0.000	UnitedHealth Group Incorporated		
		00000	63-0974161			Tuscaloosa Surgical Center, L.P.		AL	NIA	Surgical Center of Tuscaloosa Holdings, LLC	Ownership	30.00	UnitedHealth Group Incorporated		
		00000	94-3077084			U.S. Behavioral Health Plan, California		CA	IA	United Behavioral Health	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1388279			UHC Finance (Ireland) Unlimited Company		IRL	NIA	UnitedHealth Group International Finance (Ireland) Unlimited Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1913059			UHC International Services, Inc.		DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	95-2931460			UHC of California		CA	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1103713			UHCG - FZE		ARE	NIA	UnitedHealthcare Global Medical (UK) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372063			UHCG Holdings (Ireland) Limited		IRL	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372064			UHCG Services (Ireland) Limited		IRL	NIA	UHC Holdings (Ireland) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1122490			UHG Brasil Participações S.A.		BRA	NIA	Polar II Fundo de Investimento em Participações Multiestratégia	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1921008			UHIC Holdings, Inc.		DE	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2922396			UICI Funding Corp. 2		DE	NIA	HealthMarkets, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	39-1995276			UIM, Inc.		DE	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1444648			Unidad Médica Diagnóstico S.A.		COL	NIA	Colmedica Medicina Prepagada	Ownership	92.380	UnitedHealth Group Incorporated		2
		00000	98-1444648			Unidad Médica Diagnóstico S.A.		COL	NIA	Banmédica Colombia SpA	Ownership	7.619	UnitedHealth Group Incorporated		2
0707	UnitedHealth Group Incorporated	91529	52-1996029			Unimérica Insurance Company		WI	IA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	11596	01-0637149			Unimérica Life Insurance Company of New York		NY	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	00000	20-5917714			Unison Health Plan of Delaware, Inc.		DE	IA	Three Rivers Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	00000	94-2649097			United Behavioral Health		CA	NIA	OptumHealth Holdings, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1868911			United Behavioral Health of New York, I.P.A., Inc.		NY	NIA	United Behavioral Health	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2583080			United Group Reinsurance, Inc.		TCA	NIA	HealthMarkets, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1941615			United Health Foundation		MN	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1289245	3410132		UnitedHealthCare Services, Inc.		MN	UIP	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	75-2601147			United Management Services, Inc.		NY	NIA	HealthMarkets, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	30-0318238			United Resource Networks IPA of New York, Inc.		NY	NIA	OptumHealth Care Solutions, LLC	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	01-0538317			UnitedHealth Advisors, LLC		ME	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	84-3188598			UnitedHealth Group Finance Inc.		DE	NIA	Bordeaux (Barbados) Holdings III, SRL	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1321939	4665014	0000731766	UnitedHealth Group Incorporated		DE	UIP	Self	Ownership	0.000	UnitedHealth Group Incorporated		2
		00000	98-1422474			UnitedHealth Group International Finance (Ireland) Unlimited Company		IRL	NIA	UnitedHealthcare Europe S.á r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1079826			UnitedHealth Group International GP		CYM	NIA	FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-3311984			UnitedHealth Group Ventures, LLC		DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1917398			UnitedHealth International, Inc.		DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	26-2574977			UnitedHealth Military & Veterans Services, LLC		DE	NIA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-055902			UnitedHealth UK Limited		GBR	NIA	Optum Solutions UK Holdings Limited	Ownership	100.00	UnitedHealth Group Incorporated		
0707	UnitedHealth Group Incorporated	95174	33-0115163			UnitedHealthcare Benefits of Texas, Inc.		TX	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	47-3221444			UnitedHealthcare Benefits Plan of California		CA	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	46-4348775			UnitedHealthcare Community Plan of California, Inc.		CA	IA	United HealthCare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		

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

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
..0707	UnitedHealth Group Incorporated	13168	26-2688274			UnitedHealthcare Community Plan of Georgia, Inc.		GA	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	12323	56-2451429			UnitedHealthcare Community Plan of Ohio, Inc.		OH	IA	Three Rivers Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	11141	91-2008361			UnitedHealthcare Community Plan of Texas, L.L.C.		TX	IA	Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95467	38-3204052			UnitedHealthcare Community Plan, Inc.		MI	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1200034			UnitedHealthcare Consulting & Assistance Service (Beijing) Co., Ltd.		CHN	NIA	UnitedHealthcare International I B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1199879			UnitedHealthcare Europe S.à r.l.		LUX	NIA	FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1104429			UnitedHealthcare Global Canada Limited		CAN	NIA	UnitedHealthcare International I B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1029201			UnitedHealthcare Global Medical (UK) Limited		GBR	NIA	UnitedHealthcare International I B.V.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1099116			UnitedHealthcare India Private Limited		IND	NIA	OptumHealth International B.V.	Ownership	99.99	UnitedHealth Group Incorporated		
		00000	98-1099116			UnitedHealthcare India Private Limited		IND	NIA	UnitedHealth International, Inc.	Ownership	0.001	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	79413	36-2739571			UnitedHealthcare Insurance Company		CT	IA	UHC Holdings, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	60318	36-3800349			UnitedHealthcare Insurance Company of Illinois		IL	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	60093	11-3283886			UnitedHealthcare Insurance Company of New York		NY	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	12231	20-1902768			UnitedHealthcare Insurance Company of the River Valley		IL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372065			UnitedHealthcare Insurance Designated Activity Company		IRL	IA	UHC Holdings (Ireland) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated		86-0618309			UnitedHealthcare Integrated Services, Inc.		AZ	IA	Ovations, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	41-1988797			UnitedHealthcare International Asia, LLC		DE	NIA	UnitedHealth Group Incorporated	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1100512			UnitedHealthcare International I B.V.		NLD	NIA	FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1079459			UnitedHealthcare International I S.à r.l.		LUX	NIA	UnitedHealthcare Europe S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1340853			UnitedHealthcare International III B.V.		NLD	NIA	UnitedHealthcare Europe S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1077436			UnitedHealthcare International III S.à r.l.		LUX	NIA	Optum Services (Ireland) Limited	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1080926			UnitedHealthcare International IV S.à r.l.		LUX	NIA	UnitedHealthcare International VIII S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372058			UnitedHealthcare International VI S.à r.l.		LUX	NIA	FrontierMEDEX US, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372060			UnitedHealthcare International VII S.à r.l.		LUX	NIA	UHC Finance (Ireland) Unlimited Company	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1372062			UnitedHealthcare International VIII S.à r.l.		LUX	NIA	UnitedHealthcare International X S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
		00000	98-1443728			UnitedHealthcare International X S.à r.l.		LUX	NIA	UnitedHealthcare International III S.à r.l.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	97179	86-0207231			UnitedHealthcare Life Insurance Company		WI	IA	Golden Rule Financial Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95784	63-0899562			UnitedHealthcare of Alabama, Inc.		AL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	96016	86-0507074			UnitedHealthcare of Arizona, Inc.		AZ	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95446	63-1036819			UnitedHealthcare of Arkansas, Inc.		AR	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95090	84-1004639			UnitedHealthcare of Colorado, Inc.		CO	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95264	59-1293865			UnitedHealthcare of Florida, Inc.		FL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95850	58-1653544			UnitedHealthcare of Georgia, Inc.		GA	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95776	36-3280214			UnitedHealthcare of Illinois, Inc.		IL	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	96644	62-1240316			UnitedHealthcare of Kentucky, Ltd.		KY	IA	United HealthCare Services, Inc.	Ownership	94.170	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	96644	62-1240316			UnitedHealthcare of Kentucky, Ltd.		KY	IA	United HealthCare Services, Inc.	Ownership	5.830	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95833	72-1074008			UnitedHealthcare of Louisiana, Inc.		LA	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95716	63-1036817			UnitedHealthcare of Mississippi, Inc.		MS	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95149	05-0413469			UnitedHealthcare of New England, Inc.		RI	IA	UnitedHealthcare Services, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	13214	26-2697886			UnitedHealthcare of New Mexico, Inc.		NM	IA	UnitedHealthcare Insurance Company	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95085	06-1172891			UnitedHealthcare of New York, Inc.		NY	IA	AmeriChoice Corporation	Ownership	100.00	UnitedHealth Group Incorporated		
..0707	UnitedHealth Group Incorporated	95103	56-1461010			UnitedHealthcare of North Carolina, Inc.		NC	IA	UnitedHealthcare, Inc.	Ownership	100.00	UnitedHealth Group Incorporated		

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

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.0707	UnitedHealth Group Incorporated	95186	31-1142815			UnitedHealthcare of Ohio, Inc.		.OH.	.IA.	UnitedHealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	96903	33-0115166			UnitedHealthcare of Oklahoma, Inc.		.OK.	.IA.	UnitedHealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95893	93-0938819			UnitedHealthcare of Oregon, Inc.		.OR.	.IA.	UnitedHealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95220	25-1756858			UnitedHealthcare of Pennsylvania, Inc.		.PA.	.IA.	Three Rivers Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	00000	35-2674992			UnitedHealthcare of South Carolina, Inc.		.SC.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95765	95-3939697			UnitedHealthcare of Texas, Inc.		.TX.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95025	52-1130183			UnitedHealthcare of the Mid-Atlantic, Inc.		.MD.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95591	47-0676824			UnitedHealthcare of the Midlands, Inc.		.NE.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	96385	43-1361841			UnitedHealthcare of the Midwest, Inc.		.MO.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95501	41-1488563			UnitedHealthcare of Utah, Inc.		.UT.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	48038	91-1312551			UnitedHealthcare of Washington, Inc.		.WA.	.IA.	UnitedHealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
.0707	UnitedHealth Group Incorporated	95710	39-1555888			UnitedHealthcare of Wisconsin, Inc.		.WI.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	98-1099116			UnitedHealthcare Parekh Insurance TPA Private Limited		.IND.	.NIA.	UnitedHealth International, Inc.	Influence.	25.926	UnitedHealth Group Incorporated		.5
.0707	UnitedHealth Group Incorporated	95378	36-3379945			UnitedHealthcare Plan of the River Valley, Inc.		.IL.	.IA.	UnitedHealthcare, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	47-0854646			UnitedHealthcare Service LLC		.DE.	.NIA.	UnitedHealthcare Insurance Company	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	01-0518346			UnitedHealthcare Specialty Benefits, LLC		.ME.	.NIA.	Specialty Benefits, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	41-1922511			UnitedHealthcare, Inc.		.DE.	.NIA.	United HealthCare Services, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	26-4219191			UpFront Insurance Agency, LLC		.MN.	.NIA.	SavvySherpa, LLC	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	83-4657754			Upland Holdings, LLC		.CA.	.NIA.	NSC Upland, LLC	Ownership.	58.990	UnitedHealth Group Incorporated		.2
		00000	33-0812827			Upland Outpatient Surgical Center, L.P.		.CA.	.NIA.	NSC Upland, LLC	Ownership.	51.000	UnitedHealth Group Incorporated		.2
		00000	26-0382877			Urgent Care Holdings, Inc.		.DE.	.NIA.	Optum Clinics Intermediate Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	26-3667220			Urgent Care MSO, LLC		.DE.	.NIA.	Urgent Care Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	82-2400620			Urgent Care New York, P.C.		.NY.	.NIA.	Physician(s) owned	Influence.	0.000	UnitedHealth Group Incorporated		.4
		00000	75-2613230			Urology Associates of North Texas, P.L.L.C.		.TX.	.NIA.	USMD Affiliated Services	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	75-2613230			Urology Associates of North Texas, P.L.L.C.		.TX.	.NIA.	USMD Affiliated Services	Influence.	100.00	UnitedHealth Group Incorporated		.5
		00000	20-3887008			USHEALTH Academy, Inc.		.TX.	.NIA.	USHEALTH Group, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	26-4163593			USHEALTH Administrators, LLC		.DE.	.NIA.	USHEALTH Group, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	26-3887598			USHEALTH Advisors, L.L.C.		.TX.	.NIA.	USHEALTH Group, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	75-2192748			USHEALTH Career Agency, Inc.		.DE.	.NIA.	USHEALTH Group, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	75-2225185			USHEALTH Funding, Inc.		.DE.	.NIA.	USHEALTH Group, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	73-1165000			USHEALTH Group, Inc.		.DE.	.NIA.	Golden Rule Financial Corporation	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	20-8048861			USMD Administrative Services, L.L.C.		.TX.	.NIA.	USMD Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	27-2956222			USMD Affiliated Services		.TX.	.NIA.	USMD Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	84-2381722			USMD ASC IV1, LLC		.TX.	.NIA.	USMD PPM, LLC	Influence.	20.000	UnitedHealth Group Incorporated		.5
		00000	27-2866866			USMD Holdings, Inc.		.DE.	.NIA.	WellMed Medical Management, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	20-8050318			USMD Inc.		.TX.	.NIA.	USMD Holdings, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	73-1662757			USMD of Arlington GP, L.L.C.		.TX.	.NIA.	Physician(s) owned	Influence.	0.000	UnitedHealth Group Incorporated		.4
		00000	35-2446102			USMD PPM, LLC		.TX.	.NIA.	USMD Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	98-1259657			V & L Medical Ltd		.CAN.	.NIA.	UnitedHealthcare Global Canada Limited	Influence.	100.00	UnitedHealth Group Incorporated		.5
		00000	63-1182191			Valley Hospital, L.L.C.		.WA.	.NIA.	Surgery Center of Spokane, LLC	Ownership.	50.000	UnitedHealth Group Incorporated		.2
		00000	87-0757396			Valley Physicians Network, Inc.		.CA.	.NIA.	PrimeCare Medical Network, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	81-4629242			VERTA MANAGEMENT SERVICES, LLC		.DE.	.NIA.	SCA-VERTA, LLC	Ownership.	50.000	UnitedHealth Group Incorporated		.2
		00000	98-1444067			Vida Tres Internacional S.A.		.CHL.	.NIA.	Banmédica S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	98-1443076			Vidaintegra S.A.		.CHL.	.NIA.	Banmédica S.A.	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	Virtual Therapeutics Corporation			Virtual Therapeutics Corporation		.DE.	.NIA.	United HealthCare Services, Inc.	Influence.	33.000	UnitedHealth Group Incorporated		.5
		00000	Vivify Health Canada, Inc.			Vivify Health Canada, Inc.		.CAN.	.NIA.	Vivify Health, Inc.	Ownership.	100.00	UnitedHealth Group Incorporated		
		00000	27-1348358			Vivify Health, Inc.		.DE.	.NIA.	OptumHealth Care Solutions, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	36-3469841			Wauwatosa Outpatient Surgery Center, LLC		.DE.	.NIA.	Surgery Centers-West Holdings, LLC	Ownership.	100.000	UnitedHealth Group Incorporated		
		00000	Wauwatosa Surgery Center, Limited Partnership					.WI.	.NIA.	Wauwatosa Outpatient Surgery Center, LLC	Ownership.	51.000	UnitedHealth Group Incorporated		
		00000	36-3469839					.RI.	.NIA.	Wayland Square Surgicare Acquisition, L.P.	Ownership.	99.000	UnitedHealth Group Incorporated		.2
		00000	20-5429310					.RI.	.NIA.	Wayland Square Surgicare GP, Inc.	Ownership.	100.000	UnitedHealth Group Incorporated		.2
		00000	75-2500274					.RI.	.NIA.	Surgery Center Holding, LLC	Ownership.				

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

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domestic- iliary Loca- tion	10 Relation- ship to Reportin g Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percent- age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
		.00000	46-2854394				Waypoint Minnesota PC	.MN	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000					WebInsure Benefits, LLC	.DE	.N/A	hCative, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	74-2574229				WelIMed Medical Group, P.A.	.TX	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	74-2797745				WelIMed Medical Management of Florida, Inc.	.FL	.N/A	WellIMed Medical Management, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
		.00000	74-2786364				WelIMed Medical Management, Inc.	.TX	.N/A	Collaborative Care Holdings, LLC	Ownership	85.000	UnitedHealth Group Incorporated		.2
		.00000	35-2314192				WelIMed Network of Florida, Inc.	.TX	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	74-2889447				WelIMed Networks, Inc.	.TX	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	92-0183013				WelIMed of Las Cruces, Inc.	.TX	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
		.00000	27-2809113				West Coast Endoscopy Holdings, LLC	.DE	.N/A	SCA Surgery Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Western Connecticut Orthopedic Surgical Center, LLC	.CT	.N/A	SCA-Western Connecticut, LLC	Ownership	61.380	UnitedHealth Group Incorporated		.2
							WESTMED Practice Partners LLC	.DE	.N/A	Collaborative Care Holdings, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							WillowB Labs LLC	.DE	.N/A	OptumRx, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							Wilmington ASC, LLC	.NC	.N/A	SCA-Wilmington, LLC	Ownership	100.000	UnitedHealth Group Incorporated		
							Wilson Creek Surgical Center, LLC	.TX	.N/A	THR-SCA Holdings, LLC	Ownership	0.000	UnitedHealth Group Incorporated		
							Winchester Endoscopy, LLC	.IL	.N/A	SCA-Winchester, LLC	Ownership	51.000	UnitedHealth Group Incorporated		.2
							Winter Park Surgery Center, L.P.	.TN	.N/A	SCA-Winter Park, Inc.	Influence	1.000	UnitedHealth Group Incorporated		.5
							Winter Park, LLC	.TN	.N/A	SCA-Winter Park, Inc.	Ownership	51.000	UnitedHealth Group Incorporated		.2
							WND Medical, PLLC	.TX	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
							XLHealth Corporation	.MD	.N/A	United HealthCare Services, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		
							XLHealth Corporation India Private Limited	.IND	.N/A	XLHealth Corporation	Ownership	99.998	UnitedHealth Group Incorporated		
							XLHealth Corporation India Private Limited	.IND	.N/A	UnitedHealth International, Inc.	Ownership	0.002	UnitedHealth Group Incorporated		
							XLHome Michigan, P.C.	.MI	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
							XLHome Northeast, P.C.	.NJ	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
							XLHome Oklahoma, Inc.	.OK	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
							XLHome, P.C.	.MD	.N/A	Physician(s) owned	Influence	0.000	UnitedHealth Group Incorporated		.4
							Your Health Options Insurance Services, Inc.	.CA	.N/A	PrimeCare Medical Network, Inc.	Ownership	100.000	UnitedHealth Group Incorporated		

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

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

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
41-1913523	ACN Group IPA of New York, Inc.		0	0	.0	0	831,902	0		.0	831,902	0
27-0015861	ACN Group of California, Inc.		(5,000,000)	0	0	0	10,765,570	0		0	5,765,570	0
82406	35-1665915	All Savers Insurance Company	(250,000,000)	0	0	0	(80,823,813)	(4,097)		0	(330,827,910)	(1,075)
73130	35-1744596	All Savers Life Insurance Company of California	0	0	.0	0	(3,505)	0		0	(3,505)	0
52623	35-2108729	American Health Network of Indiana, LLC	0	0	.0	0	0	0		0	0	0
54-1743136	AmeriChoice Corporation		0	(150,000,000)	0	0	0	0		0	(150,000,000)	0
95497	22-3368602	AmeriChoice of New Jersey, Inc.	0	150,000,000	0	0	(323,024,551)	0		0	(173,024,551)	0
86-0813232	Arizona Physicians IPA, Inc.		(60,000,000)	0	0	0	(792,818,137)	0		0	(852,818,137)	0
30-0842394	AxelaCare Intermediate Holdings, LLC		0	0	0	0	239,137,554	0		0	239,137,554	0
88-0267857	Behavioral Healthcare Options, Inc.		0	0	0	0	7,505,811	0		0	7,505,811	0
12558	45-4976934	Care Improvement Plus of Texas Insurance Company	(15,000,000)	0	0	0	(287,774,842)	0		0	(302,774,842)	0
12567	20-3888112	Care Improvement Plus South Central Insurance Company	(125,000,000)	0	0	0	(459,282,855)	(35)		0	(584,282,890)	0
14041	27-5038136	Care Improvement Plus Wisconsin Insurance Company	0	0	0	0	(66,336,006)	0		0	(66,336,006)	0
52-1811176	DBP Services of New York IPA, Inc.		0	0	0	0	1,896,823	0		0	1,896,823	0
52-1452809	Dental Benefit Providers of California, Inc.		(5,000,000)	0	0	0	(11,833,285)	0		0	(16,833,285)	0
52053	36-4008355	Dental Benefit Providers of Illinois, Inc.	0	0	0	0	2,387	0		0	2,387	0
41-2014834	Dental Benefit Providers, Inc.		0	0	0	0	173,401,855	0		0	173,401,855	0
75-1617708	Enterprise Life Insurance Company		0	0	0	0	(5,674,957)	27,517,754		0	21,842,797	(25,895,257)
20-0087132	Excelsior Insurance Brokerage, Inc.		0	0	0	0	26,296	0		0	26,296	0
61-1096685	Freedom Life Insurance Company of America		0	0	0	0	(91,049,301)	(26,402,999)		0	(117,452,300)	26,655,307
20-3420886	Golden Outlook, Inc.		0	0	0	0	3,643,159	0		0	3,643,159	0
37-0855360	Golden Rule Financial Corporation		0	0	0	0	0	0		0	0	0
62286	37-6028756	Golden Rule Insurance Company	(130,000,000)	0	0	0	(270,998,156)	0		0	(400,998,156)	0
98-0213198	H&W Indemnity (SPC), Ltd.		0	0	0	0	0	1,015,101		0	1,015,101	37,639,788
79480	35-1279304	Harken Health Insurance Company	(10,000,000)	7,000,000	0	0	(9,005,632)	0		0	(12,005,632)	0
96342	88-0201035	Health Plan of Nevada, Inc.	(125,000,000)	0	0	0	(312,650,058)	(1,057,318)		0	(438,707,376)	(16,902)
27-0277771	HealthMarkets Insurance Agency, Inc.		0	0	0	0	67,856,560	0		0	67,856,560	0
46-1131431	HealthMarkets Services, Inc.		0	0	0	0	(24,058)	0		0	(24,058)	0
75-2044750	HealthMarkets, Inc.		0	0	0	0	2,292,661	0		0	2,292,661	0
45-3143218	Lifeprint East, Inc.		0	0	0	0	204,316,053	0		0	204,316,053	0
27-2309024	LifePrint Health, Inc.		0	0	0	0	3,936,178,227	0		0	3,936,178,227	0
60321	52-1803283	MAMSI Life and Health Insurance Company	0	0	0	0	(18,943,523)	(3,270)		0	(18,946,793)	150
95-4874334	March Vision Care Group, Incorporated		0	0	0	0	16,916,416	0		0	16,916,416	0
96310	52-1169135	MD-Individual Practice Association, Inc.	(25,000,000)	0	0	0	(18,767,069)	(252,665)		0	(44,019,734)	689
12756	20-3391186	Medica Health Plans of Florida, Inc.	0	0	0	0	12,339	0		0	12,339	0
12155	01-0788576	Medica HealthCare Plans, Inc.	(10,000,000)	0	0	0	(78,103,876)	0		0	(88,103,876)	0
32-0037402	Medical Transportation Services, LLC		0	0	0	0	3,297,749	0		0	3,297,749	0

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.66087	62-0724538	Mid-West National Life Insurance Company of Tennessee	0	0	0	0	(2,013,705)	187,607		0	(1,826,098)	2,181,537
22-3935634		Monarch Health Plan, Inc.	0	0	0	0	0	2,322,695		0	2,322,695	(16,850)
73-1187572		National Foundation Life Insurance Company	0	0	0	0	(13,280,773)	(1,114,755)		0	(14,395,528)	(760,050)
47-2336925		National MedTrans, LLC	0	0	0	0	16,941,632	0		0	16,941,632	0
.95251	76-0196559	National Pacific Dental, Inc.	(1,500,000)	0	0	0	(1,023,753)	0		0	(2,523,753)	0
.95123	65-0996107	Neighborhood Health Partnership, Inc.	(17,500,000)	0	0	0	(99,148,788)	0		0	(116,648,788)	0
.95758	88-0228572	Nevada Pacific Dental	0	0	0	0	(407,373)	0		0	(407,373)	0
72-1267232		New Orleans Regional Physician Hospital Organization, L.L.C.	0	0	0	0	1,032,941,002	0		0	1,032,941,002	0
84-1250135		New West Physicians, Inc.	0	0	0	0	35,237	0		0	35,237	0
.96940	52-1518174	Optimum Choice, Inc.	0	0	0	0	(33,048,135)	(301,618)		0	(33,349,753)	.66
.69647	31-0628424	Optum Insurance of Ohio, Inc.	(35,000,000)	0	0	0	(10,403,347)	0		0	(45,403,347)	0
.11068	30-0029448	Optum Networks of New Jersey, Inc.	0	15,000,000	0	0	(1,474,935)	0		0	13,525,065	0
46-2385459		OptumCare Health Plan of California, Inc.	0	0	0	0	384,860,805	0		0	384,860,805	0
95-4509662		OptumCare Management, LLC	0	0	0	0	0	0		0	0	0
13-4138668		OptumCare New York IPA, Inc.	0	0	0	0	120,120,784	0		0	120,120,784	0
41-1591944		OptumHealth Care Solutions, LLC	0	0	0	0	198,320,603	0		0	198,320,603	0
41-1858498		OptumInsight, Inc.	0	0	0	0	334,759,444	0		0	334,759,444	0
33-0441200		OptumRx, Inc.	0	0	0	0	8,200,488,453	0		0	8,200,488,453	0
13-3818652		OrthoNet LLC	0	0	0	0	7,141,187	0		0	7,141,187	0
.78026	22-2797560	Oxford Health Insurance, Inc.	(270,000,000)	0	0	0	(1,106,633,634)	(885,931)		0	(1,377,519,565)	181,534
.96798	06-1181201	Oxford Health Plans (CT), Inc.	(80,000,000)	0	0	0	(402,673,737)	(1,750,301)		0	(484,424,038)	.893
.95506	22-2745725	Oxford Health Plans (NJ), Inc.	(40,000,000)	0	0	0	(341,358,500)	535,333		0	(380,823,167)	6,110
.95479	06-1181200	Oxford Health Plans (NY), Inc.	0	0	0	0	(133,288,950)	0		0	(133,288,950)	0
52-2443751		Oxford Health Plans LLC	0	0	0	0	0	0		0	0	0
.70785	35-1137395	PaciFiCare Life and Health Insurance Company	0	0	0	0	(1,215,200)	136		0	(1,215,064)	12,426
.84506	95-2829463	PaciFiCare Life Assurance Company	0	5,000,000	0	0	(5,378,343)	0		0	(378,343)	0
.95617	94-3267522	PaciFiCare of Arizona, Inc.	(6,000,000)	0	0	0	(10,110,394)	(511)		0	(16,110,905)	0
.95434	84-1011378	PaciFiCare of Colorado, Inc.	(138,000,000)	0	0	0	(1,940,818,440)	(5,378,144)		0	(2,084,196,584)	0
.95685	86-0875231	PaciFiCare of Nevada, Inc.	0	0	0	0	(83,052)	(36)		0	(83,088)	0
20-5662149		Peoples Health, Inc.	0	0	0	0	(1,034,344,032)	0		0	(1,034,344,032)	0
.11494	04-3677255	Physicians Health Choice of Texas, LLC	0	20,000,000	0	0	(730,642,989)	12,049		0	(710,630,940)	2,287
.11176	65-0885893	Preferred Care Partners, Inc.	(66,000,000)	0	0	0	(811,175,451)	0		0	(877,175,451)	0
33-0607478		PrimeCare Medical Network, Inc.	(60,000,000)	0	0	0	288,337,094	0		0	228,337,094	0
87-0757397		PrimeCare of Citrus Valley, Inc.	0	0	0	0	(650)	0		0	(650)	0
33-0674407		PrimeCare of Corona, Inc.	0	0	0	0	(300)	0		0	(300)	0
33-0674401		PrimeCare of Hemet Valley, Inc.	0	0	0	0	(100)	0		0	(100)	0
33-0674408		PrimeCare of Inland Valley, Inc.	0	0	0	0	(8,517)	0		0	(8,517)	0
33-0674400		PrimeCare of Redlands, Inc.	0	0	0	0	(200)	0		0	(200)	0
33-0674404		PrimeCare of Riverside, Inc.	0	0	0	0	(1,630)	0		0	(1,630)	0

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

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	14-1915328	PrimeCare of San Bernardino, Inc.	0	0	0	0	(39)	0	0	0	(39)	0
	33-0674409	PrimeCare of Temecula, Inc.	0	0	0	0	(360)	0	0	0	(360)	0
95482	84-0614905	Rocky Mountain Health Maintenance Organization, Incorporated	(7,400,000)	0	0	0	(86,249,895)	(215,156)	0	0	(93,865,051)	0
71420	94-0734860	Sierra Health and Life Insurance Company, Inc.	(300,000,000)	0	0	0	(3,195,084,717)	(95,670)	0	0	(3,495,180,387)	(95,098)
	88-0201420	Southwest Medical Associates, Inc.	0	0	0	0	193,559,151	0	0	0	193,559,151	0
	71-0886811	Spectra of New York, IPA, Inc.	0	0	0	0	28,280	0	0	0	28,280	0
	52-1260282	Spectra, Inc.	0	0	0	0	54,868,866	0	0	0	54,868,866	0
84549	38-2044243	Syphonix Health Insurance, Inc.	(25,000,000)	0	0	0	(116,224,037)	0	0	0	(141,224,037)	0
	30-0445773	TeamMD Physicians, P.C.	0	0	0	0	2,986,206	0	0	0	2,986,206	0
61832	52-0676509	The Chesapeake Life Insurance Company	0	0	0	0	(92,359,399)	0	0	0	(92,359,399)	0
	94-3077084	U.S. Behavioral Health Plan, California	0	20,000,000	0	0	106,433,157	0	0	0	126,433,157	0
	95-2931460	UHC of California	(200,000,000)	0	0	0	(1,514,633,162)	0	0	0	(1,714,633,162)	0
91529	52-1996029	Unamerica Insurance Company	(73,000,000)	0	0	0	(29,740,956)	(1,351,023)	0	0	(104,091,979)	(415,920)
11596	01-0637149	Unamerica Life Insurance Company of New York	0	0	0	0	(1,724,019)	0	0	0	(1,724,019)	0
	20-5917714	Unison Health Plan of Delaware, Inc.	(10,000,000)	0	0	0	90,804	0	0	0	(9,909,196)	0
	94-2649097	United Behavioral Health	0	0	0	0	1,955,369,584	0	0	0	1,955,369,584	0
	41-1868911	United Behavioral Health of New York, I.P.A., Inc.	0	0	0	0	2,003,273	0	0	0	2,003,273	0
	75-2583080	United Group Reinsurance, Inc.	0	0	0	0	0	(187,607)	0	0	(187,607)	(2,181,537)
	41-1289245	United HealthCare Services, Inc.	5,016,754,273	(163,000,000)	0	0	13,054,548,663	0	0	0	17,908,302,936	0
	41-1321939	UnitedHealth Group Incorporated	620,500,000	0	0	0	2,160,887,138	0	0	0	2,781,387,138	0
95174	33-0115163	UnitedHealthcare Benefits of Texas, Inc.	(74,000,000)	0	0	0	(2,795,305,174)	(4,059,682)	0	0	(2,873,364,856)	15,891
	47-3221444	UnitedHealthcare Benefits Plan of California	0	0	0	0	(83,009)	0	0	0	(83,009)	0
	46-4348775	UnitedHealthcare Community Plan of California, Inc.	0	0	0	0	(12,300,577)	0	0	0	(12,300,577)	0
13168	26-2688274	UnitedHealthcare Community Plan of Georgia, Inc.	0	0	0	0	5,349	0	0	0	5,349	0
12323	56-2451429	UnitedHealthcare Community Plan of Ohio, Inc.	(50,000,000)	0	0	0	(556,223,987)	(3,756,091)	0	0	(609,980,078)	18,409,942
	11141	UnitedHealthcare Community Plan of Texas, L.L.C.	0	10,000,000	0	0	(325,052,808)	214,587	0	0	(314,838,221)	244,410
95467	38-3204052	UnitedHealthcare Community Plan, Inc.	(25,000,000)	0	0	0	(158,919,820)	625,550	0	0	(183,294,270)	1,197,835
	79413	36-2739571	UnitedHealthcare Insurance Company	(2,511,554,273)	0	0	(10,420,162,768)	95,420,329	0	0	(12,836,296,712)	(545,438,407)
60318	36-3800349	UnitedHealthcare Insurance Company of Illinois	(70,000,000)	0	0	0	(147,429,115)	(107,273)	0	0	(217,536,388)	2,620
60093	11-3283886	UnitedHealthcare Insurance Company of New York	0	0	0	0	(570,144,332)	(60,535,970)	0	0	(630,680,302)	320,773,851
12231	20-1902768	UnitedHealthcare Insurance Company of the River Valley	(15,000,000)	0	0	0	(267,307,621)	(206,693)	0	0	(282,514,314)	(73,774)

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

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
											Totals	
86-0618309		UnitedHealthcare Integrated Services, Inc.	0	0	0	0	487,433	0		0	487,433	0
97179	86-0207231	UnitedHealthcare Life Insurance Company	(35,500,000)	0	0	0	(41,950,501)	(136)		0	(77,450,637)	(12,426)
95784	63-0899562	UnitedHealthcare of Alabama, Inc.	(20,000,000)	0	0	0	(33,188,123)	(156,426)		0	(53,344,549)	0
96016	86-0507074	UnitedHealthcare of Arizona, Inc.	(10,000,000)	0	0	0	(10,927,193)	(115,019)		0	(21,042,212)	0
95446	63-1036819	UnitedHealthcare of Arkansas, Inc.	0	0	0	0	(24,548,595)	(131,877)		0	(24,680,472)	0
95090	84-1004639	UnitedHealthcare of Colorado, Inc.	(1,500,000)	0	0	0	(17,378,506)	(112,421)		0	(18,990,927)	0
95264	59-1293865	UnitedHealthcare of Florida, Inc.	(75,000,000)	0	0	0	(327,485,979)	(2,069,007)		0	(404,554,986)	0
95850	58-1653544	UnitedHealthcare of Georgia, Inc.	0	0	0	0	(48,892,800)	(333,987)		0	(49,226,787)	0
95776	36-3280214	UnitedHealthcare of Illinois, Inc.	(10,000,000)	0	0	0	(20,634,308)	(171,252)		0	(30,805,560)	2
96644	62-1240316	UnitedHealthcare of Kentucky, Ltd.	(1,800,000)	10,000,000	0	0	(20,497,697)	(175,111)		0	(12,472,808)	0
95833	72-1074008	UnitedHealthcare of Louisiana, Inc.	0	0	0	0	(248,424,305)	(2,679,550)		0	(251,103,855)	(1,245)
95716	63-1036817	UnitedHealthcare of Mississippi, Inc.	(20,000,000)	0	0	0	(118,390,855)	(172,330)		0	(138,563,185)	27,804
95149	05-0413469	UnitedHealthcare of New England, Inc.	0	0	0	0	(307,283,023)	(2,338,532)		0	(309,621,555)	1,201,427
13214	26-2697886	UnitedHealthcare of New Mexico, Inc.	(50,000,000)	0	0	0	(14,295,511)	0		0	(64,295,511)	0
95085	06-1172891	UnitedHealthcare of New York, Inc.	0	0	0	0	(897,178,488)	0		0	(897,178,488)	0
95103	56-1461010	UnitedHealthcare of North Carolina, Inc.	0	76,000,000	0	0	(57,681,443)	(571,020)		0	(17,747,537)	0
95186	31-1142815	UnitedHealthcare of Ohio, Inc.	(26,000,000)	0	0	0	(6,492,161)	(52,331)		0	(32,544,492)	0
96903	33-0115166	UnitedHealthcare of Oklahoma, Inc.	(26,500,000)	0	0	0	(84,429,758)	0		0	(110,929,758)	0
95893	93-0938819	UnitedHealthcare of Oregon, Inc.	(43,500,000)	0	0	0	(269,382,516)	0		0	(312,882,516)	0
95220	25-1756858	UnitedHealthcare of Pennsylvania, Inc.	0	0	0	0	(200,888,351)	(1,202,724)		0	(202,091,075)	0
95765	95-3939697	UnitedHealthcare of Texas, Inc.	0	0	0	0	(16,885,444)	(170,100)		0	(17,055,544)	7
95025	52-1130183	UnitedHealthcare of the Mid-Atlantic, Inc.	0	0	0	0	(245,504,594)	(1,800,228)		0	(247,304,822)	16
95591	47-0676824	UnitedHealthcare of the Midlands, Inc.	(110,000,000)	0	0	0	(714,307,230)	(14,332,541)		0	(838,639,771)	0
96385	43-1361841	UnitedHealthcare of the Midwest, Inc.	(25,000,000)	0	0	0	(413,435,486)	21,681,958		0	(416,753,528)	166,353,595
95501	41-1488563	UnitedHealthcare of Utah, Inc.	(7,500,000)	0	0	0	(865,597,213)	(901,799)		0	(873,999,012)	0
48038	91-1312551	UnitedHealthcare of Washington, Inc.	(15,000,000)	0	0	0	(185,348,633)	0		0	(200,348,633)	0
95710	39-1555888	UnitedHealthcare of Wisconsin, Inc.	(325,000,000)	0	0	0	(1,528,685,480)	(9,657,936)		0	(1,863,343,416)	354
95378	36-3379945	UnitedHealthcare Plan of the River Valley, Inc.	0	0	0	0	(558,444,080)	(4,721,927)		0	(563,166,007)	0
47-0854646		UnitedHealthcare Service LLC	0	0	0	0	971,462	0		0	971,462	0
01-0518346		UnitedHealthcare Specialty Benefits, LLC	0	0	0	0	40,855	0		0	40,855	0
73-1165000		USHEALTH Group, Inc.	0	0	0	0	102,810,105	0		0	102,810,105	0
35-2314192		WellMed Network of Florida, Inc.	0	0	0	0	1,014,473,684	0		0	1,014,473,684	0
74-2889447		WellMed Networks, Inc.	0	0	0	0	3,171,161,007	0		0	3,171,161,007	0
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

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

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

Responses	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4. Will an actuarial opinion be filed by March 1?	YES
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
7. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	YES
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
11. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
AUGUST FILING	
The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.	
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies)	YES
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? No

28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? No

29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? No

30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? No

31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? No

32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1? No

33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? No

34. Will the Worker's Compensation Cave-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) No

35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? No

36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? No

37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? No

38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? No

39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? No

40. Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? No

APRIL FILING

41. Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? Yes

42. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? No

43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) No

44. Will the Accident and Health Policy Experience Exhibit be filed by April 1? Yes

45. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? No

46. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? No

47. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII.8D be filed with the state of domicile by April 30? No

48. Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? No

49. Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? No

50. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? No

Explanations:

12. No

13. No

14. No

15. Yes

16. No

17. No

18. No

19. No

20. No

21. No

22. No

23. No

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47. No

48. No

49. No

50. No

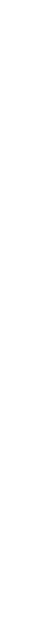
Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420] 
 6 9 6 4 7 2 0 1 9 4 2 0 0 0 0 0

13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] 
 6 9 6 4 7 2 0 1 9 3 6 0 0 0 0 0

14. Trusteed Surplus Statement [Document Identifier 490] 
 6 9 6 4 7 2 0 1 9 4 9 0 0 0 0 0

15. Participating Opinion for Exhibit 5 [Document Identifier 371] 
 6 9 6 4 7 2 0 1 9 3 7 1 0 0 0 0

17. Actuarial Opinion on X-Factors [Document Identifier 442] 
 6 9 6 4 7 2 0 1 9 4 4 2 0 0 0 0 0

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit
[Document Identifier 443]

19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts
[Document Identifier 444]

20. Reasonableness of Assumptions Certification required by Actuarial Guideline
XXXV [Document Identifier 445]

21. Reasonableness and Consistency of Assumptions Certification required by
Actuarial Guideline XXXVI [Document Identifier 446]

22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate
Method required by Actuarial Guideline XXXVI [Document Identifier 447]

23. Reasonableness and Consistency of Assumptions Certification required by
Actuarial Guideline XXXVI [Document Identifier 448]

24. Reasonableness and Consistency of Assumptions Certification required by
Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]

25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]

26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]

27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance
for Equity Indexed Annuities [Document Identifier 452]

28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]

29. Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII
[Document Identifier 456]

30. Financial Officer Certification Related to Clearly Defined Hedging Strategy
required by Actuarial Guideline XLIII [Document Identifier 457]

31. Management Certification That the Valuation Reflects Management's Intent
required by Actuarial Guideline XLIII [Document Identifier 458]

32. Actuarial Certification Related to the Reserves required by Actuarial Guideline
XLIII [Document Identifier 459]

33. Actuarial Certification regarding the use of 2001 Preferred Class Tables
required by the Model Regulation Permitting the Recognition of Preferred
Mortality Tables for Use in Determining Minimum Reserve Liabilities
[Document Identifier 454]

34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]

35. Supplemental Schedule O [Document Identifier 465]

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

37. Relief from the five-year rotation requirement for lead audit partner
[Document Identifier 224]

38. Relief from the one-year cooling off period for independent CPA
[Document Identifier 225]

39. Relief from the Requirements for Audit Committees [Document Identifier 226]
[Document Identifier 226]

40. VM-20 Reserves Supplement [Document Identifier 456]

42. Long-Term Care Experience Reporting Forms [Document Identifier 306]

43. Credit Insurance Experience Exhibit [Document Identifier 230]

45. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]

46. Supplemental Health Care Exhibit's Expense Allocation Report
[Document Identifier 217]

47. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D
[Document Identifier 455]

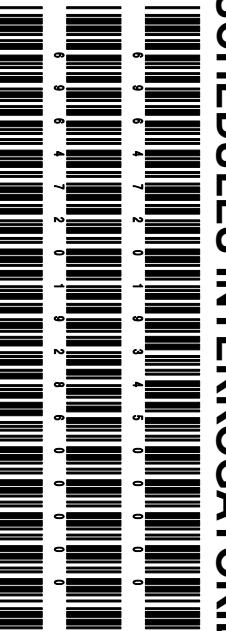
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Supplemental Term and Universal Life Insurance Reinsurance Exhibit

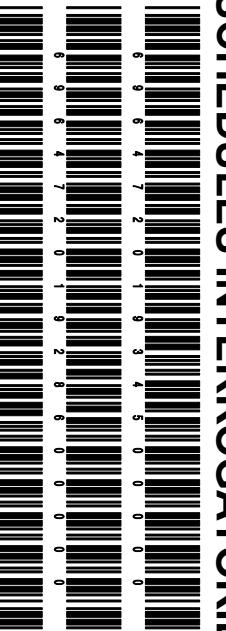
50. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]

49. Variable Annuities Supplement [Document Identifier 286]
[Document Identifier 343]



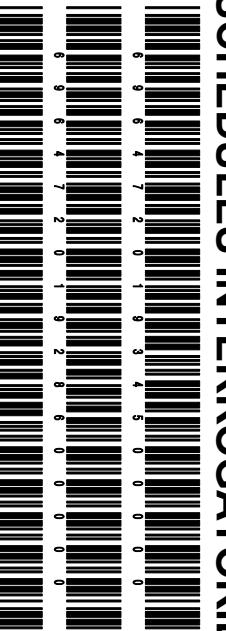
50. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]

49. Variable Annuities Supplement [Document Identifier 286]
[Document Identifier 343]



50. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]

49. Variable Annuities Supplement [Document Identifier 286]
[Document Identifier 343]



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