



QUARTERLY STATEMENT  
AS OF MARCH 31, 2021  
OF THE CONDITION AND AFFAIRS OF THE  
Gateway Health Plan of Ohio, Inc.

NAIC Group Code	0812 (Current Period)	0812 (Prior Period)	NAIC Company Code	12325	Employer's ID Number	30-0282076
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	OH		
Country of Domicile	United States					
Licensed as business type:	Life, Accident & Health[ ] Dental Service Corporation[ ] Other[X]		Property/Casualty[ ] Vision Service Corporation[ ] Is HMO Federally Qualified? Yes[ ] No[X] N/A[ ]		Hospital, Medical & Dental Service or Indemnity[ ] Health Maintenance Organization[ ]	
Incorporated/Organized	11/05/2004		Commenced Business	09/01/2005		
Statutory Home Office	Four Gateway Center, 444 Liberty Avenue, Ste 2100 (Street and Number)		Pittsburgh, PA, US 15222-1222 (City or Town, State, Country and Zip Code)			
Main Administrative Office	Four Gateway Center, 444 Liberty Avenue, Ste 2100 (Street and Number)					
	Pittsburgh, PA, US 15222-1222 (City or Town, State, Country and Zip Code)		(412)255-4640 (Area Code) (Telephone Number)			
Mail Address	Four Gateway Center, 444 Liberty Avenue, Ste 2100 (Street and Number or P.O. Box)		Pittsburgh, PA, US 15222-1222 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	c/o CT Corporation System, 1300 East 9th Street (Street and Number)					
	Cleveland, OH, US 44114 (City or Town, State, Country and Zip Code)		(216)802-2121 (Area Code) (Telephone Number)			
Internet Web Site Address	www.gatewayhealthplan.com					
Statutory Statement Contact	Christopher Michael Cogan (Name)		(412)255-4693 (Area Code)(Telephone Number)(Extension)			
	CCogan@GatewayHealthPlan.com (E-Mail Address)		(412)255-4693 (Fax Number)			

OFFICERS

Name	Title
Cain-Aten Hayes	President
Ja'Ron Bridges	Treasurer
Frances Ann Woodward	Secretary
Christopher Michael Cogan	Assistant Treasurer

OTHERS

DIRECTORS OR TRUSTEES

David Arthur Blandino M.D. Karen Lynn Hanlon Peter Joseph Schied	Tony George Farah M.D. Stuart Michael Kilpinen James Lennox Woodward
--	--

State of \_\_\_\_\_  
County of \_\_\_\_\_ ss

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

(Signature) Cain-Aten Hayes (Printed Name) 1. President (Title)	(Signature) Ja'Ron Bridges (Printed Name) 2. Treasurer (Title)	(Signature) Frances Ann Woodward (Printed Name) 3. Secretary (Title)
--	---	---

Subscribed and sworn to before me this _____ day of _____, 2021	a. Is this an original filing? b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached	Yes[X] No[ ] _____ _____ _____
---	--	---

\_\_\_\_\_  
(Notary Public Signature)

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds .....	1,162,324		1,162,324	1,164,757
2.	Stocks:				
2.1	Preferred stocks .....				
2.2	Common stocks .....				
3.	Mortgage loans on real estate:				
3.1	First liens .....				
3.2	Other than first liens .....				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances) .....				
4.2	Properties held for the production of income (less \$.....0 encumbrances) .....				
4.3	Properties held for sale (less \$.....0 encumbrances) .....				
5.	Cash (\$.....204,045), cash equivalents (\$.....4,513,209) and short-term investments (\$.....0) .....	4,717,254		4,717,254	9,788,956
6.	Contract loans (including \$.....0 premium notes) .....				
7.	Derivatives .....				
8.	Other invested assets .....				
9.	Receivables for securities .....				
10.	Securities lending reinvested collateral assets .....				
11.	Aggregate write-ins for invested assets .....				
12.	Subtotals, cash and invested assets (Lines 1 to 11) .....	5,879,578		5,879,578	10,953,712
13.	Title plants less \$.....0 charged off (for Title insurers only) .....				
14.	Investment income due and accrued .....	13,758		13,758	12,796
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection .....	1,220		1,220	1,220
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums) .....				
15.3	Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....894,240) .....	894,240		894,240	894,240
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers .....				
16.2	Funds held by or deposited with reinsured companies .....				
16.3	Other amounts receivable under reinsurance contracts .....				
17.	Amounts receivable relating to uninsured plans .....	49,449	46,866	2,584	2,584
18.1	Current federal and foreign income tax recoverable and interest thereon .....	8,846		8,846	8,846
18.2	Net deferred tax asset .....				
19.	Guaranty funds receivable or on deposit .....				
20.	Electronic data processing equipment and software .....				
21.	Furniture and equipment, including health care delivery assets (\$.....0) .....				
22.	Net adjustments in assets and liabilities due to foreign exchange rates .....				
23.	Receivables from parent, subsidiaries and affiliates .....	30,879		30,879	13,061
24.	Health care (\$.....0) and other amounts receivable .....	80,600	80,600		
25.	Aggregate write-ins for other-than-invested assets .....	3,205	3,205		
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	6,961,775	130,670	6,831,104	11,886,458
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28.	TOTAL (Lines 26 and 27) .....	6,961,775	130,670	6,831,104	11,886,458
DETAILS OF WRITE-INS					
1101.	.....				
1102.	.....				
1103.	.....				
1198.	Summary of remaining write-ins for Line 11 from overflow page .....				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above) .....				
2501.	Broker Commission Overpayment .....	3,205	3,205		
2502.	.....				
2503.	.....				
2598.	Summary of remaining write-ins for Line 25 from overflow page .....				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	3,205	3,205		

**LIABILITIES, CAPITAL AND SURPLUS**

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$.....0 reinsurance ceded) .....	1,785,913		1,785,913	1,819,107
2.	Accrued medical incentive pool and bonus amounts .....				
3.	Unpaid claims adjustment expenses .....	52,331		52,331	52,331
4.	Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act .....	65,261		65,261	65,261
5.	Aggregate life policy reserves .....				
6.	Property/casualty unearned premium reserve .....				
7.	Aggregate health claim reserves .....				
8.	Premiums received in advance .....				
9.	General expenses due or accrued .....	7,999		7,999	6,277
10.1	Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)) .....				
10.2	Net deferred tax liability .....				
11.	Ceded reinsurance premiums payable .....				
12.	Amounts withheld or retained for the account of others .....				
13.	Remittances and items not allocated .....				18
14.	Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current) .....				
15.	Amounts due to parent, subsidiaries and affiliates .....	7,469		7,469	16,858
16.	Derivatives .....				
17.	Payable for securities .....				
18.	Payable for securities lending .....				
19.	Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers) .....				
20.	Reinsurance in unauthorized and certified (\$.....0) companies .....				
21.	Net adjustments in assets and liabilities due to foreign exchange rates .....				
22.	Liability for amounts held under uninsured plans .....	409,857		409,857	409,857
23.	Aggregate write-ins for other liabilities (including \$.....0 current) .....	13,658		13,658	13,658
24.	Total liabilities (Lines 1 to 23) .....	2,342,489		2,342,489	2,383,367
25.	Aggregate write-ins for special surplus funds .....	X X X	X X X		
26.	Common capital stock .....	X X X	X X X		
27.	Preferred capital stock .....	X X X	X X X		
28.	Gross paid in and contributed surplus .....	X X X	X X X	31,536,235	36,536,235
29.	Surplus notes .....	X X X	X X X		
30.	Aggregate write-ins for other-than-special surplus funds .....	X X X	X X X		
31.	Unassigned funds (surplus) .....	X X X	X X X	(27,047,620)	(27,033,144)
32.	Less treasury stock, at cost:				
32.1	.....0 shares common (value included in Line 26 \$.....0) .....	X X X	X X X		
32.2	.....0 shares preferred (value included in Line 27 \$.....0) .....	X X X	X X X		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32) .....	X X X	X X X	4,488,615	9,503,091
34.	Total Liabilities, capital and surplus (Lines 24 and 33) .....	X X X	X X X	6,831,104	11,886,458
DETAILS OF WRITE-INS					
2301.	Escheat Liability Medicare .....	13,658		13,658	13,658
2302.	.....				
2303.	.....				
2398.	Summary of remaining write-ins for Line 23 from overflow page .....				
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above) .....	13,658		13,658	13,658
2501.	.....	X X X	X X X		
2502.	.....	X X X	X X X		
2503.	.....	X X X	X X X		
2598.	Summary of remaining write-ins for Line 25 from overflow page .....	X X X	X X X		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	X X X	X X X		
3001.	.....	X X X	X X X		
3002.	.....	X X X	X X X		
3003.	.....	X X X	X X X		
3098.	Summary of remaining write-ins for Line 30 from overflow page .....	X X X	X X X		
3099.	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above) .....	X X X	X X X		

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months .....	X X X .....			
2.	Net premium income (including \$.....0 non-health premium income) .....	X X X .....		21,501	(56,919)
3.	Change in unearned premium reserves and reserves for rate credits .....	X X X .....			
4.	Fee-for-service (net of \$.....0 medical expenses) .....	X X X .....			
5.	Risk revenue .....	X X X .....			
6.	Aggregate write-ins for other health care related revenues .....	X X X .....			
7.	Aggregate write-ins for other non-health revenues .....	X X X .....			
8.	Total revenues (Lines 2 to 7) .....	X X X .....		21,501	(56,919)
<b>Hospital and Medical:</b>					
9.	Hospital/medical benefits .....		23,807	(813,429)	1,034,344
10.	Other professional services .....		(6,176)	159,483	232,787
11.	Outside referrals .....				
12.	Emergency room and out-of-area .....		(1,066)	66,019	77,566
13.	Prescription drugs .....		(20,998)	(178,025)	(85,229)
14.	Aggregate write-ins for other hospital and medical .....		(42)	18,453	26,286
15.	Incentive pool, withhold adjustments and bonus amounts .....				
16.	Subtotal (Lines 9 to 15) .....		(4,475)	(747,499)	1,285,754
<b>Less:</b>					
17.	Net reinsurance recoveries .....				
18.	Total hospital and medical (Lines 16 minus 17) .....		(4,475)	(747,499)	1,285,754
19.	Non-health claims (net) .....				
20.	Claims adjustment expenses, including \$.....1,182 cost containment expenses .....		6,095	105,201	241,708
21.	General administrative expenses .....		8,675	52,038	99,145
22.	Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only) .....				
23.	Total underwriting deductions (Lines 18 through 22) .....		10,295	(590,260)	1,626,607
24.	Net underwriting gain or (loss) (Lines 8 minus 23) .....	X X X .....	(10,295)	611,761	(1,683,527)
25.	Net investment income earned .....		1,898	36,334	48,906
26.	Net realized capital gains (losses) less capital gains tax of \$.....0 .....				
27.	Net investment gains or (losses) (Lines 25 plus 26) .....		1,898	36,334	48,906
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....14,884)] .....		(14,884)	406	(397,267)
29.	Aggregate write-ins for other income or expenses .....				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	X X X .....	(23,281)	648,500	(2,031,888)
31.	Federal and foreign income taxes incurred .....	X X X .....		(4,423)	(4,423)
32.	Net income (loss) (Lines 30 minus 31) .....	X X X .....	(23,281)	652,923	(2,027,465)
<b>DETAILS OF WRITE-INS</b>					
0601.	.....	X X X .....			
0602.	.....	X X X .....			
0603.	.....	X X X .....			
0698.	Summary of remaining write-ins for Line 6 from overflow page .....	X X X .....			
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	X X X .....			
0701.	.....	X X X .....			
0702.	.....	X X X .....			
0703.	.....	X X X .....			
0798.	Summary of remaining write-ins for Line 7 from overflow page .....	X X X .....			
0799.	TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	X X X .....			
1401.	DME .....		(42)	15,515	23,348
1402.	Hearing Hardware .....			2,938	2,938
1403.	Transportation Costs .....				
1498.	Summary of remaining write-ins for Line 14 from overflow page .....				
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) .....		(42)	18,453	26,286
2901.	.....				
2902.	.....				
2903.	.....				
2998.	Summary of remaining write-ins for Line 29 from overflow page .....				
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above) .....				

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year .....	9,503,091	10,408,762	10,408,762
34.	Net income or (loss) from Line 32 .....	(23,281)	652,923	(2,027,465)
35.	Change in valuation basis of aggregate policy and claim reserves .....			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....0 .....			
37.	Change in net unrealized foreign exchange capital gain or (loss) .....			
38.	Change in net deferred income tax .....		(4,423)	(4,423)
39.	Change in nonadmitted assets .....	8,804	(182,109)	1,126,217
40.	Change in unauthorized and certified reinsurance .....			
41.	Change in treasury stock .....			
42.	Change in surplus notes .....			
43.	Cumulative effect of changes in accounting principles .....			
44.	Capital Changes:			
44.1	Paid in .....			
44.2	Transferred from surplus (Stock Dividend) .....			
44.3	Transferred to surplus .....			
45.	Surplus adjustments:			
45.1	Paid in .....	(5,000,000)		
45.2	Transferred to capital (Stock Dividend) .....			
45.3	Transferred from capital .....			
46.	Dividends to stockholders .....			
47.	Aggregate write-ins for gains or (losses) in surplus .....			
48.	Net change in capital and surplus (Lines 34 to 47) .....	(5,014,477)	466,392	(905,671)
49.	Capital and surplus end of reporting period (Line 33 plus 48) .....	4,488,615	10,875,154	9,503,091
DETAILS OF WRITE-INS				
4701.	.....	.....	.....	.....
4702.	.....	.....	.....	.....
4703.	.....	.....	.....	.....
4798.	Summary of remaining write-ins for Line 47 from overflow page .....	.....	.....	.....
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above) .....	.....	.....	.....

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance .....		1,291	73,353
2.	Net investment income .....	5,090	48,002	74,731
3.	Miscellaneous income .....			
4.	TOTAL (Lines 1 to 3) .....	5,090	49,294	148,084
5.	Benefit and loss related payments .....	19,914	1,255,614	892,552
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7.	Commissions, expenses paid and aggregate write-ins for deductions .....	26,448	264,770	807,083
8.	Dividends paid to policyholders .....			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses) .....		0	
10.	TOTAL (Lines 5 through 9) .....	46,362	1,520,384	1,699,635
11.	Net cash from operations (Line 4 minus Line 10) .....	(41,272)	(1,471,090)	(1,551,551)
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds .....			
12.2	Stocks .....			
12.3	Mortgage loans .....			
12.4	Real estate .....			
12.5	Other invested assets .....			
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments .....			
12.7	Miscellaneous proceeds .....			
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7) .....			
13.	Cost of investments acquired (long-term only):			
13.1	Bonds .....			
13.2	Stocks .....			
13.3	Mortgage loans .....			
13.4	Real estate .....			
13.5	Other invested assets .....			
13.6	Miscellaneous applications .....			
13.7	TOTAL investments acquired (Lines 13.1 to 13.6) .....			
14.	Net increase (or decrease) in contract loans and premium notes .....			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....			
Cash from Financing and Miscellaneous Sources				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes .....			
16.2	Capital and paid in surplus, less treasury stock .....	(5,000,000)		
16.3	Borrowed funds .....			
16.4	Net deposits on deposit-type contracts and other insurance liabilities .....			
16.5	Dividends to stockholders .....			
16.6	Other cash provided (applied) .....	(30,430)	(182,152)	(238,401)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6) .....	(5,030,430)	(182,152)	(238,401)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(5,071,702)	(1,653,243)	(1,789,952)
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year .....	9,788,956	11,578,907	11,578,907
19.2	End of period (Line 18 plus Line 19.1) .....	4,717,254	9,925,665	9,788,956

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
---------	--	--	--	--

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year .....										
2. First Quarter .....										
3. Second Quarter .....										
4. Third Quarter .....										
5. Current Year .....										
6. Current Year Member Months .....										
Total Member Ambulatory Encounters for Period:										
7. Physician .....	39							39		
8. Non-Physician .....	30							30		
9. Total .....	69							69		
10. Hospital Patient Days Incurred .....										
11. Number of Inpatient Admissions .....										
12. Health Premiums Written (a) .....										
13. Life Premiums Direct .....										
14. Property/Casualty Premiums Written .....										
15. Health Premiums Earned .....										
16. Property/Casualty Premiums Earned .....										
17. Amount Paid for Provision of Health Care Services .....	19,915							19,915		
18. Amount Incurred for Provision of Health Care Services .....	(4,475)							(4,475)		

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.0.

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

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 days	Over 120 Days	Total
0199999 Individually Listed Claims Unpaid .....						
0299999 Aggregate Accounts Not Individually Listed - Uncovered .....						
0399999 Aggregate Accounts Not Individually Listed - Covered .....	75					75
0499999 Subtotals .....	75					75
0599999 Unreported claims and other claim reserves .....						1,785,838
0699999 Total Amounts Withheld .....						
0799999 Total Claims Unpaid .....						1,785,913
0899999 Accrued Medical Incentive Pool And Bonus Amounts .....						



**UNDERWRITING AND INVESTMENT EXHIBIT**

**ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE**

Line of Business		Claims Paid Year to Date		Liability End of Current Quarter		5	6
		1	2	3	4		
		On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1+3)	Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
1.	Comprehensive (hospital & medical) .....	.....	.....	.....	.....	.....	.....
2.	Medicare Supplement .....	.....	.....	.....	.....	.....	.....
3.	Dental only .....	.....	.....	.....	.....	.....	.....
4.	Vision only .....	.....	.....	.....	.....	.....	.....
5.	Federal Employees Health Benefits Plan .....	.....	.....	.....	.....	.....	.....
6.	Title XVIII - Medicare .....	19,915	.....	1,785,913	.....	1,805,828	1,819,107
7.	Title XIX - Medicaid .....	.....	.....	.....	.....	.....	.....
8.	Other health .....	.....	.....	.....	.....	.....	.....
9.	Health subtotal (Lines 1 to 8) .....	19,915	.....	1,785,913	.....	1,805,828	1,819,107
10.	Healthcare receivables (a) .....	80,600	.....	.....	.....	80,600	89,404
11.	Other non-health .....	.....	.....	.....	.....	.....	.....
12.	Medical incentive pools and bonus amounts .....	.....	.....	.....	.....	.....	.....
13.	Totals (Lines 9 - 10 + 11 + 12) .....	(60,685)	.....	1,785,913	.....	1,725,229	1,729,703

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

Notes to Financial Statement

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Gateway Health Plan of Ohio, Inc. ("GHPOI") are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance ("the Department"). The Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under Ohio insurance law and regulations. The National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual, ("NAIC SAP") has been adopted as a component of prescribed or permitted practices by the State of Ohio.

A reconciliation of GHPOI's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	03/31/2021	12/31/2020
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (23,281)	\$ (2,027,465)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ (23,281)</u>	<u>\$ (2,027,465)</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 4,488,615	\$ 9,503,091
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 4,488,615</u>	<u>\$ 9,503,091</u>

B. Use of Estimates in the Preparation of the Financial Statements - No Significant Changes

C. Accounting Policy

- (1) Short-term investments - No Significant Changes
- (2) GHPOI does not hold Mandatory Convertible securities and SVO Identified investments. Bonds are stated at amortized cost using the scientific interest method.
- (3) Common stocks - No Significant Changes
- (4) Preferred stocks - No Significant Changes
- (5) Mortgage loans - No Significant Changes
- (6) GHPOI does not hold any loan-backed securities.
- (7) Investments in subsidiaries, controlled and affiliated entities - No Significant Changes
- (8) Investments in joint ventures, partnerships and limited liability companies - No Significant Changes
- (9) Derivatives - No Significant Changes
- (10) Investment income as a factor in the premium deficiency calculation - No Significant Changes
- (11) Liabilities for losses and loss/claim adjustment expenses - No Significant Changes
- (12) Changes in capitalization policy - No Significant Changes
- (13) Pharmaceutical rebate receivables - No Significant Changes

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern. There is no substantial doubt in its ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors - No Significant Changes

3. Business Combinations and Goodwill - No Significant Changes

4. Discontinued Operations - No Significant Changes

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - No Significant Changes
- B. Debt Restructuring - No Significant Changes
- C. Reverse Mortgages - No Significant Changes
- D. Loan-Backed Securities - None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None

# Notes to Financial Statement

**5. Investments (Continued)**

- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - No Significant Changes
- K. Low-Income Housing Tax Credits (LIHTC) - No Significant Changes
- L. Restricted Assets - No Significant Changes
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - No Significant Changes
- P. Short Sales - No Significant Changes
- Q. Prepayment Penalty and Acceleration Fees - No Significant Changes
- R. Reporting Entity's Share of Cash Pool by Asset type - None

**6. Joint Ventures, Partnerships and Limited Liability Companies** - No Significant Changes

**7. Investment Income** - No Significant Changes

**8. Derivative Instruments** - None

**9. Income Taxes** - No Significant Changes

**10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

- A. Nature of Relationships - No Significant Changes
- B. GHPOI returned \$5,000,000 in contributed surplus to it's parent, Gateway Health LLC on February 26, 2021. GHPOI stopped operations as of 1/1/20, and will continue returning contributed surplus up to \$7,500,000 in order to maintain minimum RBC and Capital levels.
- C. Transactions With Related Party Who Are Not Reported on Schedule Y - No Significant Changes
- D. Amounts Due To or From Related Parties - No Significant Changes
- E. Management Service Contracts and Cost Sharing Arrangements - No Significant Changes
- F. Guarantees or Contingencies - No Significant Changes
- G. Nature of Relationships that Could Affect Operations - No Significant Changes
- H. Amount Deducted for Investment in Upstream Company - No Significant Changes
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - No Significant Changes
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - No Significant Changes
- K. Foreign Subsidiary Value Using CARVM - No Significant Changes
- L. Downstream Holding Company Value Using Look-Through Method - No Significant Changes
- M. All SCA Investments - No Significant Changes
- N. Investment in Insurance SCAs - No Significant Changes
- O. SCA and SSAP No. 48 Entity Loss Tracking - No Significant Changes

**11. Debt**

- A. Debt, Including Capital Notes - No Significant Changes
- B. FHLB (Federal Home Loan Bank) Agreements  
GHPOI has no FHLB (Federal Home Loan Bank) agreements.

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

- A. Defined Benefit Plan - None
- B. Investment Policies and Strategies of Plan Assets - No Significant Changes
- C. Fair Value of Each Class of Plan Assets - No Significant Changes
- D. Expected Long-Term Rate of Return for the Plan Assets - No Significant Changes
- E. Defined Contribution Plans - No Significant Changes
- F. Multiemployer Plans - No Significant Changes
- G. Consolidated/Holding Company Plans - No Significant Changes
- H. Postemployment Benefits and Compensated Absences - No Significant Changes
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - No Significant Changes

**13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations** - No Significant Changes

Notes to Financial Statement

14. Liabilities, Contingencies and Assessments - No Significant Changes

15. Leases

GHPOI has no leases.

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - No Significant Changes

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- A. Transfers of Receivables Reported as Sales - No Significant Changes
- B. Transfers and Servicing of Financial Assets - None
- C. Wash Sales

GHPOI had no wash sales.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - No Significant Changes

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - No Significant Changes

20. Fair Value Measurements

A. Fair Value Measurement

The Level of the fair value hierarchy within which the fair value measurements are categorized in their entirety (Level 1, 2 or 3)

In accordance with SSAP No. 100, financial assets and liabilities recorded at fair value in the statements of assets, liabilities, capital and surplus are categorized based upon the level of judgment associated with the inputs used to measure their fair value. Input levels, as defined by NAIC SAP, are as follows:

- Level 1 – Pricing inputs are based on unadjusted quoted market prices for identical financial assets in active markets. Active markets are those in which transactions occur in sufficient frequency and volume to provide pricing information on an ongoing basis.
- Level 2 – Pricing inputs are based on other than quoted prices in active markets included in Level 1 that are observable unadjusted quoted market prices for similar financial assets or liabilities in active markets or quoted market prices for identical assets in inactive markets.
- Level 3 – Pricing inputs include unobservable inputs that are supported by little or no market activity that reflect management’s best estimate of what market participants would use in pricing the asset at the measurement date.

(1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Total Cash Equivalents .....	\$ ..... 4,513,209	\$ .....	\$ .....	\$.....	\$..... 4,513,209
Total assets at fair value/NAV .....	<u>\$ ..... 4,513,209</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ ..... 4,513,209</u>
b. Liabilities at fair value					
Total liabilities at fair value .....	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy - None

(3) GHPOI's policy for determining when transfers between levels are recognized is determined at the end of the reporting period

(4) The following methods and assumptions were used to determine the fair value of each class of the following assets and liabilities recorded at fair value in the statements of assets, liabilities, capital and surplus:

Bonds – Fair values are based on quoted market prices, where available. These fair values are obtained primarily from a third party pricing service, which generally uses Level 1 or Level 2 inputs for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include corporate securities, securities from states, municipalities, and political subdivisions and mortgage-backed securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds.

Short-term securities – Short-term securities include securities with a maturity of less than one year but greater than 90 days at the date of purchase. Fair values of short-term securities are based on quoted market prices, where available. These fair values are obtained primarily from a third party pricing service, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. U.S. Government securities represent Level 1 securities, while Level 2 securities include corporate securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds.

Cash and cash equivalents: Cash equivalents include exempt money market funds, commercial paper, and discount notes or securities with a maturity of 3 months or less. Cash equivalents are designated as Level 1 or Level 2, depending on structure and the extent of credit-related features.

GHPOI uses a third party pricing service to obtain quoted prices for each security. The third party service provides pricing based on recent trades of the specific security or like securities, as well as a variety of valuation methodologies for those securities where an observable market price may not exist. The third party service may derive pricing for Level 2 securities from market corroborated pricing, matrix pricing, and inputs such as yield curves and indices. Pricing for Level 3 securities may be obtained from investment managers for private placements or derived from discounted cash flows, or ratio analysis and price comparisons of similar companies. GHPOI performs an analysis of reasonableness of the prices received for fair value by monitoring month-to-month fluctuations and determining reasons for significant differences, selectively testing fair values against prices obtained from other sources, and comparing the combined fair value of a class of assets against an appropriate index benchmark. There were no adjustments to quoted market prices obtained from third party pricing services during the period ended March 31, 2021 that were material to the statutory financial statements.

(5) Derivatives - None

B. Other Fair Value Disclosures - None

Notes to Financial Statement

20. Fair Value Measurements (Continued)

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds.....	\$..... 1,331,549	\$..... 1,162,324	\$..... 1,331,549	\$.....	\$.....	\$.....	\$.....
Cash Equivalents.....	4,513,209	4,513,209	4,513,209				

D. Not Practicable to Estimate Fair Value - None

E. Nature and Risk of Investments Reported at NAV - None

21. Other Items - No Significant Changes

22. Events Subsequent

Type I. – Recognized Subsequent Events

Subsequent events have been considered through May 14, 2021 for the statutory statement issued on March 31, 2021.

Type II. – Nonrecognized Subsequent Events

Subsequent events have been considered through May 14, 2021 for the statutory statement issued on March 31, 2021.

23. Reinsurance - No Significant Changes

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate - No Significant Changes

B. Method Used to Record - No Significant Changes

C. Amount and Percent of Net Retrospective Premiums - No Significant Changes

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - No Significant Changes

E. Risk-Sharing Provisions of the Affordable Care Act (ACA) - None

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

Reserves as of December 31, 2020 were \$1,871,438. As of March 31,2021, \$78,536 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,785,913 as a result of re-estimation of unpaid and claim adjustment expenses. Therefore there has been a \$6,988 favorable prior-year development since March 31, 2021 and December 31, 2020. These changes are generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses

There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements - No Significant Changes

27. Structured Settlements - No Significant Changes

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

The rebates accrued are an estimate based on historical rebates received per member per month (PMPM) and current volume.

GHPOI is responsible for billing rebates. The majority of rebates are paid to GHPOI via wire-transfer.

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
..... 03/31/2021.....	\$.....	\$.....	\$.....	\$.....	\$.....
..... 12/31/2020.....					
..... 09/30/2020.....					
..... 06/30/2020.....					
..... 03/31/2020.....	200,712				
..... 12/31/2019.....	709,922	610,506	610,506		74,487
..... 09/30/2019.....	808,208	773,380	752,868		(5,494)
..... 06/30/2019.....	753,369	883,473	793,231		41,896
..... 03/31/2019.....	874,031	859,196	808,603		24,234
..... 12/31/2018.....	2,127,318	2,290,401	2,152,218	(112,463)	210,121
..... 09/30/2018.....	2,165,660	2,331,563	2,078,774		249,532
..... 06/30/2018.....	2,156,841	2,256,829	2,120,718		133,328

\*Estimated Pharmacy Rebates as Reported on Financial Statements represents the admitted rebate receivable as reported on the financial statements.

\*\* Pharmacy Rebates Billed or Confirmed represents rebates billed or confirmed in the quarter.

B. Risk-Sharing Receivables - No Significant Changes

**Notes to Financial Statement**

**29. Participating Policies** - No Significant Changes

**30. Premium Deficiency Reserves**

- |   |            |
|---|------------|
| 1. Liability carried for premium deficiency reserves:             | \$         |
| 2. Date of the most recent evaluation of this liability:          | 03/31/2021 |
| 3. Was anticipated investment income utilized in the calculation? | NO         |

**31. Anticipated Salvage and Subrogation** - No Significant Changes

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES  
GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

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

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

Yes[ ] No[X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

Yes[X] No[ ]
- If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes[X] No[ ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes:

Premier Health Consultants, LLC, Total Urgent Care, LLC, Total Urgent Care and Occupational Medicine, LLC, Lake Charles Urgent Care, LLC., LCUC Family Physicians Urgent Care, LLC, Rapides After Hours Clinic, LLC., Lake Urgent Care Ascension, LLC., Lourdes After Hours, LLC. Convenient Care, LLC., St. Joseph's/Candler Urgent Care Centers, LLC, LCMC Urgent Care, LLC, St. Francis Urgent Care, LLC, Seton Urgent Care, LLC, CP Premier Urgent Care JV, LLC, Family First Express Care, PLLC, Holy Cross Health Urgent Care, Inc., Trinity Health Of New England Urgent Care, PLLC, Mercy Health Urgent Care, PLLC, THPH of Columbus, LLC, Mount Carmel Urgent Care, LLC, THPH of Columbus, LLC, Saint Mary's Health Care System Urgent Care, LLC, THPH of Maryland, LLC, THPH of Athens, LLC; THPH of Maryland, LLC, THPH of West Michigan, LLC, Orange ASC, Ltd , Healthcare Solutions WNY, LLC, Saint Joseph's McAuley Park I, LLC, and Saint Joseph's Developer, LLC were added. Gottlieb Management Services, Inc., Farren Care Center, Inc., Trinity Health Partners, LLC, Trinity Health Partners - Michigan, LLC, Trinity Health Partners - Idaho, LLC, Trinity Health Partners - Illinois, LLC, Trinity Health Partners - New Jersey, LLC, Mercy Physician Network, Total Health Connecticut, LLC, and Providence Homecare, Inc were removed.
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group?

Yes[ ] No[X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes[ ] No[X]
- If yes, complete and file the merger history data file with the NAIC.
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

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

Yes[ ] No[X] N/A[ ]
- If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2016
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2016
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

04/24/2018
- 6.4 By what department or departments?

Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

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

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

Yes[ ] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[ ] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[ ] No[X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC
		No	No	No	No

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes[X] No[ ]
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended?

Yes[ ] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[ ] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

Yes[X] No[ ]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:

\$..... 0

GENERAL INTERROGATORIES (Continued)

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes[ ] No[X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:

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

\$ ..... 0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes[ ] No[X]
- 14.2 If yes, please complete the following:

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

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

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

Yes[ ] No[ ] N/A[X]
- If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

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

\$ ..... 0

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

\$ ..... 0

16.3 Total payable for securities lending reported on the liability page

\$ ..... 0
17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes[X] No[ ]
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
PNC Bank, NA .....	Pittsburgh, PA .....
Mellon Bank, NA .....	Pittsburgh, PA .....

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes[ ] No[X]
- 17.4 If yes, give full and complete information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Dina L. Richard, Trinity Health .....	A .....
W. Dennis Cronin, Highmark .....	A .....
Susan Payden, Trinity Health .....	A .....
Kevin Marpoe, Highmark .....	A .....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?

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

Yes[ ] No[X]
- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.



**GENERAL INTERROGATORIES (Continued)**

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	Dina L. Richard .....	.....	.....	..... NO .....
.....	W. Dennis Cronin .....	.....	.....	..... NO .....
.....	Susan Payden .....	.....	.....	..... NO .....
.....	Kevin Marpoe .....	.....	.....	..... NO .....

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

18.2 If no, list exceptions:

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

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

b. Issuer or obligor is current on all contracted interest and principal payments.

c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

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

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

a. The security was purchased prior to January 1, 2018.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.

d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

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

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

a. The shares were purchased prior to January 1, 2019.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security

c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.

d. The fund only or predominantly holds bonds in its portfolio.

e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.

f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

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

**GENERAL INTERROGATORIES**

**PART 2 - HEALTH**

1. Operating Percentages:	
1.1 A&H loss percent	0.000%
1.2 A&H cost containment percent	0.000%
1.3 A&H expense percent excluding cost containment expenses	0.000%
2.1 Do you act as a custodian for health savings accounts?	Yes[ ] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.	\$..... 0
2.3 Do you act as an administrator for health savings accounts?	Yes[ ] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.	\$..... 0
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes[X] No[ ]
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes[ ] No[X]

**SCHEDULE S - CEDED REINSURANCE**  
**Showing All New Reinsurance Treaties - Current Year to Date**

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

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**  
**Current Year to Date - Allocated by States and Territories**

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

(a) Active Status Counts:

L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG  
E – Eligible - Reporting entities eligible or approved to write surplus lines in the state  
N – None of the above – Not allowed to write business in the state

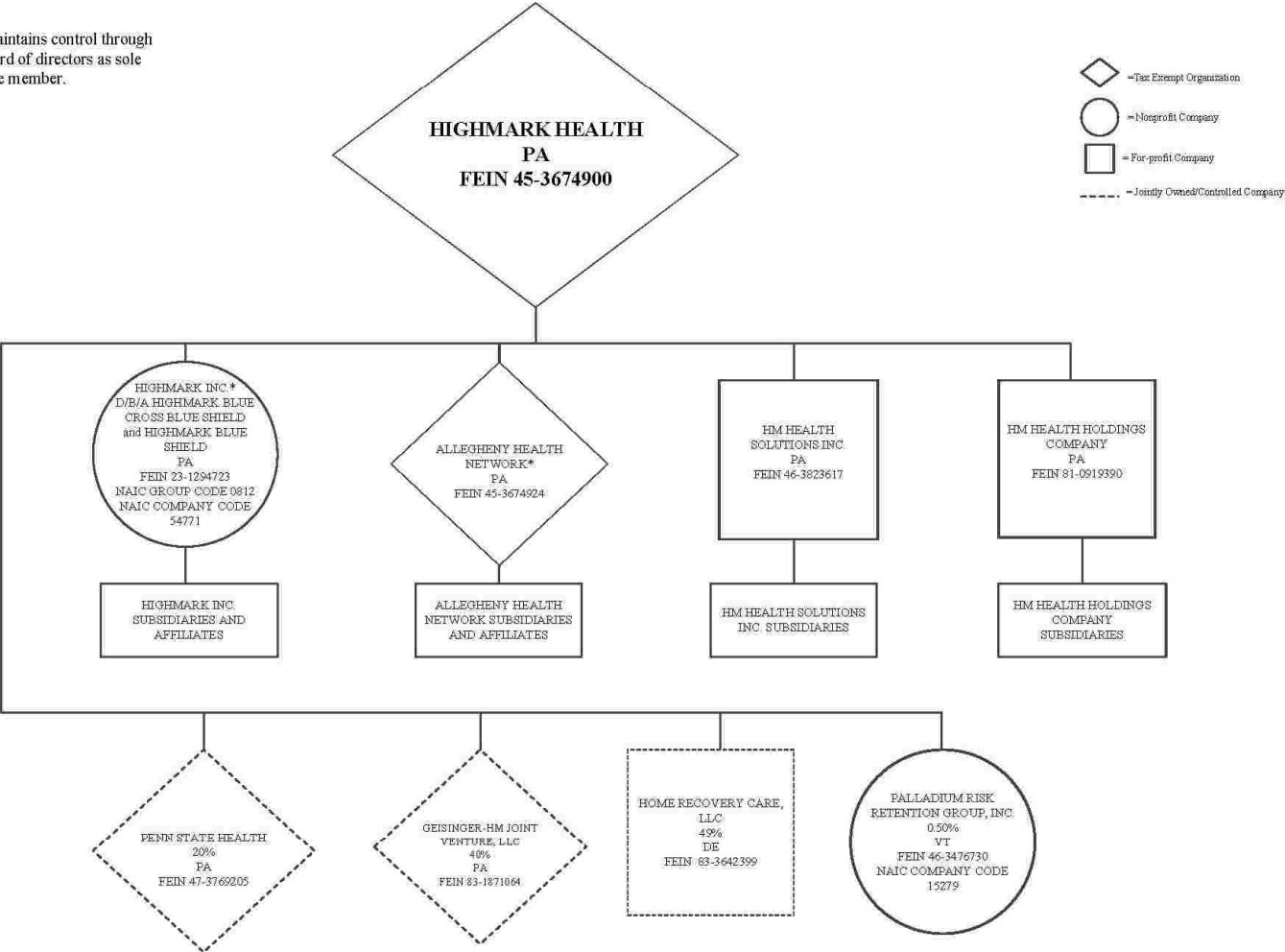
3  
54

R – Registered - Non-domiciled RRGs  
Q – Qualified - Qualified or accredited reinsurer

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATION CHART

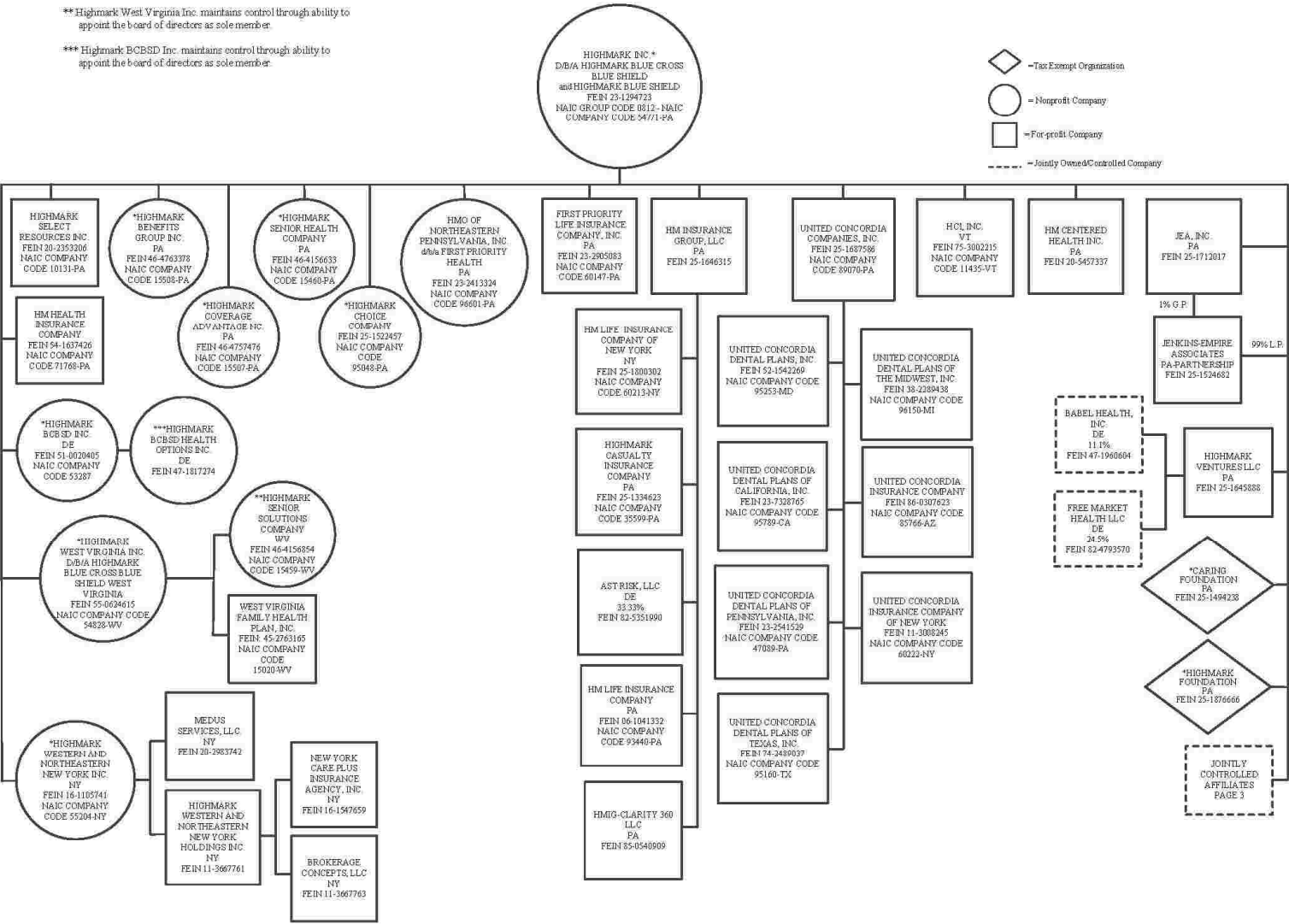
\* Highmark Health maintains control through ability to appoint the board of directors as sole member or sole corporate member.



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER  
MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART

\* Control is maintained through ability to appoint the board of directors as sole member or sole corporate member.  
\*\* Highmark West Virginia Inc. maintains control through ability to appoint the board of directors as sole member.  
\*\*\* Highmark BCBSID Inc. maintains control through ability to appoint the board of directors as sole member.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATION CHART

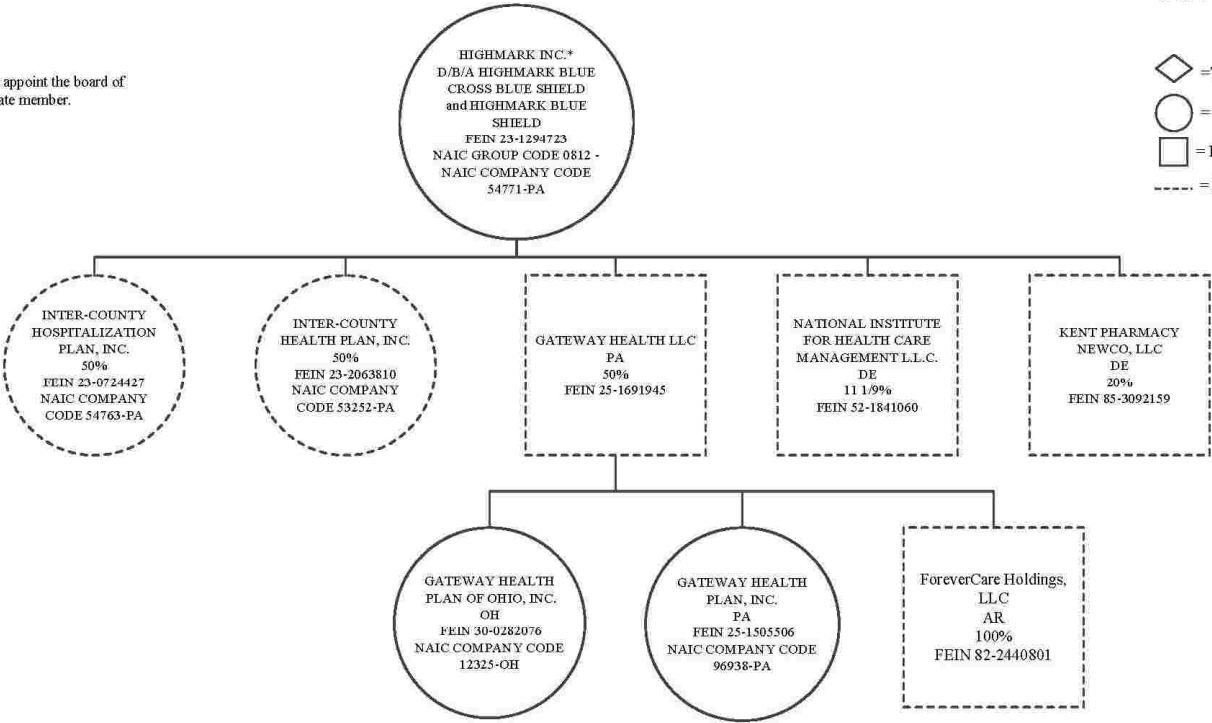


**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATION CHART

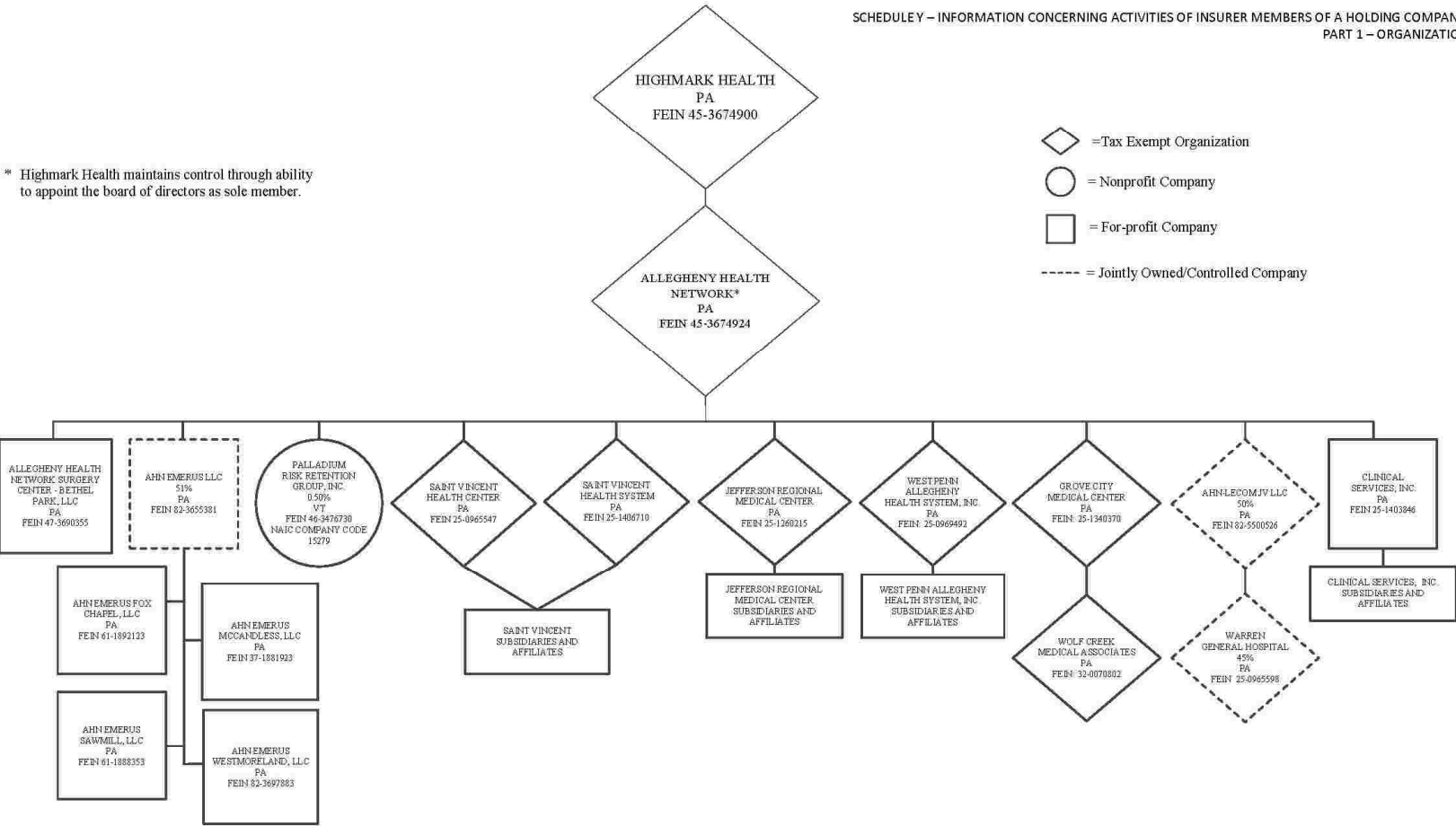
\* Control is maintained through ability to appoint the board of directors as sole member or sole corporate member.

- ◊ = Tax Exempt Organization
- = Nonprofit Company
- = For-profit Company
- = Jointly Owned/Controlled Company



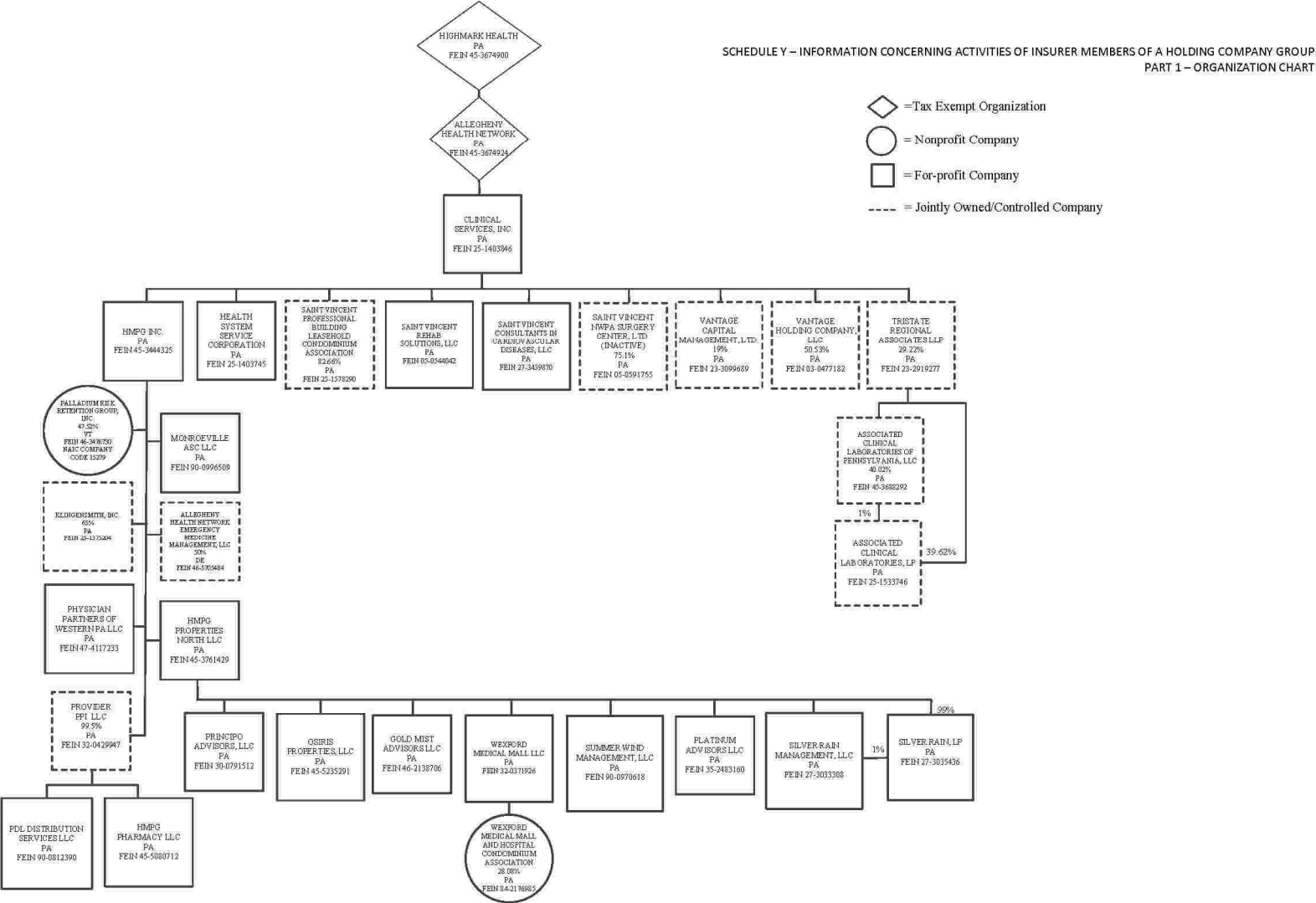
**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

\* Highmark Health maintains control through ability to appoint the board of directors as sole member.

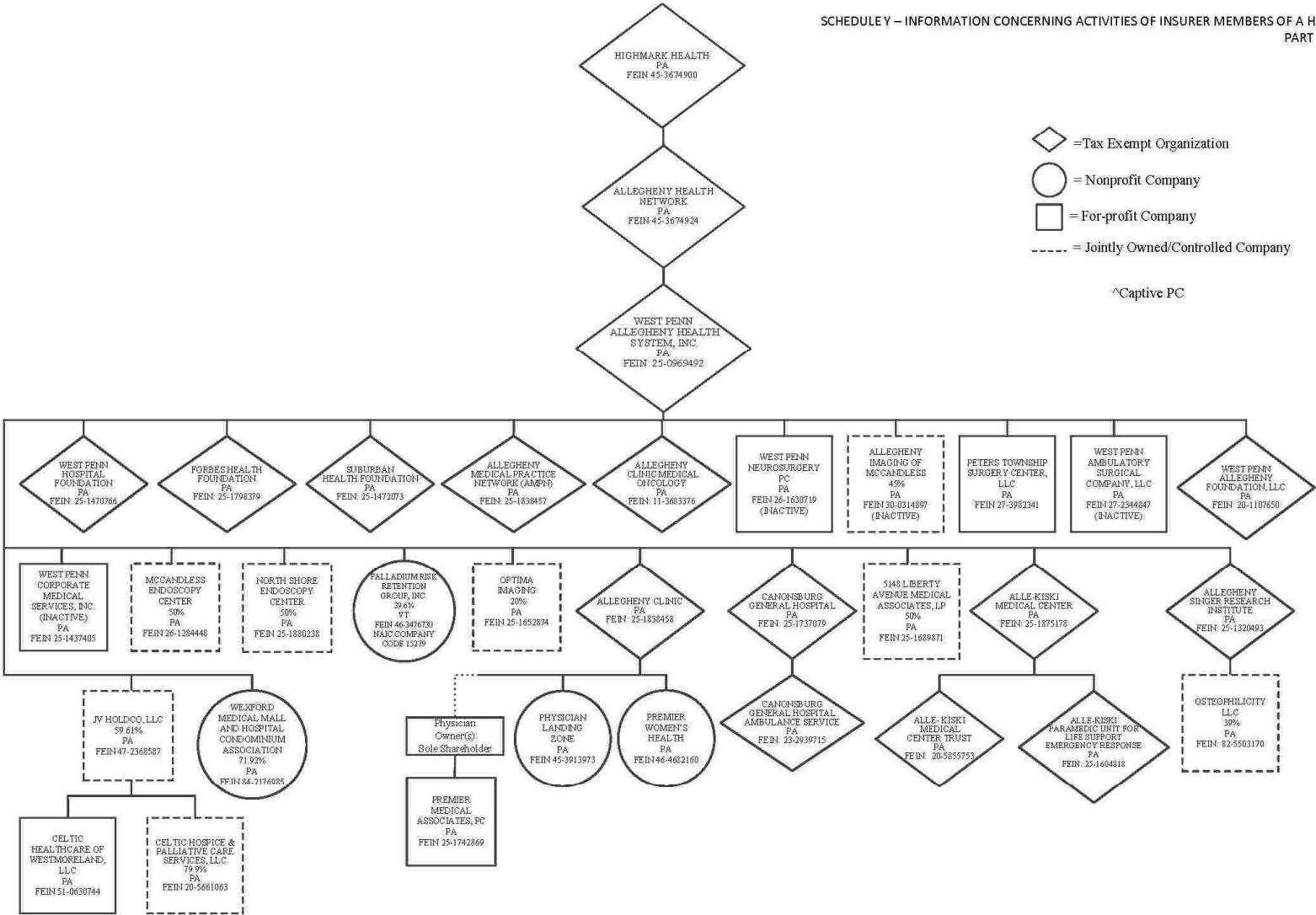




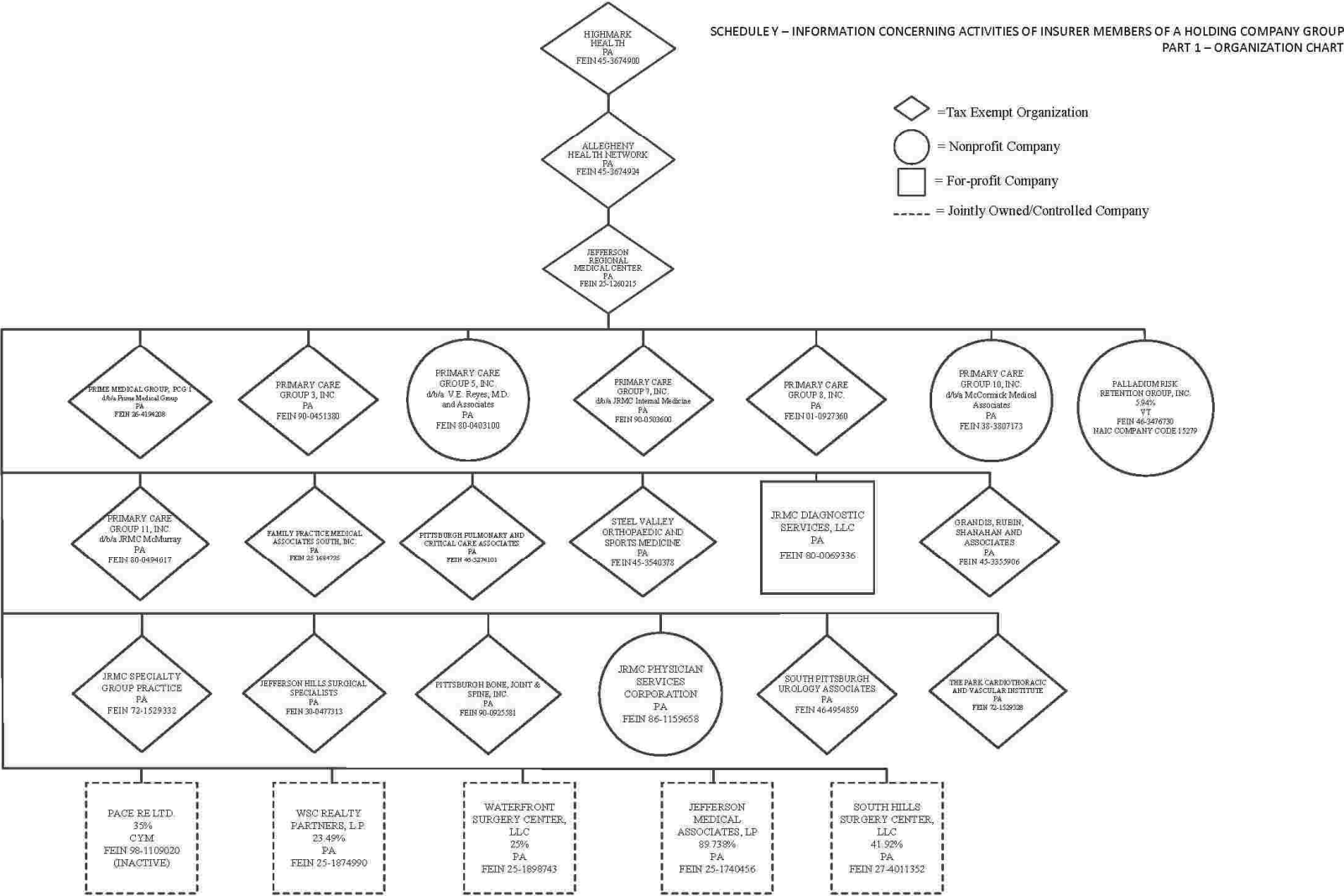
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER  
MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER  
MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER  
MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER  
MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART

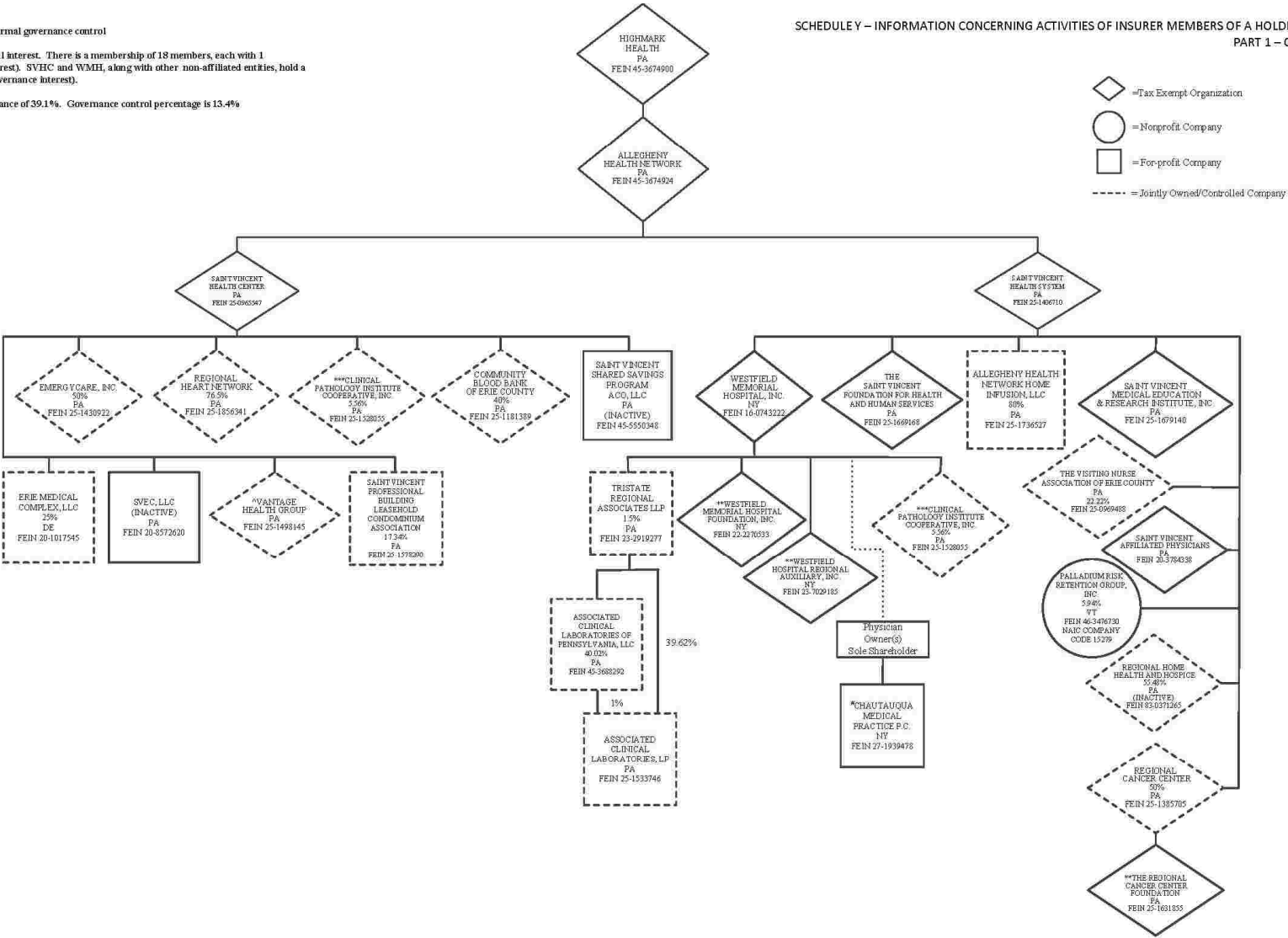
\*\*Support relationship; no formal governance control

\*\*\*SVHC has a 50% financial interest. There is a membership of 18 members, each with 1 membership unit (5.56% interest). SVHC and WMH, along with other non-affiliated entities, hold a 1/18 member interest (i.e., governance interest).

^SVHC maintains a fund balance of 39.1%. Governance control percentage is 13.4%

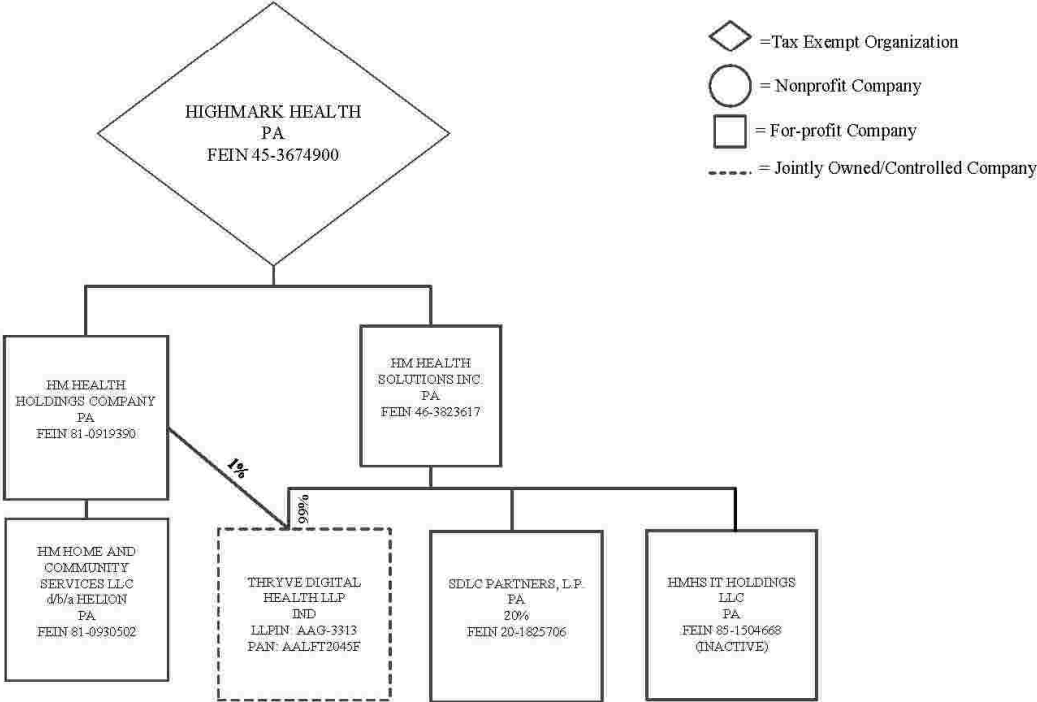
\*Captive PC

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATION CHART



**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATION CHART



**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Trinity Health Corporation (an Indiana nonprofit): FEIN: 35-1443425 (PARENT CORPORATION)	
Clivica, Inc. (DE Nonprofit Nonstock Corporation): FEIN: 83-1246927 (Trinity has no ownership or membership interest in Clivica – only voting rights and rights to appoint BOD members attendant to our position as a 'Governing Member.')	
Trinity Health Pharmacy Services, LLC: FEIN: 84-3130212 (100% Controlled by Immediate Parent)	
Trinity Assurance, LTD (Cayman Island) (100% Controlled by Trinity Health Corporation)	
Michigan Co-Tenancy Laboratory (Tenants in Common Co-Tenancy ): Trinity Health Corporation holds a 6.09% Tenants in Common interest: THC together with Its subsidiaries holds a 59.97% Tenants in Common interest	
Mercy Care Center: FEIN: 85-3904921 (100% Controlled by Trinity Health Corporation)	
Premier Health Holdings, LLC: FEIN: 47-2665226 (55.7% Controlled by Trinity Health Corporation: 23.8% by St. Louise Holdings, LLC; 20.50% by Franciscan Missionaries of Our Lady Health System, Inc.)	
Premier Health Consultants, LLC.: FEIN: 20-5972761 (100% Controlled by Premier Health Holdings, LLC)	
Total Urgent Care, LLC: FEIN: 84-3755134 (100% Controlled by Premier Health Consultants, LLC)	
Total Urgent Care and Occupational Medicine, L.L.C.: FEIN: 27-1618580 (100% Controlled by Premier Health Consultants, LLC)	
Lake Charles Urgent Care, L.L.C.: FEIN: 27-2272979 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by MMarque, Inc.)	
LCUC Family Physicians Urgent Care, LLC: FEIN: 81-3301419 (55% Controlled by Lake Charles Urgent Care, LLC; 45% Controlled by Family Physicians Urgent Care, LLC)	
Rapides After Hours Clinic, L.L.C.: FEIN : 45-1772383 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Rapides Healthcare System, L.L.C.)	
Lake Urgent Care Ascension, L.L.C.: FEIN : 35-2463092 (33.34% Controlled by Premier Health Consultants, LLC; 66.66% Controlled by Our Lady of the Lake (trade name of Our Lady of the Lake Hospital, Inc.))	
Lourdes After Hours, L.L.C. FEIN : 20-1367299 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Our Lady of the Lake Regional Medical Center (trade name of Our Lady of the Lake Hospital, Inc.))	
Convenient Care, L.L.C. FEIN: 72-1439481 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Our Lady of the Lake Regional Medical Center (trade name of Our Lady of the Lake Hospital, Inc.))	
St. Joseph's/Candler Urgent Care Centers, LLC: FEIN: 82-4301751 (49% Controlled by Premier Health Consultants, LLC; 51% Controlled by St. Joseph's/Candler Health System, Inc.)	
LCMC Urgent Care, LLC: FEIN: 30-0951534 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Crescent City Physicians, Inc.)	
St. Francis Urgent Care, L.L.C.: FEIN: 47-4013731 (50% Controlled by Premier Health Consultants, LLC; 50% Controlled by St. Francis Medical Center, Inc.)	
Seton Urgent Care, LLC: FEIN: 32-0511311 (This Captive Affiliated JV Entity is 33.33% Controlled by Premier Health Consultants, LLC; 33.33% Controlled HH/Killeen Health System, LLC; 33.33% Controlled by Keystone Administration Management, LLC)	
Freedom Urgent Care PLLC: FEIN: 27-1208614 (100% of Beneficial Ownership of Equity Interests held by Jay McKenna, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
CP Premier Urgent Care JV, LLC: FEIN: 32-0569183 (This Captive Affiliated JV Entity is 50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Cedar Park Health System. L.P.)	
Family First Express Care, PLLC: FEIN: 84-2395528: (100% of Beneficial Ownership of Equity Interests held by Kevin DiBenedetto, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
East Texas Urgent Care, LLC: FEIN: 84-3750645 (This Captive Affiliated JV Entity is 50% Controlled by Premier Health Consultants, LLC; 50% Controlled by East Texas Urgent Care Holdings, LLC)	
UT East Texas Urgent Care Centers, PLLC: FEIN: 85-0603102: (100% of Beneficial Ownership of Equity Interests held by Kevin DiBenedetto, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
Topeka Urgent Care, LLC: FEIN: 85-0536501 (This Captive Affiliated JV Entity is 50% Controlled by Premier Health Consultants, LLC; 50% Controlled by Topeka Health System, LLC)	
UK St. Francis Urgent Care, LLC: FEIN: 85-0732004: (100% of Beneficial Ownership of Equity Interests held by Kevin DiBenedetto, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
Trinity Health Of New England Urgent Care, PLLC: FEIN: 85-3033413: (100% of Beneficial Ownership of Equity Interests held by Kurt Myers, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
Holy Cross Health Urgent Care, Inc.: FEIN: 86-1216596: (100% of Beneficial Ownership of Equity Interests held by Kevin DiBenedetto, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
Mercy Health Urgent Care, PLLC: FEIN: 85-4260462: (100% of Beneficial Ownership of Equity Interests held by Kevin DiBenedetto, MD - This Captive Medical Practice is Managed by Premier Health Consultants, LLC)	
THPH Urgent Care, LLC: FEIN: 85-2464958 (51% Controlled by Trinity Health Corporation: 49% Controlled by Premier Health Consultants, LLC)	
THPH Of New England, LLC: FEIN: 85-1888365 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
THPH of Ft. Lauderdale, LLC: FEIN: 85-4185977 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
Holy Cross Urgent Care, LLC: FEIN: 85-4026585 (This Captive Medical Practice is 100% Controlled by THPH Urgent Care, LLC and Managed by Premier Health Consultants, LLC)	
THPH of Columbus, LLC: FEIN: 85-4041862 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
Mount Carmel Urgent Care, LLC: FEIN: 85-3883823 (This Captive Medical Practice is 100% Controlled by THPH Urgent Care, LLC and Managed by Premier Health Consultants, LLC)	
THPH of Athens, LLC: FEIN: 86-2848438 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
Saint Mary's Health Care System Urgent Care, LLC: FEIN: 86-2944408 (This Captive Medical Practice is 100% Controlled by THPH Urgent Care, LLC and Managed by Premier Health Consultants LLC)	
THPH of Maryland, LLC: FEIN: 86-2380369 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
THPH of West Michigan, LLC: FEIN: 85-4334405 (This Captive Affiliated JV Entity is 100% Controlled by THPH Urgent Care, LLC)	
<u>Mount Carmel Health System (Ohio): FEIN: 31-1439334 (100% Controlled by Trinity Health Corporation)</u>	
Mount Carmel East (dba of Mount Carmel Health System): FEIN: 31-1439334 (100% Controlled by Immediate Parent	
Mount Carmel St. Ann's (dba of Mount Carmel Health System): FEIN: 31-1439334 (100% Controlled by Immediate Parent	
Mount Carmel New Albany Surgical Hospital (dba of Mount Carmel Health System): FEIN: 31-1439334 (100% Controlled by Immediate Parent	
Mount Carmel Grove City (dba of Mount Carmel Health System): FEIN: 31-1439334 (100% Controlled by Immediate Parent)	
Mount Carmel Health System Foundation: FEIN: 31-1113966 (100% Controlled by Immediate Parent	
Mount Carmel Health Plan, Inc. (HMO): FEIN: 31-1471229 (100% Controlled by Immediate Parent	
Mount Carmel Health Plan of Idaho, Inc.: FEIN: 83-1422704 (100% Controlled by Immediate Parent	
Mount Carmel Health Plan of New York, Inc.: FEIN: 83-3278543 (100% Controlled by Immediate Parent	
Mount Carmel Health Insurance Company (PPO): FEIN: 25-1912781 (100% Controlled by Immediate Parent)	
Mount Carmel College of Nursing: FEIN: 31-1308555 (100% Controlled by Immediate Parent	
Patient Transport Services of Columbus LLC dba Columbus Connection: FEIN: 26-4601285 (50% Controlled by Immediate Parent	
OSU/Mount Carmel Health Alliance: FEIN: 31-1654603 (50% Controlled by Immediate Parent	
Madison County Community Hospital: FEIN: 31-1657206 (40% Controlled by Immediate Parent)	
Diley Ridge Medical Center: FEIN: 34-2032340 (70% Controlled by Immediate Parent)	
Mount Carmel Health Partners, LLC: FEIN: 47-1139205 (100% Controlled by Immediate Parent	
Central Ohio Medical Textiles: FEIN: 38-3643188 (50% Controlled by Immediate Parent	
SA MOB III LLC: FEIN: 20-1218559 (Mount Carmel Health System holds a 38.14% interest: Mount Carmel HealthProviders, Inc. holds a 6.27% interest	
Mount Carmel HealthProviders, Inc. dba Mount Carmel Medical Group: FEIN: 31-1382442 (100% Controlled by Immediate Parent	
Note: Entity is also listed above as MCHS also holds a controlling interest %: SA MOB III LLC: FEIN: 20-1218559 (Mount Carmel Health System holds a 38.14% interest: Mount Carmel HealthProviders, Inc. holds a 6.27% intere	
Mount Carmel HealthProviders Two, LLC: FEIN: 20-1983271 (100% Controlled by Immediate Parent	
Mount Carmel Health Providers III, LLC: FEIN: 20-4145781 (100% Controlled by Immediate Parent	
Big Run Medical Office Building Limited Partnership: FEIN: 31-1608125 (76.92% Controlled by Immediate Parent	
MCHS Big Run Condominium Association: FEIN: 31-1571567 (50% Controlled by Immediate Parent)	
Taylor Station Surgical Center, LTD: FEIN: 31-1459910 (40% Controlled by Immediate Parent)	
Columbus Cyberknife, LLC: FEIN: 27-0865251 (35% Controlled by Immediate Parent)	
New Albany Surgery Center, LLC: FEIN: 45-1617821 (35% Controlled by Immediate Parent)	
MCE MOB IV Limited Partnership: FEIN: 42-1544707 (49.63% Controlled by Immediate Parent)	
St Ann's Medical Office Building II Limited Partnership: FEIN: 31-1603660 (46.75% Controlled by Immediate Parent)	
Mount Carmel East Professional Office Building III Limited Partnership: FEIN: 31-1369473 (27.5% Controlled by Immediate Parent)	

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Medilucent MOB I Limited Partnership: FEIN: 20-4913370 (25% Controlled by Immediate Parent)  
Eastwind Surgical, LLC: FEIN: 90-0739342 (30.77841% Controlled by Immediate Parent)  
Health Collaborative of Central Ohio, LLC: FEIN: 46-5603895 (100% Controlled by Immediate Parent)  
Encompass Health Rehabilitation Hospital of Westerville, LLC dba Mount Carmel Rehabilitation Hospital, an Affiliate of Encompass Health: FEIN: 47-4200156 (20.4% Controlling Interest held by Immediate Parent)  
Orange ASC, Ltd.: FEIN: (50% Controlled by Immediate Parent)  
Holy Cross Health, Inc. (Maryland): FEIN: 52-0738041 (100% Controlled by Trinity Health Corporation)  
Holy Cross Hospital (dba of Holy Cross Health, Inc.): FEIN: 52-0738041 (100% Controlled by Immediate Parent)  
Holy Cross Germantown Hospital (dba of Holy Cross Health, Inc.): FEIN: 52-0738041 (100% Controlled by Immediate Parent)  
Holy Cross Health Network (dba of Holy Cross Health, Inc.): FEIN: 52-0738041 (100% Controlled by Immediate Parent)  
Maryland Care Group, Inc.: FEIN: 52-1815313 (100% Controlled by Immediate Parent)  
Holy Cross Health Foundation, Inc.: FEIN: 20-8428450 (100% Controlled by Immediate Parent)  
Chesapeake Potomac Regional Cancer Center, LLC: FEIN: 20-3762277 (20% Controlled by Immediate Parent)  
Doctors' Regional Cancer Center, LLC: FEIN: 20-8889327 (20% Controlled by Immediate Parent)  
Maryland Care, Inc. d/b/a Maryland Physician Care MCO: FEIN: 22-3476498 (25% Controlled by Immediate Parent)  
Maryland Care Management, Inc. dba Maryland Physician Care MCO: FEIN: 20-4771530 (25% Controlled by Immediate Parent)  
The Blue Door Pharmacy, LLC: FEIN: 47-3638756 (25% Controlled by Immediate Parent)  
Holy Cross Health Centers, LLC: FEIN: 82-2340203 (100% Controlled by Immediate Parent)  
Holy Cross Health Partners, LLC: FEIN: 82-2391212(100% Controlled by Immediate Parent)  
Mercy Health Network, Inc. d/b/a MercyOne FEIN: 42-1478417 (50% Controlled by Trinity Health Corporation; 50% Controlled by CommonSpirit Health (Catholic Health Initiatives) [Iowa/Nebraska  
Wellmark Value Health Plan, Inc.: FEIN: 42-1264647 (50% Controlled by Mercy Health Network, Inc.  
Mercy Community Hospital Group, LLC: FEIN: 35-2473948 (100% Controlled by Immediate Parent)  
Central Community Hospital dba MercyOne Elkader Medical Center: FEIN: 42-0818642 (100% Controlled by Immediate Parent)  
Wheaton Franciscan Healthcare - Iowa, Inc. dba MercyOne Northeast Iowa: FEIN: 42-1177001 (100% Controlled by MHN)  
N.E. Iowa Real Estate Investments, Ltd.: FEIN: 42-1207432 (100% Controlled by Immediate Parent)  
Mercy Hospital of Franciscan Sisters, Inc. dba MercyOne Oelwein Medical Center: FEIN: 42-1178403 (100% Controlled by Immediate Parent)  
Covenant Medical Center, Inc. dba MercyOne Waterloo Medical Center: FEIN: 42-1264647 (100% Controlled by Immediate Parent)  
Covenant Foundation, Inc. dba MercyOne Waterloo Foundation: FEIN: 42-1295784 (100% Controlled by Immediate Parent)  
Sartori Memorial Hospital, Inc. dba MercyOne Cedar Falls Medical Center: FEIN: 42-0758901 (100% Controlled by Immediate Parent)  
Sartori Health Care Foundation, Inc. dba MercyOne Cedar Falls Foundation: FEIN: 42-1240996 (100% Controlled by Immediate Parent)  
Mercy Health Services - Iowa, Corp. (Iowa/Nebraska): FEIN: 31-1373080 (100% Controlled by Trinity Health Corporation: Subject to Mercy Health Network, Inc. JOA)  
Mercy Medical Center - Clinton, Inc. dba MercyOne Clinton Medical Center: FEIN: 42-1336618 (100% Controlled by Immediate Parent)  
Mercy Healthcare Foundation-Clinton: FEIN: 42-1316126 (Entity is independent of and not controlled by Mercy Medical Center - Clinton, Inc. dba MercyOne Clinton Medical Center)  
Mercy-Clinton Anesthesia Group, LLC: FEIN: 46-1906752 (100% Controlled by Immediate Parent)  
Clinton Imaging Services, L.L.C.: FEIN: 41-2044739 (65% Controlled by Immediate Parent)  
MercyOne Dyersville Medical Center (dba of Mercy Health Services - Iowa, Corp.): FEIN: 31-1373080)  
MercyOne Dubuque Medical Center (dba of Mercy Health Services - Iowa, Corp.): FEIN: 31-1373080)  
Dubuque Mercy Health Foundation, Inc. dba MercyOne Dubuque Foundation: FEIN: 26-2227941 (100% Controlled by Immediate Parent) Dyersville Health Foundation, Inc. dba MercyOne  
Dyersville Foundation: FEIN: 20-5383271 (100% Controlled by Immediate Parent)  
United Clinical Laboratories, Inc.: FEIN: 42-1268486 (33.33% Controlled by Immediate Parent)  
Preferred Health Choices, L.L.C.: FEIN: 90-0139311 (50% Controlled by Immediate Parent)  
Health Management Services, L.L.C. : FEIN: 46-1861361 (50% Controlled by MercyOne Dubuque Medical Center (dba of Mercy Health Services - Iowa Corp.: FEIN: 31-1373080)  
Tri-State Surgery Center, L.L.C.: FEIN: 91-1900559 (100% Controlled by Immediate Parent)  
Medical Associates/Mercy Family Care Network, L.L.C.: FEIN: 42-1478444 (100% Controlled by Immediate Parent)  
Tri-State Occupational Health, L.L.C. : FEIN: 90-1039315 (100% Controlled by Immediate Parent)  
MercyOne New Hampton Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Hospice of North Iowa dba MercyOne North Iowa Hospice: FEIN: 42-1173708 (100% Controlled by Immediate Parent)  
Mercy Medical Center Foundation - North Iowa dba MercyOne North Iowa Foundation: FEIN: 42-1229151 (100% Controlled by Immediate Parent)  
Forest Park Imaging, LLC: FEIN: 13-4365966 (52.89% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Froesenius Kidney Center North Iowa: FEIN: 81-2470407 (20% Controlled by Immediate Parent)  
Surgical Center Building Associates, LLC: FEIN: 31-1373080 (35% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
YMCA and Rehabilitation Center: FEIN: 42-1491491 (50% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Magnetic Resonance Services, LLC: FEIN: 42-1328388 (49% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Mason City Ambulatory Surgery Center, LLC dba Mason City Surgery Center: FEIN: 20-1960348 (51% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Mercy Heart Center Outpatient Services, LLC: FEIN: 13-4237594 (51% Controlled by MercyOne North Iowa Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Iowa Falls Clinic: FEIN: 42-1467712 (50% Controlled by MercyOne North Iowa Medical Center(dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
MercyOne Siouxland Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Hawarden Regional Healthcare Clinics, L.L.C.: FEIN: 20-1444339 (50% Controlled by MercyOne Siouxland Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Mercy Medical Services, Inc. dba MercyOne Medical Group - Siouxland: FEIN: 42-1283849 (100% Controlled by Immediate Parent)  
Mercy Medical Center - Sioux City Foundation dba MercyOne Siouxland Foundation: FEIN: 14-1880022 (100% Controlled by Immediate Parent)  
Health, Incorporated: FEIN: 31-1712115 (50% Controlled by MercyOne Siouxland Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Siouxland Paramedics, Inc.: FEIN: 42-1185707 (100% Controlled by Immediate Parent)  
Siouxland Regional Cancer Center dba June E. Nylen Cancer Center: FEIN: 42-1411233 (100% Controlled by Immediate Parent)  
Hospice of Siouxland: FEIN: 38-3320710 (100% Controlled by Immediate Parent)  
Mercy/USP Health Ventures, L.L.C.: FEIN: 47-1290300 (55.71% Controlled by MercyOne Siouxland Medical Center (dba of Mercy Health Services - Iowa, Corp.: FEIN: 31-1373080)  
Siouxland Surgery Center Limited Liability Partnership: FEIN: 46-0423353 (55.54% Controlled by Immediate Parent)  
Oakland Mercy Hospital dba MercyOne Oakland Medical Center: FEIN: 20-8072234 (100% Controlled by Immediate Parent)  
Oakland Mercy Hospital Foundation dba MercyOne Oakland Foundation: FEIN: 31-1678345 (100% Controlled by Immediate Parent)  
Baum Harmon Mercy Hospital dba MercyOne Primghar Medical Center: FEIN: 42-1500277 (100% Controlled by Immediate Parent)  
Baum Harmon Mercy Hospital and Clinics Foundation dba MercyOne Primghar Foundation: FEIN: 26-2973307 (100% Controlled by Immediate Parent)

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

<u>Saint Joseph Regional Medical Center, Inc. [Indiana]: FEIN: 35-1568821 (100% Controlled by Trinity Health</u>	
The Foundation of Saint Joseph Regional Medical Center, Inc.: FEIN: 35-1654543 (100% Controlled by Immediate Parent	
Alick's Home Medical Equipment, Inc.: FEIN: 35-1548294 (13.50% Controlled by Immediate Parent	
Saint Joseph Regional Medical Center - Health Insurance Services, LLC: FEIN: 46-2814097 (100% Controlled by Immediate Parent)	
Northern Indiana Magnetic Resonance Center, LLP: FEIN: 35-1832912 (25% Controlled by Immediate Parent)	
Select Health Network, Inc.: FEIN: 35-1932210 (50% Controlled by Immediate Parent)	
Michiana Heath Information Network, LLC: FEIN: 35-2050128 (33.33% Controlled by Immediate Parent)	
Edison Lakes, Inc.: FEIN: 35-1783309 (23.84% Controlled by Immediate Parent)	
Edison Lakes ROC, LLC : FEIN: 27-1778694 (30% Controlled by Immediate Parent)	
Saint Joseph Regional Medical Center - South Bend Campus Inc.: FEIN: 35-0868157 (100% Controlled by Immediate Parent	
Saint Joseph Regional Medical Center - Plymouth Campus, Inc.: FEIN: 35-1142669 (100% Controlled by Immediate Parent	
SIRMC Holdings, Inc.: FEIN: 47-4763735 (100% Controlled by Immediate Parent	
Michiana Urgent Care Management, LLC: FEIN: 47-4279865 (40% Controlled by Immediate Parent	
<u>Saint Alphonsus Health System, Inc. [Idaho/Oregon]: FEIN: 27-1929502 (100% Controlled by Trinity Health</u>	
Saint Alphonsus Medical Center - Nampa, Inc.: FEIN: 82-0200896 (100% Controlled by Immediate Parent	
MedNow, Inc.: FEIN: 82-0389927 (100% Controlled by Immediate Parent	
Saint Alphonsus Medical Center - Nampa Health Foundation, Inc.: FEIN: 26-1737256 (100% Controlled by Immediate Parent	
Saint Alphonsus Regional Medical Center, Inc.: FEIN: 82-0200895 (100% Controlled by Immediate Parent	
Saint Alphonsus Regional Medical Center Auxillary, Inc.: FEIN: 82-6009027 (100% Controlled by Immediate Parent	
Life Flight Network, LLC: FEIN: 20-5016802 (25% Controlled by Immediate Parent)	
Saint Alphonsus Diversified Care, Inc.: FEIN: 94-3028978 (100% Controlled by Immediate Parent	
Entity was Administratively dissolved 12/27/2019 in Idaho: we are waiting to hear from RHM as to Final disposition or Reinstatement: Emergency Medical Plazas of Idaho, LLC: FEIN: 81-4098266 (50% Controlled by Immediate Parent	
Entity was Administratively dissolved 3/5/2019 in Idaho: we are waiting to hear from RHM as to Final Disposition or Reinstatement: EMP Idaho Nampa, LLC: FEIN: 36-4851679 (100% Controlled by Immediate Parent	
Entity was Administratively dissolved 3/5/2019 in Idaho: we are waiting to hear from RHM as to Final Disposition or Reinstatement: EMP Idaho Boise, LLC: FEIN: 35-2577088 (100% Controlled by Immediate Paren	
Entity was Administratively dissolved 3/5/2019 in Idaho: we are waiting to hear from RHM as to Final Disposition or Reinstatement: EMP Idaho Eagle, LLC: FEIN: (100% Controlled by Immediate Pare	
Entity was Administratively dissolved 3/5/2019 in Idaho: we are waiting to hear from RHM as to Final Disposition or Reinstatement: EMP Idaho Twin Falls, LLC: FEIN: (100% Controlled by Immediate Paren	
Saint Alphonsus Regional Rehabilitation Hospital, LLC: FEIN: 63-0860407 (49% Controlled by Saint Alphonsus Diversified Care, Inc.	
Intermountain Medical Imaging, LLC: FEIN: 82-0514422 (50% Controlled by Immediate Parent	
Saint Alphonsus Caldwell Cancer Treatment Center, L.L.C.: FEIN: 82-0526861 (80% Controlled by Immediate Parent)	
Saint Alphonsus Home Health and Hospice, LLC: FEIN: 20-3942050 (50% Controlled by Immediate Parent	
Saint Alphonsus Professional Medical Services LLC: FEIN: 46-0500210 (100% Controlled by Immediate Parent	
Saint Alphonsus Specialty Services, Inc.: FEIN: 26-0553931 (100% Controlled by Immediate Parent	
Saint Alphonsus Medical Center - Ontario, Inc.: FEIN: 27-1789847 (100% Controlled by Immediate Parent	
Saint Alphonsus Medical Center Ontario Volunteers: FEIN: 94-3059469 (100% Controlled by Immediate Parent	
Saint Alphonsus Foundation - Ontario, Inc. : FEIN: 20-2683560 (100% Controlled by Immediate Parent	
Saint Alphonsus Medical Center - Baker City, Inc.: FEIN: 27-1790052 (100% Controlled by Immediate Parent	
Saint Alphonsus Foundation - Baker City, Inc.: FEIN: 94-3164869 (100% Controlled by Immediate Parent	
Eastern Oregon Coordinated Care Organization, LLC: FEIN: (10% Controlled by Saint Alphonsus Health System, Inc.	
Saint Alphonsus Health Alliance, Inc.: FEIN: 82-0524649 (100% Controlled by Saint Alphonsus Health System, Inc.	
Health Alliance Integrated Care, LLC: FEIN: 371755768 (100% Controlled by Saint Alphonsus Health System, Inc.	
Summit Health Plan, Inc.: OR INSURANCE DIVISION CORPORATION FORMED 2/14/2020: FEIN: 83-3295864 (10% Controlled by SAHS	
<u>Trinity Health - Michigan [Michigan]: FEIN: 38-2113393 (100% Controlled by Trinity Health Corporation)</u>	
THRE Services LLC: FEIN: 45-2603654 (100% Controlled by Immediate Parent	
Joint Venture Hospital Laboratories, L.L.C.: FEIN: (16.67% Controlled by Trinity Health-Michigan	
Tri-Hospital Emergency Medical Services Corporation: FEIN: 38-2485700 (33.33% Controlled by Immediate Parent	
Saint Joseph Mercy Health System (Division of and dba for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
St. Joseph Mercy Chelsea, Inc. dba St. Joseph Mercy Chelsea Hospital; dba Chelsea Community Hospital, A Member of The Saint Joseph Mercy Health System: dba Chelseacare: dba Chelseacare Pharmacy: dba SRSLY: dba St. Joseph Mercy Chelsea-Cancer Center (New MI Corporation, Incorporated 1.31.18): FEIN: 82- 4757260 (51% Controlled by Immediate Parent: 49% Controlled by University of Michigan)	
St. Joseph Mercy Hospital, Ann Arbor: (Division of and dba for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
Saint Joseph Mercy Livingston Hospital (Division of and dba for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
St. Mary Mercy Hospital: Saint Mary Mercy Livonia (Division of and dbas for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
St. Joseph Mercy Oakland (Division of and dba for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
Mercy Health Saint Mary's (Division of and dba for Trinity Health - Michigan): FEIN: 38-2113393 (100% Controlled by Immediate Parent	
Saint Mary's Foundation: FEIN: 38-1779602 (100% Controlled by Immediate Parent	
Mercy Hospital Cadillac Foundation: FEIN: 20-3357131 (100% Controlled by Immediate Parent	
Metropolitan Detroit Area Hospital Services, Inc.: FEIN: 38-1958953 (A Michigan Non-Profit Co-Op): Members include Trinity Health- Michigan d/b/a Saint Joseph Mercy	
Health System (33.30% Interest): Henry Ford Health System, Inc.: and University of Michigan	
Health Park Central, L.L.C.: FEIN: 38-3006501 (10.55% Controlled by Immediate Parent	
Together Health Network, L.L.C.: FEIN: 47-1573173 ; (47.5% Controlled by Immediate Parent	
Sixty-Fourth Street, LLC: FEIN: FEIN: 20-2443646 (53.94% Controlled by Immediate Parent)	
Washtenaw/Livingston Medical Control Corporation : FEIN: 38-2843970 (52.5% Controlled by Immediate Parent	
Mission Health Corporation : FEIN: 38-3181557 (50% Controlled by Immediate Parent)	
Center for Digestive Care, LLC: FEIN: 03-0447062 (51% Controlled by Immediate Parent	
Huron Arbor Corporation: FEIN: 38-2475644 (100% Controlled by Immediate Parent	
Parkprop, LLC:FEIN: 27-3074736 (100% Controlled by Immediate Parent)	
Probability Therapy Services: FEIN: 20-2020239 (100% Controlled by Immediate Parent	
Advantage Health/ Saint Mary's Medical Group d/b/a Mercy Health Physician Partners: FEIN: 27-2491974 (100% Controlled by Immediate Parent	
Advent Rehabilitation LLC: FEIN: 38-3306673 (50% Controlled by Immediate Parent	
Life Circles: FEIN: 26-0170498 (25.5% Controlled by Immediate Parent	
Woodland Imaging Center, LLC dba Avant Imaging : FEIN: 76-0820959 (51% Controlled by Immediate Parent):	
IHA Health Services Corporation : FEIN: 38-3316559 (100% Controlled by Immediate Parent)	



**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Huron Valley CT Center, LLC; FEIN:	(100% Controlled by Immediate Parent
IHA Affiliation Corp.; FEIN: 38-3188895	(100% Controlled by Immediate Parent
McAuley Health Partners ACO, LLC; FEIN: 83-0959900	(100% Controlled by Immediate Parent
IHA Olma Primary Care Risk, LLC; FEIN:	(100% Controlled by IHA Health Services Corporation
IHA Olma Primary Non Risk, LLC; FEIN:	(100% Controlled by IHA Health Services Corporation
IHA Olma Specialty Services, LLC; FEIN:	(100% Controlled by IHA Health Services Corporation
Catherine McAuley Health Services Corporation; FEIN: 38-2507173	(100% Controlled by Immediate Parent
The Waterford Surgical Center, LLC; FEIN: 27-1110813	(33.02% Controlled by Immediate Parent
Physician Direct Accountable Care Organization LLC; FEIN: 45-5589234	(25% Controlled by Immediate Parent
Oakland Health Alliance, LLC; FEIN: 82-2021072	(100% Controlled by Immediate Parent
Southeast Michigan Clinical Network, LLC; FEIN: 47-3856789	(100% Controlled by Immediate Parent
Frances Warde Medical Laboratory (Trinity Health - Michigan Partnership); FEIN: 38-2648446	(66.6% Controlled by Immediate Parent
West Michigan Shared Hospital Laundry; FEIN: 38-2026913	(17.36% Controlled by Mercy Health Partners; 10.70% Interest Held by Trinity Health - Michigan
Western Michigan Associates; FEIN: 38-2960292	(14.06% Controlled by Mercy Health Partners; 10.70% Controlled by Trinity Health - Michigan
Northern Michigan Supply Alliance, L.L.C.; FEIN: 38-3453378	(50% Controlled by Immediate Parent
<u>Mercy Health Partners; FEIN: 38-2589966 (100% Controlled by Immediate Parent)</u>	
Mercy Health Mercy Campus (dba of Mercy Health Partners); FEIN: 38-2589966	(100% Controlled by Immediate Parent
Mercy Health Hackley Campus (dba of Mercy Health Partners); FEIN: 38-2589966	(100% Controlled by Immediate Parent
Mercy Health Lakeshore Campus (dba of Mercy Health Partners); FEIN: 38-2589966	(100% Controlled by Immediate Parent
Muskegon Community Health Project; FEIN: 91-1932918	(100% Controlled by Immediate Parent
Muskegon SC, LLC; FEIN: 20-3244346	(34.88% Controlled by Immediate Parent
West Shore Professional Building Condominium Association; FEIN: 38-2700166	(96% Controlled by Immediate Parent
Professional Med Team; FEIN: 38-2638284	(100% Controlled by Immediate Parent
Mobile Health Resources, L.L.C.; FEIN: 38-3285823	(14.3% Controlled by Immediate Parent
Mercy Health Clinically Integrated Network, LLC dba Affinia Health Network; FEIN: 47-2070753	(100% Controlled by Immediate Parent
Affinia Physician Network, LLC; FEIN: 82-2810979	(100% Controlled by Immediate Parent
Western Michigan Associates; FEIN: 38-2960292	(14.06% Controlled by Mercy Health Partners; 10.70% Controlled by Trinity Health - Michigan
West Michigan Shared Hospital Laundry; FEIN: 38-2026913	(17.36% Controlled by Mercy Health Partners; 10.70% Interest Held by Trinity Health - Michigan
Hackley Health Ventures, Inc.; FEIN: 38-2589959	(100% Controlled by Immediate Parent
Hackley Professional Pharmacy, Inc. dba Mercy Health Partners-Pharmacy Inc.; dba Mercy Health Pharmacy - Lakes; dba Mercy Health Pharmacy - North Muskegon; FEIN: 38-2447870	(100% Controlled by Immediate Parent
Workplace Health of Grand Haven, Inc.; FEIN: 38-3112035	(80% Controlled by Immediate Parent
<u>Loyola University Health System (Illinois); FEIN: 36-3342448 (100% Controlled by Trinity Health Corporation)</u>	
Loyola Physician Partners ACO, LLC; FEIN: 38-3930598	(100% Controlled by Immediate Parent
Gottlieb Memorial Hospital; FEIN: 36-2379649	(100% Controlled by Immediate Parent
Gottlieb/West Towns PHO, Inc.; FEIN: 36-4006263	(50% Controlled by Immediate Parent)
Gottlieb Community Health Services Corporation dba MacNeal Hospital; FEIN: 36-3332852	(100% Controlled by Immediate Parent
L. Medicine Labs, LLC; FEIN: 37-1878743	(100% Controlled by Immediate Parent
Primary Care Physicians Center, L.L.C.; FEIN: 36-4038505	(94% Controlled by GCHSC
Chicago Health System ACO, LLC (Inactive operationally since 2019 due to termination of Medicare Shared Savings Program but remains active with the IL SOS); FEIN: 45-3020116	(100% Controlled by GCHSC)
MacNeal Health Providers, Inc. dba Chicago Health System, Inc.; FEIN: 36-3361297	(100% Controlled by GCHSC
NOMC/MacNeal Radiation Therapy Joint Venture, L.L.C.; FEIN: 20-0812600	(45% Controlled by GCHSC)
Loyola University Medical Center; FEIN: 36-4015560	(100% Controlled by Immediate Parent
Loyola Ambulatory Centers, LLC; FEIN: 36-4321058	(100% Controlled by Immediate Parent
Loyola Ambulatory Surgery Center at Oakbrook, L.P.; FEIN: 36-4119522	(49% Controlled by Immediate Parent)
RMLHP Corporation; FEIN: 36-4160869	(50% Controlled by Immediate Parent)
Loyola Medicine Transport LLC; FEIN 47-4147171	(100% Controlled by Immediate Parent)
Loyola Medical Group, LLC; FEIN: 32-0552496	(100% Controlled by LUMC)
South Campus Partners, Inc.; FEIN: 32-0517854	(49% Controlled by LUMC)
Palos Health Surgery Center, LLC; FEIN: 35-2634975	(48.5% Controlled by Loyola University Medical Center
Loyola Physician Partners, LLC; FEIN: 37-1756257	(100% Controlled by Immediate Parent
<u>Mercy Health System of Chicago (Illinois); FEIN: 36-3163327 (100% Controlled by Trinity Health)</u>	
Mercy Hospital and Medical Center; FEIN: 36-2170152	(100% Controlled by Immediate Parent
Mercy Foundation, Inc. ; FEIN:36-3227350	(100% Controlled by Immediate Parent)
<u>Saint Agnes Medical Center (California); FEIN: 94-1437713 (100% Controlled by Trinity Health)</u>	
Saint Agnes Medical Foundation dba Saint Agnes Care; Saint Agnes Care Center-Northwest; and Saint Agnes Urgent Care; FEIN: 94-2839324	(100% Controlled by Immediate Parent
Saint Agnes Medical Providers, Inc.; FEIN: 46-1465093	(Sole Shareholder licensed physicians appointed by SAMC - Not Controlled by SAMC)
Central Valley Health Plan, Inc.; FEIN: 61-1846844	(100% Controlled by Immediate Parent
California Healthcare Capital Partners, LLC; FEIN: 81-2937390	(33% Controlled by Immediate Parent
Saint Agnes/USP Surgery Centers, LLC; FEIN: 36-4896811	(50.1% Controlled by Saint Agnes Medical Center
Renaissance Surgery Center, LLC; FEIN: 20-5977652	(Saint Agnes/USP Surgery Centers, LLC acquired 51% membership interest 9/1/2018
Saint Agnes/Dignity/USP Surgery Centers, L.L.C.; FEIN: 84-3522377	(50.1% Controlling Interest held by Saint Agnes Medical Center
Central California Healthcare Holdings, LLC; FEIN: 47-4538833	(71.35% Controlling Interest held by Saint Agnes/Dignity/USP Surgery Centers, L.L.C.)
Sierra Pacific Surgery Center, LLC; FEIN: 95-4810282	(100% Controlled by Central California Healthcare Holdings, LLC
FSC Hospital, LLC ; FEIN: 77-0528014	(100% Controlled by Central California Healthcare Holdings, LLC
Fresno Surgery Center, L.P.; FEIN: 77-0011624	(75.102212% Controlling Interest held by FSC Hospital, LLC; 24.897788% held by Central California Healthcare Holdings, LLC)
<u>Mercy Medical, A Corporation (Alabama); FEIN: 63-6002215 (100% Controlled by Trinity Health)</u>	
<u>Pittsburgh Mercy Health System, Inc. (Pennsylvania); FEIN: 25-1464211 (100% Controlled by Trinity Health)</u>	
Mercy Life Center Corporation; FEIN: 25-1604115	(100% Controlled by Immediate Parent)
Living Independence for the Elderly - Pittsburgh, Inc. d/b/a LIFE Pittsburgh; FEIN: 25-1815436	(48% Controlled by Immediate Parent
McAuley Ministries; FEIN: 94-3436142	(100% Controlled by Immediate Parent

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Bethlehem Haven of Pittsburgh, Inc.:	FEIN: 25-1436685 (100% Controlled by Immediate Parent
BH Venture Mgmt LLC:	FEIN: 83-2416426 (100% Controlled by Bethlehem Haven of Pittsburgh, Inc.
BH Venture One LP:	FEIN: 38-4098074 (99% Controlled by Limited Partner Bethlehem Haven of Pittsburgh, Inc. and 1% Controlled by General Partner BH Venture Mgmt, LLC)
<u>Trinity Continuing Care Services (multistate operation - incorporated in Michigan): FEIN: 38-2559656 (100% Controlled by Trinity Health Corporation</u>	
Trinity Senior Services Management, Inc.:	FEIN: 37-1572595 (100% Controlled by Trinity Continuing Care Services/Trinity Health
Holy Cross CareNet, Inc. (Operating Assets Sold 8.31.2018 but Entity Remains):	FEIN: 52-1945054 (100% Controlled by Immediate Parent
Mary Free Bed Sub-Acute Rehabilitation:	FEIN: 46-3971740 (50% Controlled by Immediate Parent)
Mercy Services for Aging Nonprofit Housing Corporation:	FEIN: 38-2719605(100% Controlled by Immediate Parent)
Trinity Continuing Care Services - Indiana, Inc.:	FEIN: 93-0907047 (100% Controlled by Immediate Parent
Saint Joseph's Tower Inc.:	FEIN: 31-1040468 (100% Controlled by Immediate Parent
Saint Joseph of the Pines, Inc.:	FEIN: 56-0694200 (100% Controlled by Immediate Parent
Mercy Community Health, Inc.:	FEIN: 06-1492707 (100% Controlled by Immediate Parent
Saint Mary Home, Incorporated:	FEIN: 06-0646843 (100% Controlled by Immediate Parent
McAuley Center, Incorporated:	FEIN: 06-1058086 (100% Controlled by Immediate Parent
Mount St. Joseph dba Mount Saint Joseph Residence and Rehabilitation:	FEIN: 01-0274998 (100% Controlled by Immediate Parent
Glacier Hills, Inc.:	FEIN: 38-1891500 (100% Controlled by Immediate Parent
Glacier Hills Foundation:	FEIN: 20-8072723 (100% Controlled by Immediate Parent
Trinity Continuing Care Services - Massachusetts dba Farren Care Center (PLEASE NOTE: PER THE FEBRUARY 2018 TRANSFER OF ASSETS, MEMBERSHIP AND SERVICES OF FARREN CARE CENTER, INC. (MA) TO TCCS - MA, FARREN CARE CENTER IS A DBA OF TCCS - MA; AND, AS THE FEIN FOR FARREN CARE CENTER, INC. (MA) WAS NOT TRANSFERRED, THIS SHELL ENTITY REMAINS WITH THONE): FEIN: 82-4005577 (100% Controlled by Immediate Parent)	
<u>Trinity Home Health Services (multistate operation - incorporated in Michigan): FEIN: 38-2621935 (100% Controlled by Trinity Health Corporation</u>	
ASSETS OF THIS ENTITY WERE SOLD 10.31.2017 BUT ENTITY REMAINS - THHS Oakland: FEIN: 38-3320699 (100% Controlled by Immediate Parent	
Hospice of Muskegon County, Inc.:	FEIN:38-2415247 (20% Controlled by Trinity Home Health Services)
Mercy General Health Partners, Amicare Homecare dba North Ottawa at Home:	FEIN: 38-3.321856 (100% Controlled by Immediate Parent
Saint Mary's Amicare Home Healthcare:	FEIN: 38-3320700 (100% Controlled by Immediate Parent
<u>Trinity Health PACE: FEIN: 47-3073124 (100% Controlled by Immediate Parent) (multistate operation - incorporated in Michigan</u>	
Saint Joseph PACE Inc.:	FEIN: 47-3129127 (100% Controlled by Immediate Parent
LIFE St. Joseph of the Pines, Inc.:	FEIN: 27-2159847 (100% Controlled by Immediate Parent
Trinity Health LIFE Pennsylvania Inc. dba Mercy LIFE - West Philadelphia :	FEIN: 47-5244984 (100% Controlled
Mercy LIFE of Alabama:	FEIN: 27-3163002 (100% Controlled by Immediate Parent
Mercy LIFE, Inc.:	FEIN: 45-3086711 (100% Controlled by Immediate Parent)
LIFE at Lourdes Inc. dba Trinity Health LIFE New Jersey:	FEIN: 26-1854750 (100% Controlled by Immediate Parent
<u>Trinity Health ACO, Inc.: FEIN: 47-3794666 (100% Controlled by Trinity Health</u>	
Trinity Integrated Care, LLC:	FEIN: 81-2772183 (100% Controlled by Immediate Parent
Trinity Accountable Care, LLC:	FEIN: 81-2780900 (100% Controlled by Immediate Parent
Trinity Accountable Care II, LLC:	FEIN: 84-2508775 (100% Controlled by Immediate Parent
<u>Trinity Health of the Mid-Atlantic Region (Effective 7.1.19 -formerly Mercy Health System of Southeastern Pennsylvania) [Pennsylvania]: FEIN: 23-2212638 (100% Controlled by Trinity Health</u>	
Mercy Health Foundation of Southeastern Pennsylvania:	FEIN: 23-2829864 (100% Controlled by Immediate Parent
Mercy Catholic Medical Center of Southeastern Pennsylvania:	FEIN: 23-1352191 (100% Controlled by Immediate Parent
Mercy Catholic Medical Center - Mercy Fitzgerald Campus (dba of Mercy Catholic Medical Center of Southeastern Pennsylvania):	FEIN: 23-1352191 (100% Controlled by Trinity Health of the Mid-Atlantic Region
Mercy Catholic Medical Center - Mercy Philadelphia Campus (dba of Mercy Catholic Medical Center of Southeastern Pennsylvania):	FEIN: 23-1352191 (100% Controlled by Trinity Health of the Mid-Atlantic Region
Mercy Suburban Hospital (Inactive - Assets Sold 2/1/2016 but entity remains):	FEIN: 23-1396763 (100% Controlled by Immediate Parent
Nazareth Hospital:	FEIN: 23-2794121 (100% Controlled by Immediate Parent
Nazareth Medical Office Building Associates, L.P.:	FEIN: 23-2388040 (63.85% Controlled by Immediate Parent
St. Agnes Continuing Care Center:	FEIN: 23-2840137 (100% Controlled by Immediate Parent
Mercy Accountable Care Network, LLC:	FEIN: 46-2774097 (100% Controlled by Immediate Parent
Mercy Accountable Care, LLC:	FEIN: 46-2774097 (100% Controlled by Immediate Parent
Mercy Health Plan:	FEIN: 22-2483605 (100% Controlled by Immediate Parent
Gateway Health LLC (50% Controlled by Immediate Parent):	FEIN: 25-1691945
Gateway Health Plan, Inc.:	FEIN: 25-1505506 (100% Controlled by Immediate Parent
Gateway Health Plan of Ohio, Inc.:	FEIN: 30-0282076 (100% Controlled by Immediate Parent
Mercy Home Health Services:	FEIN: 23-2325058 (100% Controlled by Immediate Parent
Mercy Home Health:	FEIN: 23-1352099 (100% Controlled by Immediate Parent
Mercy Family Support:	FEIN: 23-2325059 (100% Controlled by Immediate Parent
Nazareth Physician Services, Inc.:	FEIN: 20-3261266 (100% Controlled by Immediate Parent
N.E. Physician Services, Inc.:	FEIN: 23-2497355 (100% Controlled by Immediate Parent
East Norriton Physicians Services, Inc. (Inactive - Assets Sold 2/1/2016 but entity remains):	FEIN: 23-2515999 (100% Controlled by Immediate Parent
Mercy Management of Southeastern Pennsylvania:	FEIN: 23-2627944 (100% Controlled by Immediate Parent
Mercy/Manor Partnership (50% Controlled by Immediate Parent):	FEIN: 52-1931012
Mercy Eastwick, Inc.:	FEIN: 23-2184261 (100% Controlled by Immediate Parent
St. Mary Medical Center [Pennsylvania]:	FEIN: 23-1913910 (100% Controlled by Trinity Health of the Mid-Atlantic Region
Langhorne Physician Services:	FEIN: 23-2571699 (100% Controlled by Immediate Parent
LIFE St. Mary:	FEIN: 26-2976184 (100% Controlled by Immediate Parent
St. Mary Emergency Medical Services:	FEIN: 46-5354512 (100% Controlled by Immediate Parent
St. Mary Building and Development:	FEIN: 46-1827502 (100% Controlled by Immediate Parent
Langhorne Services, Inc.:	FEIN: 23-2625981 (100% Controlled by Immediate Parent)
Langhorne Services II, Inc.:	FEIN: 23-3795549 (100% Controlled by Immediate Parent
Langhorne MOB Partners, L.P.:	FEIN: 23-2622772 (42.857% Controlled by Immediate Parent
The Ambulatory Surgery Center at St. Mary, LLC:	FEIN: 23-2871206 (51% Controlled by Immediate Parent
SMMC MOB II, Limited Partnership:	FEIN: 36-4559869 (65.75% Controlled by Immediate Parent
Quality Health AllianceLLC:	FEIN: 46-5686622 (100% Controlled by Immediate Parent

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

	Quality Health Alliance - ACOLLC: FEIN: 46-5675954 (100% Controlled by Immediate Parent
	Endoscopy Center at St. Mary, LP: FEIN: 20-5253361 (16.349% Controlled by Immediate Parent
	St. Mary Rehabilitation Hospital, LLP: FEIN: 27-3938747 (59% Controlled by SMMC
	Heart Institute of St. Mary, LLC: FEIN: 45-4903701 (10% Controlled by SMMC
	St. Francis Hospital, Inc. [Delaware]: FEIN: 51-0064326 (100% Controlled by Trinity Health of the Mid-Atlantic Region
	LIFE at St. Francis Healthcare, Inc.: FEIN: 45-2569214 (100% Controlled by Immediate Parent
	Per CT Audit, ENTITY IS VOID IN DE AS OF 3/1/2016- WAITING TO HEAR FINAL DISPOSITION FROM MINISTRY AND WHETHER ENTITY WILL BE REINSTATED: Franciscan Eldercare Corporation: FEIN: 22-3008680 (100% Controlled by Immediate Parent
	Delaware Care Collaboration ("DCC") LLC: FEIN: 47-4069475 (100% Controlled by Immediate Parent
	<u>St. Mary's Health Care System, Inc. [Georgial dba St. Mary's Hospital: FEIN: 58-0566223 (100% Controlled by Trinity Health</u>
	St. Mary's Foundation, Inc.: FEIN: 58-2544232 (100% Controlled by Immediate Parent
	St. Mary's Sacred Heart Hospital, Inc. dba HealthWorks: FEIN: 47-3752176 (100% Controlled by Immediate Parent
	Sacred Heart Enterprises, LLC: FEIN: 35-2534772 (100% Controlled by Immediate Parent
	Cobb Enterprises, LLC: FEIN: 20-8356011 (100% Controlled by Immediate Parent)
	Good Samaritan Hospital, Inc. dba St. Mary's Good Samaritan Hospital: FEIN: 26-1720984 (100% Controlled by Immediate Parent
	St. Mary's Good Samaritan Foundation, Inc.: FEIN: 81-1660088 (100% Controlled by Immediate Parent
	St. Mary's Medical Group, Inc.: FEIN: 26-1858563 (100% Controlled by Immediate Parent
	St. Mary's Highland Hills, Inc. dba St. Mary's Highland Hills Village and dba Highland Hills Village: FEIN: 02-0576648 (100% Controlled by Immediate Paren
	Athens Residential Properties, LLC: FEIN: Not Issued (100% Controlled by Immediate Parent
	<u>Maxis Health System [Pennsylvania]: FEIN: 91-1940902 (100% Controlled by Trinity Health</u>
	<u>St. Francis Medical Center, a New Jersey Nonprofit Corporation [New Jersey]: FEIN: 22-3431049 (100% Controlled by Maxis Health System [PA] which is 100% Controlled by Trinity Health)</u>
	St. Francis Medical Center Foundation, Inc.: FEIN: 52-1025476 (100% Controlled by Immediate Parent
	LIFE St Francis, a New Jersey Non-Profit Corporation (PACE): FEIN: 22-2797282 (100% Controlled by Immediate Parent
	LifeCare Physicians Professional Corporation (Discontinued Entity but not Dissolved or Merged): Managed and Controlled but not Controlled by St. Francis Medical Center): FEIN: 26-1649038
	St. Francis Community Health Services, LLC (Inactive Entity but not Dissolved or Merged): FEIN: 46-1801229 (100% Controlled by Immediate Parent
	Central New Jersey Heart Services, LLC: FEIN: 20-8525458 (59.76% Controlled by St. Francis Medical Center
	St. Francis Medical Associates, P.A.: FEIN: 83-2199054 (100% Controlled by Immediate Parent
	<u>St. Peter's Health Partners [New York]: FEIN: 45-3570715 (100% Controlled by Trinity Health</u>
	United Laboratory Network IPA, LLC: FEIN: 14-1827292 (SPHP holds 16.5% Interest: Samaritan Hospital of Troy, New York holds 16.5% Interest
	Capital Region UC LLC d/b/a WellNow: FEIN: 38-4124497: (25% Interest Held by SPHP
	Innovative Health Alliance of New York, LLC (100% Controlled by Immediate Parent): FEIN: 46-5676066
	St. Peter's Hospital Foundation, Inc.: FEIN: 22-2262982 (100% Controlled by Immediate Parent
	Manning Medical, PLLC (Nominally Controlled by SPHP Physician In accordance with NY law: SPHP exercises control through an Agreement and Reserve Powers): FEIN: 46-433151
	Albany Advanced Imaging, P.L.L.C. dba St. Peter's Health Partners Imaging (Manning Medical PLLC controls 44.65%; Albany Radiology Partners, PLLC controls 55.35%): FEIN: 14-181306
	St. Peter's Health Partners Medical Associates, P.C.: FEIN: 46-1177336 (100% Controlled by Immediate Parent
	St. Peter's Hospital of the City of Albany dba St. Peter's Hospital: FEIN: 14-1348692 (100% Controlled by Immediate Parent
	Villa Mary Immaculate d/b/a St Peter's Nursing & Rehabilitation Center: FEIN: 14-1438749 (100% Controlled by Immediate Paren
	St. Peter's Ambulatory Surgery Center LLC (St. Peter's Hospital: 50%; AGC Associates, Inc. 50%): FEIN: 46-046389
	Everett Road ASC, LLC: FEIN: 83-3542382 (SPHCA holds 20% Interest)
	St. Peter's Hospital College of Nursing: FEIN: 84-3744949 (100% Controlled by SPHCA
	The Community Hospice, Inc.: FEIN: 14-1608921 (100% Controlled by Immediate Parent
	The Community Hospice Foundation, Inc.: FEIN: 22-2692940 (100% Controlled by Immediate Parent
	Samaritan Hospital of Troy, New York dba Samaritan Hospital: FEIN: 14-1338544 (100% Controlled by Immediate Parent
	Samaritan Hospital - St. Mary's Campus (dba of Samaritan Hospital): FEIN: 14-1338544 (100% Controlled by Immediate Paren
	Samaritan Hospital - Albany Memorial Campus (dba of Samaritan Hospital): FEIN: 14-1338544 (100% Controlled by Immediate Paren
	Alliance for Better Health Care, LLC ( JV Samaritan Hospital 20%; Ellis Hospital 20%; Hometown Health 20%; St. Mary Hospital of Amsterdam 20%; Whitney M. Young Health Center 20%): FEIN: 47-2920659
	The Northeast Health Foundation, Inc.: 22-2743478 (100% Controlled by Immediate Parent
	PLEASE NOTE: FACILITY CLOSED SEPTEMBER 2020 - BUT ENTITY STILL REMAINS: Samaritan Child Care Center, Inc.: FEIN: 14-1710225 (100% Controlled by Immediate Parent
	Sunnyview Hospital and Rehabilitation Center: FEIN: 14-1338386 (100% Controlled by Immediate Parent
	Sunnyview Hospital and Rehabilitation Center Foundation, Inc: FEIN: 22-2505127 (100% Controlled by Immediate Parent
	LTC (Eddy), Inc. dba The Eddy: FEIN: 22-2564710 (100% Controlled by Immediate Parent)
	Our Lady of Mercy Life Center: FEIN: 14-1743506 (100% Controlled by Immediate Parent)
	The James A. Eddy Memorial Geriatric Center, Inc. dba Eddy Memorial Geriatric Center: FEIN: 22-2570478 (100% Controlled by Immediate Parent
	Capital Region Geriatric Center, Inc. dba Eddy Village Green: FEIN: 14-1701597 (100% Controlled by Immediate Parent
	Heritage House Nursing Center, Inc. dba Eddy Heritage House Nursing and Rehabilitation Center: FEIN: 14-1725101(100% Controlled by Immediate Parent
	Senior Care Connection, Inc. dba Eddy Senior Care: FEIN: 14-1708754 (100% Controlled by Immediate Parent)
	Home Aide Service of Eastern New York, Inc. dba Eddy Visiting Nurse Association: FEIN: 14-1514867 (100% Controlled by Immediate Parent
	Beverwyck, Inc. dba Eddy Village Green at Beverwyck: FEIN: 14-1717028 (100% Controlled by Immediate Parent
	Glen Eddy, Inc.: FEIN: 14-1794150 (100% Controlled by Immediate Parent)
	The Glen at Hiland Meadows, Inc.: FEIN: 16-1529639 (50% Controlled by Immediate Parent
	Hawthorne Ridge, Inc. dba Eddy Hawthorne Ridge: FEIN: 80-0102840 (100% Controlled by Immediate Parent
	The Marjorie Doyle Rockwell Center, Inc.: FEIN: 14-1793885(100% Controlled by Immediate Parent
	Beechwood, Inc. dba Eddy Property Services: FEIN: 14-1651563 (100% Controlled by Immediate Parent)
	Samaritan Medical Office Building, Inc.: FEIN: 14-1607244 (100% Controlled by Immediate Parent
	Eddy Licensed Home Care Agency, Inc.: FEIN: 14-1818568 (100% Controlled by Immediate Parent
	Empire Home Infusion Service, Inc. dba Northeast Home Medical Equipment: FEIN: 14-1795732 (100% Controlled by Immediate Parent
	Seton Health at Schuyler Ridge Residential Healthcare dba Schuyler Ridge: FEIN: 14-1756230 (100% Controlled by Immediate Parent
	<u>St. James Mercy Health System (New York): FEIN: 22-3127184 (100% Controlled by Trinity Health</u>
	SJM Properties, Inc.: FEIN: 16-1294991 (100% Controlled by Immediate Parent
	<u>Catholic Health System, Inc. (IOA - 50% Controlled by Trinity Health) [New York]: FEIN: 22-2565278</u>
	Sisters of Charity Hospital of Buffalo, New York: FEIN: 16-0743187 (100% Controlled by Immediate Parent

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Sisters Hospital Foundation, Inc.:	FEIN: 22-2283077 (100% Controlled by Immediate Parent)
Kenmore Mercy Hospital:	FEIN: 16-0762843 (100% Controlled by Immediate Parent)
Kenmore Mercy Foundation, Inc.:	FEIN: 16-1162971 (100% Controlled by Immediate Parent)
KMH Homes, Inc.:	FEIN: 16-1387890 (100% Controlled by Immediate Parent; Operationally Inactive)
Catholic Health System Continuing Care Foundation:	FEIN: 20-0947831 (100% Controlled by Immediate Parent)
Mercy Hospital of Buffalo:	FEIN: 16-0756336 (100% Controlled by Immediate Parent)
Orchard Park Mercy Corp.:	FEIN: 16-1470350 (100% Controlled by Immediate Parent)
Alsace Abbott Corporation:	FEIN: 16-1355092 (100% Controlled by Immediate Parent)
Aurora Mercy Corp.:	FEIN: 16-1354302 (100% Controlled by Immediate Parent)
Mercy Hospital Foundation, Inc.:	FEIN: 22-2209721 (100% Controlled by Immediate Parent)
Mount St. Mary's Hospital of Niagara Falls:	FEIN: 16-1523353 (100% Controlled by Immediate Parent)
Mount St. Mary's Hospital Foundation, Inc.:	FEIN: 16-1360884 (100% Controlled by Immediate Parent)
Mount St. Mary's Child Care Center, Inc.:	FEIN: 16-1523352 (100% Controlled by Immediate Parent)
The Board of Associates of Mount St. Mary's Hospital of Niagara Falls, Inc.:	FEIN: 16-1582926 (100% Controlled by Immediate Parent)
The St. Francis Guild of Mount St. Mary's Hospital of Niagara Falls, Inc.:	FEIN: 51-0217790 (100% Controlled by Immediate Parent)
Niagara Medicine, P.C.:	FEIN: 45-3669525 (Captive PC - CHS does not legally own but does control this entity through a Management Agreement)
Assets were sold 4/13/2015 but entity remains with CHS: Nazareth, Inc.:	
FEIN: 16-0813142 (100% Controlled by Immediate Paren: Operationally Inactive)	
WNY Catholic Long Term Care, Inc.:	d/b/a Father Baker Manor (100% Controlled by Immediate Parent): FEIN: 16-1434368
Niagara Homemaker Services, Inc.:	FEIN: 16-1317960 (100% Controlled by Immediate Parent)
Assets were sold 3/7/2016 but entity remains with CHS: St. Vincent's Home for the Aged:	
FEIN: 16-0743167 (100% Controlled by Immediate Parent; Operationally Inactive)	
Assets were sold 3/7/2016 but entity still remains with CHS: St. Elizabeth's Home of Lancaster, New York:	
FEIN: 16-0743154 (100% Controlled by Immediate Paren: Operationally Inactive)	
McAuley-Seton Home Care Corporation:	FEIN: 16-1310062 (100% Controlled by Immediate Parent)
St. Francis Geriatric and Healthcare Services, Inc.:	FEIN: 16-1523535 (100% Controlled by Immediate Parent)
St. Clare Apartments Housing Development Fund Company, Inc.:	(50% Controlled by Immediate Parent): FEIN: 16-078264
Catholic Health System Program of All-Inclusive Care for the Elderly, Inc.:	FEIN: 26-1252884 (100% Controlled by Immediate Parent)
Catholic Health System Infusion Pharmacy, Inc.:	FEIN: 20-0198518 (100% Controlled by Immediate Parent)
Catholic Health Home Respiratory, LLC:	(50% Controlled by Immediate Paren: Operationally Inactive): FEIN: 45-4134007
Our Lady of Victory Renaissance Corporation:	FEIN: 20-0167745 (100% Controlled by Immediate Parent)
Our Lady of Victory Community Housing Development Organization, Inc.:	FEIN: 20-0372194 (100% Controlled by Immediate Parent)
Our Lady of Victory Housing Development Fund Corp:	(100% Controlled by Immediate Parent): FEIN: 14-1930644
Smithtown GP, LLC:	(100% Controlled by Immediate Parent): FEIN: 57-3192758
Victory Ridge Apartments, L.P.:	(80% Controlled by Immediate Parent): FEIN: 57-121973
Trinity Medical WNY, P.C.:	FEIN: 27-2576645 (Captive PC)
Salus Medical Care, P.C.:	FEIN: (100% Controlled by Immediate Parent)
Catholic Medical Partners-Accountable Care IPA, Inc.:	FEIN: ( % Controlled by Immediate Paren
CH Emmaus, Inc.:	FEIN 82-1852345 (100% Controlled by Immediate Parent)
Sterling Surgical Center, LLC:	FEIN: 16-1607894 (100% Controlled by CH Emmaus
Healthcare Solutions WNY, LLC:	FEIN: (100% Controlled by CH Emmaus, Inc.)
Assets were sold 3/7/2016 but entity remains with CHS: St. Francis Home of Williamsville, New York (Inactive):	
FEIN: 16-0743153 (100% Controlled by Immediate Paren	
<u>Baycare Health System, Inc. (JOA - 50.4% Controlled by Trinity Health, not all facilities Controlled; Other Parties to the JOA include Morton Plant Mease Health</u>	
<u>Care, Inc. and South Florida Baptist Hospital, Inc.) (Florida):</u>	
<u>FEIN: 59-2796965</u>	
Morton Plant Mease Health Care, Inc.:	FEIN: 59-2374556 (Entity is a Party to the JOA BayCare Health System: Membership of this entity is a Directors Model - the members of the Board of Directors of Morton Plant Mease Health Care, Inc. are the Members of this Corporation's Immediate Parent)
Trustees of Mease Hospital, Inc.:	d/b/a Mease Countryside Hospital: FEIN: 59-0855412 (100% Controlled by Immediate Parent)
Trustees of Mease Hospital, Inc.:	d/b/a Mease Dunedin Hospital: FEIN: 59-0855412 (100% Controlled by Immediate Parent)
Morton Plant Hospital Association, Inc.:	d/b/a Morton Plant Hospital: FEIN: 59-0624462 (100% Controlled by Immediate Parent)
Morton Plant Hospital Association, Inc.:	d/b/a Morton Plant North Bay Hospital: FEIN: 59-0624462 (100% Controlled by Immediate Parent)
Morton Plant Hospital Association, Inc.:	d/b/a Morton Plant North Bay Recovery Center: FEIN: 59-0624462 (100% Controlled by Immediate Parent)
Morton Plant Hospital Association, Inc.:	d/b/a Morton Plant Rehabilitation Center: FEIN: 59-0624462 (100% Controlled by Immediate Parent)
South Florida Baptist Hospital, Inc.:	FEIN: 59-0594631 (Entity is a Party to the JOA BayCare Health System: Membership of this entity consists of 21
Bartow Regional Medical Center, Inc.:	FEIN: 47-5387418 (100% Controlled by Immediate Parent)
Winter Haven Hospital, Inc.:	FEIN: 59-0724462 (100% Controlled by Immediate Parent)
Winter Haven Hospital, Inc.:	dba Winter Haven Women's Hospital: FEIN: 59-0724462 (100% Controlled by Immediate Parent)
BayCare Alliant Hospital, Inc.:	FEIN: 05-0615150 (100% Controlled by Immediate Parent)
Baycare Physician Partners, LLC:	FEIN: 45-2908908 (100% Controlled by Immediate Parent)
Baycare Physician Partners ACO, LLC:	FEIN: 46-5720072 (Members are Baycare Health System and 2 individuals
BayCare Medical Group, Inc.:	(f/k/a Morton Plant Mease Primary Care, Inc. ): FEIN: 59-3140335 (100% Controlled by Immediate Parent)
St Joseph's Hospital, Inc.:	FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St Joseph's Hospital, Inc.:	d/b/a St. Joseph's Children's Hospital: FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St Joseph's Hospital, Inc.:	d/b/a St. Joseph's Women's Hospital: FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St Joseph's Hospital, Inc.:	d/b/a St. Joseph's Hospital - North: FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St. Joseph's Hospital, Inc.:	d/b/a/ St. Joseph's Hospital - South: FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St Joseph's Hospital, Inc.:	d/b/a St. Joseph's Hospital Behavioral Health Center: FEIN: 59-0774199 (100% Controlled by Trinity Health Corporation)
St. Joseph's Health Care Center, Inc.:	FEIN: 59-2593686 (100% Controlled by Trinity Health Corporation)
St. Joseph's Hospital of Tampa Foundation, Inc.:	FEIN: 59-1100828 (100% Controlled by Immediate Parent)
John Knox Village of Tampa Bay, Inc.:	FEIN: 58-1377711 (100% Controlled by Immediate Parent)
HealthPoint Medical Group, Inc.:	FEIN: 59-3244268 (100% Controlled by Immediate Parent)
Franciscan Properties, Inc.:	FEIN: 59-2822519 (100% Controlled by Immediate Parent)
St. Joseph's Community Care, Inc.:	FEIN: 59-3152608 (100% Controlled by Immediate Parent)
St. Joseph's Enterprises, Inc.:	FEIN: 59-2822516 (100% Controlled by Immediate Parent)
St. Anthony's Professional Building and Services, Inc.:	FEIN: 59-2018848 (100% Controlled by Immediate Parent)

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

St. Anthony's Hospital, Inc.:	FEIN: 59-2043026 (100% Controlled by Trinity Health Corporation
St. Anthony's Hospital Auxillary, Inc.:	FEIN: 59-0201974 (100% Controlled by Immediate Parent
St. Anthony's Health Care Foundation, Inc.:	FEIN: 59-2128991 (100% Controlled by Immediate Parent
St. Anthony's Physicians Surgery Center, LLC:	FEIN: 01-0861245 (100% Controlled by Immediate Parent
<u>Alegany Franciscan Ministries, Inc. (Florida):</u>	<u>FEIN: 58-1492325 (100% Controlled by Trinity Health</u>
<u>Global Health Ministry d/b/a Global Health Volunteers (MD):</u>	<u>FEIN: 42-1253527 (100% Controlled by Trinity Health</u>
<u>Saint Joseph's Health System, Inc. (Georgia):</u>	<u>FEIN: 58-1744848 (100% Controlled by Trinity Health</u>
Saint Joseph's Mercy Care Services, Inc. dba Mercy Care:	FEIN: 58-1752700 (100% Controlled by Immediate Parent
Mercy Senior Care, Inc. dba Mercy Care Rome:	FEIN: 58-1366508 (100% Controlled by Immediate Parent
Mercy Care Foundation, Inc. (f/k/a Saint Joseph's Mercy Foundation, Inc.):	FEIN: 58-1448522 (100% Controlled by Immediate Parent
Mercy Services Downtown, Inc.:	FEIN: 27-2046353 (100% Controlled by Immediate Parent)
SJHS/JOC Holdings, Inc.:	FEIN: 47-2299757 (100% Controlled by Immediate Parent
Emory/Saint Joseph's, Inc. (JOC - 49% Controlled by SJHS/JOC Holdings, Inc.):	FEIN: 45-2721833
Saint Joseph's McAuley Park I, LLC:	FEIN: (100 Controlled by Saint Joseph's Health System, Inc.
Saint Joseph's Developer, LLC:	FEIN: (100% Controlled by Saint Joseph's Health System, Inc.
<u>Holy Cross Hospital, Inc. (Florida):</u>	<u>FEIN: 59-0791028 (100% Controlled by Trinity Health</u>
Holy Cross Primary Care, Inc.:	FEIN: 81-2531495 (100% Controlled by Immediate Parent
Nursing Network, Inc.:	FEIN: 59-1145192 (100% Controlled by Immediate Parent
Holy Cross Outpatient Services, Inc.:	FEIN: 46-5421068 (100% Controlled by Immediate Parent
Holy Cross Physician Partners, LLC:	FEIN: 36-4712116 (100% Controlled by Immediate Parent
Holy Cross Physician Partners ACO, LLC:	FEIN: 46-5530455 (100% Controlled by Immediate Parent
Holy Cross Senior Services, Inc.:	FEIN: 83-2256461 (100% Controlled by Immediate Parent
Physicians Outpatient Surgery Center, LLC (JV with Physician Members - 71% Controlled by HCH):	FEIN: 35-2325646
Atlantic Coast Health Network, LLC (JV with Atlantic Coast Holdings, Inc. - 50% Controlled by HCH):	FEIN: 47-475658
<u>St. Joseph's Health, Inc. (New York):</u>	<u>FEIN: 47-4754987 (100% Controlled by Trinity Health</u>
St. Joseph's Hospital Health Center:	FEIN: 15-0532254 (100% Controlled by Immediate Parent
S.J. Management Company of Syracuse, Inc.:	FEIN: 27-1763712 (100% Controlled by Immediate Parent
SJLS, LLC (51% SJMCS, 34% Fresenius, 15% Physicians):	FEIN: 20-1796650
St. Joseph's College of Nursing at St. Joseph's Hospital Health Center:	FEIN: 20-2497520 (100% Controlled by Immediate Parent
SJPE Practice Management Services, Inc.:	FEIN: 45-4164964 (100% Controlled by Immediate Parent
Plaza Corporation of Central New York (50% SJHHC, 50% Crouse Hospital):	FEIN: 22-2800840
Iroquois Nursing Home, Inc.:	FEIN: 16-1364582 (100% Controlled by Immediate Parent
Plaza Nursing Home Company, Inc.:	FEIN: 16-0955793 (100% Controlled by Immediate Parent
Mandoria Gardens Housing Development Fund Company, Inc. (50% PNH, 50% Loretto Geriatric):	FEIN:27-3993174
Enriched Resources for Independent Elderly, Inc.:	FEIN: 16-1163209 (100% Controlled by Immediate Parent)
Plaza Foundation of Central New York:	FEIN: 22-2800835 (100% Controlled by Immediate Parent
Laboratory Alliance of Central New York, LLC (50% SJHHC, 50% Crouse Health Hospital, Inc.):	FEIN: 16-153620
Loretto Independent Living Services, Inc.:	FEIN: 16-1470454 (Not Controlled by Immediate Parent, but maintains a right to one less than one half of the Board Seats
CNY AIM IPA, LLC:	FEIN: 81-5385690 (100% Controlled by Immediate Parent
CNY AIM, LLC:	FEIN: 81-1461678 (100% Controlled by Immediate Parent
St. Joseph's Health Accountable Care Organization, LLC:	FEIN: 47-4081578 (100% Controlled by Immediate Parent
St. Joseph's Hospital Health Center Foundation, Inc.:	FEIN: 22-2149775 (100% Controlled by Immediate Parent
St. Joseph's Health Center Properties, Inc.:	FEIN: 23-7219294 (100% Controlled by Immediate Parent
Radisson SJH Properties, LLC (50% St. Joseph's Health Center Properties, 50% Radisson Partners, LLC):	FEIN: 46-1892799
Franciscan Associates, Inc.:	FEIN: 20-2991688 (100% Controlled by Immediate Parent
FHS Services, Inc. d/b/a Oneida Lifeline, Franciscan Lifeline:	FEIN: 27-2995699 (100% Controlled by Immediate Parent
Franciscan Management Services, Inc.:	FEIN: 16-1351193 (100% Controlled by Immediate Parent
Lourdes Health Support, LLC:	FEIN: 16-1611707 (40% Controlled by Franciscan Management Services, Inc.)
St. Elizabeth Health Support Services, Inc. (100% Controlled by FMS):	FEIN: 16-1540486
Central New York Infusion Services, LLC (20% FMS, 80% Infusion Services, Inc.):	FEIN: 16-1559710
Franciscan Health Support, Inc.:	FEIN: 16-1236354 (100% Controlled by Immediate Parent
Franciscan Health Support Services, LLC (d/b/a Oneida Health Support, Auburn Health Support, Mountain Lakes Health Support):	FEIN: 16-1236354 (100% Controlled by Immediate Parent)
Health Care Management Administrators, Inc.:	FEIN: 16-1450960 (100% Controlled by Immediate Parent
Near Northside Holdings, LLC:	FEIN: Not Yet Applied For (100% Controlled by Immediate Parent
Embracing Age, Inc.:	FEIN: 46-1051881 (100% Controlled by Immediate Parent
Oswego Health Home Care, LLC (49% Embracing Age and 60% Oswego Health):	FEIN: 47-246373
St. Joseph's Physician Health, P.C.:	FEIN: 16-1516863 (Captive PC
St. Joseph's Medical, P.C.:	FEIN: 27-3899821 (Captive PC
St. Joseph's Imaging Associates, PLLC (60% Prospect Hill Radiology Group, 40% SJMPC):	FEIN: 16-110429
CNY North Urgent Care, PLLC:	FEIN: 35-2605215 (100% Controlled by St. Joseph's Medical, P.C.
Concordia Healthcare Network, LLC:	FEIN: 84-1939474 (100% Controlled by Immediate Parent)
Concordia Healthcare Network IPA, LLC:	FEIN: 84-3669999 (100% Controlled by Concordia Health Network, LLC
Concordia Health ACO, LLC:	FEIN: TBD (100% Controlled by St. Joseph's Health, Inc.
<u>Trinity Health Of New England Corporation, Inc. (formerly Trinity Health - New England, Inc.) (Connecticut):</u>	<u>FEIN: 06-1491191 (100% Controlled by Trinity Health</u>
Trinity Health of New England Urgent Care, LLC:	FEIN: 84-2665996 (51% Controlled by Trinity Health of New England Corporation, Inc.; 49% Controlled by Premier Health Consultants, LL
Saint Francis Hospital and Medical Center:	FEIN: 06-0646813 (100% Controlled by Immediate Parent
Woodland Partners Real Estate LLC:	FEIN: 83-3371094; (55% Controlled by Saint Francis Hospital and Medical Center
Lighthouse Surgery Center, LLC:	FEIN:83-2096116 (26% Controlled by Saint Francis Hospital and Medical Center/74% by Physicians
Saint Francis Hospital and Medical Center Foundation, Inc.:	FEIN: 06-1008255 (100% Controlled by Immediate Parent
Collaborative Laboratory Services, LLC:	FEIN: 06-1520109 (100% Controlled by Immediate Parent

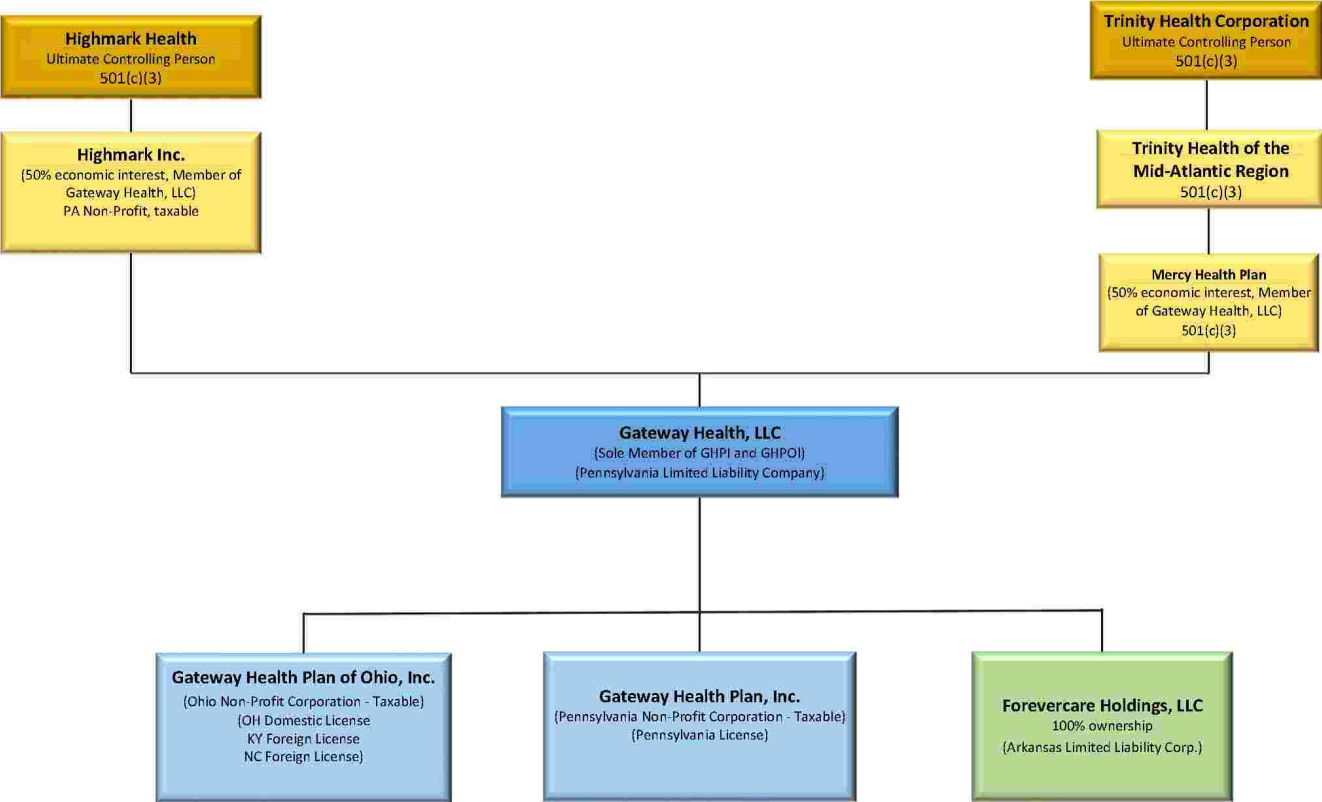
**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

Mount Sinai Hospital Foundation, Inc.; FEIN: 22-2584082 (100% Controlled by Immediate Parent
Women's Auxiliary of Saint Francis Hospital and Medical Center, Inc.; FEIN: 06-0660403 (100% Controlled by Immediate Parent
Saint Francis GI Endoscopy, LLC (49% SFHMC); FEIN: 20-5540278
Medworks, LLC (51% SFHMC); FEIN: 06-1490483
Saint Francis Behavioral Health Group, P.C. (Nominee Shareholder - Director of Behavioral Health); FEIN: 06-1384686 (100% Controlled by Immediate Parent
Saint Francis Care Medical Group, P.C. (Nominee Shareholder, SVP Medical Affairs); FEIN: 06-1432373 (100% Controlled by Immediate Parent
Mount Sinai Rehabilitation Hospital, Inc.; FEIN: 06-1422973 (100% Controlled by Immediate Parent
SFH/FF, LLC; FEIN: 06-1489749; (100% Controlled by MSRH)
Trinity Health Of New England Provider Network Organization, Inc. (formerly Trinity Health-New England Physician Network Organization ; FEIN: 06-1450168 (100% Controlled by Immediate Parent
Saint Francis Emergency Medical Group, Inc.; FEIN: 45-1994612 (100% Controlled by Immediate Parent
Asylum Hill Family Medicine Center, Inc.; FEIN: 06-1450170 (100% Controlled by Immediate Parent
Southern New England Healthcare Organization, Inc. (50% Interest held by Trinity Health of New England Corporation, Inc.); FEIN: 06-1391257
Saint Francis HealthCare Partners Foundation, Inc.; FEIN: 20-8176133 (100% Controlled by Saint Francis HealthCarePartners, Inc.
Saint Francis Healthcare Partners ACO, Inc.; FEIN: 46-1315402 (100% Controlled by Immediate Parent
Southern New England Affiliated Physicians Purchasing Group, LLC; FEIN: 81-4362177 (100% Controlled by Immediate Parent
Trinity Health Of New England ACO LLC; FEIN: 83-3165256 (33.3% Controlling Interest held by each of Mercy Care Alliance, LLC; Saint Mary's Physician Partners, LLC d/b/a Valley Health Alliance; and Southern New England Healthcare Organization, Inc.)
Connecticut Occupational Medicine Partners, LLC; FEIN: 06-1586674 (33.3% Controlled by THONE; 20% Controlled by JMMC)
Johnson Memorial Hospital, Inc.; FEIN: 47-5676956 (100% Controlled by Immediate Parent
NRRON, LLC; FEIN: 81-2004513; (25% Controlled by Johnson Memorial Hospital, Inc.)
TIC, LLC; FEIN: 81-2022269 (15% Controlled by Johnson Memorial Hospital, Inc.)
Trinity Health Of New England Emergency Medical Services, Inc.; FEIN: 83-3546613 (100% Controlled by Immediate Parent
The Mercy Hospital, Inc. dba Mercy Medical Center, Providence Behavioral Health Hospital, Weldon Rehabilitation Hospital, Family Life Center for Maternity, Sister Caritas Cancer Center, WorkWise, Mercy Healthcare for The Homeless; FEIN: 04-3398280 (100% Controlled by Immediate Parent)
Mercy Inpatient Medical Associates, Inc. dba Breast Care Center; dba MercyCare - Forest Park; dba Providence Prenatal Center of Holyoke; dba Trinity Health of New England Medical Group; FEIN: 04-3029929 (100% Controlled by Immediate Parent)
System Coordinated Services, Inc. dba Life Laboratories; FEIN: 04-2938161 (100% Controlled by Immediate Parent
Catherine Horan Building Corporation; FEIN: 04-2938160 (100% Controlled by Immediate Parent
Catherine Horan Building Associates Limited Partnership; FEIN: 04-2723429 (100% Controlled by Immediate Parent
The Lifepath Partners, LLC (JV with NEPA: 50% Controlled by Immediate Parent); FEIN: 26-0021080
Greater Springfield MRI Limited Partnership; FEIN: 04-3178855 (50% Controlled by System Coordinated Services
Mercy Health Accountable Care Organization, LLC; FEIN: 82-1007572 (100% Controlled by Immediate Parent
Mercy Physicians, P.C. dba Trinity Health of New England Medical Group; FEIN: 000857412 (100% Controlled by Immediate Parent
Brightside, Inc.; FEIN: 04-2182395 (100% Controlled by Immediate Parent
Mercy Care Alliance, LLC; FEIN: 47-1561725 (100% Controlled by Immediate Parent
Trinity Health Of New England ACO LLC; FEIN: 83-3165256 (33.3% Controlling Interest held by each of Mercy Care Alliance, LLC; Saint Mary's Physician Partners, LLC d/b/a Valley Health Alliance; and Southern New England Healthcare Organization, Inc.)
Pioneer Valley Cardiology Associates, Inc.; FEIN: 45-4208896 (100% Controlled by Immediate Parent
Mercy Specialist Physicians, Inc. dba Trinity Health of New England Medical Group ; FEIN: 26-4033168 (100% Controlled by Immediate Parent
Mercy Medical Group, Inc. dba Trinity Health of New England Medical Group; FEIN: 45-4884805 (100% Controlled by Immediate Parent
Farren Care Center, Inc. (PLEASE NOTE: PER THE FEBRUARY 2018 TRANSFER OF ASSETS, MEMBERSHIP AND SERVICES OF FARREN CARE CENTER, INC. (MA) TO TCCS - MA, FARREN CARE CENTER IS A DBA OF TCCS - MA; AND, AS THE FEIN FOR FARREN CARE CENTER, INC. (MA) WAS NOT TRANSFERRED, THIS SHELL ENTITY REMAINS WITH THONE); FEIN: 04-2501711 (100% Controlled by Immediate Parent)
Riverbend Medical Group, Inc. dba Trinity Health of New England Medical Group; FEIN: 81-1807730 (100% Controlled by Immediate Parent
Sisters of Providence Care Centers, Inc. ; FEIN: 22-2541103 (100% Controlled by Immediate Parent)
Western Massachusetts PET/CT Imaging Center, LLC; FEIN: 20-4744663 (50% Controlled by The Mercy Hospital, Inc.; 50% Controlled by Alliance Imaging, Inc.)
Saint Mary's Hospital, Inc.; FEIN: 06-0646844 (100% Controlled by Immediate Parent
The Harold Leever Regional Cancer Center, Inc.; FEIN: 06-1548409 (50% Controlled by Immediate Parent
Franklin Medical Group, P.C. dba Trinity Health of New England Medical Group; FEIN: 06-1470493 (Nominee Shareholder of Physician Group
Diagnostic Imaging of Southbury, LLC; FEIN: 06-1487582 (60% Controlled by Immediate Paren
Naugatuck Valley MRI, LLC; FEIN: 06-1239526 (78.3% Controlled by Immediate Parent
Saint Mary's Physician Partners, LLC dba Valley Health Alliance; FEIN: 46-5760769 (100% Controlled by Immediate Parent
Trinity Health Of New England ACO LLC; FEIN: 83-3165256 (33.3% Controlling Interest held by each of Mercy Care Alliance, LLC; Saint Mary's Physician Partners, LLC d/b/a Valley Health Alliance; and Southern New England Healthcare Organization, Inc.)
Saint Mary's Hospital Foundation, Inc.; FEIN: 22-2528400 (100% Controlled by Immediate Parent
Scovill Street Medical Building Association, Inc.; FEIN: 06-1232868 92% Controlled by Immediate Parent)

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER**  
**MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

**Gateway Health, LLC**  
**Parent & Subsidiary Organization Chart**

Effective 12/29/20



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

Q16

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
0000	HIGHMARK INC	00000	45-3674900	000000000	0000000000		HIGHMARK HEALTH	PA	UIP	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	0000123
0000		00000	45-3674924	000000000	0000000000		ALLEGHENY HEALTH NETWORK	PA	NIA	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	
0812		54771	23-1294723	000000000	0000000000		HIGHMARK INC	PA	IA	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	46-3823617	000000000	0000000000		HM HEALTH SOLUTIONS INC.	PA	NIA	HIGHMARK HEALTH	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	83-3642399	000000000	0000000000		HOME RECOVERY CARE, LLC	DE	NIA	HIGHMARK HEALTH	Ownership	49.0	HIGHMARK HEALTH	N	
0000		00000	83-1871064	000000000	0000000000		GEISINGER-HM JOINT VENTURE, LLC	PA	NIA	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	47-3769205	000000000	0000000000		PENN STATE HEALTH	PA	NIA	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	20-1825706	000000000	0000000000		SDLC PARTNERS, L.P.	PA	NIA	HM HEALTH SOLUTIONS INC.	Ownership	20.0	HIGHMARK HEALTH	N	
0000		15279	46-3476730	000000000	0000000000		PALLADIUM RISK RETENTION GROUP, INC.	VT	IA	HIGHMARK HEALTH	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	81-0919390	000000000	0000000000		HM HEALTH HOLDINGS COMPANY	PA	NIA	HIGHMARK HEALTH	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	81-0930502	000000000	0000000000		HM HOME AND COMMUNITY SERVICES LLC	PA	NIA	HM HEALTH HOLDINGS COMPANY	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	AAG-3313	000000000	0000000000		THRYVE DIGITAL HEALTH LLP.	IND	NIA	HM HEALTH HOLDINGS COMPANY	Ownership	1.0	HIGHMARK HEALTH	N	
0000		00000	AAG-3313	000000000	0000000000		THRYVE DIGITAL HEALTH LLP.	IND	NIA	HM HEALTH SOLUTIONS INC.	Ownership	99.0	HIGHMARK HEALTH	N	
0000		00000	45-3913973	000000000	0000000000		PHYSICIAN LANDING ZONE	PA	NIA	ALLEGHENY CLINIC	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1742869	000000000	0000000000		PREMIER MEDICAL ASSOCIATES, PC	PA	NIA	ALLEGHENY CLINIC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	46-4682160	000000000	0000000000		PREMIER WOMEN'S HEALTH	PA	NIA	ALLEGHENY CLINIC	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	45-3444325	000000000	0000000000		HMPG INC.	PA	NIA	ALLEGHENY HEALTH NETWORK	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1260215	000000000	0000000000		JEFFERSON REGIONAL MEDICAL CENTER	PA	NIA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	82-3655381	000000000	0000000000		AHN EMERUS LLC	PA	NIA	ALLEGHENY HEALTH NETWORK	Ownership	51.0	HIGHMARK HEALTH	N	
0000		00000	61-1892123	000000000	0000000000		AHN EMERUS FOX CHAPEL, LLC	PA	NIA	AHN EMERUS LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	37-1881923	000000000	0000000000		AHN EMERUS MCCANDLESS, LLC	PA	NIA	AHN EMERUS LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	61-1888353	000000000	0000000000		AHN EMERUS SAWMILL, LLC	PA	NIA	AHN EMERUS LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	82-3697883	000000000	0000000000		AHN EMERUS WESTMORELAND, LLC	PA	NIA	AHN EMERUS LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1340370	000000000	0000000000		GROVE CITY MEDICAL CENTER	PA	NIA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	32-0070802	000000000	0000000000		WOLF CREEK MEDICAL ASSOCIATES	PA	NIA	GROVE CITY MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	82-5500526	000000000	0000000000		AHN-LECOM JV LLC	PA	NIA	ALLEGHENY HEALTH NETWORK	Ownership	50.0	HIGHMARK HEALTH	N	
0000		00000	25-0965598	000000000	0000000000		WARREN GENERAL HOSPITAL	PA	NIA	AHN-LECOM JV LLC	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	47-3690355	000000000	0000000000		ALLEGHENY HEALTH NETWORK SURGERY CENTER-BETHEL PARK, LLC.	PA	NIA	ALLEGHENY HEALTH NETWORK	Ownership	100.0	HIGHMARK HEALTH	N	
0000		15279	46-3476730	000000000	0000000000		PALLADIUM RISK RETENTION GROUP, INC.	VT	IA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-0965547	000000000	0000000000		SAINT VINCENT HEALTH CENTER	PA	NIA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1406710	000000000	0000000000		SAINT VINCENT HEALTH SYSTEM	PA	NIA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-0969492	000000000	0000000000		WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	PA	NIA	ALLEGHENY HEALTH NETWORK	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	82-5503170	000000000	0000000000		OSTEOPHILICITY LLC	PA	NIA	ALLEGHENY SINGER RESEARCH INSTITUTE	Ownership	39.0	HIGHMARK HEALTH	N	
0000		00000	20-5855753	000000000	0000000000		ALLE-KISKI MEDICAL CENTER TRUST	PA	NIA	ALLE-KISKI MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1533746	000000000	0000000000		ASSOCIATED CLINICAL LABORATORIES, LP	PA	NIA	ASSOCIATED CLINICAL LABORATORIES OF PENNSYLVANIA, LLC	Ownership	1.0	HIGHMARK HEALTH	N	
0000		00000	23-2939715	000000000	0000000000		CANONSBURG GENERAL HOSPITAL AMBULANCE SERVICE	PA	NIA	CANONSBURG GENERAL HOSPITAL	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	27-3459870	000000000	0000000000		SAINT VINCENT CONSULTANTS IN CARDIOVASCULAR DISEASES, LLC	PA	NIA	CLINICAL SERVICES, INC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1403745	000000000	0000000000		HEALTH SYSTEM SERVICE CORPORATION	PA	NIA	CLINICAL SERVICES, INC	Ownership	100.0	HIGHMARK HEALTH	N	



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

Q16.1

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	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
0000		00000	05-0591755	0000000000	0000000000		SAINT VINCENT NWPA SURGERY CENTER, LTD	PA	NIA	CLINICAL SERVICES, INC	Ownership	75.1	HIGHMARK HEALTH	N	
0000		00000	05-0544042	0000000000	0000000000		SAINT VINCENT REHAB SOLUTIONS, LLC	PA	NIA	CLINICAL SERVICES, INC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1578290	0000000000	0000000000		ST. VINCENT PROFESSIONAL BUILDING LEASEHOLD CONDOMINIUM ASSOCIATION	PA	NIA	CLINICAL SERVICES, INC	Ownership	82.7	HIGHMARK HEALTH	N	
0000		00000	23-2919277	0000000000	0000000000		TRISTATE REGIONAL ASSOCIATES LLP	PA	NIA	CLINICAL SERVICES, INC	Ownership	29.2	HIGHMARK HEALTH	N	
0000		00000	23-3099689	0000000000	0000000000		VANTAGE CAPITAL MANAGEMENT, LTD	PA	NIA	CLINICAL SERVICES, INC	Ownership	19.0	HIGHMARK HEALTH	N	
0000		00000	03-0477182	0000000000	0000000000		VANTAGE HOLDING COMPANY, LLC	PA	NIA	CLINICAL SERVICES, INC	Ownership	50.5	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	12325	30-0282076	0000000000	0000000000		GATEWAY HEALTH PLAN OF OHIO, INC.	OH	RE	GATEWAY HEALTH LLC	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1505506	0000000000	0000000000		GATEWAY HEALTH PLAN, INC.	PA	IA	GATEWAY HEALTH LLC	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	82-2440801	0000000000	0000000000		FOREVERCARE HOLDINGS, LLC	AR	NIA	GATEWAY HEALTH LLC	Ownership	49.0	HIGHMARK HEALTH	N	
0000		00000	47-1817274	0000000000	0000000000		HIGHMARK BCBSD HEALTH OPTIONS INC.	DE	NIA	HIGHMARK BCBSD INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1494238	0000000000	0000000000		CARING FOUNDATION	PA	NIA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0812	HIGHMARK INC	60147	23-2905083	0000000000	0000000000		FIRST PRIORITY LIFE INSURANCE COMPANY, INC.	PA	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1691945	0000000000	0000000000		GATEWAY HEALTH LLC	PA	NIA	HIGHMARK INC.	Ownership	50.0	HIGHMARK HEALTH	N	0000003
0812	HIGHMARK INC	11435	75-3002215	0000000000	0000000000		HCI, INC.	VT	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	Y	
0812	HIGHMARK INC	53287	51-0020405	0000000000	0000000000		HIGHMARK BCBSD INC.	DE	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0812	HIGHMARK INC	15508	46-4763378	0000000000	0000000000		HIGHMARK BENEFITS GROUP INC	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0812	HIGHMARK INC	15507	46-4757476	0000000000	0000000000		HIGHMARK COVERAGE ADVANTAGE INC	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1876666	0000000000	0000000000		HIGHMARK FOUNDATION	PA	NIA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0812	HIGHMARK INC	10131	20-2353206	0000000000	0000000000		HIGHMARK SELECT RESOURCES INC.	PA	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	15460	46-4156633	0000000000	0000000000		HIGHMARK SENIOR HEALTH COMPANY	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1645888	0000000000	0000000000		HIGHMARK VENTURES LLC	PA	NIA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	54828	55-0624615	0000000000	0000000000		HIGHMARK WEST VIRGINIA INC.	WV	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	20-5457337	0000000000	0000000000		HM CENTERED HEALTH, INC	PA	NIA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	71768	54-1637426	0000000000	0000000000		HM HEALTH INSURANCE COMPANY	PA	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1646315	0000000000	0000000000		HM INSURANCE GROUP, LLC	PA	NIA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	96601	23-2413324	0000000000	0000000000		HMO OF NORTHEASTERN PENNSYLVANIA, INC	PA	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0936	INDEPENDENCE HEALTH GROUP INC.	53252	23-2063810	0000000000	0000000000		INTER-COUNTY HEALTH PLAN, INC.	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	0000001
0936	INDEPENDENCE HEALTH GROUP INC.	54763	23-0724427	0000000000	0000000000		INTER-COUNTY HOSPITALIZATION PLAN, INC.	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	0000002
0000		00000	25-1712017	0000000000	0000000000		JEA, INC.	PA	NIA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1524682	0000000000	0000000000		JENKINS-EMPIRE ASSOCIATES	PA	NIA	HIGHMARK INC.	Ownership	99.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	95048	25-1522457	0000000000	0000000000		HIGHMARK CHOICE COMPANY	PA	IA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	85-3092159	0000000000	0000000000		KENT PHARMACY NEWCO, LLC	DE	NIA	HIGHMARK INC.	Ownership	20.0	HIGHMARK HEALTH	N	
0000		00000	52-1841060	0000000000	0000000000		NATIONAL INSTITUTE FOR HEALTH CARE MANAGEMENT LLC	DE	NIA	HIGHMARK INC.	Board of Directors		HIGHMARK HEALTH	N	
0812	HIGHMARK INC	89070	25-1687586	0000000000	0000000000		UNITED CONCORDIA COMPANIES, INC.	PA	IA	HIGHMARK INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	47-1960604	0000000000	0000000000		BABEL HEALTH LLC	DE	NIA	HIGHMARK VENTURES LLC	Ownership	11.1	HIGHMARK HEALTH	N	

**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 Comp-any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic-iliary Loca-tion	Rela-tion-ship to Report-ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
Q162	0000 .. 0812 .. HIGHMARK INC .....	000000 15459	82-4793570 . 46-4156854 .	0000000000 0000000000	0000000000 0000000000	.....	FREE MARKET HEALTH LLC .....	DE ..	NIA ..	HIGHMARK VENTURES LLC .....	Ownership .....	24.5	HIGHMARK HEALTH .....	N .....	.....
	0812 .. HIGHMARK INC .....	15020	45-2763165 .	0000000000 0000000000	.....	.....	HIGHMARK SENIOR SOLUTIONS COMPANY .....	WV ..	IA ..	HIGHMARK WEST VIRGINIA INC. ....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0812 .. HIGHMARK INC .....	35599	25-1334623 .	0000000000 0000000000	.....	.....	WEST VIRGINIA FAMILY HEALTH PLAN, INC .....	WV ..	IA ..	HIGHMARK WEST VIRGINIA INC. ....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0812 .. HIGHMARK INC .....	93440	06-1041332 .	0000000000 0000000000	.....	.....	HIGHMARK CASUALTY INSURANCE COMPANY .....	PA ..	IA ..	HM INSURANCE GROUP, LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0812 .. HIGHMARK INC .....	60213	25-1800302 .	0000000000 0000000000	.....	.....	HM LIFE INSURANCE COMPANY .....	PA ..	IA ..	HM INSURANCE GROUP, LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	85-0540909 .	0000000000 0000000000	.....	.....	HM LIFE INSURANCE COMPANY OF NEW YORK .....	NY ..	IA ..	HM INSURANCE GROUP, LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	82-5351990 .	0000000000 0000000000	.....	.....	HMIG-CLARITY 360 LLC .....	PA ..	NIA ..	HM INSURANCE GROUP, LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	47-4117233 .	0000000000 0000000000	.....	.....	AST RISK, LLC .....	DE ..	NIA ..	HM INSURANCE GROUP, LLC .....	Ownership .....	33.3	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	46-5705484 .	0000000000 0000000000	.....	.....	PHYSICIAN PARTNERS OF WESTERN PA LLC .....	PA ..	NIA ..	HMPG INC. ....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	45-3761429 .	0000000000 0000000000	.....	.....	ALLEGHENY HEALTH NETWORK EMERGENCY MEDICINE MANAGEMENT, LLC .....	DE ..	NIA ..	HMPG INC. ....	Ownership .....	50.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	25-1375204 .	0000000000 0000000000	.....	.....	HMPG PROPERTIES NORTH LLC .....	PA ..	NIA ..	HMPG INC. ....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	90-0996509 .	0000000000 0000000000	.....	.....	KLINGENSMITH, INC .....	PA ..	NIA ..	HMPG INC. ....	Ownership .....	65.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	15279	46-3476730 .	0000000000 0000000000	.....	.....	MONROEVILLE ASC LLC .....	PA ..	NIA ..	HMPG INC. ....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	32-0429947 .	0000000000 0000000000	.....	.....	PALLADIUM RISK RETENTION GROUP, INC. ....	VT ..	IA ..	HMPG INC. ....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	46-2138706 .	0000000000 0000000000	.....	.....	PROVIDER PPI LLC .....	PA ..	NIA ..	HMPG INC. ....	Ownership .....	99.5	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	45-5235291 .	0000000000 0000000000	.....	.....	GOLD MIST ADVISORS LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	35-2483160 .	0000000000 0000000000	.....	.....	OSIRIS PROPERTIES, LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	30-0791512 .	0000000000 0000000000	.....	.....	PLATINUM ADVISORS LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	27-3033308 .	0000000000 0000000000	.....	.....	PRINCIPO ADVISORS, LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	27-3035436 .	0000000000 0000000000	.....	.....	SILVER RAIN MANAGEMENT, LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	90-0970618 .	0000000000 0000000000	.....	.....	SILVER RAIN, LP .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	99.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	32-0371926 .	0000000000 0000000000	.....	.....	SUMMER WIND MANAGEMENT, LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	84-2176985 .	0000000000 0000000000	.....	.....	WEXFORD MEDICAL MALL LLC .....	PA ..	NIA ..	HMPG PROPERTIES NORTH LLC .....	Ownership .....	100.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	25-1524682 .	0000000000 0000000000	.....	.....	WEXFORD MEDICAL MALL AND HOSPITAL CONDOMINIUM ASSOCIATION .....	PA ..	NIA ..	WEXFORD MEDICAL MALL LLC .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	25-1684735 .	0000000000 0000000000	.....	.....	JENKINS-EMPIRE ASSOCIATES .....	PA ..	NIA ..	JEA INC. ....	Ownership .....	1.0	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	45-3355906 .	0000000000 0000000000	.....	.....	FAMILY PRACTICE MEDICAL ASSOCIATES SOUTH, INC. ....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	30-0477313 .	0000000000 0000000000	.....	.....	GRANDIS, RUBIN, SHANAHAN AND ASSOCIATES .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	25-1740456 .	0000000000 0000000000	.....	.....	JEFFERSON HILLS SURGICAL SPECIALISTS .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	80-0069336 .	0000000000 0000000000	.....	.....	JEFFERSON MEDICAL ASSOCIATES, LP .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Ownership .....	89.7	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	86-1159658 .	0000000000 0000000000	.....	.....	JRMC DIAGNOSTIC SERVICES, LLC .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	72-1529332 .	0000000000 0000000000	.....	.....	JRMC PHYSICIAN SERVICES CORPORATION .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	98-1109020 .	0000000000 0000000000	.....	.....	JRMC SPECIALTY GROUP PRACTICE .....	PA ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Board of Directors .....	.....	HIGHMARK HEALTH .....	N .....	.....
	0000 ..	000000	.....	0000000000 0000000000	.....	.....	PACE RE LTD .....	CYM ..	NIA ..	JEFFERSON REGIONAL MEDICAL CENTER .....	Ownership .....	35.0	HIGHMARK HEALTH .....	N .....	.....

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

Q16.3

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Relation- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
0000		15279	46-3476730	000000000	0000000000		PALLADIUM RISK RETENTION GROUP, INC.	VT	IA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	90-0925581	000000000	0000000000		PITTSBURGH BONE, JOINT & SPINE, INC.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	46-3274101	000000000	0000000000		PITTSBURGH PULMONARY AND CRITICAL CARE ASSOCIATES	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	38-3807173	000000000	0000000000		PRIMARY CARE GROUP 10, INC.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	80-0494617	000000000	0000000000		PRIMARY CARE GROUP 11, INC.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	90-0451380	000000000	0000000000		PRIMARY CARE GROUP 3, INC	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	80-0403100	000000000	0000000000		PRIMARY CARE GROUP 5, INC	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	90-0503600	000000000	0000000000		PRIMARY CARE GROUP 7, INC.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	01-0927360	000000000	0000000000		PRIMARY CARE GROUP 8, INC.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	26-4194208	000000000	0000000000		PRIME MEDICAL GROUP, PCG 1	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	27-4011352	000000000	0000000000		SOUTH HILLS SURGERY CENTER, LLC	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Ownership	41.9	HIGHMARK HEALTH	N	
0000		00000	46-4954859	000000000	0000000000		SOUTH PITTSBURGH UROLOGY ASSOCIATES	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	45-3540378	000000000	0000000000		STEEL VALLEY ORTHOPAEDIC AND SPORTS MEDICINE	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	72-1529328	000000000	0000000000		THE PARK CARDIOTHORACIC AND VASCULAR INSTITUTE	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1898743	000000000	0000000000		WATERFRONT SURGERY CENTER, LLC	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Ownership	25.0	HIGHMARK HEALTH	N	
0000		00000	25-1874990	000000000	0000000000		WSC REALTY PARTNERS, L.P.	PA	NIA	JEFFERSON REGIONAL MEDICAL CENTER	Ownership	23.5	HIGHMARK HEALTH	N	
0000		00000	51-0630744	000000000	0000000000		CELTIC HEALTHCARE OF WESTMORELAND, LLC	PA	NIA	JV HOLDCO, LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	20-5661063	000000000	0000000000		CELTIC HOSPICE & PALLIATIVE CARE SERVICES, LLC	PA	NIA	JV HOLDCO, LLC	Ownership	79.9	HIGHMARK HEALTH	N	
0000		00000	45-5080712	000000000	0000000000		HMPG PHARMACY LLC	PA	NIA	PROVIDER PPI LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	90-0812390	000000000	0000000000		PDL DISTRIBUTION SERVICES LLC	PA	NIA	PROVIDER PPI LLC	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1631855	000000000	0000000000		THE REGIONAL CANCER CENTER FOUNDATION	PA	NIA	REGIONAL CANCER CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	20-8572620	000000000	0000000000		SVEC, LLC	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1528055	000000000	0000000000		CLINICAL PATHOLOGY INSTITUTE COOPERATIVE, INC	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1181389	000000000	0000000000		COMMUNITY BLOOD BANK OF ERIE COUNTY	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1430922	000000000	0000000000		EMERGYCARE, INC	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	20-1017545	000000000	0000000000		ERIE MEDICAL COMPLEX, LLC	DE	NIA	SAINT VINCENT HEALTH CENTER	Ownership	25.0	HIGHMARK HEALTH	N	
0000		00000	25-1856341	000000000	0000000000		REGIONAL HEART NETWORK	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	45-5550348	000000000	0000000000		SAINT VINCENT SHARED SAVINGS PROGRAM, ACO, LLC	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	

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

Q16.4

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Loca- tion	Relation- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
0000		00000	25-1578290	0000000000	0000000000		ST. VINCENT PROFESSIONAL BUILDING LEASEHOLD CONDOMINIUM ASSOCIATION	PA	NIA	SAINT VINCENT HEALTH CENTER	Ownership	17.3	HIGHMARK HEALTH	N	
0000		00000	25-1498145	0000000000	0000000000		VANTAGE HEALTH GROUP	PA	NIA	SAINT VINCENT HEALTH CENTER	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1736527	0000000000	0000000000		ALLEGHENY HEALTH NETWORK HOME INFUSION, LLC	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Ownership	80.0	HIGHMARK HEALTH	N	
0000		00000	25-1403846	0000000000	0000000000		CLINICAL SERVICES, INC	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Ownership	100.0	HIGHMARK HEALTH	N	
0000		15279	46-3476730	0000000000	0000000000		PALLADIUM RISK RETENTION GROUP, INC.	VT	IA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1385705	0000000000	0000000000		REGIONAL CANCER CENTER	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	83-0371265	0000000000	0000000000		REGIONAL HOME HEALTH AND HOSPICE	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Ownership	55.5	HIGHMARK HEALTH	N	
0000		00000	20-3784338	0000000000	0000000000		SAINT VINCENT AFFILIATED PHYSICIANS	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1679140	0000000000	0000000000		SAINT VINCENT MEDICAL EDUCATION & RESEARCH INSTITUTE, INC	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-1669168	0000000000	0000000000		THE SAINT VINCENT FOUNDATION FOR HEALTH AND HUMAN SERVICES	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	25-0969488	0000000000	0000000000		THE VISITING NURSE ASSOCIATION OF ERIE COUNTY	PA	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	16-0743222	0000000000	0000000000		WESTFIELD MEMORIAL HOSPITAL, INC	NY	NIA	SAINT VINCENT HEALTH SYSTEM	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	27-3035436	0000000000	0000000000		SILVER RAIN, LP	PA	NIA	SILVER RAIN MANAGEMENT, LLC	Ownership	1.0	HIGHMARK HEALTH	N	
0000		00000	45-3688292	0000000000	0000000000		ASSOCIATED CLINICAL LABORATORIES OF PENNSYLVANIA, LLC	PA	NIA	TRISTATE REGIONAL ASSOCIATES LLP	Ownership	40.0	HIGHMARK HEALTH	N	
0000		00000	25-1533746	0000000000	0000000000		ASSOCIATED CLINICAL LABORATORIES, LP	PA	NIA	TRISTATE REGIONAL ASSOCIATES LLP	Ownership	39.6	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	95789	23-7328765	0000000000	0000000000		UNITED CONCORDIA DENTAL PLANS OF CALIFORNIA, INC.	CA	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	47089	23-2541529	0000000000	0000000000		UNITED CONCORDIA DENTAL PLANS OF PENNSYLVANIA, INC.	PA	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	95160	74-2489037	0000000000	0000000000		UNITED CONCORDIA DENTAL PLANS OF TEXAS, INC.	TX	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	96150	38-2289438	0000000000	0000000000		UNITED CONCORDIA DENTAL PLANS OF THE MIDWEST, INC.	MI	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	95253	52-1542269	0000000000	0000000000		UNITED CONCORDIA DENTAL PLANS, INC.	MD	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	60222	11-3008245	0000000000	0000000000		UNITED CONCORDIA INSURANCE COMPANY OF NEW YORK	NY	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0812	HIGHMARK INC	85766	86-0307623	0000000000	0000000000		UNITED CONCORDIA INSURANCE COMPANY	AZ	IA	UNITED CONCORDIA COMPANIES, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
0000		00000	25-1689871	0000000000	0000000000		5148 LIBERTY AVENUE MEDICAL ASSOCIATES, LP	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	50.0	HIGHMARK HEALTH	N	
0000		00000	25-1838458	0000000000	0000000000		ALLEGHENY CLINIC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
0000		00000	30-0314897	0000000000	0000000000		ALLEGHENY IMAGING OF MCCANDLESS	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	45.0	HIGHMARK HEALTH	N	

**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 Comp-any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic-iliary Loca-tion	Rela-tion-ship to Report-ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
Q16.5	0000	00000	25-1838457	0000000000	0000000000		ALLEGHENY MEDICAL PRACTICE NETWORK	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1320493	0000000000	0000000000		ALLEGHENY SINGER RESEARCH INSTITUTE	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1875178	0000000000	0000000000		ALLE-KISKI MEDICAL CENTER	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1737079	0000000000	0000000000		CANONSBURG GENERAL HOSPITAL	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1798379	0000000000	0000000000		FORBES HEALTH FOUNDATION	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	47-2368587	0000000000	0000000000		JV HOLDCO, LLC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	84-2176985	0000000000	0000000000		WEXFORD MEDICAL MALL AND HOSPITAL CONDOMINIUM ASSOCIATION			WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	59.6	HIGHMARK HEALTH	N	
	0000	00000	26-1284448	0000000000	0000000000		MCCANDLESS ENDOSCOPY CENTER	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1880238	0000000000	0000000000		NORTH SHORE ENDOSCOPY CENTER	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	50.0	HIGHMARK HEALTH	N	
	0000	00000	25-1652874	0000000000	0000000000		OPTIMA IMAGING	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	50.0	HIGHMARK HEALTH	N	
	0000	15279	46-3476730	0000000000	0000000000		PALLADIUM RISK RETENTION GROUP, INC.			WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	20.0	HIGHMARK HEALTH	N	
	0000	00000	27-3982341	0000000000	0000000000		PETERS TOWNSHIP SURGERY CENTER, LLC	VT	IA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	25-1472073	0000000000	0000000000		SUBURBAN HEALTH FOUNDATION	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	20-1107650	0000000000	0000000000		WEST PENN ALLEGHENY FOUNDATION, LLC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	11-3683376	0000000000	0000000000		ALLEGHENY CLINIC MEDICAL ONCOLOGY	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	27-2344847	0000000000	0000000000		WEST PENN AMBULATORY SURGICAL COMPANY, LLC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	25-1437405	0000000000	0000000000		WEST PENN CORPORATE MEDICAL SERVICES, INC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	25-1470766	0000000000	0000000000		WEST PENN HOSPITAL FOUNDATION	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	26-1630719	0000000000	0000000000		WEST PENN NEUROSURGERY PC	PA	NIA	WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	27-1939478	0000000000	0000000000		CHAUTAUQUA MEDICAL PRACTICE P.C.			WEST PENN ALLEGHENY HEALTH SYSTEM, INC.	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	25-1528055	0000000000	0000000000		CLINICAL PATHOLOGY INSTITUTE COOPERATIVE, INC	NY	NIA	WESTFIELD MEMORIAL HOSPITAL, INC	Ownership	100.0	HIGHMARK HEALTH	N	
	0000	00000	23-2919277	0000000000	0000000000		TRISTATE REGIONAL ASSOCIATES LLP	PA	NIA	WESTFIELD MEMORIAL HOSPITAL, INC	Board of Directors		HIGHMARK HEALTH	N	
	0000	00000	23-7029185	0000000000	0000000000		WESTFIELD HOSPITAL REGIONAL AUXILIARY, INC	PA	NIA	WESTFIELD MEMORIAL HOSPITAL, INC	Ownership	1.5	HIGHMARK HEALTH	N	
	0000	00000	22-2270533	0000000000	0000000000		WESTFIELD MEMORIAL HOSPITAL FOUNDATION, INC	NY	NIA	WESTFIELD MEMORIAL HOSPITAL, INC	Board of Directors		HIGHMARK HEALTH	N	

Asterisk	Explanation
0000001	Inter-County Health Plan: 50/50 membership between Highmark Inc. and Independence Hospital Indemnity Plan, Inc. Each member elects 50% of the Board. ....
0000002	Inter-County Hospitalization Plan: 50/50 membership between Highmark Inc. and Independence Hospital Indemnity Plan, Inc. Each member elects 50% of the Board. ....
0000003	Gateway Health LLC: Ownership between Highmark Ventures, LLC (1% GP), Highmark Inc. (49% LP), Mercy Health Plan (1% GP & 49% LP). Each LP elects 50% of the Board. ....

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

## RESPONSE

No

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

Explanations:

Bar Codes:

## Medicare Part D Coverage Supplement



**OVERFLOW PAGE FOR WRITE-INS**

**N O N E**



STATEMENT AS OF **March 31, 2021** OF THE **Gateway Health Plan of Ohio, Inc.**

**SCHEDULE A - VERIFICATION**

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

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	1,164,757	1,174,355
2. Cost of bonds and stocks acquired .....		
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration for bonds and stocks disposed of .....		
7. Deduct amortization of premium .....	2,433	9,598
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other-than-temporary impairment recognized .....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		
11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10) .....	1,162,324	1,164,757
12. Deduct total nonadmitted amounts .....		
13. Statement value at end of current period (Line 11 minus Line 12) .....	1,162,324	1,164,757

**SCHEDULE D - PART 1B**  
**Showing the Acquisitions, Dispositions and Non-Trading Activity**  
**During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation**

NAIC Designation		1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>									
1.	NAIC 1 (a) .....	1,164,756			(2,433)	1,162,324			1,164,756
2.	NAIC 2 (a) .....								
3.	NAIC 3 (a) .....								
4.	NAIC 4 (a) .....								
5.	NAIC 5 (a) .....								
6.	NAIC 6 (a) .....								
7.	Total Bonds .....	1,164,756			(2,433)	1,162,324			1,164,756
<b>PREFERRED STOCK</b>									
8.	NAIC 1 .....								
9.	NAIC 2 .....								
10.	NAIC 3 .....								
11.	NAIC 4 .....								
12.	NAIC 5 .....								
13.	NAIC 6 .....								
14.	Total Preferred Stock .....								
15.	Total Bonds & Preferred Stock .....	1,164,756			(2,433)	1,162,324			1,164,756

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

**SI03   Schedule DA Part 1 ..... NONE**

**SI03   Schedule DA Verification ..... NONE**

**SI04   Schedule DB - Part A Verification ..... NONE**

**SI04   Schedule DB - Part B Verification ..... NONE**

**SI05   Schedule DB Part C Section 1 ..... NONE**

**SI06   Schedule DB Part C Section 2 ..... NONE**

**SI07   Schedule DB - Verification ..... NONE**

**SCHEDULE E - PART 2 - VERIFICATION**  
**(Cash Equivalents)**

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year .....	9,501,048	11,426,517
2.	Cost of cash equivalents acquired .....	12,161	682,531
3.	Accrual of discount .....		
4.	Unrealized valuation increase (decrease) .....		
5.	Total gain (loss) on disposals .....		
6.	Deduct consideration received on disposals .....	5,000,000	2,608,000
7.	Deduct amortization of premium .....		
8.	Total foreign exchange change in book/adjusted carrying value .....		
9.	Deduct current year's other-than-temporary impairment recognized .....		
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9) .....	4,513,209	9,501,048
11.	Deduct total nonadmitted amounts .....		
12.	Statement value at end of current period (Line 10 minus Line 11) .....	4,513,209	9,501,048

<b>E01</b>	<b>Schedule A Part 2</b>	<b>NONE</b>
<b>E01</b>	<b>Schedule A Part 3</b>	<b>NONE</b>
<b>E02</b>	<b>Schedule B Part 2</b>	<b>NONE</b>
<b>E02</b>	<b>Schedule B Part 3</b>	<b>NONE</b>
<b>E03</b>	<b>Schedule BA Part 2</b>	<b>NONE</b>
<b>E03</b>	<b>Schedule BA Part 3</b>	<b>NONE</b>
<b>E04</b>	<b>Schedule D Part 3</b>	<b>NONE</b>
<b>E05</b>	<b>Schedule D Part 4</b>	<b>NONE</b>
<b>E06</b>	<b>Schedule DB Part A Section 1</b>	<b>NONE</b>
<b>E07</b>	<b>Schedule DB Part B Section 1</b>	<b>NONE</b>
<b>E08</b>	<b>Schedule DB Part D Section 1</b>	<b>NONE</b>
<b>E09</b>	<b>Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity</b>	<b>NONE</b>
<b>E09</b>	<b>Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity</b>	<b>NONE</b>
<b>E10</b>	<b>Schedule DB Part E</b>	<b>NONE</b>
<b>E11</b>	<b>Schedule DL - Part 1 - Securities Lending Collateral Assets</b>	<b>NONE</b>
<b>E12</b>	<b>Schedule DL - Part 2 - Securities Lending Collateral Assets</b>	<b>NONE</b>

**SCHEDULE E - PART 1 - CASH**

**Month End Depository Balances**

1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
Depository			Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	*
							First Month	Second Month	Third Month	
open depositories										
PNC Operating Medicaid Acct 1060 .....	Jeannette, PA .....						6,646	4,744	2,866	X X X
PNC Operating Medicare Acct 1061 .....	Jeannette, PA .....						496,330	447,950	421,480	X X X
PNC Medicare Claims Acct 1070 .....	Jeannette, PA .....						(389,588)	(237,710)	(220,301)	X X X
0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories ..			X X X	... X X X ..						X X X
0199999 Totals - Open Depositories .....			X X X	... X X X ..			113,388	214,984	204,045	X X X
0299998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories .....			X X X	... X X X ..						X X X
0299999 Totals - Suspended Depositories .....			X X X	... X X X ..						X X X
0399999 Total Cash On Deposit .....			X X X	... X X X ..			113,388	214,984	204,045	X X X
0499999 Cash in Company's Office .....			X X X	... X X X ..	X X X	X X X				X X X
0599999 Total Cash .....			X X X	... X X X ..			113,388	214,984	204,045	X X X

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
<b>Exempt Money Market Mutual Funds - as Identified by SVO</b>								
. 261941108 .	DREYFUS TREAS INSTL CASH MGMT .....		..... 03/02/2021 .....	..... 0.000 .....	..... X X X .....	..... 2,099,251 .....	.....	..... 52
. 38142B880 .	GOLDMAN SACHS FDS FIN SQ FED-FST MM .....		..... 03/31/2021 .....	..... 0.000 .....	..... X X X .....	..... 2,413,959 .....	..... 12 .....	..... 45
8599999 Subtotal - Exempt Money Market Mutual Funds - as Identified by SVO .....						..... 4,513,209 .....	..... 12 .....	..... 97
9999999 Total Cash Equivalents .....						..... 4,513,209 .....	..... 12 .....	..... 97