



HEALTH ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2021
 OF THE CONDITION AND AFFAIRS OF THE
Vision Service Plan Insurance Company

NAIC Group Code 1189 1189 NAIC Company Code 39616 Employer's ID Number 06-1227840
(Current) (Prior)

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

Country of Domicile United States of America

Licensed as business type: Property/Casualty

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 06/10/1987 Commenced Business 07/01/1987

Statutory Home Office 3400 Morse Crossing Columbus, OH, US 43219
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 3333 Quality Drive
(Street and Number)
Rancho Cordova, CA, US 95670 916-851-5000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 3333 Quality Drive Rancho Cordova, CA, US 95670
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3333 Quality Drive
(Street and Number)
Rancho Cordova, CA, US 95670 916-851-5000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.vsp.com

Statutory Statement Contact Sandy Wick 916-851-5000
(Name) (Area Code) (Telephone Number)
sandy.wick@vsp.com 916-463-9040
(E-mail Address) (FAX Number)

OFFICERS

President Kate Alison Renwick-Espinosa Secretary Theresa Ann Wilson #
 Treasurer Monica Renee Perez

OTHER

DIRECTORS OR TRUSTEES

Thomas Allan Fessler Bradley Nelson Garber Michael Joseph Guyette
Kate Alison Renwick-Espinosa Daniel Joseph Schauer

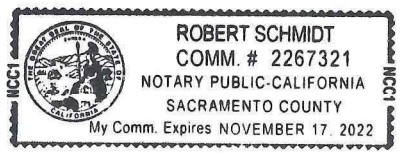
State of California SS
 County of Sacramento

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.

Kate Alison Renwick-Espinosa Monica Renee Perez Theresa Ann Wilson
 President Treasurer Secretary

Subscribed and sworn to before me this 21st day of February 2022
[Signature]

- a. Is this an original filing? Yes [X] No []
 b. If no,
 1. State the amendment number.....
 2. Date filed.....
 3. Number of pages attached.....



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
FEDVIP HIGH OPTION 24900002.....	3,773,847	0	0	0	0	3,773,847
FEDVIP HIGH OPTION 12400001.....	1,580,406	0	0	0	0	1,580,406
FEDVIP HIGH OPTION 51500015.....	1,261,619	0	0	0	0	1,261,619
ADP.....	729,199	361,561	0	0	0	1,090,760
ACTIVES FULL SERVICE (VSP+).....	1,028,847	(866)	0	0	0	1,027,981
FEDVIP HIGH OPTION 97381600.....	767,173	0	0	0	0	767,173
FEDVIP HIGH OPTION 18000009.....	712,294	0	0	0	0	712,294
MERCK.....	689,231	0	0	0	0	689,231
OHIOHEALTH.....	688,276	(27)	0	0	0	688,250
MEDTRONIC - ACTIVE.....	559,527	(2,185)	0	0	0	557,342
USAA-ACTIVES.....	519,929	0	0	0	0	519,929
FEDVIP STD OPTION 24900002.....	450,389	0	0	0	0	450,389
CARGILL ACTIVE.....	391,582	34,567	0	0	0	426,149
US ONCOLOGY - ACTIVE.....	281,171	141,629	0	0	0	422,800
FEDVIP HIGH OPTION 97380800.....	417,890	0	0	0	0	417,890
FEDVIP STD OPTION 51500015.....	402,771	0	0	0	0	402,771
SANFORD ACTIVE.....	398,268	0	0	0	0	398,268
HARRIS TEETER ACTIVE.....	264,761	132,997	(5,437)	(9,889)	0	382,432
FEDVIP HIGH OPTION 97380100.....	313,829	0	0	0	0	313,829
FEDVIP HIGH OPTION 97380600.....	297,917	0	0	0	0	297,917
FEDVIP HIGH OPTION 97380500.....	280,995	0	0	0	0	280,995
G.I.B. EDUCATION.....	275,988	0	0	0	0	275,988
AUTOZONE - PLAN A-ACTIVES.....	269,816	0	0	0	0	269,816
OHP/CHIP 6-18 YEARS.....	264,578	(1,119)	0	0	0	263,459
ENCOMPASS HEALTH ACTIVE-HIGH.....	155,205	76,894	4,981	15,729	252,807	0
COMERICA INCORPORATED.....	246,463	(602)	0	0	0	245,861
HEALTHCARE- BUY UP PLAN MUNSON.....	237,612	(1,652)	0	0	0	235,960
TRTA.....	230,044	0	0	0	0	230,044
REGIONS BANK ACTIVES.....	205,809	7,231	16,875	0	0	229,916
ECOLAB ACTIVE.....	229,776	0	0	0	0	229,776
ACTIVE PREMIER PLAN.....	229,169	0	0	0	0	229,169
PHARMA.....	220,611	0	0	0	0	220,611
PRISMA HEALTH PREMIER.....	217,727	0	0	0	0	217,727
HONEYWELL ACTIVE PREMIER PLUS.....	216,667	0	0	0	0	216,667
HSRC.....	197,396	0	0	16,379	213,776	0
FEDVIP STD OPTION 97381600.....	204,887	0	0	0	0	204,887
LTL HOURLY - BASE.....	201,364	(76)	0	0	0	201,288
ENCOMPASS HEALTH ACTIVE-LOW.....	124,001	62,095	(8)	13,000	199,086	0
WM-ACTIVE.....	197,114	0	0	0	0	197,114
ACTIVE.....	194,474	0	0	0	0	194,474
JACOBS TECHNOLOGY.....	170,247	0	5,608	17,848	193,703	0
LIFEPOINT HOSP. ACTIVE PREMIER.....	189,236	0	0	0	0	189,236
QUINTILES ACTIVES.....	188,377	0	0	0	0	188,377
ACTIVE.....	186,724	0	0	0	0	186,724
PWAC.....	178,944	0	0	0	0	178,944
PULTEGROUP, INC.....	112,901	(105)	56,108	(186)	0	168,718
BBVA COMPASS-VSP PLUS PLAN.....	59	0	160,492	(183)	0	160,368
LTL HOURLY - BUY-UP.....	156,216	(74)	0	0	0	156,142
WESTLAKE MANAGEMENT SERVICES.....	152,473	0	0	0	0	152,473
AVIS BUDGET GROUP-ACTIVE.....	100,692	50,476	(34)	0	0	151,135
INTERNATIONAL PAPER COMPANY.....	140,890	0	0	0	0	140,890

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EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
AIR METHODS, INC.	93,098	46,602	(314)	(377)	0	139,010
BIG LOTS - LOW PLAN	138,987	0	0	0	0	138,987
BENEFIT PLANS	138,113	0	(175)	(1,809)	0	136,129
JBS USA LLC-SALARY	134,208	0	0	0	0	134,208
KINDER MORGAN	134,062	0	0	0	0	134,062
NATIONAL HERITAGE ACADEMIES	133,483	(507)	0	0	0	132,976
KPMG- ACTIVE EMPLOYEES	132,175	0	0	0	0	132,175
CH ROBINSON	119,074	9,742	0	0	0	128,817
GOOD	122,593	0	0	0	0	122,593
HIGH PLAN: ACTIVES	122,467	0	0	0	0	122,467
FEDVIP HIGH OPTION 97381500	121,923	0	0	0	0	121,923
BIOGEN IDEC	121,801	0	0	0	0	121,801
TTEC ACTIVES BUY UP	118,407	(80)	0	0	0	118,326
AMERISOURCE ENHANCED	116,829	0	0	0	0	116,829
MCLANE GROCERY 1	115,810	(45)	0	0	0	115,765
TE CONNECTIVITY - ACTIVES	112,024	0	0	0	0	112,024
G.I.B. STATE	111,756	0	0	0	0	111,756
AMEDISYS HOLDINGS LLC ACTIVE	111,691	0	0	0	0	111,691
LIFEPOINT HOSP. ACTIVE BASIC	111,680	0	0	0	0	111,680
UNFI ACTIVES ENHANCED PLAN	134,733	0	(23,921)	0	0	110,812
PENNEY OPCO LLC.	109,397	0	0	0	0	109,397
PRISMA HEALTH BASE	107,007	0	0	0	0	107,007
G.I.B. EDUCATION	106,358	0	0	0	0	106,358
SCHERING PLOUGH/MERCK	106,071	0	0	0	0	106,071
CDK GLOBAL ACTIVE	105,924	0	0	0	0	105,924
ACTIVES CHOICE-PROTEC SAFETY	104,579	0	0	0	0	104,579
ACTIVE- ENHANCED PLAN	67,807	35,194	0	0	0	103,001
REALOGY-ACTIVE	101,802	0	0	0	0	101,802
FEDVIP STD OPTION 18000009	101,638	0	0	0	0	101,638
FEDVIP HIGH OPTION 14069999	99,788	0	0	0	0	99,788
PPC - SALARY	99,722	0	0	0	0	99,722
IB-ALL POPULATIONS	97,692	0	0	0	0	97,692
FEDVIP HIGH OPTION 88022098	97,501	0	0	0	0	97,501
SEDGWICK COUNTY ACTIVE	64,440	32,607	0	0	0	97,046
CLYDE HOURLY	66,463	33,054	(2,481)	0	0	97,035
FEDVIP STD OPTION 97380800	95,876	0	0	0	0	95,876
FEDVIP HIGH OPTION 14019999	95,751	0	0	0	0	95,751
BEN ASSOC- VOLUNTARY EFF 12/10	95,775	(661)	0	0	0	95,114
SPECTRUM HEALTH - SHH	95,233	0	(345)	0	0	94,889
SAINT FRANCIS HEALTH SYSTEM	94,362	(150)	0	0	0	94,211
EVT CHOICE PLAN B 3-TIER	62,504	31,124	0	0	0	93,627
HUNTSVILLE HOSPITAL ACTIVE	92,350	0	0	0	0	92,350
COMMUNITY HEALTH NETWORK, INC.	89,207	0	0	0	0	89,207
DFA DAIRY BRANDS ACTIVE	87,617	0	0	0	0	87,617
HEALTH SERVICES (COHS)	87,425	0	0	0	0	87,425
COMMERCIAL METALS CO.-PREMIUM	87,314	0	0	0	0	87,314
DECEMBER-EXTEND PLAN 12/12/24	87,052	0	0	0	0	87,052
VIVINT INC ACTIVES	79,761	2,067	2,404	2,490	86,721	0
G.I.B. STATE	85,931	0	0	0	0	85,931
MCLANE GROCERY 2	85,095	0	0	0	0	85,095
ACTIVE	83,735	(9)	0	0	0	83,726

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
PRA ACTIVE	82,903	0	0	0	0	82,903
G.I.B. STATE	82,636	0	0	0	0	82,636
ROBERT BOSCH CORP - BUY UP EO	78,864	3,438	0	0	0	82,301
FEDVIP STD OPTION 97380100	81,117	0	0	0	0	81,117
PATTERSON DENTAL (ACTIVES)	80,212	(226)	0	0	0	79,987
FEDVIP STD OPTION 97380600	79,136	0	0	0	0	79,136
BEN ASSOC- PACKAGED EFF 12/10	78,762	(458)	0	0	0	78,304
MI ST. UNIV PREM EO PLN ACTIVE	77,690	0	0	0	0	77,690
SH SYSTEM	77,155	0	0	0	0	77,155
CLEAN HARBORS ACTIVE	76,185	0	0	0	0	76,185
FEDVIP HIGH OPTION 24069999	75,974	0	0	0	0	75,974
UKHS ACTIVE PLUS PLAN	75,401	0	0	0	0	75,401
FAIRVIEW HEALTH - ACTIVE	74,911	0	0	0	0	74,911
GSS ACTIVE	74,743	0	0	0	0	74,743
CORPORATE SLRD EXEMPT	49,694	24,743	(82)	0	0	74,355
ACTIVE-BASE PLAN	73,843	(19)	0	0	0	73,824
PHOENIX CHILDREN'S HOSPITAL	73,374	0	0	0	0	73,374
FEDVIP HIGH OPTION 97380700	72,243	0	0	0	0	72,243
BOY SCOUTS	72,223	0	0	0	0	72,223
DAYTON FREIGHT LINES, INC.	71,923	0	0	0	0	71,923
INTEGER ACTIVE	71,584	(112)	0	0	0	71,472
FINDLAY HRLY	47,359	23,667	(17)	0	0	71,009
TECH MAHINDRA INC PREM ACTIVE	70,996	0	0	0	0	70,996
ACTIVE PREMIER PLAN	67,267	3,593	0	0	0	70,861
BRONSON HEALTHCARE-HIGH PLAN	70,824	0	0	0	0	70,824
DENVER PUBLIC SCHOOL DISTRICT	70,600	0	0	0	0	70,600
CAREOREGON ADVANTAGE PLUS	70,764	0	(206)	0	0	70,558
LUTHERAN	71,621	(1,177)	0	0	0	70,444
ILRTA	70,217	0	0	0	0	70,217
NATIONAL GENERAL MANAGEMENT	69,791	0	0	0	0	69,791
ROBERT BOSCH CORPORATION	66,155	0	0	3,343	69,498	0
GREA	69,346	0	0	0	0	69,346
MARION HRLY	46,108	22,743	0	0	0	68,851
G.I.B. EDUCATION	67,963	0	0	0	0	67,963
ACTIVES	67,298	0	0	0	0	67,298
MUNSON HEALTHCARE BASE PLAN	67,427	(479)	0	0	0	66,948
UKG ACTIVE	66,773	0	0	0	0	66,773
PERTH AMBOY BOE- ACTIVE	32,069	34,336	(11)	0	0	66,394
HONEYWELL ACTIVE PREMIER	66,352	0	0	0	0	66,352
MMC VISION CARE PLAN	65,072	0	0	0	0	65,072
HAYS CISD	43,619	21,375	0	0	0	64,993
BILL TO/SHIP TO:	64,516	0	0	0	0	64,516
DFA ACTIVE	64,500	0	0	0	0	64,500
CONSOLIDATED ELECTRICAL DIST.	63,479	0	0	0	0	63,479
VIVINT SOLAR ACTIVITIES	42,336	21,194	(618)	0	0	62,911
EVT CHOICE PLAN B 2-TIER	41,838	20,897	0	0	0	62,735
ONE GAS ACTIVE	62,081	0	0	0	0	62,081
P-WESTINGHOUSE ELECTRIC	61,170	(169)	0	0	0	61,001
WESTINGHOUSE ELECTRIC COMPANY	52,049	(68)	0	8,880	60,861	0
EVT CHOICE PLN C VOL 3-TIER	5,426	54,536	0	0	0	59,962
EVT CHOICE PLN B VOL 3-TIER	39,978	19,894	0	0	0	59,872

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
FEDVIP STD OPTION 97380500.....	59,140	0	0	0	0	59,140
HENDRICKS REG HEALTH-ACTIVE.....	39,209	19,220	0	0	0	58,429
MY MICHIGAN HEALTH.....	57,880	0	0	0	0	57,880
JERSEY CITY EDUCATION ASSOC.....	57,146	0	0	0	0	57,146
SEALY INC ENHANCED.....	57,129	0	0	0	0	57,129
HILCORP - ACTIVE.....	57,121	0	0	0	0	57,121
LOWE'S STORES HIGH PLAN.....	23,638	33,309	0	0	0	56,947
CHEROKEE NATION-OPTION 2.....	56,671	0	0	0	0	56,671
AMANA FT HRLY.....	37,178	18,965	(155)	0	0	55,987
TTEC ACTIVES.....	55,956	(31)	0	0	0	55,926
CORPORATE SLRD NON-EXEMPT.....	37,248	18,611	0	0	0	55,859
AMERISOURCE STANDARD.....	54,383	0	0	0	0	54,383
G.I.B. EDUCATION.....	53,975	0	0	0	0	53,975
ACTIVES.....	53,756	0	0	0	0	53,756
ALL ACTIVE EMPLOYEES.....	53,532	0	0	0	0	53,532
GOLD-ACTIVE.....	52,307	0	0	0	0	52,307
MMC VISION CARE PLAN.....	52,086	0	0	0	0	52,086
OTHER DISH CHOICE.....	52,004	(80)	0	0	0	51,924
UAB ACTIVE PREM EMP+FAMILY.....	51,796	0	0	0	0	51,796
INVOLUNTARY CLASSIC.....	33,056	16,683	1,776	0	0	51,514
KRONOS INCORPORATED.....	51,322	0	0	0	0	51,322
AUTOZONE - PLAN B-ACTIVES.....	51,183	0	0	0	0	51,183
BANCORPSOUTH ACTIVE.....	51,129	0	0	0	0	51,129
ETR SERVICES INC NBU ACT/DIS.....	50,840	0	0	0	0	50,840
DCP MIDSTREAM, LP-ACTIVE.....	50,596	0	0	0	0	50,596
FEDVIP HIGH OPTION 16150050.....	49,555	0	0	0	0	49,555
WORLEY GROUP INC.....	49,547	0	0	0	0	49,547
LGH VSP PLUS PLAN.....	49,417	0	0	0	0	49,417
BAPTIST HEALTH.....	32,851	16,437	(73)	0	0	49,215
MIAMI VALLEY HOSPITAL.....	49,197	0	0	0	0	49,197
ARAMARK CORPORATION-SALARY.....	48,739	0	0	0	0	48,739
EPAM SYSTEMS, INC. - ACTIVE.....	48,596	(4)	0	0	0	48,592
INVOLUNTARY DELUXE.....	37,972	10,143	0	0	0	48,114
WORTHINGTON INDUSTRIES INC.....	47,874	0	0	0	0	47,874
EOG RESOURCES, INC.....	47,840	0	0	0	0	47,840
JPS HEALTH NETWORK-PLUS PLAN.....	47,551	0	0	0	0	47,551
MPS - ACTIVE - PREM.....	40,454	6,961	0	0	0	47,415
STILLWATER MEDICAL CENTER.....	32,538	16,503	(94)	(1,547)	0	47,400
GENESIS HEALTHCARE SYSTEM.....	47,351	0	0	0	0	47,351
SALARIED/NON UNION HOURLY.....	47,264	0	0	0	0	47,264
UPENN - ACTIVES.....	47,255	0	0	0	0	47,255
SPECTRUM HEALTH MEDICAL GROUP.....	47,203	0	0	0	0	47,203
SOUTHEAST HEALTH.....	63,053	(16,093)	0	0	0	46,961
DENVER HEALTH ACTIVES.....	46,491	0	0	0	0	46,491
INTERTEK ACTIVE.....	46,386	0	0	0	0	46,386
BANNER HEALTH - PREMIER PLAN.....	45,768	0	0	0	0	45,768
UAB ACTIVE BASIC EMP+FAMILY.....	45,295	0	0	0	0	45,295
ACTIVE-BASIC PLAN.....	29,930	15,265	0	0	0	45,195
ACRISURE, LLC.....	45,082	0	0	0	0	45,082
CUYAHOGA COUNTY ACTIVE.....	44,964	0	0	0	0	44,964
UKHS ACTIVE BASIC PLAN.....	44,832	0	0	0	0	44,832

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
ADAPTHEALTH, LLC - ACTIVE	44,338	0	0	0	0	44,338
ACTIVE	44,226	0	0	0	0	44,226
TUALITY - FULL SERVICE	21,761	11,031	11,248	(105)	0	43,936
WOOD GROUP ACTIVE HIGH	43,763	0	0	0	0	43,763
THE CITY OF OKLAHOMA CITY	43,379	0	0	0	0	43,379
NOVEMBER-EXTEND PLAN 12/12/24	43,303	0	0	0	0	43,303
AVERA MCKENNAN HOSPITAL-BASE	43,281	0	0	0	0	43,281
SERO	43,202	(96)	0	0	0	43,106
CORNERSTONE ACTIVE	48,337	(5,299)	0	0	0	43,038
PNA- ACTIVE EMPLOYEES	42,820	0	0	0	0	42,820
MCLANE FOODSERVICE 1	42,419	(10)	0	0	0	42,409
OLATHE USD-PLAN B \$10/25	42,532	(115)	(178)	0	0	42,239
POTASH ACTIVE	42,231	0	0	0	0	42,231
UNIV. OF MN PHYSICIANS-ACTIVE	42,196	0	0	0	0	42,196
MI STATE UNIVERSITY ACTIVES	42,097	0	0	0	0	42,097
HSTD	41,905	0	0	0	0	41,905
HARLAND CLARKE	41,843	0	0	0	0	41,843
FEDVIP HIGH OPTION 10005697	41,473	0	0	0	0	41,473
MODERNA, INC.	41,437	0	0	0	0	41,437
RPEACA	41,055	0	0	0	0	41,055
H. B. FULLER COMPANY	36,957	3,934	0	0	0	40,891
INGLES MARKET INC BUY UP	41,138	(309)	0	0	0	40,829
FULL TIME	40,821	0	0	0	0	40,821
SALEM HOSPITAL ACTIVE	40,703	0	0	0	0	40,703
CLEVELAND FT HRLY	27,362	13,348	(50)	0	0	40,661
ST JOSEPH'S HEALTHCARE	40,638	0	0	0	0	40,638
GULF STATES TOYOTA	40,575	0	0	0	0	40,575
LOUISVILLE METRO GOVERNMENT	41,040	(138)	(417)	0	0	40,485
STANDARD PLAN ACTIVE	42,320	0	(1,852)	0	0	40,468
ST. PETERS UNIVERSITY HOSPITAL	40,663	(235)	0	0	0	40,429
BOARD OF PENSIONS EYEWEAR	40,329	0	0	0	0	40,329
SLHN - ACTIVE	40,270	(110)	0	0	0	40,160
GRANDVIEW MEDICAL CENTER	40,105	(105)	0	0	0	39,999
ALLSCRIPTS ACTIVE	41,307	(1,363)	0	0	0	39,944
SALARIED/NON UNION HOURLY	39,551	0	0	0	0	39,551
AKAMAI TECHNOLOGIES, INC.	39,417	0	0	0	0	39,417
PATERSON PUBLIC SCHOOLS PLAN B	39,138	(13)	(1)	0	0	39,124
ACTIVE	37,003	0	1,156	753	38,912	0
ACTIVE	38,802	0	0	0	0	38,802
G.I.B. LOCAL GOVT	38,787	0	0	0	0	38,787
AGFIRST FARM CR BANK -EXPANDED	39,037	(33)	(402)	0	0	38,602
PAYCOM PAYROLL, LLC	38,575	0	0	0	0	38,575
DAKTRONICS - ACTIVES	38,650	(135)	0	0	0	38,515
PLAINS ALL AMERICAN GP LLC	38,499	0	0	0	0	38,499
VOLUNTARY TRADITIONAL	28,304	10,022	0	0	0	38,326
FIVE BELOW, INC. ACTIVE BUY UP	38,256	0	0	0	0	38,256
HIGH PLAN W/EASYOPTION ACTIVE	37,862	0	0	0	0	37,862
DST	37,492	0	0	0	0	37,492
E7G WARSAW SALARIED	27,789	4,663	0	4,899	37,352	0
HSBE	36,938	0	0	0	0	36,938
G.I.B. STATE	36,804	0	0	0	0	36,804

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
LINK SNACKS	32,853	1,195	2,531	0	0	36,580
LOGMEIN USA INC.	36,331	0	0	0	0	36,331
UNFI ACTIVES BASIC PLAN	36,326	0	0	0	0	36,326
150 ON SEMICONDUCTOR-ACTIVES	36,194	0	0	0	0	36,194
ABS ACTIVE	18,221	18,101	(129)	0	0	36,193
PEOPLES BANCORP- WITH MEDICAL	24,426	12,167	(35)	(428)	0	36,129
WHITING OIL & GAS CORPORATION	23,342	12,671	0	0	0	36,013
ACTIVE BASE PLAN	35,890	0	0	0	0	35,890
PAREXEL INTL 7643	35,765	0	0	0	0	35,765
FEBRUARY-EXTEND PLAN 12/12/24	42,282	(6,528)	0	0	0	35,754
OSU ACTIVES - BASE	29,976	0	0	5,592	35,568	0
VALASSIS	35,501	0	0	0	0	35,501
HOLY NAME MEDICAL CNTR ACTIVE	35,373	(64)	0	0	0	35,309
EMPOWER HR	35,298	0	0	0	0	35,298
BVHS	35,180	0	0	0	0	35,180
SALLY BEAUTY	35,112	0	0	0	0	35,112
MMC LOW PLAN	34,931	0	0	0	0	34,931
ACTS ACTIVE PREMIER	34,781	0	0	0	0	34,781
MGH EMPLOYEES	34,775	0	0	0	0	34,775
TU HEALTH SYSTEM ACTIVE	32,782	1,862	0	0	0	34,645
FEDVIP HIGH OPTION 21006944	34,606	0	0	0	0	34,606
BHP PETROLEUM	34,595	0	0	0	0	34,595
MCLANE FOODSERVICE 2	34,578	(14)	0	0	0	34,564
BRONSON HEALTHCARE GROUP	34,483	0	0	0	0	34,483
MTRAN-METRO TRANSIT-PLAN C	23,016	0	11,569	(113)	0	34,471
FEDVIP HIGH OPTION 51100011	34,455	0	0	0	0	34,455
LTL SALARY - BASE	34,466	(35)	0	0	0	34,431
MMC LOW PLAN	34,416	0	0	0	0	34,416
SOUTH BEND COMMUNITY SCHOOLS	35,216	599	(1,448)	0	0	34,368
HANGER, INC.	34,168	0	0	0	0	34,168
KEYSTONE - ACTIVE	34,129	0	0	0	0	34,129
LAKELAND REGIONAL HS-ACTIVE	34,016	0	0	0	0	34,016
MVT - ACTIVE 12/12/24	33,994	0	0	0	0	33,994
G.I.B. EDUCATION	33,743	0	0	0	0	33,743
BOSE MASSACHUSETTS	33,577	0	0	0	0	33,577
G.I.B. STATE	33,178	0	0	0	0	33,178
SYNGENTA CROP PROTECTION, INC.	33,101	0	0	0	0	33,101
BRIGHTVIEW ACTIVE GOLD	32,849	0	0	0	0	32,849
GOLD - ACTIVE	32,717	0	0	0	0	32,717
CENTRAL MAINE HEALTHCARE CORP.	32,604	0	0	0	0	32,604
ROBERT W BAIRD TRADITIONAL	32,504	0	0	0	0	32,504
UAB ACTIVE PREM EMP ONLY	32,493	0	0	0	0	32,493
FEDVIP HIGH OPTION 47000016	32,447	0	0	0	0	32,447
HANCOCK WHITNEY CORP STANDARD	32,445	0	0	0	0	32,445
FEDVIP STD OPTION 97381500	32,228	0	0	0	0	32,228
COBORN'S INC.	32,675	(108)	(405)	0	0	32,162
SYNGENTA CROP PROTECT PREMIER	32,128	0	0	0	0	32,128
CORP ACTIVES BASIC	32,124	0	0	0	0	32,124
BBVA COMPASS-VSP BASIC PLAN	(9)	0	32,081	0	0	32,072
INSTALLATION CHOICE	32,391	(460)	0	0	0	31,931
APRIL-EXTEND PLAN 12/12/24	31,909	0	0	0	0	31,909

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
AMERICAN SIGNATURE INC	31,862	0	0	0	0	31,862
SHAWNEE MISSION SCHOOL DIST.	31,832		0	0	0	31,832
FEDVIP STD OPTION 14069999	31,746	0	0	0	0	31,746
SGS NORTH AMERICA ACTIVE	33,394	(107)	(1,547)	0	0	31,739
SPECTRUM ACTIVE	31,612	0	0	0	0	31,612
BOZEMAN ACTIVES	31,593	(24)	0	0	0	31,569
PT ENHANCED ACTIVE	31,461	0	0	0	0	31,461
COUNTY OF BOULDER, STATE OF CO	30,527	902	0	0	0	31,429
ACTIVES	31,355	0	0	0	0	31,355
OGE UTILITY	31,268	0	0	0	0	31,268
SS&C TECHNOLOGIES INC	31,178	0	0	0	0	31,178
G. I. B. EDUCATION	30,967	0	0	0	0	30,967
SALUSCLI	30,881	0	0	0	0	30,881
HUHTAMAKI INC. - FULL	30,866	0	0	0	0	30,866
HONEYWELL-ACTIVES	30,818	0	0	0	0	30,818
DAYTON CHILDRENS HOSPITAL	30,757	0	0	0	0	30,757
TULSA HRLY	20,319	10,322	0	0	0	30,641
WILKES-BARRE COMMONWEALTH HEAL	30,650	(120)	0	0	0	30,530
CHOICE BENEFITS - SALARIED	30,429	0	0	0	0	30,429
NORTHWEST HEALTH - PORTER	30,583	(168)	0	0	0	30,415
CORPORATE BRENTWOOD 01-ACTIVE	30,300	0	0	0	0	30,300
CRAFT	30,297	0	0	0	0	30,297
INRTA	30,263	0	0	0	0	30,263
RETIREEES	30,164	0	0	0	0	30,164
MARCH-EXTEND PLAN 12/12/24	30,139	0	0	0	0	30,139
VAIL RESORTS MNTN	30,212	(137)	0	0	0	30,076
CORNERSTONE ACTIVE W/SAFETY	29,963	(23)	0	0	0	29,939
HINES ACTIVE	29,881	0	0	0	0	29,881
MERITAGE HOMES BASE	19,860	10,006	(33)	0	0	29,833
LANDRY'S	29,816	0	0	0	0	29,816
DERP	29,777	(87)	0	0	0	29,690
CORP BUY UP-LENS OPTIONS	19,806	48	9,712	0	0	29,567
GREENVILLE HRLY	19,851	9,701	(17)	0	0	29,536
NORTH MEMORIAL HEALTH - ACTIVE	29,522	(300)	0	0	0	29,222
BUYUP ACTIVE	29,178	0	0	0	0	29,178
KS PLAN ADMINISTRATORS LLC	29,127	0	0	0	0	29,127
VOLUNTARY CLASSIC	19,742	9,222	0	0	0	28,964
VOLUNTARY DELUXE	25,597	3,278	0	0	0	28,875
SMC - ACTIVE PREMIUM PLAN	19,287	9,561	0	0	0	28,848
FULL SERVICE - ALL	28,358	0	0	0	0	28,358
ACTIVE PLUS PLAN	28,348	0	0	0	0	28,348
015-HUB CALIFORNIA	28,336	0	0	0	0	28,336
PRIME LENDING, A PLAINSCAPITAL	28,226	0	0	0	0	28,226
MATHESON TRI-GAS, INC. ACTIVES	28,170	0	0	0	0	28,170
VAIL HEALTH HOSPITAL	28,186	(45)	0	0	0	28,141
IN PUBLIC SCHOOLS ACTIVE	27,933	0	0	0	0	27,933
SHG	26,944	875	0	0	0	27,820
OSU ACTIVES - BUY-UP	27,691	0	0	0	0	27,691
RIPEA	27,565	0	0	0	0	27,565
WILEY - ACTIVE	27,515	0	0	0	0	27,515
MONONGALIA COUNTY GEN HOSPITAL	27,389	0	0	0	0	27,389

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
TRIBAL CASINO: HIGH+LENS	27,346	0	0	0	0	27,346
UAHSF VSP	27,245	0	0	0	0	27,245
Y-12 POST-65 RETIREES	27,172	0	0	0	0	27,172
GALLIANO MARINE BUYUP	27,164	0	0	0	0	27,164
ROBERT W BAIRD PREMIER	27,126	0	0	0	0	27,126
CAC ACTIVE	26,977	0	0	0	0	26,977
COBANK, ACB	26,944	0	0	0	0	26,944
AGFIRST FARM CR BANK -BASIC	27,175	(66)	(103)	(121)	0	26,885
USX BU	26,681	0	0	0	0	26,681
POUDRE SCHOOL DISTRICT R-1	26,519	0	0	0	0	26,519
FOLEY & LARDNER LLP	26,469	0	0	0	0	26,469
ENGIE - FULL SERVICE	26,465	0	0	0	0	26,465
INTERSTATE BATTERY-ACTIVE	26,396	(50)	0	0	0	26,346
FEDVIP STD OPTION 24069999	26,301	0	0	0	0	26,301
AVNET - ACTIVES	26,297	0	0	0	0	26,297
CHOCTAW - ACTIVE	26,238	0	0	0	0	26,238
TECH MAHINDRA INC BASE ACTIVE	26,105	0	0	0	0	26,105
MESA COUNTY VALLEY S.D. NO. 51	23,969	564	1,492	0	0	26,025
EAMC/LANIER	33,504	(7,498)	0	0	0	26,006
ORGANON LLC	25,984	0	0	0	0	25,984
ST. PETER'S HEALTH	25,953	0	0	0	0	25,953
CHANDLER USD-STD ALONE	25,920	0	0	0	0	25,920
FEDVIP STD OPTION 14019999	25,879	0	0	0	0	25,879
ECOVA	25,856	0	0	0	0	25,856
HYDROCHEM-SAFETY	25,795	0	0	0	0	25,795
BASE ACTIVE	25,773	0	0	0	0	25,773
PRECISION DRILLING OILFIELD	25,757	0	0	0	0	25,757
UAB ACTIVE BASIC EMP ONLY	25,727	0	0	0	0	25,727
DARLING BUY UP PLAN C	25,697	0	0	0	0	25,697
LRTA	25,642	0	0	0	0	25,642
UPENN - ACTIVES EASY OPTIONS	25,625	0	0	0	0	25,625
MCLANE FSRM 1	25,492	(10)	0	0	0	25,482
MSGA	12,849	12,631	0	0	0	25,480
HANESBRANDS ACTIVE	25,273	0	0	0	0	25,273
RACKSPACE-ACTIVE	25,020	0	0	0	0	25,020
WIH UNION	24,944	(6)	0	0	0	24,939
FREIGHT MANAGEMENT NON-UNION	24,919	0	0	0	0	24,919
ST. CLAIR HOSPITAL	12,804	12,849	(238)	(532)	0	24,882
HSSS	24,832	0	0	0	0	24,832
TOLL BROTHERS - BUY UP ACTIVE	24,660	0	0	0	0	24,660
EMMC	24,599	(18)	0	0	0	24,581
KENT COUNTY-INTERIM BENEFITS	24,551	0	0	0	0	24,551
VALLEY NATIONAL BANK ACTIVE	24,516	0	0	0	0	24,516
CHANDLER, CITY OF	24,504	0	0	0	0	24,504
REID ACTIVE PLAN 2(SILVER)	18,284	3,257	2,872	0	0	24,413
NORTHWEST MED CTR - TUCSON	24,332	(57)	0	0	0	24,275
TECHNIP ENERGIES ACTIVE	24,201	0	0	0	0	24,201
BRADY CORP-ACTIVES PREMIER	24,173	0	0	0	0	24,173
METABANK	(96)	12,218	12,051	(49)	0	24,123
FIRST BANK HOLDING-ACTIVE	24,073	0	0	0	0	24,073
U.S. COLD STORAGE BUYUP ACTIVE	24,068	0	0	0	0	24,068

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
HYDROCHEM LLC	23,946	0	0	0	0	23,946
G.I.B. STATE	23,908	0	0	0	0	23,908
AMERICAN TOWER CORPORATION	23,885	0	0	0	0	23,885
DSOUSCLI	23,807	0	0	0	0	23,807
FEDVIP STD OPTION 88022098	23,690	0	0	0	0	23,690
CORE HRLY/SLRY	15,866	7,756	0	0	0	23,623
SUNOVION PHARM: ACTIVE	23,446	(60)	0	0	0	23,386
ELA ACT/DIS	23,369	0	0	0	0	23,369
CABLE ONE ACTIVES	159	0	979	22,116	23,255	0
APACHE/ FULL SERVICES	23,202	0	0	0	0	23,202
STATE AUTO - PREMIER - ACTIVE	23,144	0	0	0	0	23,144
ADVANCED CALL CENTER ACTIVE	23,103	0	0	0	0	23,103
FULL TIME (FT)	23,089	0	0	0	0	23,089
ERC ACTIVE	23,069	0	0	0	0	23,069
FEDVIP HIGH OPTION 97381400	23,061	0	0	0	0	23,061
BARRETT DISTRIBUTION CENTERS	11,934	5,767	5,580	(264)	0	23,018
LANE INDUSTRIES	23,093	(209)	0	0	0	22,884
FEDVIP HIGH OPTION 19000003	22,881	0	0	0	0	22,881
ACTIVE - ENABLE MIDSTREAM	22,840	0	0	0	0	22,840
BORDER STATES ELECTRIC	22,782	0	0	0	0	22,782
ACTIVES	22,763	0	0	0	0	22,763
EBSCO INDUSTRIES, INC.	22,754	0	0	0	0	22,754
VOLUNTARY DELUXE W/PROGRESS	12,215	6,319	3,998	0	0	22,532
TELADOC HEALTH, INC. CORE BASE	22,453	0	0	0	0	22,453
JANUARY-EXTEND PLAN 12/12/24	22,411	0	0	0	0	22,411
TALBOTS - ACTIVE	22,380	0	0	0	0	22,380
WESTERN MIDSTREAM SERVICES	22,313	0	0	0	0	22,313
MI DENTAL ASSOC-FULL SER PREMI	22,309	0	0	0	0	22,309
LOW PLAN: ACTIVES	22,258	0	0	0	0	22,258
ACTIVE SALARY EO BUY UP	22,016	0	0	0	0	22,016
EVERETT FINANCIAL, DBA SUPREME	21,927	0	0	0	0	21,927
LMH PLAN 2	21,738	0	0	0	0	21,738
INVOLUNTARY TRADITIONAL	16,668	5,010	0	0	0	21,678
NO.ST.PAUL-MAPLEWOOD-OAKDALE	21,662	0	0	0	0	21,662
GKN AUTOMOTIVE ACTIVE	21,568	0	0	0	0	21,568
IVY TECH ADMIN HOURLY-26 PAYS	21,422	0	0	0	0	21,422
IVANTI-ACTIVE	21,248	0	0	0	0	21,248
SCP DISTRIBUTORS, LLC	21,237	0	0	0	0	21,237
CITY OF FT. COLLINS, COLORADO	21,188	0	0	0	0	21,188
MERITAGE HOMES BUYUP	14,293	6,884	(11)	0	0	21,166
PC CONNECTION, INC.	21,145	0	0	0	0	21,145
BGSU	21,094	0	0	0	0	21,094
HSNS	21,090	0	0	0	0	21,090
MIMECAST OF NORTH AMERICA	14,158	6,815	(44)	0	0	20,929
HUNT REFINERY	21,795	(24)	(843)	0	0	20,928
ACTIVE	20,794	0	0	0	0	20,794
CITY OF HUNTSVILLE - ACTIVE	20,765	0	0	0	0	20,765
KUMON NORTH AMERICA INC.	6,603	0	7,066	7,073	20,741	0
ACTIVE PREMIUM PLUS	20,717	0	0	0	0	20,717
FORRESTER RESEARCH	21,230	(309)	(232)	0	0	20,688
EXACT SCIENCES ACTIVE	20,650	0	0	0	0	20,650

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
ALFA MUTUAL INSURANCE BASE	20,618	0	0	0	0	20,618
HMCGA	20,617	0	0	0	0	20,617
SELECTIVE INSURANCE CO BUY UP	20,611	0	0	0	0	20,611
AVERA MCKENNAN HOSPITAL-	20,603	0	0	0	0	20,603
MAT-SU REGIONAL MEDICAL CENTER	20,531	(48)	0	0	0	20,484
OCTOBER-EXTEND PLAN 12/12/24	20,449	0	0	0	0	20,449
NORTHWEST BANK ACTIVE	20,421	0	0	0	0	20,421
EAMC/LANIER PREMIER	10,154	10,226	(20)	0	0	20,360
SIG SAUER	20,334	0	0	0	0	20,334
REED SMITH LLP	21,095	(793)	0	0	0	20,302
AMERICAN FIDELITY CORPORATION	20,259	0	0	0	0	20,259
OCEANEERING INTERNATIONAL,	20,256	0	0	0	0	20,256
APPRISS, INC.	10,189	10,206	(162)	0	0	20,232
FEDVIP STD OPTION 21006944	20,211	0	0	0	0	20,211
COMMERCIAL METALS CO. - BASIC	20,155	0	0	0	0	20,155
BEN ASSOC-VOL PLAN C \$200	20,738	(651)	0	0	0	20,088
BILL TO/SHIP TO:	20,073	0	0	0	0	20,073
HARRIS ACTIVE HIGH	20,038	0	0	0	0	20,038
NEXTIER HOLDING CO.--ACTIVE	20,018	0	0	0	0	20,018
BCO ACTIVE PREMIER	19,975	0	0	0	0	19,975
WESTERN UNION - ENHANCED PLAN	20,506	0	(60)	(514)	0	19,932
BUY UP - CITY OF BOULDER,	13,275	6,562	0	0	0	19,837
INVOLUNTARY PREMIERE	15,252	4,532	0	0	0	19,785
INFINITY TRUST - PLAN B	19,914	(104)	(65)	0	0	19,745
TEAMSTERS LOCAL 639-EMPLOYERS	19,697	0	0	0	0	19,697
MCLANE FSRM 2	19,610	0	0	0	0	19,610
ACA ADLT RATE CODE1(AGES19-20)	19,543	0	0	0	0	19,543
LTL SALARY - BUY-UP	19,563	(30)	0	0	0	19,532
ARCH OF ST PAUL & MN - ACTIVE	19,295	237	0	0	0	19,532
USX BASE	19,528	0	0	0	0	19,528
MMC VISION CARE PLAN	19,449	0	0	0	0	19,449
CEVA LOGISTICS NON-UNION	19,439	0	0	0	0	19,439
FLOWERS	19,482	(57)	0	0	0	19,425
BASE - CITY OF BOULDER,	12,820	6,406	0	0	0	19,226
TSG RESOURCES INC - ACTIVE	19,173	0	0	0	0	19,173
BRASFIELD & GORRIE	19,156	0	0	0	0	19,156
CSC CHOICE	19,291	(140)	0	0	0	19,151
MERCURY SYSTEMS-BASE PLAN	19,133	0	0	0	0	19,133
MOUNTAINVIEW	19,119	0	0	0	0	19,119
REID ACTIVE PLAN 3(GOLD)	19,051	0	0	0	0	19,051
CROSSMARK PREMIUM ACTIVE	18,902	0	0	0	0	18,902
AFFORDABLE CARE - ACTIVE	18,892	0	0	0	0	18,892
HOLLAND CORPORATE	18,885	0	0	0	0	18,885
LARIMER COUNTY GOVERNMENT	18,835	0	0	0	0	18,835
FEDVIP HIGH OPTION ABARMYAN	18,827	0	0	0	0	18,827
ALLIANZ LIC OF N AMER ACTIVE	18,762	0	0	0	0	18,762
FULL SERVICE ACTIVE	18,710	0	0	0	0	18,710
SMU ACTIVE	18,701	0	0	0	0	18,701
CLEVELAND FT SLRD	12,546	6,241	(110)	0	0	18,677
GADSDEN	18,611	0	0	0	0	18,611
HANCOCK WHITNEY CORP ENHANCED	18,602	0	0	0	0	18,602

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
SEALY INC STANDARD	18,576			0	0	18,576
ETR AR INC NBU/BU ACT/DIS	18,550	0	0	0	0	18,550
NORTHWEST HEALTH - LAPORTE	18,552	(17)	0	0	0	18,535
SOLIS - ACTIVE	9,582	8,954	(28)	0	0	18,508
BALL STATE UNIV - 10 MONTH EES	9,744	8,648	0	0	0	18,391
TPG GLOBAL, LLC	18,305	0	0	0	0	18,305
ENLINK MIDSTREAM OPERATING, L.	18,271	0	0	0	0	18,271
REGIONAL WEST MEDICAL ACTIVE	20,005	(1,436)	(308)	0	0	18,261
A DUJE PYLE COMPANIES - ACTIVE	18,198	0	0	0	0	18,198
BILLINGS PUBLIC SCHOOLS	18,164	0	0	0	0	18,164
JOHNSONVILLE PLUS PLAN 3AN	18,161	0	0	0	0	18,161
SEPTEMBER-EXTEND PLAN 12/12/24	18,038	0	0	0	0	18,038
ADULTS - EXCHANGE	18,018	(34)	0	0	0	17,984
POPLAR BLUFF REG MED CTR	18,029	(57)	0	0	0	17,973
WORLD ACCEPTANCE CORPORATION	17,960	0	0	0	0	17,960
SCP DISTRIBUTORS, LLC BUYUP	17,926	0	0	0	0	17,926
CRISPR THERAPEUTICS INC	18,107	(299)	0	0	0	17,807
RGG SERVICES, INC.	8,761	4,240	5,400	(672)	0	17,729
SORENSEN COMMUNICATIONS-ACTIVE	16,370	828	475	0	0	17,673
PLAN C	17,725	(63)	0	0	0	17,662
KUM & GO ACTIVE	17,599	0	0	0	0	17,599
CRESTWOOD	17,670	(101)	0	0	0	17,569
UAHSF VSP PLUS	17,564	0	0	0	0	17,564
GRAND VALLEY STATE UNIVERSITY	17,611	(63)	0	0	0	17,549
CATHOLIC MEDICAL CENTER	17,532	0	0	0	0	17,532
BANCFIRST CORPORATION	17,475	0	0	0	0	17,475
FIRMENICH INCORPORATED	8,746	(108)	8,984	(171)	0	17,450
DE CAROLINAS, LLC ACTIVE	10,702	6,710	0	0	0	17,411
MTRAN-METRO TRANSIT-PLAN A	11,652	(20)	5,764	(37)	0	17,359
HEALTHEDGE SOFTWARE, INC.	17,431	(103)	0	0	0	17,328
ACTIVE SALARY	17,323	0	0	0	0	17,323
CADENCE BANK, N.A.	17,256	0	0	0	0	17,256
ETR OPER ANO ACT/DIS NBU/BU	17,216	0	0	0	0	17,216
MEDFORD SCHOOL- ACTIVE	17,265	(61)	0	0	0	17,204
CORP	17,173	0	0	0	0	17,173
INVOLUNTARY DELUXE W/PROGRSS	12,061	5,030	0	0	0	17,091
INFINITY TRUST - CHOICE PLAN C	17,415	(89)	(270)	0	0	17,056
FEDVIP HIGH OPTION 50200002	17,030	0	0	0	0	17,030
LMH - ACTIVES	17,008	0	0	0	0	17,008
000 HUB CORPORATE	16,976	0	0	0	0	16,976
NORTH AMERICAN DENTAL- PREMIER	16,966	0	0	0	0	16,966
PEOPLES BANCORP INC-NO MEDICAL	14,781	2,183	0	0	0	16,964
MOSES TAYLOR HOSPITAL	16,991	(31)	0	0	0	16,960
MARY FREE BED REHABILITATION H	16,835	0	0	0	0	16,835
OHP/CHIP 1-5 YEARS	16,833	0	0	0	0	16,833
AMES CONSTRUCTION - ACTIVE	17,582	(546)	(229)	0	0	16,807
WARREN POWER & MACHINERY	16,807	0	0	0	0	16,807
DECATUR MORGAN ACTIVE	16,793	0	0	0	0	16,793
INSULET CORPORATION	16,761	0	0	0	0	16,761
ENGINEERS + CONSTRUCTORS	16,743	0	0	0	0	16,743
HEXAWARE TECHNOLOGIES, INC.	16,724	0	0	0	0	16,724

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
FEDVIP HIGH OPTION 97381100	16,677	0	0	0	0	16,677
SANDOZ	16,673	0	0	0	0	16,673
ACUITY EYECARE HOLDINGS	19,116	(3,016)	0	560	16,660	0
ARAMARK UNIFORM & CAREER BU	9,758	0	0	6,852	16,610	0
ACTS ACTIVE STANDARD PLAN	16,536	0	0	0	0	16,536
BRICKYARD LP	15,390	(289)	686	730	16,517	0
CORPORATE SLRD-COBRA	10,977	5,527	(10)	0	0	16,493
GLOBAL HEALTHCARE EXCHANGE	16,491	0	0	0	0	16,491
JULY-EXTEND PLAN 12/12/24	16,412	0	0	0	0	16,412
002-HUB NEW ENGLAND	16,414	(18)	0	0	0	16,396
UAH ACTIVES	16,392	0	0	0	0	16,392
SWBC ACTIVES	16,358	0	0	0	0	16,358
ENTERPRISE-COMMERICAL	16,354	0	0	0	0	16,354
088 UHS OF DELAWARE INC	16,351	0	0	0	0	16,351
MAREL ACTIVE	15,343	(24)	0	1,026	16,344	0
MARATHON HEALTH, LLC	16,259	0	0	0	0	16,259
DE TAR	16,232	0	0	0	0	16,232
ACTIVES	16,224	0	0	0	0	16,224
CAPTIONCALL, LLC ACTIVES	16,205	0	0	0	0	16,205
BEPC ACTIVES	16,248	(66)	0	0	0	16,182
026 SOUTH TEXAS HEALTH	16,144	0	0	0	0	16,144
YOUNG LIVING ESSENTIAL ACTIVES	16,143	0	0	0	0	16,143
RCM TECHNOLOGIES	11,535	5,491	0	(935)	0	16,091
MAY-EXTEND PLAN 12/12/24	16,084	0	0	0	0	16,084
KENT UNION	8,041	8,097	(58)	0	0	16,080
FEDVIP STD OPTION 97380700	16,075	0	0	0	0	16,075
SERVICING	16,071	0	0	0	0	16,071
KENT NON-UNION	7,970	8,080	0	0	0	16,050
SMM - ACTIVE PREMIUM PLAN	10,707	5,245	0	0	0	15,951
FEDVIP HIGH OPTION 19009007	15,949	0	0	0	0	15,949
ROCKET SOFTWARE	15,964	(78)	0	0	0	15,886
AW NORTH CAROLINA ACTIVE	8,003	7,965	(84)	0	0	15,884
LAREDO MEDICAL CENTER	15,915	(48)	0	0	0	15,867
QUANTUM HEALTH, LLC	602	15,289	(65)	0	0	15,825
IPL-11 ACTIVE	15,814	0	0	0	0	15,814
BEN ASSOC-VOL PLAN B \$200	16,096	(285)	0	0	0	15,811
ACTIVE & GCC	15,764	0	0	0	0	15,764
FCBI ACTIVE	15,750	0	0	0	0	15,750
UNION HOSPITAL	7,911	0	7,835	0	0	15,747
LIMESTONE COUNTY SCHOOLS	15,727	0	0	0	0	15,727
NEBO SCHOOL DISTRICT ACTIVE	7,873	7,925	(7)	(84)	0	15,707
REGIONAL HOSPITAL OF SCRANTON	15,698	(15)	0	0	0	15,683
TTI-ONE WORLD TECH,-ACTIVE	15,633	0	0	0	0	15,633
ECLIPSE SR LIVING ACTIVE	3,047	12,695	(134)	0	0	15,608
KPMG- RETIREES	15,578	0	0	0	0	15,578
VALVOLINE ACTIVES	15,575	0	0	0	0	15,575
104 UHS OF TEXOMA INC	15,507	0	0	0	0	15,507
PROKARMA, INC.	15,519	(12)	0	0	0	15,507
ABS	15,491	0	0	0	0	15,491
DIAGEO NORTH AMERICA, INC.	15,568	0	(110)	0	0	15,458
CITY OF ABILENE	9,291	6,182	(74)	0	0	15,399

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
019999 Total individuals.....						
Group Subscribers:						
FARM CR BANK OF TX -EXPANDED	15,397	0	0	0	0	15,397
BCO ACTIVE	15,377	0	0	0	0	15,377
OCTAPARMA PLASMA INC ACTIVE	15,272	0	0	0	0	15,272
FEDVIP STD OPTION 10005697	15,177	0	0	0	0	15,177
DARLING CORE PLAN B	15,140	0	0	0	0	15,140
WASHTENAW COUNTY	14,998	0	0	0	0	14,998
EBSCO INDUSTRIES PREMIER PLAN	14,978	0	0	0	0	14,978
DEALER TIRE-ACTIVE	14,963	0	0	0	0	14,963
BRADY CORP-ACTIVES BASE	14,946	(12)	0	0	0	14,934
VERMONT STATE EMP ASSOC ACTIVE	17,016	(2,084)	0	0	0	14,931
CPSI ACTIVE	14,915	0	0	0	0	14,915
ALLIANZ LIC OF N AMER BU ACT	14,839	0	0	0	0	14,839
STATE AUTO - ACTIVE	14,818	0	0	0	0	14,818
MESA AIR GROUP	14,816	0	0	0	0	14,816
AUGUST-EXTEND PLAN 12/12/24	14,812	0	0	0	0	14,812
BARTHOLOMEW CONSOLIDATED	14,984	(184)	0	0	0	14,800
GRANGE INS COMP -ACTIVE ASSOC	14,759	0	0	0	0	14,759
OTTAWA FT HRLY	9,707	5,026	0	0	0	14,733
TENNOVA HEALTHCARE-CLEVELAND	14,805	(80)	0	0	0	14,725
EXPRESS FASHIONS PREMIER PLUS	13,928	794	0	0	0	14,722
WOOD MACKENZIE	5,090	(20)	9,608	0	0	14,678
LONGVIEW	14,675	(8)	0	0	0	14,666
COMMONWEALTH CHARTER ACADEMY	14,653	0	0	0	0	14,653
HOME OFFICE ACTIVE	9,837	4,897	0	(112)	0	14,622
FORT MILL FMO1	9,709	4,899	(25)	0	0	14,584
B.L. HARBERT INTERNATIONAL,	14,608	(35)	0	0	0	14,573
MORGAN PROPERTIES	14,560	0	0	0	0	14,560
NAT SALARY - BASE	14,498	0	0	0	0	14,498
SHINTECH LOUISIANA, LLC	14,542	(55)	0	0	0	14,487
MEDVET ACTIVIES	14,481	0	0	0	0	14,481
MERIT HEALTH WESLEY	14,530	(62)	0	0	0	14,468
BRASFIELD & GORRIE	14,466	0	0	0	0	14,466
NORTHWEST SPRINGDALE	14,494	(31)	0	0	0	14,463
UNITED BANK-FULL SERVICE WV	14,555	(116)	0	0	0	14,439
001-HUB NORTHEAST	14,438	(9)	0	0	0	14,429
FEDVIP STD OPTION 51100011	14,379	0	0	0	0	14,379
MOUSER ELECTRONICS	14,341	0	0	0	0	14,341
MEM HOSP & HEALTH SILVER	14,316	0	0	0	0	14,316
CAE USA L3 BUY UP	14,287	0	0	0	0	14,287
113 SUMMERLIN HOSP MED CTR	14,255	0	0	0	0	14,255
DEXTER AXLE	14,243	0	0	0	0	14,243
SALUSCLI MATERIAL ONLY	14,233	0	0	0	0	14,233
NAT HOURLY - BUY-UP	14,190	(15)	0	0	0	14,175
SHARED SERV CTRS OF FT SMITH	14,139	(24)	0	0	0	14,115
INFINITY TRUST - PLAN C	14,250	(141)	0	0	0	14,109
SHAPE CORPORATION PREMIUM	14,108	0	0	0	0	14,108
030 NORTHWEST TEXAS HLTHCARE	14,103	0	0	0	0	14,103
HIBBETT SPORTING GOODS, INC.	14,857	(764)	0	0	0	14,093
DALLAS COWBOYS FOOTBALL CLUB,	14,081	0	0	0	0	14,081
NREL ACTIVE BASE PLAN	14,478	(317)	(102)	0	0	14,059
ACTIVES BUY UP	14,030	0	0	0	0	14,030

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
SOUTH BALDWIN REG MEDICAL CNTR	14,070	(44)	0	0	0	14,025
MIDDLEBURY ENHANCED PLAN	14,023		0	0	0	14,023
GREAT RIVER HEALTH SYST ACTIVE	14,018	0	0	0	0	14,018
CORPORATE	13,988	0	0	0	0	13,988
CALL CENTER	13,977	0	0	0	0	13,977
VOLARIS ACTIVE HIGH	13,969	0	0	0	0	13,969
SELECTIVE INSURANCE COMPANY	13,967	0	0	0	0	13,967
TENNOVA HEALTHCARE-CLARKSVILLE	14,046	(97)	0	0	0	13,950
NORTH KNOXVILLE MED CTR	13,976	(31)	0	0	0	13,945
KPMG- ACTIVE PARTNERS	13,934	0	0	0	0	13,934
IPG PHOTONICS, CORPORATION	13,888	0	0	0	0	13,888
BORAL STONE PRODUCTS ACTIVE	4,580	9,236		0	0	13,816
ASSA ABLOY INC	13,773	0	0	0	0	13,773
JUNE-EXTEND PLAN 12/12/24	13,752	0	0	0	0	13,752
TOLL BROTHERS - ACTIVE	13,722	0	0	0	0	13,722
AHF PRODUCTS - ACTIVES	13,860	(141)	0	0	0	13,719
CFI ACTIVE	13,690	0	0	0	0	13,690
U.S. COLD STORAGE- BASE ACTIVE	13,648	0	0	0	0	13,648
MARATHON OIL ACTIVE	13,647	0	0	0	0	13,647
BALL STATE UNIV-PREMIUM PLAN	13,642	0	0	0	0	13,642
WORTHINGTON INDUSTRIES INC.	13,639	0	0	0	0	13,639
TREK ACTIVE	13,624	0	0	0	0	13,624
TRITON VISION PLUS	13,602	0	0	0	0	13,602
PARKVIEW MEDICAL CENTER	13,602	0	0	0	0	13,602
ANKURA CONSULTING GROUP	13,587	0	0	0	0	13,587
GPA	13,577	0	0	0	0	13,577
158 MANATEE MEMORIAL HOSPITAL	13,557	0	0	0	0	13,557
BORAL BUILDING PRODUCTS ACTIVE	4,465	9,089		0	0	13,553
EMH1	13,514	0	0	0	0	13,514
AVERA HEALTH (CORP)-BASE	13,513	0	0	0	0	13,513
KCH ACTIVE	13,482	0	0	0	0	13,482
VENICE REGIONAL MED CTR	13,617	(142)	0	0	0	13,476
VERMONT STATE COLLEGES SYSTEM	13,496	(27)	0	0	0	13,469
MRI SOFTWARE, LLC	13,424	0	0	0	0	13,424
CHEROKEE NATION-OPTION 1	13,413	0	0	0	0	13,413
SERVIER PHARMACEUTICALS, LLC	6,920	6,469	0	0	0	13,389
KOSCIOUSKO	13,404	(15)	0	0	0	13,389
DICKINSON ISD	13,367	0	0	0	0	13,367
SHARED SERV CTRS OF TUCSONEAS	13,372	(8)	0	0	0	13,364
ITC HOLDINGS CORP. ENHANCED	13,361	0	0	0	0	13,361
MEDIREVV ANAHEIM	13,350	0	0	0	0	13,350
SOUTHWEST COMMUNITY HEALTH	13,348	0	0	0	0	13,348
PIPER SANDLER	13,329	0	0	0	0	13,329
AVALON OWNED FACILITIES BUY UP	13,318	0	0	0	0	13,318
BAKER BOTTS L.L.P.	13,431	(203)	(29)	0	0	13,199
MAIN COUNTY	13,047	0	141	0	0	13,188
CHARTER STEEL	13,143	0	0	0	0	13,143
EAST GEORGIA REG MED CTR	13,099	0	0	0	0	13,099
HORMEL-BARGAINING UNIT BUY-UP	13,075	0	0	0	0	13,075
DNV USA, INC: ACTIVE	13,036	0	0	0	0	13,036
FOUNDATION MEDICINE, INC.	12,984	0	0	0	0	12,984

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
INFINITY TRUST - CHOICE PLAN B	13,138	(171)	0	0	0	12,967
ENCORE REHABILITATION, INC.	7,018	7,044	(43)	(1,066)	0	12,953
BOULDER COMMUNITY HEALTH	12,955	(27)	0	0	0	12,929
WILLAMETTE DENTAL ACTIVE	12,927	0	0	0	0	12,927
HAMAMATSU CORPORATION	6,542	6,377	0	0	0	12,919
TRIBAL GOVERNMENT EE	8,719	4,169	(12)	0	0	12,876
POLICE ACTIVES	12,864	0	0	0	0	12,864
TUCSON ELECTRIC-UNCLASSIFIED	12,853	0	0	0	0	12,853
TAYLOR COMMUNICATIONS, INC.	12,848	0	0	0	0	12,848
WMH PLUS	12,845	0	0	0	0	12,845
OLAM ACTIVE EMPLOYEES	13,036	0	0	(201)	0	12,835
CLEAN HARBORS ACTIVE: BUY-UP	12,823	0	0	0	0	12,823
FULTON UNION EMPLOYEES - FULL	12,798	0	0	0	0	12,798
EBY GROUP - EXAM & MATERIALS	13,209	(253)	0	(216)	0	12,739
ACTIVE EMPLOYEES	12,738	0	0	0	0	12,738
EMPLOYEE LIABILITY MGMT	12,727	0	0	0	0	12,727
WPL-14 ACTIVE	12,725	0	0	0	0	12,725
BALL STATE UNIVERSITY	12,721	0	0	0	0	12,721
AMERICAN CAMPUS COMMUNITIES	12,681	0	0	0	0	12,681
BELTON ISD	12,669	0	0	0	0	12,669
REDDY ICE LLC	12,699	(33)	0	0	0	12,666
PT STANDARD PLAN ACTIVE	12,649	0	0	0	0	12,649
CARET HOLDINGS DBA, ROOT INC.	12,641	0	0	0	0	12,641
POPULUS GROUP	12,596	0	0	0	0	12,596
MT LAUREL	12,563	0	0	0	0	12,563
GEM PLUMBING & HEATING COMPANY	4,278	4,110	4,260	(109)	0	12,540
HOME SRVC USA CORP-NON-UNION	12,529	0	0	0	0	12,529
SMC CORPORATION - ACTIVE	12,512	0	0	0	0	12,512
INGLES MARKET INC BASE	12,554	(43)	0	0	0	12,511
WORLD WRESTLING ENTERTAINMENT	12,826	(53)	(74)	(213)	0	12,486
G.I.B. LOCAL GOVT	12,485	0	0	0	0	12,485
PATERSON PUBLIC SCHOOLS PLAN A	12,474	0	0	0	0	12,474
FAYETTE COUNTY MEMORIAL HOSP	4,236	2,118	2,118	3,984	12,456	0
ARCHROCK SERVICES, L.P. ACTIVE	12,454	0	0	0	0	12,454
NUTRA ACTIVES	12,415	0	0	0	0	12,415
PHYSICIANS HEALTH PINE RIDGE	12,468	(88)	0	0	0	12,380
GW BANK ACTIVE - PREMIUM	12,359	0	0	0	0	12,359
HARRISON COUNTY SCHOOLS ACTIVE	12,341	0	0	0	0	12,341
ENHANCED PLAN ACTIVE	12,291	0	0	0	0	12,291
TUCSON ELECTRIC-CLASSIFIED	12,264	0	0	0	0	12,264
RPA ACTIVE PLAN 3(GOLD)	10,280	1,428	556	0	0	12,264
BORAL ROOFING GROUP ACTIVE	4,145	8,093	0	0	0	12,239
ACU- ACTIVES	12,202	(6,301)	6,336	0	0	12,237
CDI MGMT-ACTIVE	12,218	0	0	0	0	12,218
SUBCOM CABLE SYSTEMS	12,742	(534)	0	0	0	12,208
CITY OF CEDAR RAPIDS-ACTIVE	12,193	0	0	0	0	12,193
OGLALA LAKOTA COUNTY SCHOOL	9,016	4,584	(1,409)	0	0	12,192
SILVER - ACTIVE	12,144	0	0	0	0	12,144
PERI	12,138	0	0	0	0	12,138
PERTH AMBOY BOE- RETIREES >65	6,022	6,083	0	0	0	12,104
CROCS, INC.	12,083	0	0	0	0	12,083

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1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
BLIND & DISABLED WO/MED <21	12,070	0	0	0	0	12,070
BOSTON DYNAMICS	12,045	0	0	0	0	12,045
W.H. BRAUM, INC.	12,072	(41)	0	0	0	12,032
ACUITY EYECARE HOLDINGS-DOCTOR	6,180	2,936	2,905	0	0	12,020
SEALY MANUFACTURING ENHANCED	11,826	(18)	201	0	0	12,008
SGJ	12,004	0	0	0	0	12,004
REGIONS BANK COBRA	4,564	3,749	3,828	(160)	0	11,981
WOODLAND HEIGHTS	12,075	(103)	0	0	0	11,972
COBRA FULL SERVICE (VSP+)	12,103	(137)	0	0	0	11,965
NEW JERSEY	4,010	0	4,000	3,942	11,952	0
VINSON & ELKINS	11,937	0	0	0	0	11,937
FEDVIP HIGH OPTION 50100001	11,904	0	0	0	0	11,904
GOLD-ACTIVE	11,894	0	0	0	0	11,894
MERIT HEALTH CENTRAL	11,843	0	0	0	0	11,843
JEFFERSON PARISH PREMIER	11,821	0	0	0	0	11,821
INNOVAGE	11,782	0	0	0	0	11,782
WOOD GROUP ACTIVE LOW	11,780	0	0	0	0	11,780
FEDVIP HIGH OPTION 95040006	11,778	0	0	0	0	11,778
COLUMBUS REGIONAL HOSPITAL	12,170	(408)	0	0	0	11,762
NREL ACTIVE BUY UP PLAN	11,816	(89)	0	0	0	11,727
G9G ZIMMER US INC SALARIED	11,715	0	0	0	0	11,715
055 GEORGE WASHINGTON UNIV	11,710	0	0	0	0	11,710
MMC LOW PLAN	11,700	0	0	0	0	11,700
FEDVIP HIGH OPTION A4900002	11,692	0	0	0	0	11,692
ACTIVE BUY-UP	11,684	0	0	0	0	11,684
PRICELINE.COM	5,756	5,867	0	0	0	11,622
ENEL NORTH AMERICA	11,615	0	0	0	0	11,615
FLINT GROUP - ACTIVE	11,595	0	0	0	0	11,595
TURKEY CREEK METRO KNOXVILLE	11,610	(24)	0	0	0	11,586
OCEANFIRST BANK	11,553	0	0	0	0	11,553
UPPER IOWA UNIVERSITY	2,330	2,330	2,330	4,508	11,497	0
EXEMPT	11,493	0	0	0	0	11,493
KOORSEN FIRE & SECURITY	11,485	0	0	0	0	11,485
SIOUX CITY COMMUNITY SD ACTIVE	11,746	(88)	(177)	0	0	11,481
010-HUB NORTHWEST	11,505	(26)	0	0	0	11,479
ACUREN BUY UP	11,474	0	0	0	0	11,474
LANDAIR	11,461	0	0	0	0	11,461
CSIG HOLDING COMPANY	11,397	0	0	0	0	11,397
INVOLUNTARY CLASSIC W/PROG	6,303	3,167	1,867	0	0	11,337
GALLIANO MARINE BASE	11,337	0	0	0	0	11,337
INDEPENDENCE BANK	2,890	0	1,566	6,878	11,334	0
HAZELDEN BETTY FORD FOUNDATION	11,319	0	0	0	0	11,319
SALUSRES	11,302	0	0	0	0	11,302
APPLE AMERICAN ACTIVE	11,265	0	0	0	0	11,265
DTC ACTIVES VISION PLAN 2	11,253	0	0	0	0	11,253
NORTH COUNTRY HOSPITAL	6,027	6,252	(1,033)	0	0	11,245
CARTER HEALTHCARE LLC	7,404	3,807	0	0	0	11,211
EASTERN IOWA COMMUNITY COLLEGE	5,696	5,539	(57)	0	0	11,179
PP BENDIX-ELYRIA SALARIED	11,248	(78)	0	0	0	11,170
HELEN KELLER HOSPITAL ACTIVE	11,157	0	0	0	0	11,157
ACTIVE	11,163	(19)	0	0	0	11,145

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
019999 Total individuals.....						
Group Subscribers:						
SHAPE CORPORATION	11,140	0	0	0	0	11,140
ACTIVES BASE	11,136	0	0	0	0	11,136
HUT AMERICAN ACTIVE	11,129	0	0	0	0	11,129
TRUTH HARDWARE	4,657	4,412	0	2,055	11,124	0
ETR OPER RVR BND NBU/BU ACT/DI	11,104	0	0	0	0	11,104
GUN LAKE CASINO	11,103	0	0	0	0	11,103
MILFORD REGIONAL MEDICAL ACTIV	15,861	(4,764)	0	0	0	11,097
FEDVIP HIGH OPTION 19000001	11,046	0	0	0	0	11,046
JBS USA LLC-HOURLY	10,994	0	0	0	0	10,994
NC	10,992	0	0	0	0	10,992
CNE NON-UNION	5,553	5,458	(29)	0	0	10,981
SHORE MEMORIAL HOSPITAL ACTIVE	10,305	651	0	0	0	10,956
MILWAUKEE BREWERS BASEBALL CLU	7,364	3,609	(21)	0	0	10,951
PERFORCE SOFTWARE, INC.	6,000	4,943	(12)	0	0	10,931
ALLIANCE UNION ACTIVE	10,926	0	0	0	0	10,926
BEN ASSOC-PACKAGED-PLAN C \$200	11,070	(184)	0	0	0	10,886
VECTOR SECURITY ACTIVE	10,875	0	0	0	0	10,875
FLATIRON CONSTRUCTION CORP.	10,857	0	0	0	0	10,857
RNA	20,481	(9,626)	0	0	0	10,855
014-HUB MOUNTAIN	10,852	0	0	0	0	10,852
LMH PLAN 1	10,836	0	0	0	0	10,836
SERVCO-22 ACTIVE	10,820	0	0	0	0	10,820
001 VALLEY HOSPITAL	10,804	0	0	0	0	10,804
WP COMPANY LLC ACTIVE	10,793	0	0	0	0	10,793
PAPPAS DEPT - BUY UP	10,772	0	0	0	0	10,772
FEDVIP HIGH OPTION DBARMYAN	10,733	0	0	0	0	10,733
ETR OPR GRND GLF NBU/BU ACT/DI	10,728	0	0	0	0	10,728
DUPONT	10,721	0	0	0	0	10,721
OAKBEND MEDICAL CENTER	10,693	0	0	0	0	10,693
IVC ACTIVES	10,675	0	0	0	0	10,675
ACE CASH EXPRESS INC	10,666	0	0	0	0	10,666
LAKE GRANBURY MEDICAL CTR. 51-	10,665	0	0	0	0	10,665
022 SOUTHWEST HEALTHCARE	10,654	0	0	0	0	10,654
HORNBLLOWER GROUP PREMIUM	10,652	0	0	0	0	10,652
UAB ACTIVE PREM EMP-CHILD(REN)	10,614	0	0	0	0	10,614
CORP. OFFICE-NOVI, MI	10,602	(17)	0	0	0	10,585
EATON VANCE MANAGEMENT	10,581	0	0	0	0	10,581
DRAPER, INC./ENHANCED B	10,868	(293)	0	0	0	10,574
FORUM ENERGY ACTIVE	10,571	0	0	0	0	10,571
MEDTRONIC - RETIREES	10,555	0	0	0	0	10,555
LAKE NORMAN REG MED CTR	10,586	(33)	0	0	0	10,552
NON-BARGAINING	10,545	0	0	0	0	10,545
PORTAGE TOWNSHIP SCHOOLS-CERTS	5,259	5,259	0	0	0	10,518
SALARIED EMPLOYEES	10,495	0	0	0	0	10,495
CIMPRESS USA, INCORPORATED	9,767	243	474	0	0	10,485
004-HUB MIDWEST	17,178	(6,708)	0	0	0	10,470
DUFRESNE SPENCER GROUP	10,457	0	0	0	0	10,457
BASE ACTIVE: EE+FAMILY	10,408	0	0	0	0	10,408
WSSRA	10,403	0	0	0	0	10,403
ENHANCED AFI WI HOURLY	10,400	0	0	0	0	10,400
MUSCO CORPORATION	10,399	0	0	0	0	10,399

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
ETR MS NBU/BU ACT/DIS	10,393	0	0	0	0	10,393
BIOTELEMETRY, INC.	10,391	0	0	0	0	10,391
MERIT HEALTH RIVER REGION	10,427	(53)	0	0	0	10,374
BEAVER AEROSPACE & DEF EASY OP	5,241		2,575	2,549	10,364	0
TALLGRASS MANAGEMENT LLC	10,346	0	0	0	0	10,346
DIRECT SALES CHOICE	10,447	(106)	0	0	0	10,341
EVT CHOICE PLN C 3-TIER	10,360	(24)	0	0	0	10,336
RIVERSTONE HEALTH	6,850	3,484	0	0	0	10,334
RSEALA	10,313	0	0	0	0	10,313
ENI US OPERATING CO. INC.(ENI)	10,285	0	0	0	0	10,285
DNOW ACTIVE	10,279	0	0	0	0	10,279
MEDDATA, INC. ACTIVE	10,278	0	0	0	0	10,278
OTTER PRODUCTS, LLC	10,259	0	0	0	0	10,259
FRONTIER HEALTH	8,762	489	652	347	10,250	0
SIGNATURE PLAN	10,228	0	0	0	0	10,228
WINSTEAD PC BASE PLAN	10,246	(26)	0	0	0	10,220
A.M. BEST RATING SERVICES	7,232	3,567	(38)	(544)	0	10,217
INVOLUNTARY PREMIERE W/CVC&P	7,808	2,405	0	0	0	10,213
HOBOKEN, CITY OF-MUNICIPAL	10,467	(260)	0	0	0	10,207
CAPE COD FIVE CENTS SAVINGS	5,141	5,103	(65)	0	0	10,179
SCANSOURCE - PLAN 2	10,714	(543)	0	0	0	10,171
FREA	10,116	0	0	0	0	10,116
TALEN ENERGY SUPPLY HIGH	10,097	0	0	0	0	10,097
MLA HOUSTON	10,085	0	0	0	0	10,085
APERGY ARTIFICIAL LIFT A12	10,068	0	0	0	0	10,068
BAYFRONT HEALTH PORT CHARLOTT	10,079	(15)	0	0	0	10,064
BRIGGS EQUIPMENT	10,042	0	0	0	0	10,042
TTI-OWT-R&B SALES & TKG-ACTIVE	10,031	0	0	0	0	10,031
HARRIS ACTIVE LOW	10,024	0	0	0	0	10,024
NORTHERN LOGISTICS	7,593	2,421	0	0	0	10,014
ETR OPER WTRFORD NBU/BU ACT/DI	10,000	0	(1)	0	0	9,995
0299997. Group subscriber subtotal	45,895,031	1,931,421	376,265	130,893	1,377,388	46,956,224
0299998. Premiums due and unpaid not individually listed	15,761,979	(27,835)	(1,605,132)	(2,483,638)	926,535	10,718,838
0299999. Total group	61,657,010	1,903,586	(1,228,867)	(2,352,745)	2,303,923	57,675,062
0399999. Premiums due and unpaid from Medicare entities						
0499999. Premiums due and unpaid from Medicaid entities						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	61,657,010	1,903,586	(1,228,867)	(2,352,745)	2,303,923	57,675,062

Exhibit 3 - Health Care Receivables

N O N E

Exhibit 3A - Health Care Receivables Collected and Accrued

N O N E

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Vision Service Plan	Sales and management expenses	51,060,496	51,060,496	
0199999. Individually listed payables		51,060,496	51,060,496	0
0299999. Payables not individually listed		0		
0399999 Total gross payables		51,060,496	51,060,496	0

EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	86,857,259	9.0	XXX	XXX		86,857,259
6. Contractual fee payments	878,223,392	91.0	XXX	XXX	878,223,392	
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	0	0.0	XXX	XXX		
12. Total other payments	965,080,651	100.0	XXX	XXX	878,223,392	86,857,259
13. TOTAL (Line 4 plus Line 12)	965,080,651	100%	XXX	XXX	878,223,392	86,857,259

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
NONE					
9999999 Totals			XXX	XXX	XXX

Exhibit 8 - Furniture and Equipment Owned

N O N E



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Alabama		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	502,847	0	0	0	502,847	0	0	0	0	0	0	0
2. First Quarter	516,603				516,603							
3. Second Quarter	513,893				513,893							
4. Third Quarter	513,984				513,984							
5. Current Year	503,157				503,157							
6. Current Year Member Months	6,156,026				6,156,026							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	171,248				171,248							
9. Total	171,248	0	0	0	171,248	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	44,911,329				44,911,329							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	44,911,329	0	0	0	44,911,329	0	0	0	0	0	0	0
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	27,981,028				27,981,028							
18. Amount Incurred for Provision of Health Care Services	28,167,217				28,167,217							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Alaska		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arizona		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	396,288	0	0	0	396,288	0	0	0	0	0	0	
2. First Quarter	432,258				432,258							
3. Second Quarter	432,106				432,106							
4. Third Quarter	438,815				438,815							
5. Current Year	446,474				446,474							
6. Current Year Member Months	5,230,951				5,230,951							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	142,498				142,498							
9. Total	142,498	0	0	0	142,498	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	36,876,176				36,876,176							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	36,876,176	0	0	0	36,876,176	0	0	0	0	0	0	
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	25,226,092				25,226,092							
18. Amount Incurred for Provision of Health Care Services	25,393,947				25,393,947							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arkansas		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Colorado		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	730,345	0	0	0	730,345	0	0	0	0	0		
2. First Quarter	752,762				752,762							
3. Second Quarter	749,083				749,083							
4. Third Quarter	750,674				750,674							
5. Current Year	755,206				755,206							
6. Current Year Member Months	9,020,802				9,020,802							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	240,689				240,689							
9. Total	240,689	0	0	0	240,689	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	56,444,069				56,444,069							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	56,444,069				56,444,069							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	37,534,112				37,534,112							
18. Amount Incurred for Provision of Health Care Services	37,785,322				37,785,322							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Connecticut		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	402,633	0	0	0	402,633	0	0	0	0	0		
2. First Quarter	410,476				410,476							
3. Second Quarter	405,914				405,914							
4. Third Quarter	384,382				384,382							
5. Current Year	384,869				384,869							
6. Current Year Member Months	4,786,290				4,786,290							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	163,189				163,189							
9. Total	163,189	0	0	0	163,189	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	32,188,664				32,188,664							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	32,188,664				32,188,664							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	25,371,362				25,371,362							
18. Amount Incurred for Provision of Health Care Services	25,540,184				25,540,184							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Delaware		2021							NAIC Company Code	
		39616		Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
1 Total	2 Individual	3 Group										
Total Members at end of:												
1. Prior Year	74,888	0	0	0	74,888	0	0	0	0	0	0	
2. First Quarter	84,431				84,431							
3. Second Quarter	84,354				84,354							
4. Third Quarter	89,352				89,352							
5. Current Year	90,179				90,179							
6. Current Year Member Months	1,044,798				1,044,798							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	25,951				25,951							
9. Total	25,951	0	0	0	25,951	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	6,475,640				6,475,640							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	6,475,640				6,475,640							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	4,316,994				4,316,994							
18. Amount Incurred for Provision of Health Care Services	4,345,719				4,345,719							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30 DE



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		District of Columbia		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	1,373,458	0	0	0	44,553	0	1,328,905	0	0	0		
2. First Quarter	1,408,032				46,020		1,362,012					
3. Second Quarter	1,411,634				48,306		1,363,328					
4. Third Quarter	1,413,564				118,788		1,294,776					
5. Current Year	1,414,156				112,853		1,301,303					
6. Current Year Member Months	16,936,658				977,634		15,959,024					
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	565,315				45,113		520,202					
9. Total	565,315	0	0	0	45,113	0	520,202	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	165,983,442				13,245,847		152,737,595					
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	165,983,442				13,245,847		152,737,595					
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	128,930,797				10,288,964		118,641,833					
18. Amount Incurred for Provision of Health Care Services	129,788,802				10,357,434		119,431,368					

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Hawaii		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Idaho		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0		
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Illinois		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		Indiana		DURING THE YEAR					2021		(LOCATION)		NAIC Company Code	39616
		1		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
		Total	Individual	Group	Medicare Supplement								Vision Only	Dental Only		
Total Members at end of:																
1. Prior Year	473,355	0	0	0	473,355	0	0	0	0	0	0	0	0	0	0	0
2. First Quarter	489,057				489,057											
3. Second Quarter	485,024				485,024											
4. Third Quarter	481,996				481,996											
5. Current Year	482,536				482,536											
6. Current Year Member Months	5,828,998				5,828,998											
Total Member Ambulatory Encounters for Year:																
7. Physician	0				0											
8. Non-Physician	165,186				165,186											
9. Total	165,186	0	0	0	165,186	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0				0											
11. Number of Inpatient Admissions	0				0											
12. Health Premiums Written (b)	36,673,766				36,673,766											
13. Life Premiums Direct	0				0											
14. Property/Casualty Premiums Written	0				0											
15. Health Premiums Earned	36,673,766				36,673,766											
16. Property/Casualty Premiums Earned	0				0											
17. Amount Paid for Provision of Health Care Services	24,720,008				24,720,008											
18. Amount Incurred for Provision of Health Care Services	24,901,913				24,901,913											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR						(LOCATION)	
		Iowa		2021						NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
		Individual	Group								
Total Members at end of:											
1. Prior Year	149,539	0	0	0	149,539	0	0	0	0	0	
2. First Quarter	151,778				151,778						
3. Second Quarter	151,426				151,426						
4. Third Quarter	153,267				153,267						
5. Current Year	153,385				153,385						
6. Current Year Member Months	1,825,072				1,825,072						
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	50,172				50,172						
9. Total	50,172	0	0	0	50,172	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	12,774,412				12,774,412						
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	12,774,412				12,774,412						
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	7,923,270				7,923,270						
18. Amount Incurred for Provision of Health Care Services	7,975,992				7,975,992						

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Kansas		2021							NAIC Company Code	
		39616		Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
1 Total	2 Individual	3 Group										
Total Members at end of:												
1. Prior Year	173,765	0	0	0	173,765	0	0	0	0	0	0	
2. First Quarter	188,252				188,252							
3. Second Quarter	186,741				186,741							
4. Third Quarter	186,561				186,561							
5. Current Year	186,525				186,525							
6. Current Year Member Months	2,249,544				2,249,544							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	67,176				67,176							
9. Total	67,176	0	0	0	67,176	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	16,580,033				16,580,033							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	16,580,033				16,580,033							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	11,110,961				11,110,961							
18. Amount Incurred for Provision of Health Care Services	11,184,894				11,184,894							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Kentucky		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	95,044	0	0	0	95,044	0	0	0	0	0		
2. First Quarter	92,568				92,568							
3. Second Quarter	92,170				92,170							
4. Third Quarter	91,953				91,953							
5. Current Year	91,305				91,305							
6. Current Year Member Months	1,111,387				1,111,387							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	28,429				28,429							
9. Total	28,429	0	0	0	28,429	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	6,669,503				6,669,503							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	6,669,503				6,669,503							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	4,268,881				4,268,881							
18. Amount Incurred for Provision of Health Care Services	4,297,286				4,297,286							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30 KY



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Louisiana		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	146,755	0	0	0	146,755	0	0	0	0	0		
2. First Quarter	135,942				135,942							
3. Second Quarter	135,676				135,676							
4. Third Quarter	135,243				135,243							
5. Current Year	135,207				135,207							
6. Current Year Member Months	1,626,622				1,626,622							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	40,910				40,910							
9. Total	40,910	0	0	0	40,910	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	10,006,453				10,006,453							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	10,006,453				10,006,453							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	6,557,331				6,557,331							
18. Amount Incurred for Provision of Health Care Services	6,600,964				6,600,964							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.LA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maine		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	92,039	0	0	0	92,039	0	0	0	0	0	0	
2. First Quarter	95,568				95,568							
3. Second Quarter	95,349				95,349							
4. Third Quarter	95,533				95,533							
5. Current Year	94,764				94,764							
6. Current Year Member Months	1,144,733				1,144,733							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	21,754				21,754							
9. Total	21,754	0	0	0	21,754	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	6,482,973				6,482,973							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	6,482,973				6,482,973							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	4,002,385				4,002,385							
18. Amount Incurred for Provision of Health Care Services	4,029,017				4,029,017							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Massachusetts		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	592,001	0	0	0	592,001	0	0	0	0	0		
2. First Quarter	713,946				713,946							
3. Second Quarter	713,346				713,346							
4. Third Quarter	719,582				719,582							
5. Current Year	725,765				725,765							
6. Current Year Member Months	8,576,319				8,576,319							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	187,363				187,363							
9. Total	187,363	0	0	0	187,363	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	54,159,157				54,159,157							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	54,159,157				54,159,157							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	36,533,497				36,533,497							
18. Amount Incurred for Provision of Health Care Services	36,776,592				36,776,592							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Michigan		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	859,247	0	0	0	859,247	0	0	0	0	0		
2. First Quarter	857,934				857,934							
3. Second Quarter	851,471				851,471							
4. Third Quarter	840,715				840,715							
5. Current Year	838,598				838,598							
6. Current Year Member Months	10,180,282				10,180,282							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	269,140				269,140							
9. Total	269,140	0	0	0	269,140	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	68,815,679				68,815,679							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	68,815,679				68,815,679							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	44,893,017				44,893,017							
18. Amount Incurred for Provision of Health Care Services	45,236,606				45,236,606							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Minnesota		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	614,019	0	0	0	614,019	0	0	0	0	0		
2. First Quarter	637,865				637,865							
3. Second Quarter	628,914				628,914							
4. Third Quarter	625,600				625,600							
5. Current Year	624,235				624,235							
6. Current Year Member Months	7,565,548				7,565,548							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	160,750				160,750							
9. Total	160,750	0	0	0	160,750	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	50,931,185				50,931,185							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	50,931,185				50,931,185							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	35,551,129				35,551,129							
18. Amount Incurred for Provision of Health Care Services	35,787,687				35,787,687							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Mississippi		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	115,990	0	0	0	115,990	0	0	0	0	0		
2. First Quarter	117,450				117,450							
3. Second Quarter	117,556				117,556							
4. Third Quarter	118,829				118,829							
5. Current Year	120,186				120,186							
6. Current Year Member Months	1,422,450				1,422,450							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	34,287				34,287							
9. Total	34,287	0	0	0	34,287	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	8,282,423				8,282,423							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	8,282,423				8,282,423							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	5,031,029				5,031,029							
18. Amount Incurred for Provision of Health Care Services	5,065,325				5,065,325							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Montana		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	66,255	0	0	0	66,255	0	0	0	0	0	0	0
2. First Quarter	64,231				64,231							
3. Second Quarter	62,223				62,223							
4. Third Quarter	62,721				62,721							
5. Current Year	60,667				60,667							
6. Current Year Member Months	753,512				753,512							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	14,998				14,998							
9. Total	14,998	0	0	0	14,998	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	3,866,666				3,866,666							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	3,866,666				3,866,666							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	2,219,501				2,219,501							
18. Amount Incurred for Provision of Health Care Services	2,234,270				2,234,270							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Nebraska		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	93,392	0	0	0	93,392	0	0	0	0	0		
2. First Quarter	85,336				85,336							
3. Second Quarter	84,418				84,418							
4. Third Quarter	84,938				84,938							
5. Current Year	85,115				85,115							
6. Current Year Member Months	1,019,553				1,019,553							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	33,539				33,539							
9. Total	33,539	0	0	0	33,539	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	7,491,243				7,491,243							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	7,491,243				7,491,243							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	5,022,869				5,022,869							
18. Amount Incurred for Provision of Health Care Services	5,056,291				5,056,291							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.NE



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Nevada		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0		
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New Hampshire		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
	Total	Individual	Group									
Total Members at end of:												
1. Prior Year	75,916	0	0	0	75,916	0	0	0	0	0		
2. First Quarter	77,800				77,800							
3. Second Quarter	77,868				77,868							
4. Third Quarter	78,308				78,308							
5. Current Year	78,974				78,974							
6. Current Year Member Months	935,428				935,428							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	17,175				17,175							
9. Total	17,175	0	0	0	17,175	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	5,855,389				5,855,389							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	5,855,389				5,855,389							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	3,395,103				3,395,103							
18. Amount Incurred for Provision of Health Care Services	3,417,694				3,417,694							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New Jersey		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	985,170	0	0	0	985,170	0	0	0	0	0	0	
2. First Quarter	1,014,428				1,014,428							
3. Second Quarter	1,011,214				1,011,214							
4. Third Quarter	1,007,904				1,007,904							
5. Current Year	1,011,421				1,011,421							
6. Current Year Member Months	12,135,131				12,135,131							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	309,187				309,187							
9. Total	309,187	0	0	0	309,187	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	82,679,115				82,679,115							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	82,679,115				82,679,115							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	55,745,550				55,745,550							
18. Amount Incurred for Provision of Health Care Services	56,116,482				56,116,482							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		North Carolina		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	922,271	0	0	0	922,271	0	0	0	0	0		
2. First Quarter	930,384				930,384							
3. Second Quarter	916,481				916,481							
4. Third Quarter	924,455				924,455							
5. Current Year	917,302				917,302							
6. Current Year Member Months	11,098,084				11,098,084							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	270,866				270,866							
9. Total	270,866	0	0	0	270,866	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	80,570,328				80,570,328							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	80,570,328				80,570,328							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	56,404,217				56,404,217							
18. Amount Incurred for Provision of Health Care Services	56,779,536				56,779,536							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		North Dakota		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	35,298	0	0	0	35,298	0	0	0	0	0	0	
2. First Quarter	35,712				35,712							
3. Second Quarter	35,065				35,065							
4. Third Quarter	35,443				35,443							
5. Current Year	35,466				35,466							
6. Current Year Member Months	425,660				425,660							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	14,448				14,448							
9. Total	14,448	0	0	0	14,448	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	3,143,572				3,143,572							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	3,143,572				3,143,572							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	1,986,537				1,986,537							
18. Amount Incurred for Provision of Health Care Services	1,999,755				1,999,755							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Ohio		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	1,349,408	0	0	0	1,349,408	0	0	0	0	0		
2. First Quarter	1,367,085				1,367,085							
3. Second Quarter	1,365,972				1,365,972							
4. Third Quarter	1,365,131				1,365,131							
5. Current Year	1,362,567				1,362,567							
6. Current Year Member Months	16,405,685				16,405,685							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	411,465				411,465							
9. Total	411,465	0	0	0	411,465	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	107,680,510				107,680,510							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	107,680,510				107,680,510							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	74,869,943				74,869,943							
18. Amount Incurred for Provision of Health Care Services	75,368,806				75,368,806							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products
 (b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Oklahoma		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	624,037	0	0	0	624,037	0	0	0	0	0	0	
2. First Quarter	613,333				613,333							
3. Second Quarter	612,134				612,134							
4. Third Quarter	614,928				614,928							
5. Current Year	617,775				617,775							
6. Current Year Member Months	7,379,686				7,379,686							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	229,223				229,223							
9. Total	229,223	0	0	0	229,223	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	52,582,146				52,582,146							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	52,582,146				52,582,146							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	34,995,142				34,995,142							
18. Amount Incurred for Provision of Health Care Services	35,228,001				35,228,001							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Oregon		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	253,760	0	0	0	253,760	0	0	0	0	0		
2. First Quarter	265,916				265,916							
3. Second Quarter	265,365				265,365							
4. Third Quarter	264,702				264,702							
5. Current Year	269,600				269,600							
6. Current Year Member Months	3,188,122				3,188,122							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	72,360				72,360							
9. Total	72,360	0	0	0	72,360	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	23,453,905				23,453,905							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	23,453,905				23,453,905							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	12,809,409				12,809,409							
18. Amount Incurred for Provision of Health Care Services	12,934,317				12,934,317							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Pennsylvania		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	1,083,238	0	0	0	1,083,238	0	0	0	0	0		
2. First Quarter	1,159,527				1,159,527							
3. Second Quarter	1,143,325				1,143,325							
4. Third Quarter	1,153,080				1,153,080							
5. Current Year	1,160,982				1,160,982							
6. Current Year Member Months	13,856,137				13,856,137							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	346,821				346,821							
9. Total	346,821	0	0	0	346,821	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	79,274,408				79,274,408							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	79,274,408				79,274,408							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	58,296,212				58,296,212							
18. Amount Incurred for Provision of Health Care Services	58,684,117				58,684,117							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		Rhode Island		DURING THE YEAR					2021		(LOCATION)	
		1		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	NAIC Company Code	
		Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	39616		
Total Members at end of:														
1. Prior Year	148,848	0	0	0	148,848	0	0	0	0	0	0	0	0	0
2. First Quarter	152,845				152,845									
3. Second Quarter	151,449				151,449									
4. Third Quarter	152,185				152,185									
5. Current Year	152,079				152,079									
6. Current Year Member Months	1,826,829				1,826,829									
Total Member Ambulatory Encounters for Year:														
7. Physician	0				0									
8. Non-Physician	43,145				43,145									
9. Total	43,145	0	0	0	43,145	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0				0									
11. Number of Inpatient Admissions	0				0									
12. Health Premiums Written (b)	12,155,424				12,155,424									
13. Life Premiums Direct	0				0									
14. Property/Casualty Premiums Written	0				0									
15. Health Premiums Earned	12,155,424				12,155,424									
16. Property/Casualty Premiums Earned	0				0									
17. Amount Paid for Provision of Health Care Services	7,532,307				7,532,307									
18. Amount Incurred for Provision of Health Care Services	7,582,427				7,582,427									

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.RI



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		South Carolina		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	150,539	0	0	0	150,539	0	0	0	0	0	0	0
2. First Quarter	151,812				151,812							
3. Second Quarter	151,022				151,022							
4. Third Quarter	152,102				152,102							
5. Current Year	154,636				154,636							
6. Current Year Member Months	1,826,469				1,826,469							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	45,068				45,068							
9. Total	45,068	0	0	0	45,068	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	12,084,071				12,084,071							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	12,084,071				12,084,071							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	7,938,937				7,938,937							
18. Amount Incurred for Provision of Health Care Services	7,993,182				7,993,182							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products
 (b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

30.SC



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		South Dakota		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	156,029	0	0	0	156,029	0	0	0	0	0	0	0
2. First Quarter	158,432				158,432							
3. Second Quarter	158,010				158,010							
4. Third Quarter	155,858				155,858							
5. Current Year	155,684				155,684							
6. Current Year Member Months	1,885,144				1,885,144							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	66,409				66,409							
9. Total	66,409	0	0	0	66,409	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	15,117,674				15,117,674							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	15,117,674				15,117,674							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	9,929,402				9,929,402							
18. Amount Incurred for Provision of Health Care Services	9,996,452				9,996,452							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.SD



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Tennessee		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	482,594	0	0	0	482,594	0	0	0	0	0		
2. First Quarter	486,955				486,955							
3. Second Quarter	475,514				475,514							
4. Third Quarter	468,062				468,062							
5. Current Year	462,574				462,574							
6. Current Year Member Months	5,710,367				5,710,367							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	153,266				153,266							
9. Total	153,266	0	0	0	153,266	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	37,113,121				37,113,121							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	37,113,121				37,113,121							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	25,253,199				25,253,199							
18. Amount Incurred for Provision of Health Care Services	25,421,234				25,421,234							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Texas		2021							NAIC Company Code	
		39616		Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
1 Total	2 Individual	3 Group										
Total Members at end of:												
1. Prior Year	2,632,940	0	0	0	2,632,940	0	0	0	0	0	0	
2. First Quarter	2,696,055				2,696,055							
3. Second Quarter	2,692,025				2,692,025							
4. Third Quarter	2,693,498				2,693,498							
5. Current Year	2,753,650				2,753,650							
6. Current Year Member Months	32,478,704				32,478,704							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	835,241				835,241							
9. Total	835,241	0	0	0	835,241	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	197,569,711				197,569,711							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	197,569,711				197,569,711							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	142,377,861				142,377,861							
18. Amount Incurred for Provision of Health Care Services	143,331,455				143,331,455							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.TX



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Utah		2021							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	145,175	0	0	0	145,175	0	0	0	0	0		
2. First Quarter	146,227				146,227							
3. Second Quarter	145,367				145,367							
4. Third Quarter	140,040				140,040							
5. Current Year	145,879				145,879							
6. Current Year Member Months	1,733,443				1,733,443							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	40,880				40,880							
9. Total	40,880	0	0	0	40,880	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	12,238,454				12,238,454							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	12,238,454				12,238,454							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	7,910,284				7,910,284							
18. Amount Incurred for Provision of Health Care Services	7,972,185				7,972,185							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.UT



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Vermont		2021							NAIC Company Code	
		39616		Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
1 Total	2 Individual	3 Group										
Total Members at end of:												
1. Prior Year	74,843	0	0	0	74,843	0	0	0	0	0	0	
2. First Quarter	75,960				75,960							
3. Second Quarter	76,231				76,231							
4. Third Quarter	76,926				76,926							
5. Current Year	76,419				76,419							
6. Current Year Member Months	916,907				916,907							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	19,062				19,062							
9. Total	19,062	0	0	0	19,062	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	6,235,364				6,235,364							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	6,235,364				6,235,364							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	3,518,330				3,518,330							
18. Amount Incurred for Provision of Health Care Services	3,541,741				3,541,741							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Virginia		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	0
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30 VA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Washington		2021							NAIC Company Code	
		39616		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0	0	0
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.WA



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		West Virginia		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	40,625	0	0	0	40,625	0	0	0	0	0	0	
2. First Quarter	41,158				41,158							
3. Second Quarter	41,408				41,408							
4. Third Quarter	40,571				40,571							
5. Current Year	39,618				39,618							
6. Current Year Member Months	487,226				487,226							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	12,217				12,217							
9. Total	12,217	0	0	0	12,217	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	3,553,245				3,553,245							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	3,553,245				3,553,245							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	1,815,432				1,815,432							
18. Amount Incurred for Provision of Health Care Services	1,854,685				1,854,685							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30100



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Wisconsin		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	476,201	0	0	0	476,201	0	0	0	0	0	0	
2. First Quarter	412,158				412,158							
3. Second Quarter	409,252				409,252							
4. Third Quarter	408,913				408,913							
5. Current Year	411,819				411,819							
6. Current Year Member Months	4,938,470				4,938,470							
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	137,582				137,582							
9. Total	137,582	0	0	0	137,582	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	31,821,533				31,821,533							
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	31,821,533				31,821,533							
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	23,108,524				23,108,524							
18. Amount Incurred for Provision of Health Care Services	23,262,704				23,262,704							

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.W1



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Wyoming		2021							NAIC Company Code	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	1	2	3									
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
Total Members at end of:												
1. Prior Year	0	0	0	0	0	0	0	0	0	0		
2. First Quarter	0											
3. Second Quarter	0											
4. Third Quarter	0											
5. Current Year	0											
6. Current Year Member Months	0											
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	0											
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	0											
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	0											
18. Amount Incurred for Provision of Health Care Services	0											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.WV



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Vision Service Plan Insurance Company

2. Columbus, OH

NAIC Group Code	1189	BUSINESS IN THE STATE OF	(LOCATION)									
			Grand Total		DURING THE YEAR			2021			NAIC Company Code	39616
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other			
Total Members at end of:												
1. Prior Year	16,588,752	0	0	0	15,259,847	0	1,328,905	0	0	0		
2. First Quarter	17,020,276	0	0	0	15,658,264	0	1,362,012	0	0	0		
3. Second Quarter	16,929,000	0	0	0	15,565,672	0	1,363,328	0	0	0		
4. Third Quarter	16,919,815	0	0	0	15,625,039	0	1,294,776	0	0	0		
5. Current Year	16,998,774	0	0	0	15,697,471	0	1,301,303	0	0	0		
6. Current Year Member Months	203,707,037	0	0	0	187,748,013	0	15,959,024	0	0	0		
Total Member Ambulatory Encounters for Year:												
7. Physician	0	0	0	0	0	0	0	0	0	0		
8. Non-Physician	5,407,009	0	0	0	4,886,807	0	520,202	0	0	0		
9. Total	5,407,009	0	0	0	4,886,807	0	520,202	0	0	0		
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0		
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0		
12. Health Premiums Written (b)	1,388,740,783	0	0	0	1,236,003,188	0	152,737,595	0	0	0		
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0		
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0		
15. Health Premiums Earned	1,388,740,783	0	0	0	1,236,003,188	0	152,737,595	0	0	0		
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0		
17. Amount Paid for Provision of Health Care Services	965,080,651	0	0	0	846,438,817	0	118,641,833	0	0	0		
18. Amount Incurred for Provision of Health Care Services	971,652,801	0	0	0	852,221,433	0	119,431,368	0	0	0		

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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

30.GT

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 2

NONE

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

Schedule S - Part 6

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	330,909,237		330,909,237
2. Accident and health premiums due and unpaid (Line 15)	57,675,062		57,675,062
3. Amounts recoverable from reinsurers (Line 16.1)	0		0
4. Net credit for ceded reinsurance	XXX	0	0
5. All other admitted assets (Balance)	95,704,991		95,704,991
6. Total assets (Line 28)	484,289,290	0	484,289,290
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	68,405,926		68,405,926
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	11,507,153		11,507,153
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0		0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount)	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount)	0		0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0		0
14. All other liabilities (Balance)	107,852,326		107,852,326
15. Total liabilities (Line 24)	187,765,405	0	187,765,405
16. Total capital and surplus (Line 33)	296,523,885	XXX	296,523,885
17. Total liabilities, capital and surplus (Line 34)	484,289,290	0	484,289,290
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	0		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	0		
23. Total ceded reinsurance recoverables	0		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers	0		
28. Funds held under reinsurance treaties with Certified Reinsurers	0		
29. Other ceded reinsurance payables/offsets	0		
30. Total ceded reinsurance payables/offsets	0		
31. Total net credit for ceded reinsurance	0		

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

Allocated by States and Territories

States, Etc.	Direct Business Only					Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	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? (Yes/No)	*
.0000		.00000	65-0134752	0	0		20/20 Eye Care Network, Inc.	US	NIA	Coppola Visual Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	56-2355483	0	0		Allure Eyewear, LLC	US	NIA	Marchon Eyewear, Inc	Ownership	51.000	Vision Service Plan (California)	NO	0
.0000		.00000	68-0295156	0	0		Altair Eyewear, Inc.	US	NIA	VSP Holding Company, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	85-1262252	0	0		Aran Eye Holdings, LLC	US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	85-2586280	0	0		Aran Visual Services Management, LLC	US	NIA	Aran Eye Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Charles M. Cummins, O.D. P.A.	US	NIA	Eye Drx Retail Management, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	26-3268063	0	0		Community Eye Care of South Carolina, LLC	US	NIA	Independant Eye Care MSO, Inc.	Ownership	100.000	Vision Service Plan (California)	YES	0
.0000		.00000		0	0		Community Eye Care, LLC (North Carolina)	US	NIA	Independant Eye Care MSO, Inc.	Ownership	100.000	Vision Service Plan (California)	YES	0
.0000		.00000		0	0		Coordinadora Administrativa de Personal	MEX	NIA	Marchon Eyewear, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	85-1220988	0	0		Coppola Visual Holdings, LLC	US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	85-1030916	0	0		Coppola Visual Services Management, LLC	US	NIA	Coppola Visual Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Cristallin SARL	FRA	NIA	Reflex Holding SAS	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	20-1949500	0	0		Eastern Vision Service Plan IPA, Inc.	US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.1189	Vision Serv Plan Group	.47029	22-2777159	0	0		Eastern Vision Service Plan, Inc.	US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		ECCA Managed Vision Care, Inc. (TX)	US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Empire Vision Centers, Inc.	US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Entemasyon al GozLuk Sanayi VE Ticaret AS	TUR	NIA	Marchon Europe BV	Ownership	55.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Eye Care and Surgery Center of Ft.								
.0000		.00000	20-1344254	0	0		Lauderdale, LLC	US	NIA	Aran Eye Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	23-2941185	0	0		Eye Designs, LLC	US	NIA	Marchon Eyewear, Inc.	Ownership	50.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Eye Drx Retail Management, Inc.	US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-3107295	0	0		Eyeconic, Inc.	US	NIA	VSP Retail Development Holding, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Eyefinity Ireland, Ltd.	IRL	NIA	Eyefinity, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Eyefinity OfficeMate Pty, Ltd. (Australia)	AUS	NIA	Eyefinity Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	68-0450459	0	0		Eyefinity, Inc.	US	NIA	VSPIC (Ohio)	Ownership	100.000	Vision Service Plan (California)	YES	0
.0000		.00000	45-3675739	0	0		EyeNetra, Inc.	US	NIA	VSP Optical Group, Inc.	Ownership	25.920	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		FC 18 Comercio e Representacoes Ltda	BRA	NIA	Marchon Brasil Ltda	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	86-3225533	0	0		GA Doctors of Optometry, LLC	US	NIA	Visionary Properties, Inc. (DE)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	58-2296612	0	0		Heritage Healthcare Consultants LLC	US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		I Enterprises Pty, Ltd	AUS	NIA	Marchon Eyewear, Inc	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	84-3547501	0	0		iCare Acquisition, Inc.	US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	26-0542739	0	0		iCare Health Options, LLC	US	NIA	iCare Medegy Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	46-5534391	0	0		iCare Health Solutions Tampa Florida, LLC	US	NIA	iCare Health Solutions, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	46-2604523	0	0		iCare Health Solutions, LLC	US	NIA	iCare Medegy Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	84-3549489	0	0		iCare Medegy Holdings, LLC	US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	84-3973259	0	0		iCare Visual Services Management, LLC	US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		ICP SARL	FRA	NIA	Reflex Holding SAS	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	56-1985814	0	0		Independant Eye Care MSO, Inc.	US	NIA	VSPIC (Ohio)	Ownership	100.000	Vision Service Plan (California)	YES	0
.0000		.00000		0	0		Marchon Brasil Ltda	BRA	NIA	Marchon Eyewear, Inc	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	83-4627457	0	0		Marchon Canada, Inc.	CAN	NIA	Marchon Eyewear, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	98-0201338	0	0		Marchon Europe BV	NLD	NIA	Marchon Eyewear, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Eyewear (Hong Kong) Ltd	HKG	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Eyewear (Shanghai) Ltd	CHN	NIA	Marchon Eyewear (Hong Kong) Ltd	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Eyewear Australia Pty Ltd	AUS	NIA	I Enterprises Pty Ltd	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Eyewear Shenzhen Ltd. China	CHN	NIA	Marchon Eyewear (Hong Kong) Ltd	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	11-2617364	0	0		Marchon Eyewear, Inc.	US	NIA	VSP Holding Company, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	98-0542016	0	0		Marchon France SAS	FRA	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Germany GmbH	DEU	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Gulf FZ Company	ARE	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Hispania SL	ESP	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Italia SRL	ITA	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Japan KK	JPN	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Mauritius Ltd	MUS	NIA	Marchon Eyewear (Hong Kong) Ltd	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Mexico	MEX	NIA	Marchon Eyewear, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	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? (Yes/No)	*
.0000		.00000		0	0		Marchon Portugal, Unipessoal, Lda	.PRT	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon Singapore Pte. Ltd.	.SGP	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Marchon UK Ltd	.GBR	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Monkey Software Pty. Ltd.	.AUS	NIA	Eyefinity OfficeMate Pty, Ltd. (Australia)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		MyEasySoft SARL	.FRA	NIA	Reflex Holding SAS	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	85-3684389	0	0		NC Doctors of Optometry, PLLC	.US	NIA	Visionary Properties, Inc., (DE)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	83-3379021	0	0		Ocular Health Management Solutions, LLC	.US	NIA	iCare Health Solutions, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	26-0388547	0	0		Optilab, LLC	.US	NIA	iCare Medegy Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	57-1024469	0	0		Physicians Eye Care Network, LLC	.US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	52-2372557	0	0		Physicians Eyecare Plan, Inc.	.US	NIA	Physicians Eyecare Plan, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	05-0533587	0	0		Physicians Eyecare Plan, LLC	.US	NIA	iCare Acquisition, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-0621213	0	0		Plexus Optix, Inc.	.US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Reflex Holding SAS	.IRL	NIA	Eyefinity, Ireland	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	83-4635050	0	0		Rosin of Tennessee Management Company, LLC	.US	NIA	VSP Ventures Management Services LLC	Ownership	60.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Scandinavian Eyewear (Sweden)	.SWE	NIA	Marchon Europe BV	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	75-1769288	0	0		Southwest Vision Service Plan, Inc. (Texas)	.US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Sterling Meta-Plast India Private Ltd.	.IND	NIA	Marchon Mauritius	Ownership	49.000	Vision Service Plan (California)	NO	0
.0000		.00000	62-1827649	0	0		Surgery Center of Coral Gables LLC	.US	NIA	Aran Eye Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-0801319	0	0		SV Paymaster Corporation, LLC	.US	NIA	iCare Medegy Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	80-0062678	0	0		The Laser Center of Coral Gables LLC	.US	NIA	Aran Eye Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	65-1098612	0	0		Tri-County Optical Laboratories, Inc.	.US	NIA	Coppola Visual Holdings, LLC	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Tri-State Doctors of Optometry, LLC	.US	NIA	Visionary Properties, Inc., (DE)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	94-1632821	0	0		Vision Service Plan (California)	.US	UDP	Vision Service Plan (California)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	99-0247673	0	0		Vision Service Plan (Hawaii)	.US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.1189	Vision Serv Plan Group	32395	36-3560825	0	0		Vision Service Plan Insurance Company (Missouri)	.US	IA	VSP Holding Company, Inc.	Board	0.000	Vision Service Plan (California)	NO	0
.1189	Vision Serv Plan Group	39616	06-1227840	0	0		Vision Service Plan Insurance Company (Ohio)	.US	RE	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.1189	Vision Serv Plan Group	12516	20-0891619	0	0		Vision Service Plan of Illinois, NFP	.US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.0000		.00000	83-0212963	0	0		Vision Service Plan of Wyoming (Wyoming)	.US	IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	NO	0
.0000		.00000	74-2849554	0	0		Visionary Properties, Inc., (DE)	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionary Retail Management, LLC	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionworks Distribution Services, Ltd., (TX)	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionworks Ecommerce Corp68	.US	NIA	Visionworks, Inc. (DE)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionworks Enterprises, Inc. (DE)	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionworks Lab Services, Inc., (TX)	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		Visionworks of America, Inc. (TX)	.US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	02-0677066	0	0		Visionworks, Inc. (DE)	.US	NIA	Visionworks of America, Inc. (TX)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		VSP Asia Private Ltd.	.HKG	NIA	VSP Global, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-5016913	0	0		VSP Ceres Inc.	.US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000		0	0		VSP France	.FRA	NIA	VSP Global, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-0933693	0	0		VSP Global, Inc.	.US	NIA	Vision Service Plan (California)	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	26-1998746	0	0		VSP Holding Company, Inc.	.US	NIA	Vision Service Plan (California)	Ownership	55.100	Vision Service Plan (California)	YES	0
.0000		.00000	26-1998746	0	0		VSP Holding Company, Inc.	.US	NIA	VSPIC (Ohio)	Ownership	44.900	Vision Service Plan (California)	YES	0
.0000		.00000	27-0621143	0	0		VSP Labs, Inc.	.US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	27-0621064	0	0		VSP Optical Group, Inc.	.US	NIA	Vision Service Plan (California)	Ownership	50.000	Vision Service Plan (California)	YES	0
.0000		.00000	27-0621064	0	0		VSP Optical Group, Inc.	.US	NIA	VSPIC (Ohio)	Ownership	40.000	Vision Service Plan (California)	YES	0
.0000		.00000	27-0621064	0	0		VSP Optical Group, Inc.	.US	NIA	VSP Vision Care, Inc. (Virginia)	Ownership	10.000	Vision Service Plan (California)	YES	0
.0000		.00000	46-5393037	0	0		VSP Retail Development Holding, Inc.	.US	NIA	VSP Optical Group, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	46-5406960	0	0		VSP Retail, Inc.	.US	NIA	VSP Retail Development Holding, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	61-1930870	0	0		VSP Ventures Management Services LLC	.US	NIA	VSP Labs, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0
.0000		.00000	84-2383097	0	0		VSP Ventures Optometric Solutions LLC	.US	NIA	VSP Labs, Inc.	Ownership	100.000	Vision Service Plan (California)	NO	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0000		.00000		0	0		VSP Vision Canada, Inc.	.CAN	.IA	Vision Service Plan (California)	Ownership	100.000	Vision Service Plan (California)	.NO	.0
.0000		.00000		0	0		VSP Vision Care - UK, Ltd.	.GBR	.NIA	VSP Global, Inc.	Ownership	100.000	Vision Service Plan (California)	.NO	.0
.1189	Vision Serv Plan Group	.53031	23-7089668	0	0		VSP Vision Care, Inc. (Virginia)	.US	.IA	Vision Service Plan (California)	Board	0.000	Vision Service Plan (California)	.NO	.0
.0000		.00000		0	0		Vision Web, Inc.	.US	.NIA	Marchon Eyewear, Inc	Ownership	9.600	Vision Service Plan (California)	.NO	.0
.0000		.00000		0	0		Winoptics SARL	.FRA	.NIA	Reflex Holding SAS	Ownership	100.000	Vision Service Plan (California)	.NO	.0

NONE

Asterisk	
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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Vision Service Plan Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES










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

	Responses
MARCH FILING	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will an actuarial opinion be filed by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING	
8. Will an audited financial report be filed by June 1?	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

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

MARCH FILING	
10. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
11. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
14. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
15. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
16. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
17. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
18. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
APRIL FILING	
19. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
20. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
21. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	YES
22. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
23. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	YES

AUGUST FILING	
24. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
Explanations:	
10. The data for this supplement is not required to be filed.	
11. The data for this supplement is not required to be filed.	
12. The data for this supplement is not required to be filed.	
13. The data for this supplement is not required to be filed.	
14. The data for this supplement is not required to be filed.	
15. The data for this supplement is not required to be filed.	
16. The data for this supplement is not required to be filed.	
17. The data for this supplement is not required to be filed.	
18. The data for this supplement is not required to be filed.	
19. The data for this supplement is not required to be filed.	
20. The data for this supplement is not required to be filed.	
22. The data for this supplement is not required to be filed.	

Bar Codes:	
10. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
11. Life Supplement [Document Identifier 205]	
12. SIS Stockholder Information Supplement [Document Identifier 420]	
13. Participating Opinion for Exhibit 5 [Document Identifier 371]	
14. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	
15. Medicare Part D Coverage Supplement [Document Identifier 365]	
16. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	
17. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	
18. Relief from the Requirements for Audit Committees [Document Identifier 226]	

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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



20. Life Supplement [Document Identifier 211]



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

