



**HEALTH ANNUAL STATEMENT**  
FOR THE YEAR ENDED DECEMBER 31, 2022  
OF THE CONDITION AND AFFAIRS OF THE  
**Bright Health Insurance Company of Ohio, Inc.**

NAIC Group Code	4887 (Current)	4887 (Prior)	NAIC Company Code	16353	Employer's ID Number	37-1873205
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:	Life, Accident & Health					
Is HMO Federally Qualified?	Yes [ ] No [ ]					
Incorporated/Organized	10/26/2017		Commenced Business	01/01/2019		
Statutory Home Office	300 E Business Way, Suite 220 (Street and Number)		Cincinnati, OH, US 45241 (City or Town, State, Country and Zip Code)			
Main Administrative Office	8000 Norman Center Dr, Suite 900 (Street and Number)		612-238-1321 (Area Code) (Telephone Number)			
Minneapolis, MN, US 55437 (City or Town, State, Country and Zip Code)						
Mail Address	8000 Norman Center Dr, Suite 900 (Street and Number or P.O. Box)		Minneapolis, MN, US 55437 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	8000 Norman Center Dr, Suite 900 (Street and Number)		612-238-1321 (Area Code) (Telephone Number)			
Minneapolis, MN, US 55437 (City or Town, State, Country and Zip Code)						
Internet Website Address	www.brighthealthcare.com					
Statutory Statement Contact	Chelsea Marie McGee (Name)		605-216-2433 (Area Code) (Telephone Number)			
cmcgee@brighthealthgroup.com (E-mail Address)						
	(FAX Number)					

## OFFICERS

Chief Executive Officer and  
President \_\_\_\_\_ Jay Matushak # \_\_\_\_\_  
Secretary \_\_\_\_\_ Jeff Craig # \_\_\_\_\_ Chief Financial Officer \_\_\_\_\_ Jay Matushak # \_\_\_\_\_

## OTHER

#### **DIRECTORS OR TRUSTEES**

Jay Matushak # A.Bartley Bryt # Jeff Craig #

State of \_\_\_\_\_ SS \_\_\_\_\_  
County of \_\_\_\_\_

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions 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.

Jay Matushak  
Chief Executive Officer and President

Jay Matushak  
Chief Financial Officer

Jeff Craig  
Secretary

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**EXHIBIT 3 - HEALTH CARE RECEIVABLES**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
Elixir Solutions .....	0	0	0	27,102	27,102	0
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed	0	0	0	0	0	0
0199999. Total Pharmaceutical Rebate Receivables	0	0	0	27,102	27,102	0
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	0	0	0	0	0	0
0299999. Total Claim Overpayment Receivables	0	0	0	0	0	0
0399998. Aggregate Loans and Advances to Providers Not Individually Listed	0	0	0	0	0	0
0399999. Total Loans and Advances to Providers	0	0	0	0	0	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed	0	0	0	0	0	0
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed	0	0	0	0	0	0
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Health Care Receivables Not Individually Listed	0	0	0	0	0	0
0699999. Total Other Health Care Receivables	0	0	0	0	0	0
0799999 Gross health care receivables	0	0	0	27,102	27,102	0

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED**

Type of Health Care Receivable	Health Care Receivables Collected or Offset During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5 Health Care Receivables from Prior Years (Columns 1 + 3)	6 Estimated Health Care Receivables Accrued as of December 31 of Prior Year
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year		
1. Pharmaceutical rebate receivables .....	20,177	0	27,102	0	47,279	80,857
2. Claim overpayment receivables .....	0	0	0	0	0	0
3. Loans and advances to providers .....	0	0	0	0	0	0
4. Capitation arrangement receivables .....	0	0	0	0	0	0
5. Risk sharing receivables .....	0	0	0	0	0	0
6. Other health care receivables.....	0	0	0	0	0	0
7. Totals (Lines 1 through 6)	20,177	0	27,102	0	47,279	80,857

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

## Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0199999. Individually listed claims unpaid	0	0	0	0	0	0
0299999. Aggregate accounts not individually listed- uncovered	0	0	0	0	0	0
0399999. Aggregate accounts not individually listed-covered	0	0	0	0	0	0
0499999. Subtotals	0	0	0	0	0	0
0599999. Unreported claims and other claim reserves						34,109
0699999. Total amounts withheld						0
0799999. Total claims unpaid						34,109
0899999 Accrued medical incentive pool and bonus amounts						43,967

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

## **EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES**

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## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Bright Health Management, Inc. ....	Intercompany Payables .....	176,499	176,499	0
0199999. Individually listed payables		176,499	176,499	0
0299999. Payables not individually listed		0	0	0
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
.....	.....	.....	.....	.....
0399999 Total gross payables		176,499	176,499	0

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

**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	0.0	0	0
2. Intermediaries.....	0	0.0	0	0.0	0	0
3. All other providers.....	0	0.0	0	0.0	0	0
4. Total capitation payments.....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service .....	0	0.0	XXX	XXX	0	0
6. Contractual fee payments .....	0	0.0	XXX	XXX	0	0
7. Bonus/withhold arrangements - fee-for-service .....	834,126	97.0	XXX	XXX	0	834,126
8. Bonus/withhold arrangements - contractual fee payments .....	25,906	3.0	XXX	XXX	0	25,906
9. Non-contingent salaries .....	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements .....	0	0.0	XXX	XXX	0	0
11. All other payments .....	0	0.0	XXX	XXX	0	0
12. Total other payments .....	860,032	100.0	XXX	XXX	0	860,032
13. TOTAL (Line 4 plus Line 12)	860,032	100%	XXX	XXX	0	860,032

**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
99999999 Totals				XXX	XXX

Exhibit 8 - Furniture and Equipment Owned

**N O N E**



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Bright Health Insurance Company of Ohio, Inc.

2. Cincinnati, OH

(LOCATION)

NAIC Group Code	4887	BUSINESS IN THE STATE OF Ohio			DURING THE YEAR 2022						(NAIC Company Code)	16353			
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
<b>Total Members at end of:</b>															
1. Prior Year .....		671	0	0	0	0	0	0	671	0	0	0	0	0	
2. First Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	
3. Second Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Third Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	
5. Current Year		0	0	0	0	0	0	0	0	0	0	0	0	0	
6. Current Year Member Months		0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>Total Member Ambulatory Encounters for Year:</b>															
7. Physician .....		0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Non-Physician .....		0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred		0	0	0	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	0	0	0	
12. Health Premiums Written (b) .....		(30,084)	0	0	0	0	0	0	(30,084)	0	0	0	0	0	
13. Life Premiums Direct .....		0	0	0	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	0	0	0	
15. Health Premiums Earned.....		486,285	0	0	0	0	0	0	486,285	0	0	0	0	0	
16. Property/Casualty Premiums Earned		0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services.....		860,032	0	0	0	0	0	0	860,032	0	0	0	0	0	
18. Amount Incurred for Provision of Health Care Services		(164,451)	0	0	0	0	0	0	(164,451)	0	0	0	0	0	

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....(30,084)



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Bright Health Insurance Company of Ohio, Inc.

2. Cincinnati, OH

(LOCATION)

NAIC Group Code	4887	BUSINESS IN THE STATE OF			Grand Total		DURING THE YEAR					NAIC Company Code	16353		
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14	
		1	2		3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health
		Total	Individual	Group											
<b>Total Members at end of:</b>															
1. Prior Year .....		671	0	0	0	0	0	0	0	671	0	0	0	0	0
2. First Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Second Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter .....		0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year		0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months		0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>Total Member Ambulatory Encounters for Year:</b>															
7. Physician .....		0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Non-Physician .....		0	0	0	0	0	0	0	0	0	0	0	0	0	0
9. Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred		0	0	0	0	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	0	0	0	0
12. Health Premiums Written (b) .....		(30,084)	0	0	0	0	0	0	0	(30,084)	0	0	0	0	0
13. Life Premiums Direct .....		0	0	0	0	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	0	0	0	0
15. Health Premiums Earned.....		486,285	0	0	0	0	0	0	0	486,285	0	0	0	0	0
16. Property/Casualty Premiums Earned		0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services.....		860,032	0	0	0	0	0	0	0	860,032	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services		(164,451)	0	0	0	0	0	0	0	(164,451)	0	0	0	0	0

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....(30,084)

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Schedule S - Part 1 - Section 2

**N O N E**

Schedule S - Part 2

**N O N E**

Schedule S - Part 3 - Section 2

**N O N E**

Schedule S - Part 4

**N O N E**

Schedule S - Part 4 - Bank Footnote

**N O N E**

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

**SCHEDULE S - PART 6**

Five Year Exhibit of Reinsurance Ceded Business (\$000 Omitted)

	1 2022	2 2021	3 2020	4 2019	5 2018
<b>A. OPERATIONS ITEMS</b>					
1. Premiums .....	0	0	0	0	0
2. Title XVIII - Medicare .....	0	21	99	100	0
3. Title XIX - Medicaid .....	0	0	0	0	0
4. Commissions and reinsurance expense allowance .....	0	0	0	0	0
5. Total hospital and medical expenses .....	0	(12)	0	0	0
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....	0	(2)	0	0	0
7. Claims payable .....	0	0	53	168	0
8. Reinsurance recoverable on paid losses .....	0	0	206	42	0
9. Experience rating refunds due or unpaid .....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due .....	0	0	0	0	0
11. Unauthorized reinsurance offset .....	0	0	0	0	0
12. Offset for reinsurance with Certified Reinsurers .....	0	0	0	0	0
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
13. Funds deposited by and withheld from (F) .....	0	0	0	0	0
14. Letters of credit (L) .....	0	0	0	0	0
15. Trust agreements (T) .....	0	0	0	0	0
16. Other (O) .....	0	0	0	0	0
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
17. Multiple Beneficiary Trust .....	0	0	0	0	0
18. Funds deposited by and withheld from (F) .....	0	0	0	0	0
19. Letters of credit (L) .....	0	0	0	0	0
20. Trust agreements (T) .....	0	0	0	0	0
21. Other (O) .....	0	0	0	0	0

**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)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	4,174,012	0	4,174,012
2. Accident and health premiums due and unpaid (Line 15) .....	215,075	0	215,075
3. Amounts recoverable from reinsurers (Line 16.1) .....	0	0	0
4. Net credit for ceded reinsurance .....	XXX.	0	0
5. All other admitted assets (Balance) .....	110,485	0	110,485
6. Total assets (Line 28) .....	4,499,572	0	4,499,572
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	34,109	0	34,109
8. Accrued medical incentive pool and bonus payments (Line 2) .....	43,967	0	43,967
9. Premiums received in advance (Line 8) .....	0	0	0
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount) .....	0	0	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount) .....	0	0	0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount) .....	0	0	0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount) .....	0	0	0
14. All other liabilities (Balance) .....	779,184	0	779,184
15. Total liabilities (Line 24) .....	857,260	0	857,260
16. Total capital and surplus (Line 33) .....	3,642,312	XXX	3,642,312
17. Total liabilities, capital and surplus (Line 34) .....	4,499,572	0	4,499,572
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
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

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.4887	Bright Hlth Grp .....	00000	47-4991296		0001671284 ..	Bright Health Group, Inc. ....	..DE....	...UIP....				0.000			
.4887	Bright Hlth Grp .....	00000	81-1108911			Bright Health Management, Inc. ....	..DE....	...UDP....	Bright Health, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	15963	81-1078509			Bright Health Insurance Company .....	..CO....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16122	37-1844468			Bright Health Company of Arizona .....	..AZ....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16388	32-0534235			Bright Health Insurance Company of New York .....	..NY....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....					Bright Health Insurance Company of Tennessee .....	..TN....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16341	35-2616469			Bright Health Insurance Company of Ohio, Inc. ....	..OH....	...RE....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16353	37-1873205			Bright Health Insurance Company of Florida .....	..FL....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16501	83-3456438			Bright Health Company of North Carolina .....	..NC....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16595	30-1154852			Bright Health Insurance Company of Illinois .....	..IL....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16545	83-3650545			Bright Health Company of South Carolina, Inc. ....	..SC....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16544	35-2651212			Bright Health Company of Georgia .....	..GA....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	16546	38-4106459			Bright Health Company of California .....	..CA....	...NIA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....	00000	84-4428391			Bright HealthCare Insurance Company of Texas .....	..TX....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		17041	86-3230389		Universal Care, Inc .....	..CA....	...IA....	Bright Health Company of California .....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		15910	33-0012358		Bright Health Services, Inc. ....	..DE....	...NIA....	Bright Health, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		3
.4887	Bright Hlth Grp .....		00000	84-3262809		AssociatesMD Medical Group, Inc. ....	..DE....	...NIA....	Bright Health Services, Inc. ....		Influence....	0.000	Bright Health Group, Inc. ....		5
.4887	Bright Hlth Grp .....		00000	84-3548530		Medical Practice Holding Company, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	86-2190965		Premier Medical Associates of Florida, LLC .....	..DE....	...NIA....	Medical Practice Holding Company, LLC ....		Ownership....	62.000	Bright Health Group, Inc. ....		6
.4887	Bright Hlth Grp .....		00000	85-3949537		BrightHealth Networks, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	86-2197193		NeueHealth Advantage ACO, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	85-1528100		NeueHealth Premier ACO, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	85-1676317		NeueHealth Partners, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	85-1474761		NeueHealth Partners of Florida, LLC .....	..DE....	...NIA....	Physicians Plus, LLC .....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	85-1485390		NeueHealth Partners of California, LLC .....	..DE....	...NIA....	Physicians Plus, LLC .....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	86-2212807		Premier Medical Associates of Florida .....	..DE....	...NIA....	Physicians Plus, LLC .....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	85-3886892		Healthcare, P.A. ....	..DE....	...NIA....	Bright Health Services, Inc. ....		Influence....	0.000	Bright Health Group, Inc. ....		7
.4887	Bright Hlth Grp .....		00000	86-2097242		NeueHealth LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	86-2408592		DocSquad, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		8
.4887	Bright Hlth Grp .....		16281	82-2885824		True Health New Mexico, Inc. ....	..NM....	...IA....	Bright Health Management, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		2
.4887	Bright Hlth Grp .....		00000	91-2155938		Central Health Plan of California, Inc. ....	..CA....	...IA....	Bright Health Company of California .....		Ownership....	100.000	Bright Health Group, Inc. ....		4
.4887	Bright Hlth Grp .....		00000	84-2640890		Centrum Medical Holdings, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	.75.000	Bright Health Group, Inc. ....		9
.4887	Bright Hlth Grp .....		00000	46-2536904		Med Care Centers, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	45-5087560		Med Plan Clinic, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	45-2799088		Medcare Quality Medical Centers, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	83-4221393		Med Care Express, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	87-2200070		Centrum Medical Group, PLLC .....	..TX....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		11
.4887	Bright Hlth Grp .....		00000	83-4075529		Medlife Wellness Centers, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	86-2291679		Centrum Specialty Network, LLC .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000			Centrum Medical Centers .....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		10
.4887	Bright Hlth Grp .....		00000	87-3372083		Centrum Health IP, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	87-2190282		Centrum Medical Holdings of Texas, LLC .....	..DE....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	87-3266820		BrightHealthcare Company of Florida, Inc. ....	..FL....	...NIA....	Bright Health Services, Inc. ....		Ownership....	100.000	Bright Health Group, Inc. ....		
.4887	Bright Hlth Grp .....		00000	88-0891048		Centrum Medical Group of North Carolina, PLLC .....	..NC....	...NIA....	Bright Health Services, Inc. ....		Ownership....	0.000	Bright Health Group, Inc. ....		12

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domesticiliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
.4887	Bright Hlth Grp .....	00000	88-1849873			NeueHealth Community ACO, LLC .....	..DE.....	NIA.....	Bright Health Management, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00001	88-0624053			NeueHealth Partners Florida RBE, LLC .....	..DE.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00002	88-0591476			NeueHealth Partners Texas RBE, LLC .....	..DE.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00003	88-4128249			NeueHealth Networks of Texas Inc. .....	..TX.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00004	87-2284566			NeueHealth Partners of Central Florida, LLC .....	..DE.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00000	88-4279507			Centrum Pharmacy, LLC .....	..DE.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		
.4887	Bright Hlth Grp .....	00000	92-0924696			NeueHealth Partner Services, LLC .....	..DE.....	NIA.....	Bright Health Services, Inc. .....	Ownership.....	100.000	Bright Health Group, Inc. .....	...NO.....		

Asterisk	Explanation
1 .....	Bright Health Insurance Company of Alabama, Inc. (AL) merged with and into Bright Health Insurance Company on 12/31/2020.
2 .....	100% of stock of True Health New Mexico, Inc. acquired on 3/31/2021.
3 .....	100% of stock of Universal Care, Inc. acquired on 4/30/2020.
4 .....	100% of stock of Central Health Plan of California, Inc. acquired on 4/1/2021.
5 .....	NO OWNERSHIP INTEREST. Entity owned by physician, Runddeep Gadh, D.O., that is subject to Management Services Agreement and Stockholder Transfer Restriction Agreement with Bright Health Services, Inc.
6 .....	Medical Practice Holding Company, LLC owns 62% of membership interests. PMA II, LLC owns 38% of membership interest.
7 .....	NO OWNERSHIP INTEREST. Entity owned by physician, Dr. Dinesh Khanna, that is subject to Management Services Agreement and Succession Agreement with Premier Medical Associates of Florida, LLC.
8 .....	Zipnosis, Inc. merged with and into DocSquad, LLC on 3/31/2021.
9 .....	Medical Practice Holding Company, LLC owns 75% of membership interests. RRD Healthcare, LLC owns 25% membership interests.
10 .....	Includes: Centrum Medical Center Airport, LLC FEIN 84-2658490; Centrum Medical Center East Hialeah, LLC FEIN 84-2827877; Centrum Medical Center West Hialeah, LLC FEIN 84-2658497; Centrum Medical Center Miami Gardens FEIN 84-2754516, LLC; Centrum Medical Center South Dade, LLC FEIN 84-2671249; Centrum Medical Center Westchester, LLC FEIN 84-2780203; Centrum Medical Center Little Havana 27 Ave, LLC FEIN 84-2839911; Centrum Medical Center Little Havana 12 Ave, LLC FEIN 84-2764236; Centrum Medical Centers of Coral Springs, LLC FEIN 85-3478041; Centrum Medical Centers of Margate, LLC FEIN 85-3495242; Centrum Medical Centers of Davie, LLC FEIN 86-1218604; Centrum Medical Centers of Hallandale, LLC FEIN 86-2112975; Centrum Medical Centers of Lighthouse Point, LLC FEIN 86-2824921; Centrum Medical Centers of Fort Lauderdale, LLC FEIN 86-2856366; Centrum Medical Centers of Sheridan, LLC FEIN 86-2886898; Centrum Medical Centers of Miramar, LLC FEIN 86-2899974; Centrum Medical Center Homestead, LLC FEIN 86-2932392 .....
11 .....	NO OWNERSHIP INTEREST. Entity owned by physician, Dr. Manuel Lam, that is subject to Management Services Agreement and Succession Agreement with Centrum Medical Holdings, LLC.
12 .....	NO OWNERSHIP INTEREST. Entity owned by physician, Dr. James Juiming Ho, MD, that is subject to Management Services Agreement and Succession Agreement with Centrum Medical Holdings, LLC.

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
....00000	47-4991296	Bright Health Group, Inc.	0	0	0	0	0	0	0	0	0	0
....00000	81-1108911	Bright Health Management, Inc.	0	(406,487,865)	0	0	339,393,858	0	0	0	(67,094,007)	0
....15963	81-1078509	Bright Health Insurance Company	0	17,000,000	0	0	(46,716,086)	0	0	0	(29,716,086)	0
....16122	37-1844468	Bright Health Company of Arizona	0	2,500,000	0	0	(10,219,033)	0	0	0	(7,719,033)	0
....16388	32-0534235	Bright Health Insurance Company of New York	0	0	0	0	(1,052,972)	0	0	0	(1,052,972)	0
....16341	35-2616469	Bright Health Insurance Company of Tennessee	0	21,000,000	0	0	(19,212,038)	0	0	0	1,787,962	0
....16353	37-1873205	Bright Health Insurance Company of Ohio, Inc.	0	0	0	0	(80,578)	0	0	0	(80,578)	0
....16501	83-3456438	Bright Health Insurance Company of Florida	0	77,200,000	0	0	(62,890,296)	0	0	0	14,309,704	0
....16595	30-1154852	Bright Health Company of North Carolina	0	82,500,000	0	0	(60,855,678)	0	0	0	21,644,322	0
....16545	83-3650545	Bright Health Insurance Company of Illinois	0	3,200,000	0	0	(5,620,098)	0	0	0	(2,420,098)	0
....16544	35-2651212	Bright Health Company of South Carolina, Inc.	0	3,000,000	0	0	(5,062,431)	0	0	0	(2,062,431)	0
....16546	38-4106459	Bright Health Company of Georgia	0	15,200,000	0	0	(5,623,246)	0	0	0	9,576,754	0
....00000	84-4428391	Bright Health Company of California	0	0	0	0	(207,530)	0	0	0	(207,530)	0
....17041	86-3230389	Bright HealthCare Insurance Company of Texas	0	175,000,000	0	0	50,414,336	0	0	0	225,414,336	0
....15910	33-0012358	Universal Care, Inc	0	7,007,054	0	0	(2,413,738)	0	0	0	4,593,316	0
....00000	84-3262809	Bright Health Services, Inc.	0	(16,335,778)	0	0	0	0	0	0	(16,335,778)	0
....00000	84-3548530	AssociatesMD Medical Group, Inc.	0	0	0	0	0	0	0	0	0	0
....00000	86-2190965	Medical Practice Holding Company, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-3949537	Premier Medical Associates of Florida, LLC	0	(6,653,403)	0	0	0	0	0	0	(6,653,403)	0
....00000	86-2197193	BrightHealth Networks, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-1528100	NeueHealth Advantage ACO, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-1676317	NeueHealth Premier ACO, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-1474761	NeueHealth Partners, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-1485390	NeueHealth Partners of Florida, LLC	0	0	0	0	15,665,076	0	0	0	15,665,076	0
....00000	86-2212807	NeueHealth Partners of California, LLC	0	0	0	0	0	0	0	0	0	0
....00000	85-3886892	Premier Medical Associates of Florida Healthcare, P.A.	0	0	0	0	0	0	0	0	0	0
....00000	86-2097242	NeueHealth LLC	0	0	0	0	0	0	0	0	0	0
....00000	86-2408592	DocSquad, LLC	0	(5,950,000)	0	0	0	0	0	0	(5,950,000)	0
....16281	82-2885824	True Health New Mexico, Inc.	0	33,500,000	0	0	(6,592,355)	0	0	0	26,907,645	0
....00000	91-2155938	Central Health Plan of California, Inc.	0	(1,680,008)	0	0	(1,327,414)	0	0	0	(3,007,422)	0
....00000	84-2640890	Centrum Medical Holdings, LLC	0	0	0	0	20,369,201	0	0	0	20,369,201	0
....00000	46-2536904	Med Care Centers, LLC	0	0	0	0	0	0	0	0	0	0
....00000	45-5087560	Med Plan Clinic, LLC	0	0	0	0	0	0	0	0	0	0
....00000	45-2799088	Medcare Quality Medical Centers, LLC	0	0	0	0	0	0	0	0	0	0
....00000	83-4221393	Med Care Express, LLC	0	0	0	0	0	0	0	0	0	0
....00000	87-2200070	Centrum Medical Group, PLLC	0	0	0	0	0	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
....00000	83-4075529	Med Wellness Centers, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	86-2291679	Centrum Specialty Network, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000		Centrum Medical Centers .....	0	0	0	0	0	0	*	0	0	0
....00000	87-3372083	Centrum Health IP, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	87-2190282	Centrum Medical Holdings of Texas, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	87-3266820	BrightHealthcare Company of Florida, Inc. ....	0	0	0	0	0	0	*	0	0	0
....00000	88-0891048	Centrum Medical Group of North Carolina, PLLC .....	0	0	0	0	0	0	*	0	0	0
....00000	88-1849873	NeueHealth Community ACO, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	88-0624053	NeueHealth Partners Florida RBE, LLC .....	0	0	0	0	0	0	*	0	(73,988,474)	0
....00000	88-0591476	NeueHealth Partners Texas RBE, LLC .....	0	0	0	0	0	0	*	0	(123,980,505)	0
....00000	88-4128249	NeueHealth Networks of Texas Inc. ....	0	0	0	0	0	0	*	0	0	0
....00000	87-2284566	NeueHealth Partners of Central Florida, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	88-4279507	Centrum Pharmacy, LLC .....	0	0	0	0	0	0	*	0	0	0
....00000	92-0924696	NeueHealth Partner Services, LLC .....	0	0	0	0	0	0	*	0	0	0
9999999 Control Totals			0	0	0	0	(1)	0	XXX	0	(1)	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.

## **SCHEDULE Y**

**PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL**

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Bright Health Insurance Company of Ohio, Inc.  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

**REQUIRED FILINGS**

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

**SUPPLEMENTAL FILINGS**

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?	.....	YES
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?	.....	NO
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Explanations:

- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.
- 17.
- 18.
- 19.
- 20.
- 24.

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]



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

