



HEALTH QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2023
OF THE CONDITION AND AFFAIRS OF THE
Wellpoint Ohio, Inc

NAIC Group Code06710671NAIC Company Code10767Employer's ID Number13-4212818
(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

Licensed as business type:Health Maintenance Organization

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

Incorporated/Organized03/08/2002Commenced Business09/01/2005

Statutory Home Office4361 Irwin Simpson Road, C/O Community Ins. Co. (Street and Number)Mason, OH, US 45040 (City or Town, State, Country and Zip Code)

Main Administrative Office5800 Northampton Blvd (Street and Number)Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)757-490-6900 (Area Code) (Telephone Number)

Mail Address5800 Northampton Blvd (Street and Number or P.O. Box)Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records5800 Northampton Blvd (Street and Number)Norfolk, VA, US 23502 (City or Town, State, Country and Zip Code)800-331-1476 (Area Code) (Telephone Number)

Internet Website Addresswww.elevancehealth.com

Statutory Statement ContactJill M Waddell (Name)262-202-1569 (Area Code) (Telephone Number)jill.waddell@elevancehealth.com (E-mail Address)262-523-4945 (FAX Number)

OFFICERS

President/ChairpersonKristen Louise MetzgerTreasurerVincent Edward Scher

SecretaryKathleen Susan KieferAssistant TreasurerEric (Rick) Kenneth Noble

OTHER

Jennifer Ann Dewane, Vice President

DIRECTORS OR TRUSTEES

Kristen Louise MetzgerRonald William PenczekJennifer Ann Dewane

State ofIndianaSS:
County ofMarion

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

DocuSigned by:Metzger, kristen l.93E0B1E1F93B437...Kristen Louise MetzgerPresident/Chairperson

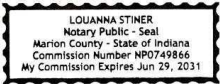
DocuSigned by:kathy kieferD85175EE05784B1...Kathleen Susan KieferSecretary

DocuSigned by:Vincent E. ScherA85A33722D4143E...Vincent Edward ScherTreasurer

Subscribed and sworn to before me this27th day ofOctober 2023

Louanna Stiner
Executive Admin Assistant
06/29/31

- 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.....



ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	16,696,972		16,696,972	1,319,151
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 13,615,415), cash equivalents (\$ 0) and short-term investments (\$)	13,615,415		13,615,415	21,307,422
6. Contract loans (including \$ premium notes)		0	0	0
7. Derivatives		0	0	0
8. Other invested assets			0	0
9. Receivables for securities		0	0	0
10. Securities lending reinvested collateral assets	4,638,494	0	4,638,494	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	34,950,881	0	34,950,881	22,626,573
13. Title plants less \$ charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	8,277	0	8,277	19,617
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	57,976	34,838	23,138	17,599
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 1,199,236) and contracts subject to redetermination (\$ 3,451,064)	4,650,300	0	4,650,300	4,096,349
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0		0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	3,117,227	0	3,117,227	3,804,978
18.1 Current federal and foreign income tax recoverable and interest thereon	52,594	0	52,594	367,476
18.2 Net deferred tax asset	573,767	840	572,927	11,591
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$ 62,267) and other amounts receivable	400,883	338,616	62,267	106,122
25. Aggregate write-ins for other than invested assets	157,542	157,242	300	150
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	43,969,447	531,536	43,437,911	31,050,455
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	43,969,447	531,536	43,437,911	31,050,455
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. State income tax recoverable	300	0	300	150
2502. Prepaid expenses	150,636	150,636	0	0
2503. Miscellaneous receivables	6,606	6,606	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	157,542	157,242	300	150

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	986,451	0	986,451	484,183
2. Accrued medical incentive pool and bonus amounts	25,421	0	25,421	19,544
3. Unpaid claims adjustment expenses	20,048	0	20,048	11,567
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	790,402	0	790,402	8,602
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	7,872,579	0	7,872,579	1,553
9. General expenses due or accrued	289	0	289	863
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	0	0	0	0
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated	12,952	0	12,952	4,336
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	7,722,435	0	7,722,435	7,787,944
16. Derivatives	0	0	0	0
17. Payable for securities	0	0	0	0
18. Payable for securities lending	4,638,494	0	4,638,494	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	460,312	0	460,312	0
23. Aggregate write-ins for other liabilities (including \$ 109,428 current)	109,428	0	109,428	13,444
24. Total liabilities (Lines 1 to 23)	22,638,811	0	22,638,811	8,332,036
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000	1,000
27. Preferred capital stock	XXX	XXX	0	
28. Gross paid in and contributed surplus	XXX	XXX	15,147,882	15,147,882
29. Surplus notes	XXX	XXX	0	
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	5,650,218	7,569,537
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX	0	
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	20,799,100	22,718,419
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	43,437,911	31,050,455
DETAILS OF WRITE-INS				
2301. Miscellaneous liabilities	109,428	0	109,428	10,314
2302. Escheat liabilities	0	0	0	3,130
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	109,428	0	109,428	13,444
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	55,957	71,924	94,832
2. Net premium income (including \$ non-health premium income).....	XXX	75,600,971	85,303,235	110,670,970
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(1,022,371)	1,425,644	1,450,018
4. Fee-for-service (net of \$ medical expenses)	XXX			0
5. Risk revenue	XXX	0		0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	74,578,600	86,728,879	112,120,988
Hospital and Medical:				
9. Hospital/medical benefits		61,610,586	71,261,239	91,955,739
10. Other professional services		940,711	1,603,523	2,779,779
11. Outside referrals		0		0
12. Emergency room and out-of-area		864,264	28,984	98,573
13. Prescription drugs		654,268	541,561	790,828
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		80,407	72,127	24,000
16. Subtotal (Lines 9 to 15)	0	64,150,236	73,507,434	95,648,919
Less:				
17. Net reinsurance recoveries				0
18. Total hospital and medical (Lines 16 minus 17)	0	64,150,236	73,507,434	95,648,919
19. Non-health claims (net)		0		
20. Claims adjustment expenses, including \$330,450 cost containment expenses		482,961	197,833	272,959
21. General administrative expenses		7,051,619	8,236,399	10,863,028
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) .		0		0
23. Total underwriting deductions (Lines 18 through 22).....	0	71,684,816	81,941,666	106,784,906
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	2,893,784	4,787,213	5,336,082
25. Net investment income earned		447,393	23,114	66,647
26. Net realized capital gains (losses) less capital gains tax of \$9,162		34,468		
27. Net investment gains (losses) (Lines 25 plus 26)	0	481,861	23,114	66,647
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ 16,968)].....		(16,968)	(16,397)	(21,017)
29. Aggregate write-ins for other income or expenses	0	(538)	(3,086)	(3,911)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	3,358,139	4,790,844	5,377,801
31. Federal and foreign income taxes incurred	XXX	1,156,211	1,367,382	1,126,438
32. Net income (loss) (Lines 30 minus 31)	XXX	2,201,928	3,423,462	4,251,363
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Other income (expense)		(538)	(3,086)	(3,911)
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(538)	(3,086)	(3,911)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	22,718,419	18,461,461	18,461,461
34. Net income or (loss) from Line 32	2,201,928	3,423,462	4,251,363
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$0			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	562,176	443,218	1,054
39. Change in nonadmitted assets	(483,423)	(372,493)	4,541
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in			0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders	(4,200,000)		
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	(1,919,319)	3,494,187	4,256,958
49. Capital and surplus end of reporting period (Line 33 plus 48)	20,799,100	21,955,648	22,718,419
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	82,674,532	93,390,791	110,680,754
2. Net investment income	1,080,441	44,634	79,734
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	83,754,973	93,435,425	110,760,488
5. Benefit and loss related payments	63,926,173	73,577,586	95,361,296
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	6,395,826	9,381,778	13,513,523
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$9,162 tax on capital gains (losses)	850,491	642,849	1,588,706
10. Total (Lines 5 through 9)	71,172,490	83,602,213	110,463,525
11. Net cash from operations (Line 4 minus Line 10)	12,582,483	9,833,212	296,963
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	15,043,581	0	0
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	15,043,581	0	0
13. Cost of investments acquired (long-term only):			
13.1 Bonds	30,999,770	0	0
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	4,638,494	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	35,638,264	0	0
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(20,594,683)	0	0
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	4,200,000	0	0
16.6 Other cash provided (applied)	4,520,193	(1,991,705)	(3,725,167)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	320,193	(1,991,705)	(3,725,167)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .	(7,692,007)	7,841,507	(3,428,204)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	21,307,422	24,735,626	24,735,626
19.2 End of period (Line 18 plus Line 19.1)	13,615,415	32,577,133	21,307,422

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

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	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
Total Members at end of:														
1. Prior Year	7,571	0	0	0	0	0	0	7,571	0	0	0	0	0	0
2. First Quarter	6,277	0	0	0	0	0	0	6,277	0	0	0	0	0	0
3. Second Quarter	6,143	0	0	0	0	0	0	6,143	0	0	0	0	0	0
4. Third Quarter	6,087							6,087						
5. Current Year	0													
6. Current Year Member Months	55,957							55,957						
Total Member Ambulatory Encounters for Period:														
7 Physician	71,492							71,492						
8. Non-Physician	77,525							77,525						
9. Total	149,017	0	0	0	0	0	0	149,017	0	0	0	0	0	0
10. Hospital Patient Days Incurred	5,300							5,300						
11. Number of Inpatient Admissions	802							802						
12. Health Premiums Written (a)	75,600,971							75,600,971						
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned.....	74,578,600							74,578,600						
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	63,642,091							63,642,091						
18. Amount Incurred for Provision of Health Care Services	64,150,236							64,150,236						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 75,600,971

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

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UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	0	0	0	0	0	0
2. Comprehensive (hospital and medical) group	0	0	0	0	0	0
3. Medicare Supplement	0	0	0	0	0	0
4. Dental Only	0	0	0	0	0	0
5. Vision Only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	39,860	63,811,783	233,319	753,132	273,179	484,183
8. Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	39,860	63,811,783	233,319	753,132	273,179	484,183
14. Health care receivables (a)	0	400,883	0	0	0	116,801
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	14,162	60,368	2,736	22,685	16,898	19,544
17. Totals (Lines 13 - 14 + 15 + 16)	54,022	63,471,268	236,055	775,817	290,077	386,926

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

NOTES TO FINANCIAL STATEMENTS

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2022. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Wellpoint Ohio, Inc. (the “Company”) have been prepared in conformity with the National Association of Insurance Commissioners’ (“NAIC”) *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* (“NAIC SAP”), subject to any deviations prescribed or permitted by the Ohio Department of Insurance (“ODI”).

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the ODI is shown below:

	SSAP #	F/S Page	F/S Line #	September 30, 2023	December 31, 2022
<u>Net Income</u>					
(1) Wellpoint Ohio, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 2,201,928	\$ 4,251,363
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 2,201,928	\$ 4,251,363
<u>Surplus</u>					
(5) Wellpoint Ohio, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 20,799,100	\$ 22,718,419
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 20,799,100	\$ 22,718,419

B. Use of Estimates in the Preparation of the Financial Statements

No significant change.

C. Accounting Policies

- (1) No significant change.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield

NOTES TO FINANCIAL STATEMENTS

to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.

The Company holds 16 SVO-Identified bond exchange trade funds (“ETFs”) reported as bonds on Schedule D-1 in which the Company has made an irrevocable decision to report at systematic value. Systematic valuation has been consistently applied to these ETFs held at September 30, 2023 and previous periods.

(3) - (5) Not applicable.

(6) Loan-backed securities are stated at amortized cost. Pre-payment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.

(7) - (14) Not applicable.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

- (1) The Company did not have loan-backed securities at September 30, 2023.
- (2) The Company did not recognize other-than-temporary impairments ("OTTI") on its loan-backed securities during the nine months ended September 30, 2023.
- (3) The Company did not hold OTTI on its loan-backed securities at September 30, 2023.
- (4) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings at September 30, 2023.
- (5) The Company had no impaired loan-backed securities at September 30, 2023.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not enter into repurchase agreements at December 31, 2022 or 2021.
- (2) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers based on, among other things, their creditworthiness in exchange for collateral initially equal to at least 102% of the market value of the loaned securities. The Company receives the collateral in cash or securities, and if cash is received the cash

NOTES TO FINANCIAL STATEMENTS

collateral is thereafter invested according to guidelines of the Company’s Investment Policy.

(3) Collateral Received

a. Aggregate amount collateral received	
	<u>Fair Value</u>
1. Securities Lending	
(a) Open	\$ 4,641,687
(b) 30 days or less	—
(c) 31 to 60 days	—
(d) 61 to 90 days	—
(e) Greater than 90 days	—
(f) Sub-total	<u>\$ 4,641,687</u>
(g) Securities received	<u>—</u>
(h) Total collateral received	<u><u>\$ 4,641,687</u></u>
2. Dollar repurchase agreement - Not applicable.	
b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged	<u><u>\$ 4,641,687</u></u>
c. The Company receives cash collateral in an amount in excess of fair value of the securities lent. The Company reinvests the cash collateral according to guidelines of the Company’s Investment Policy.	

(4) The Company does not have any securities lending transactions administered by an affiliated agent.

(5) Collateral Reinvestment

a. Aggregate amount collateral reinvested	
	<u>Amortized Cost</u> <u>Fair Value</u>
1. Securities Lending	
(a) Open	\$ — \$ —
(b) 30 days or less	1,584,269 1,585,947
(c) 31 to 60 days	1,495,889 1,496,207
(d) 61 to 90 days	291,289 291,647
(e) 91 to 120 days	224,151 224,265
(f) 121 to 180 days	613,017 613,457
(g) 181 to 365 days	429,879 430,165
(h) 1 to 2 years	— —
(i) 2 to 3 years	— —
(j) Greater than 3 years	<u>—</u> <u>—</u>
(k) Sub-total	<u>\$ 4,638,494</u> <u>\$ 4,641,687</u>
(l) Securities received	<u>—</u> <u>—</u>
(m) Total collateral reinvested	<u><u>\$ 4,638,494</u></u> <u><u>\$ 4,641,687</u></u>
2. Dollar repurchase agreement - Not applicable.	
b. Not applicable.	

(6) Not applicable.

(7) Not applicable.

NOTES TO FINANCIAL STATEMENTS

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at September 30, 2023.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at September 30, 2023.

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at September 30, 2023.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at September 30, 2023.

J. Real Estate

Not applicable.

K. Investments in Low-Income Housing Tax Credits

Not applicable.

L. Restricted Assets

No significant change.

M. Working Capital Finance Investments

Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company had no netted assets and liabilities at September 30, 2023.

O. 5GI Securities

The Company has no 5GI Securities as of September 30, 2023.

P. Short Sales

The Company did not have any short sales at September 30, 2023.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at September 30, 2023.

R. Reporting Entity's Share of Cash Pool by Asset Type

The Company did not participate in a cash pool at September 30, 2023.

6. Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

7. Investment Income

No significant change.

8. Derivative Instruments

Not applicable.

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

A. - F.

No significant change.

G. - H.

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

On August 16, 2022, the U.S. government enacted the Inflation Reduction Act which includes a new corporate alternative minimum tax (the "Corporate AMT") of 15% on the adjusted financial statement of income ("AFSI") of corporations with average AFSI exceeding \$1.0 billion over a three-year period. The Corporate AMT is effective beginning after December 31, 2022. The controlled group of corporations, of which the Company is a member, has determined it is an applicable corporation for purposes of determining if the Corporate AMT exceeds the regular federal income tax payable. The controlled group has determined that it does not expect to be subject to the Corporate AMT in 2023. The Company has determined that it would not be an applicable corporation on a stand-alone basis, therefore it does not expect to be subject to the Corporate AMT in 2023.

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

A. Nature of the Relationship

The Company changed its name to Wellpoint Ohio, Inc. effective July 12, 2023.

The Company's parent, AMERIGROUP Corporation, changed its name to Wellpoint Corporation ("WLP") effective July 27, 2023.

B. Significant Transactions for Each Period

The following significant transactions took place between the Company and its affiliates:

The Board of Directors of the Company declared an ordinary dividend in the amount of \$4,200,000 on August 23, 2023. The Company paid the dividend to its parent company, WLP, on September 5, 2023.

The Company remits a monthly capitation amount to Caremore Arizona, Inc ("Caremore"), an affiliate, who is responsible for providing health care services to the Company's Medicare enrollees. During 2023, the Company incurred capitation expense to Caremore of \$54,090,034.

The Company is a party to the Fair Market Value ("FMV") Services Attachment as discussed in Note 10E of the 2022 Annual Statement which was amended to add BioPlus Pharmacies as a medical service provider effective August 1, 2023.

C. Transactions with Related Parties who are not Reported on Schedule Y

No significant change.

NOTES TO FINANCIAL STATEMENTS

D. Amounts Due to or from Related Parties

At September 30, 2023, the Company reported no amounts due from affiliates and \$7,722,435 due to affiliates. The payable balance represents intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - O.

No significant change.

11. Debt

Not applicable.

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

A. Defined Benefit Plan

Not applicable.

B. Not applicable.

C. Not applicable.

D. Not applicable.

E. Defined Contribution Plans

Not applicable.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

No significant change.

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

Not applicable.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant change.

NOTES TO FINANCIAL STATEMENTS

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

A. Transfers of Receivables Reported as Sales

Not applicable.

B. Transfer and Servicing of Financial Assets

(1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At September 30, 2023 the fair value of securities loaned was \$4,534,229 and the carrying value of securities loaned was \$4,543,940.

(2) - (7) Not applicable.

C. Wash Sales

(1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.

(2) At September 30, 2023, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans

Not applicable.

B. Administrative Services Contract Plans

Not applicable.

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

No significant change.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements

A. (1) There are no assets or liabilities measured at fair value as of September 30, 2023.

(2) Fair Value Measurement in (Level 3) of the Fair Value Hierarchy

There are no investments in Level 3 as of September 30, 2023.

(3) The Company’s policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

(4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

Certain bonds, primarily corporate debt securities, are designated Level 3. For these securities, the valuation methodologies may incorporate broker quotes or discounted cash flow analyses using assumptions for inputs such as expected cash flows, benchmark yields, credit spreads, default rates and prepayment speeds that are not observable in the markets.

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (“NAV”)	Not Practicable (Carrying Value)
Bonds	\$ 17,139,887	\$ 16,696,972	\$ 15,890,988	\$ 1,248,899	\$ —	\$ —	—
Securities lending collateral asset	4,641,687	4,638,494	—	4,641,687	—	—	—

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value.

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

NOTES TO FINANCIAL STATEMENTS

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through November 9, 2023 for the statutory statement issued on November 10, 2023. There were no other events occurring subsequent to September 30, 2023 requiring recognition or disclosure.

23. Reinsurance

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

E. Risk Sharing Provisions of the Affordable Care Act ("ACA")

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk sharing provisions (YES/NO)? No

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year.

Not applicable.

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

Not applicable.

(4) Roll-forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.

Not applicable.

(5) ACA Risk Corridors Receivable as of Reporting Date.

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

A. The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$103,378 during 2023. This is approximately 25.9% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$398,493 as of December 31, 2022. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2023. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.

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

NOTES TO FINANCIAL STATEMENTS

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

The Company did not record any premium deficiency reserves at September 30, 2023.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

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

Yes ☒ No ☐

1.2

If yes, has the report been filed with the domiciliary state?

Yes ☒ No ☐

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ☒ No ☐

2.2

If yes, date of change:

07/12/2023

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes ☒ No ☐

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes ☐ No ☒

3.3

If the response to 3.2 is yes, provide a brief description of those changes.

3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes ☒ No ☐

3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0001156039

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes ☐ No ☒

4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5.

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

Yes ☐ No ☒ N/A ☐

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2022

6.2

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

12/31/2017

6.3

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

05/23/2019

6.4

By what department or departments?
Ohio Department of Insurance

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ☐ No ☐ N/A ☒

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes ☐ No ☐ N/A ☒

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes ☐ No ☒

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes ☐ No ☒

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes ☐ No ☒

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []
- 9.11

If the response to 9.1 is No, please explain:
.....
- 9.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
.....
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).
.....

FINANCIAL

- 10.1

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

Yes [] No [X]
- 10.2

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

0

INVESTMENT

- 11.1

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

Yes [] No [X]
- 11.2

If yes, give full and complete information relating thereto:
.....
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$.....

0
13.

Amount of real estate and mortgages held in short-term investments:

\$.....

0
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [] No [X]
- 14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$.....0	\$.....0
14.22 Preferred Stock	\$.....0	\$.....0
14.23 Common Stock	\$.....0	\$.....0
14.24 Short-Term Investments	\$.....0	\$.....0
14.25 Mortgage Loans on Real Estate	\$.....0	\$.....0
14.26 All Other	\$.....0	\$.....0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$.....0	\$.....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$.....0	\$.....0

15.1

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

Yes [] No [X]

15.2

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

16.

For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1

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

\$.....

4,641,687

16.2

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

\$.....

4,638,494

16.3

Total payable for securities lending reported on the liability page.

\$.....

4,638,494
- 11.1

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE Wellpoint Ohio, Inc.

GENERAL INTERROGATORIES

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

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase Bank, N.A	383 Madison Ave, New York, NY 10179

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Elevance Health, Inc.	I.....
Loomis, Sayles & Company, LP	U.....
.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With Securities Exchange Commission	5 Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	JIZPN2RX3UMNOYID1313 .....	.....	NO.....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.

Operating Percentages:
- 1.1

A&H loss percent

86.5 %
- 1.2

A&H cost containment percent

0.4 %
- 1.3

A&H expense percent excluding cost containment expenses

9.7 %
- 2.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 2.2

If yes, please provide the amount of custodial funds held as of the reporting date

\$
- 2.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 2.4

If yes, please provide the balance of the funds administered as of the reporting date

\$
3.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [X] No []
- 3.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [] No []

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE Wellpoint Ohio, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

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

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories											
		1	Direct Business Only								
		Active Status (a)	2	3	4	5	6	7	8	9	10
States, etc.			Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL .....	..N..							.....0	
2.	Alaska	AK .....	..N..							.....0	
3.	Arizona	AZ .....	..L..	75,600,971						75,600,971	
4.	Arkansas	AR .....	..L..							.....0	
5.	California	CA .....	..N..							.....0	
6.	Colorado	CO .....	..N..							.....0	
7.	Connecticut	CT .....	..N..							.....0	
8.	Delaware	DE .....	..N..							.....0	
9.	District of Columbia	DC .....	..N..							.....0	
10.	Florida	FL .....	..N..							.....0	
11.	Georgia	GA .....	..N..							.....0	
12.	Hawaii	HI .....	..N..							.....0	
13.	Idaho	ID .....	..N..							.....0	
14.	Illinois	IL .....	..N..							.....0	
15.	Indiana	IN .....	..N..							.....0	
16.	Iowa	IA .....	..N..							.....0	
17.	Kansas	KS .....	..N..							.....0	
18.	Kentucky	KY .....	..N..							.....0	
19.	Louisiana	LA .....	..N..							.....0	
20.	Maine	ME .....	..N..							.....0	
21.	Maryland	MD .....	..N..							.....0	
22.	Massachusetts	MA .....	..N..							.....0	
23.	Michigan	MI .....	..N..							.....0	
24.	Minnesota	MN .....	..N..							.....0	
25.	Mississippi	MS .....	..N..							.....0	
26.	Missouri	MO .....	..N..							.....0	
27.	Montana	MT .....	..N..							.....0	
28.	Nebraska	NE .....	..N..							.....0	
29.	Nevada	NV .....	..N..							.....0	
30.	New Hampshire	NH .....	..N..							.....0	
31.	New Jersey	NJ .....	..N..							.....0	
32.	New Mexico	NM .....	..N..							.....0	
33.	New York	NY .....	..N..							.....0	
34.	North Carolina	NC .....	..N..							.....0	
35.	North Dakota	ND .....	..N..							.....0	
36.	Ohio	OH .....	..L..							.....0	
37.	Oklahoma	OK .....	..N..							.....0	
38.	Oregon	OR .....	..N..							.....0	
39.	Pennsylvania	PA .....	..N..							.....0	
40.	Rhode Island	RI .....	..N..							.....0	
41.	South Carolina	SC .....	..N..							.....0	
42.	South Dakota	SD .....	..N..							.....0	
43.	Tennessee	TN .....	..N..							.....0	
44.	Texas	TX .....	..N..							.....0	
45.	Utah	UT .....	..N..							.....0	
46.	Vermont	VT .....	..N..							.....0	
47.	Virginia	VA .....	..N..							.....0	
48.	Washington	WA .....	..N..							.....0	
49.	West Virginia	WV .....	..N..							.....0	
50.	Wisconsin	WI .....	..N..							.....0	
51.	Wyoming	WY .....	..N..							.....0	
52.	American Samoa	AS .....	..N..							.....0	
53.	Guam	GU .....	..N..							.....0	
54.	Puerto Rico	PR .....	..N..							.....0	
55.	U.S. Virgin Islands	VI .....	..N..							.....0	
56.	Northern Mariana Islands	MP .....	..N..							.....0	
57.	Canada	CAN .....	..N..							.....0	
58.	Aggregate Other Aliens	OT	XXX.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
59.	Subtotal	XXX.....	.....0	75,600,971	.....0	.....0	.....0	.....0	.....0	75,600,971	.....0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX.....								.....0	
61.	Totals (Direct Business)	XXX.....	0	75,600,971	0	0	0	0	0	75,600,971	0
DETAILS OF WRITE-INS											
58001.	.....	XXX.....									
58002.	.....	XXX.....									
58003.	.....	XXX.....									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX.....	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 3
2. R - Registered - Non-domiciled RRGs..... 0
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
4. Q - Qualified - Qualified or accredited reinsurer..... 0
5. N - None of the above - Not allowed to write business in the state..... 54

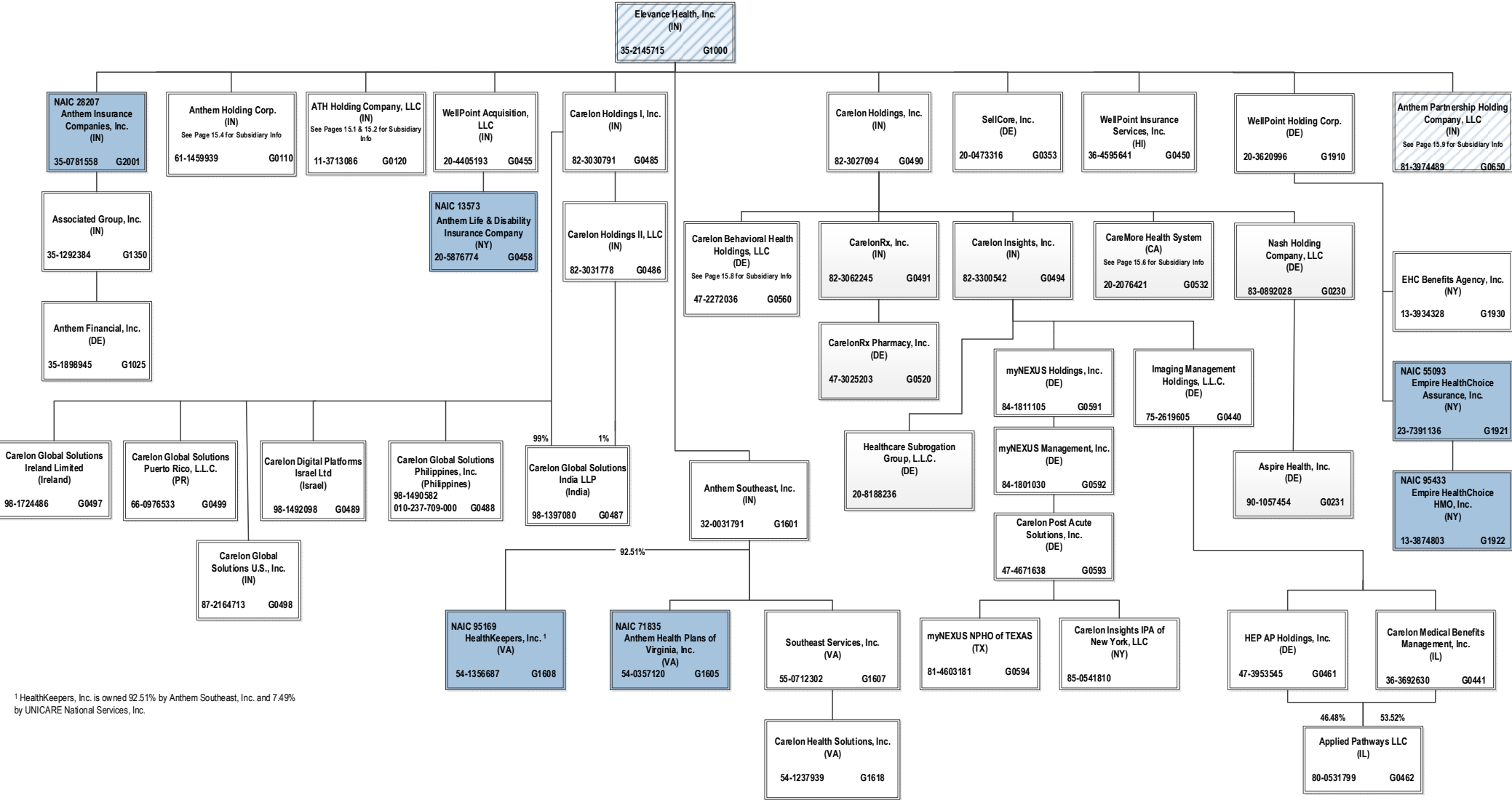
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee

Regulated Insurance Company

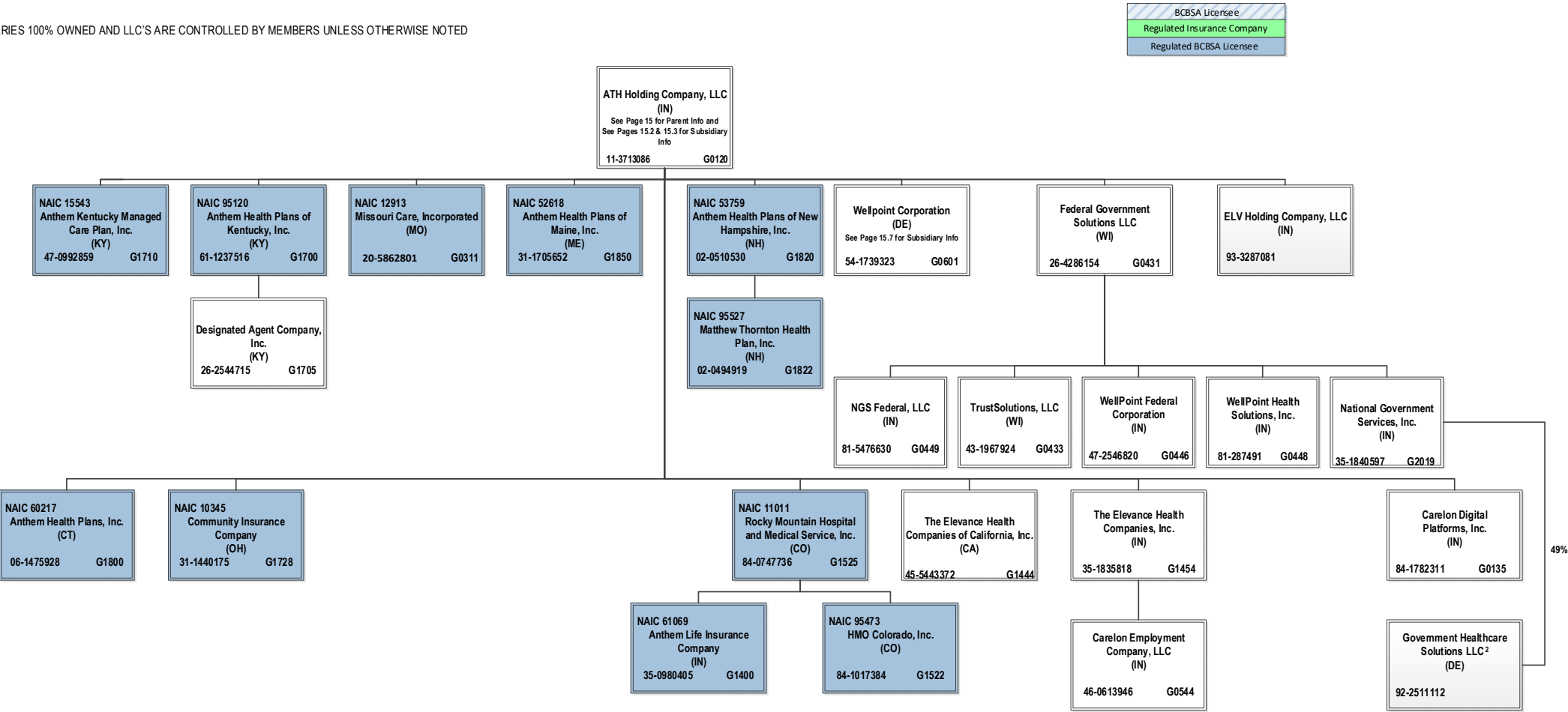
Regulated BCBSA Licensee



¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

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

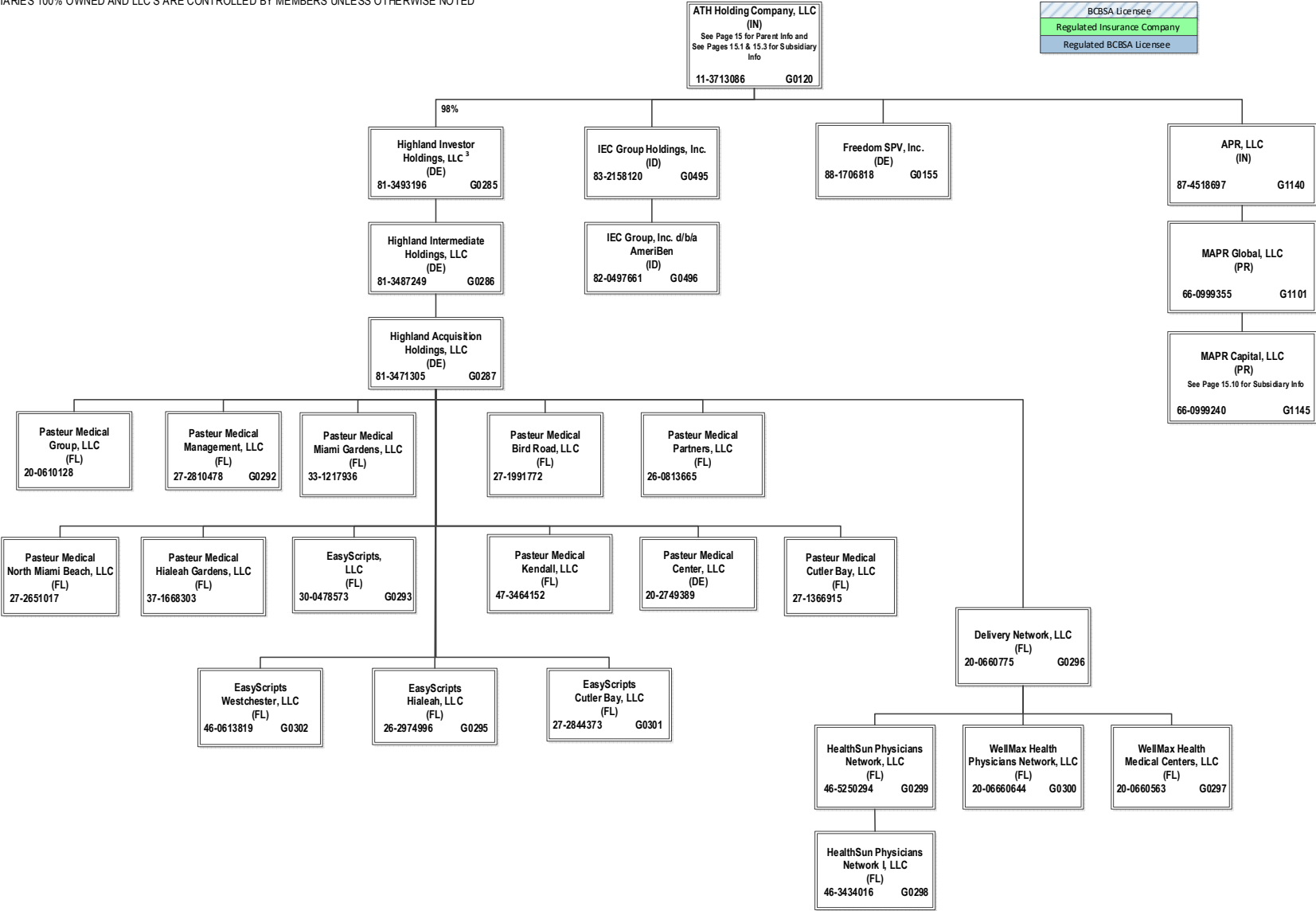
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



² Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

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

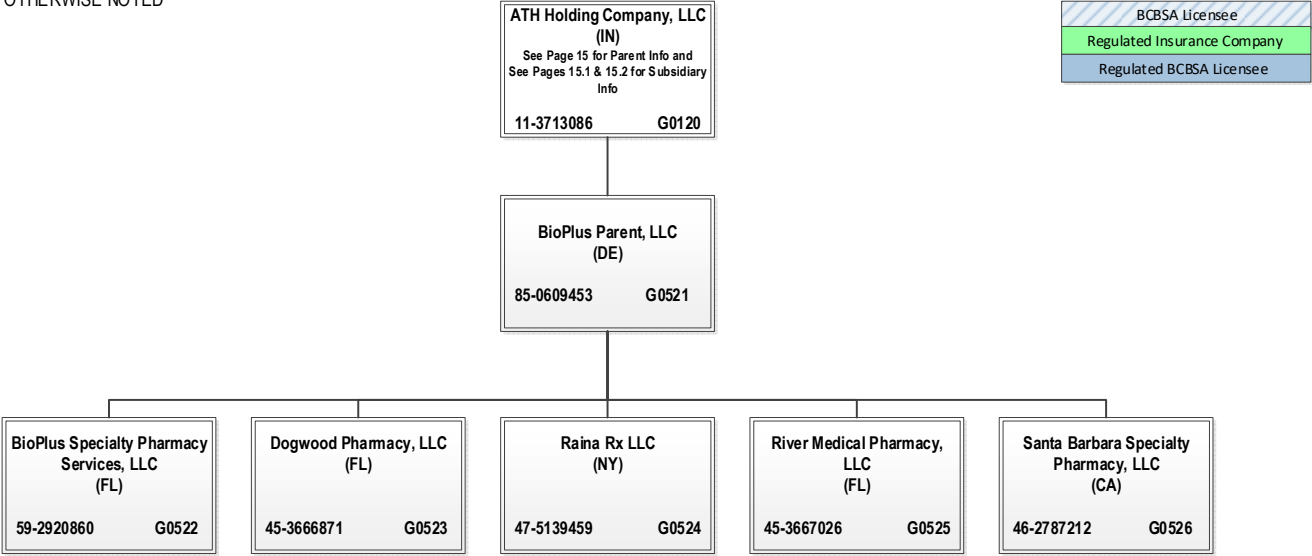
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



³ ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Wellpoint Corporation holds the remaining 2% interest.

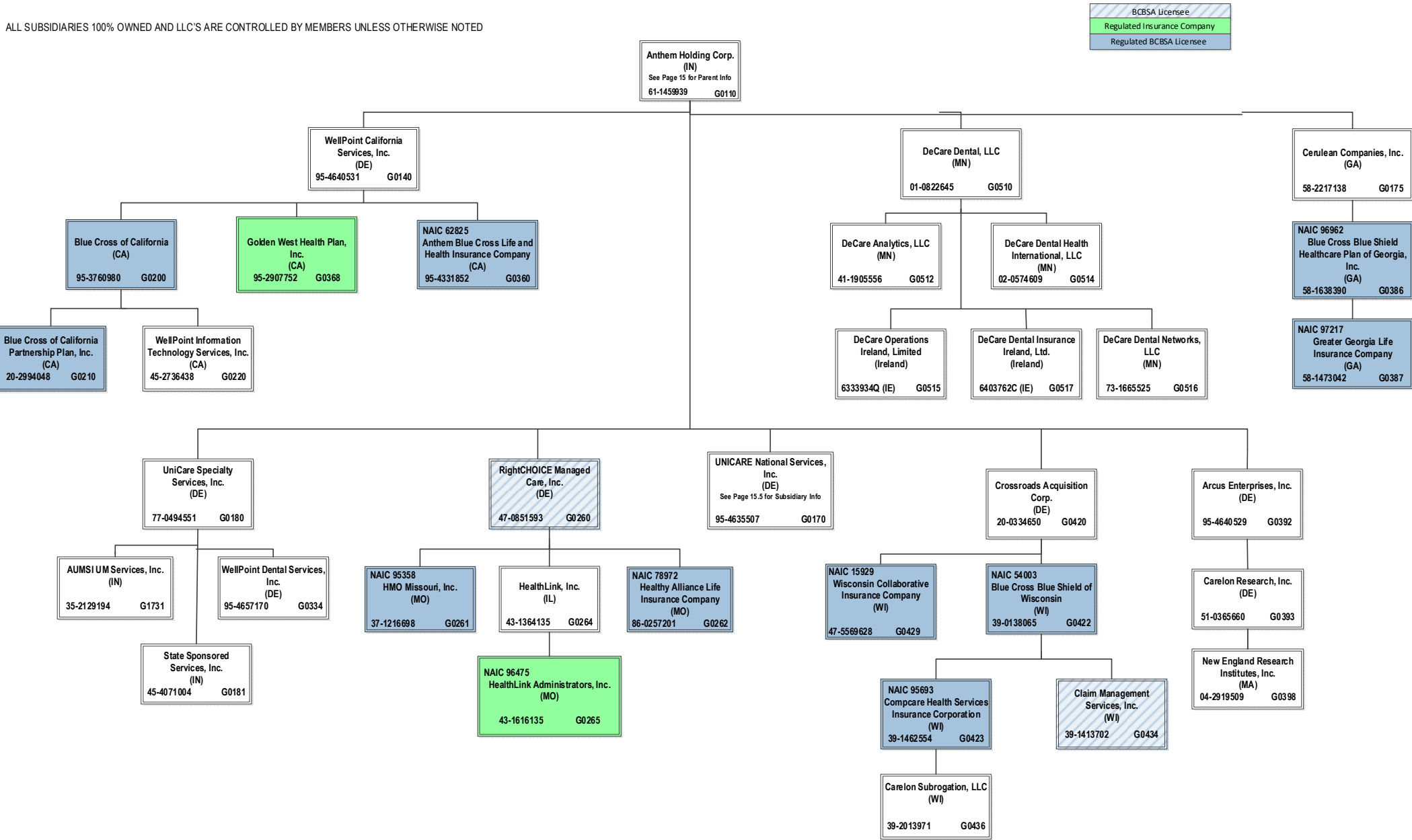
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



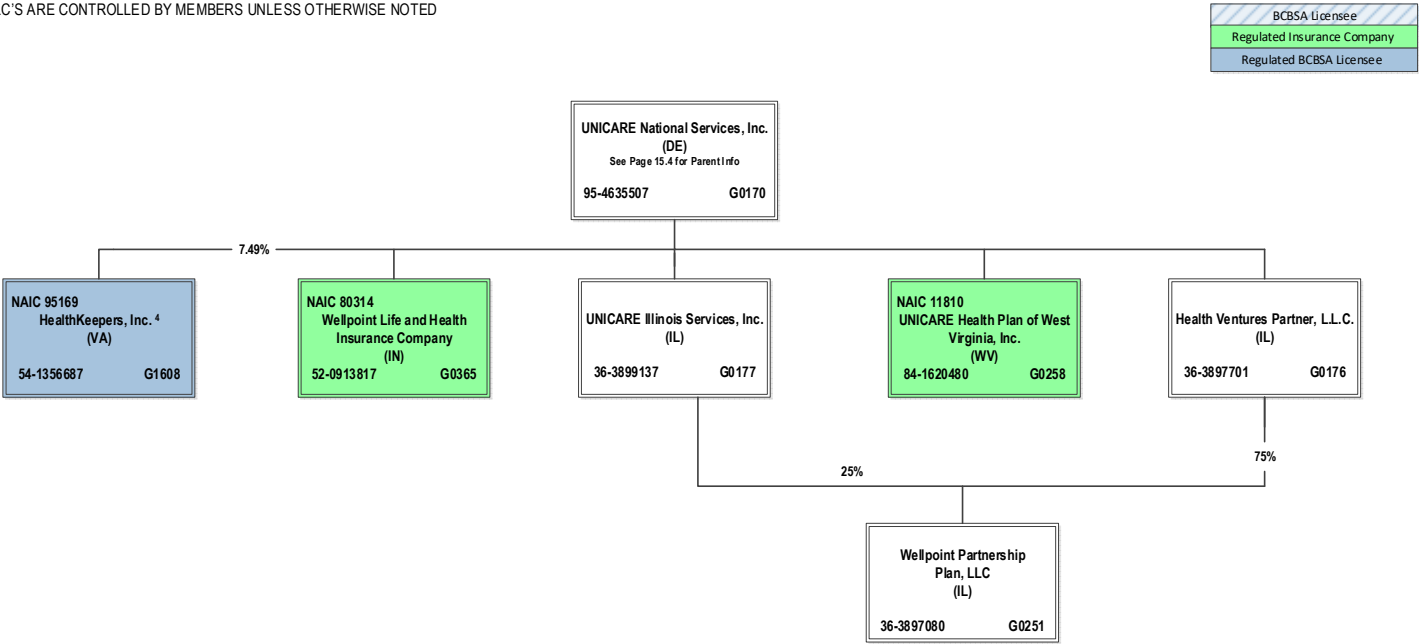
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



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

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

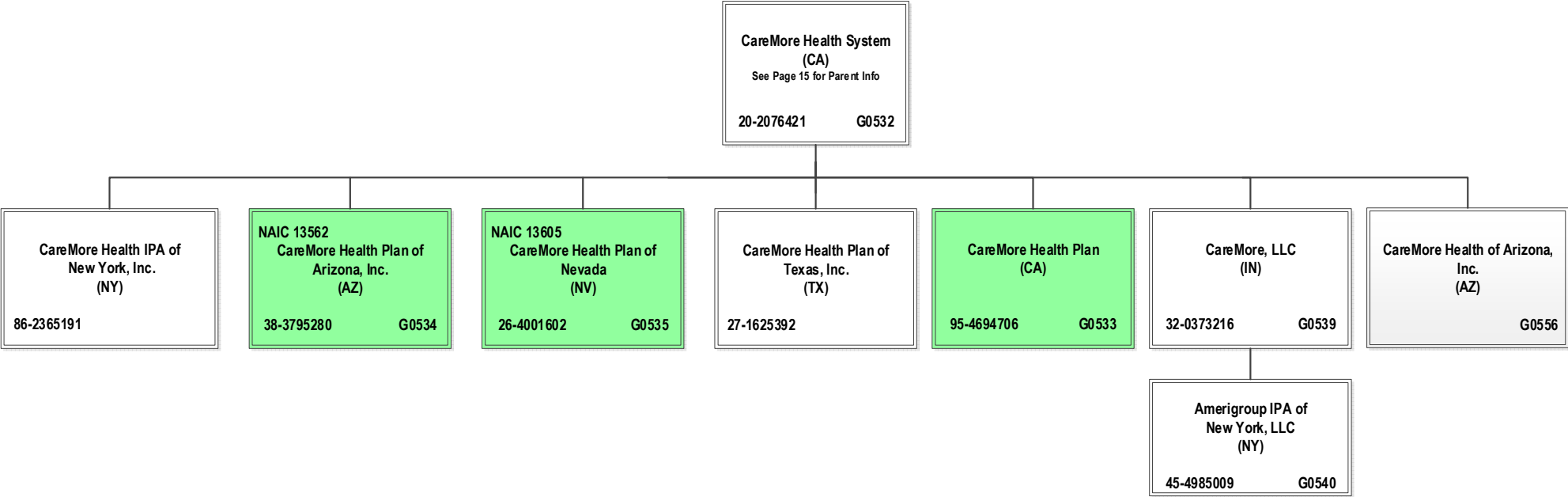


⁴ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

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

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



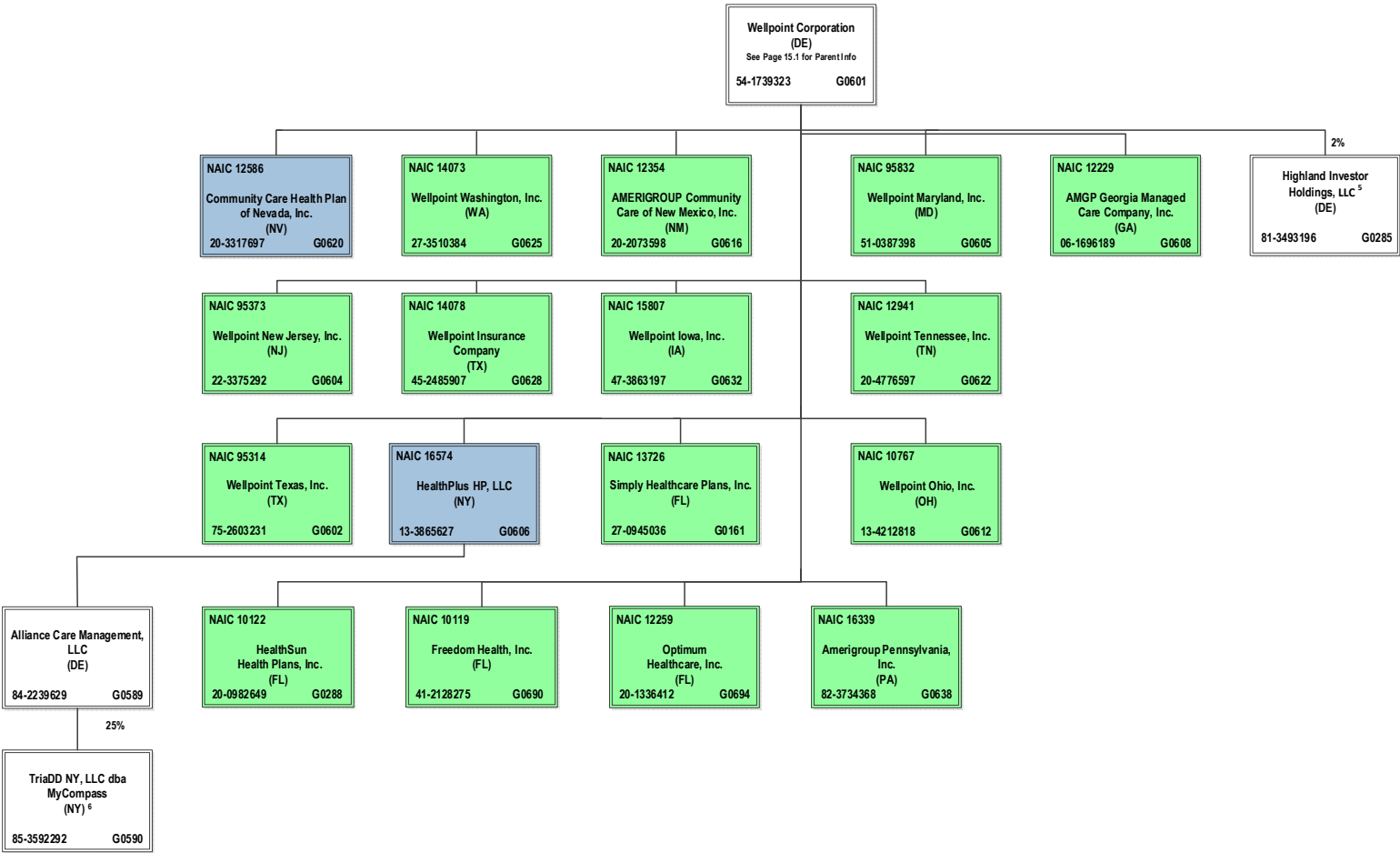
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee



⁵ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

⁶ TriaDD NY, LLC dba MyCompass is 25% owned by Alliance Care Management, LLC and the remaining 75% interest is owned by unaffiliated investors.

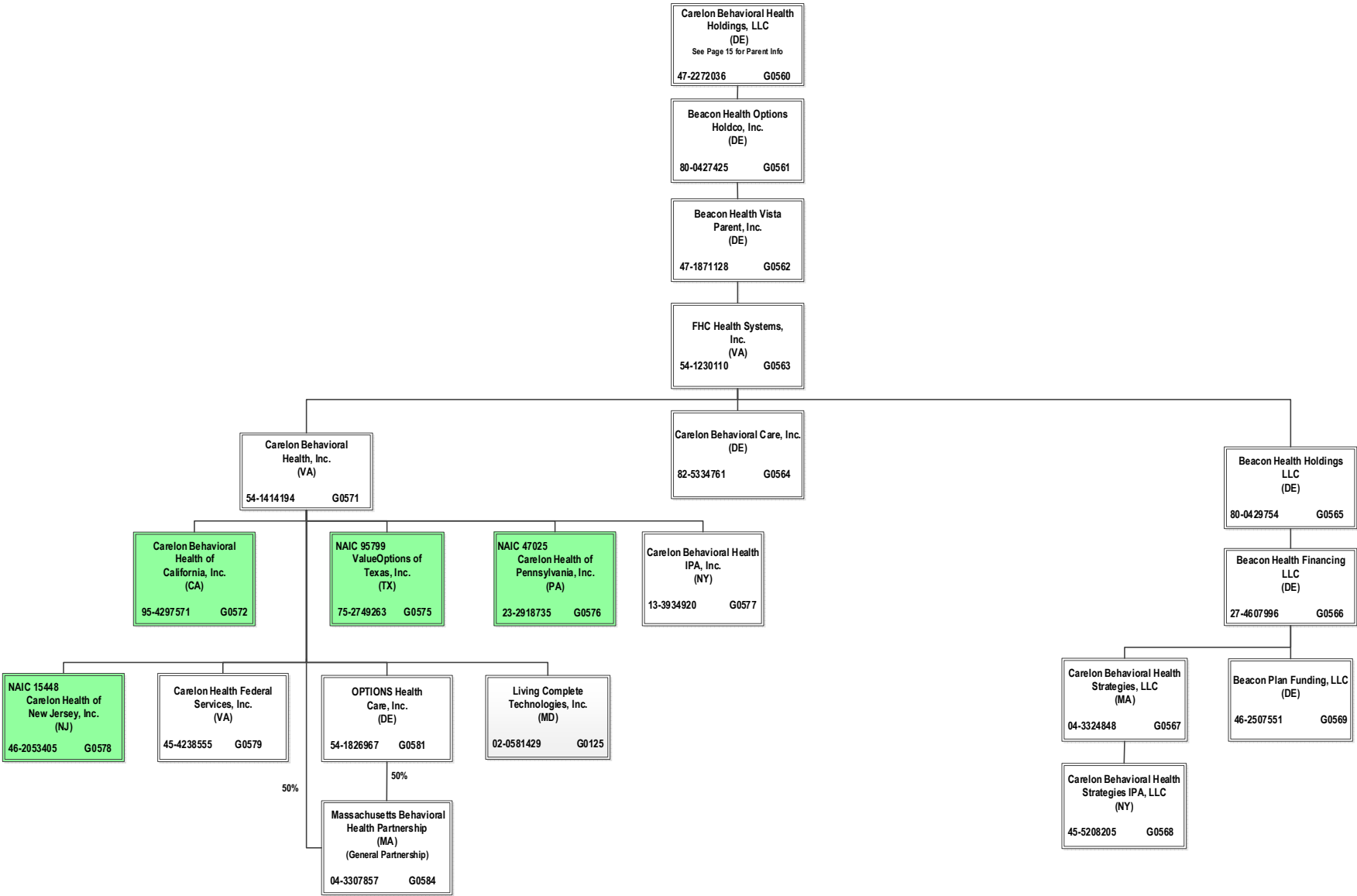
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee

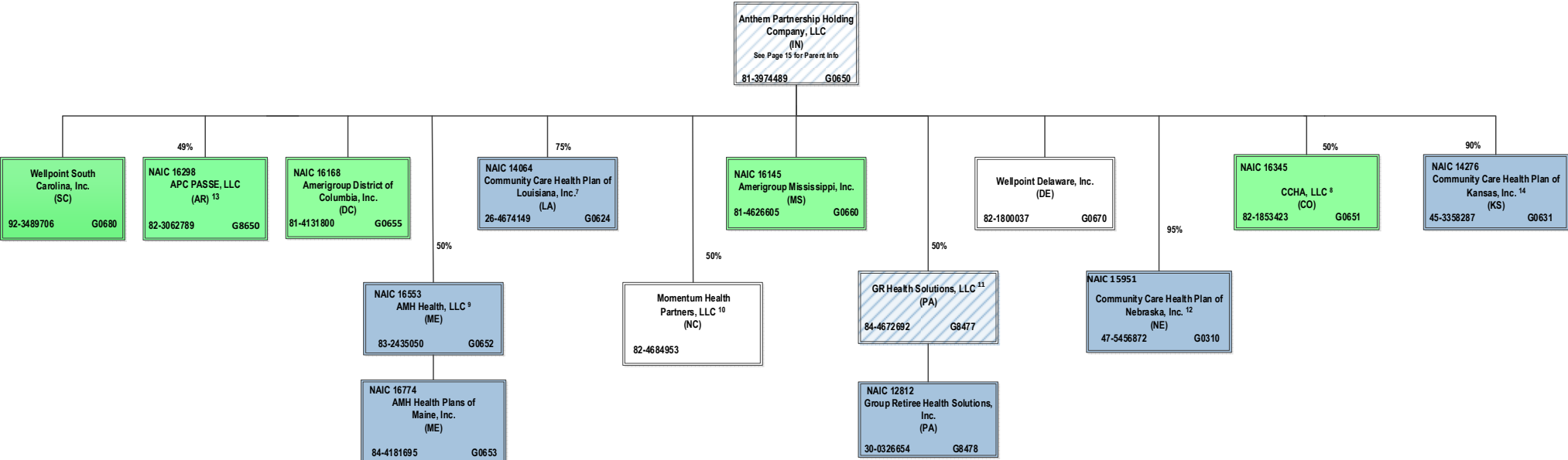
Regulated Insurance Company

Regulated BCBSA Licensee



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

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



⁷ Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (non-affiliate)

⁸ CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)

⁹ AMH Health, LLC is a joint venture 50% owned by MaineHealth (non-affiliate) and 50% owned by Anthem Partnership Holding Company, LLC

¹⁰ Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)

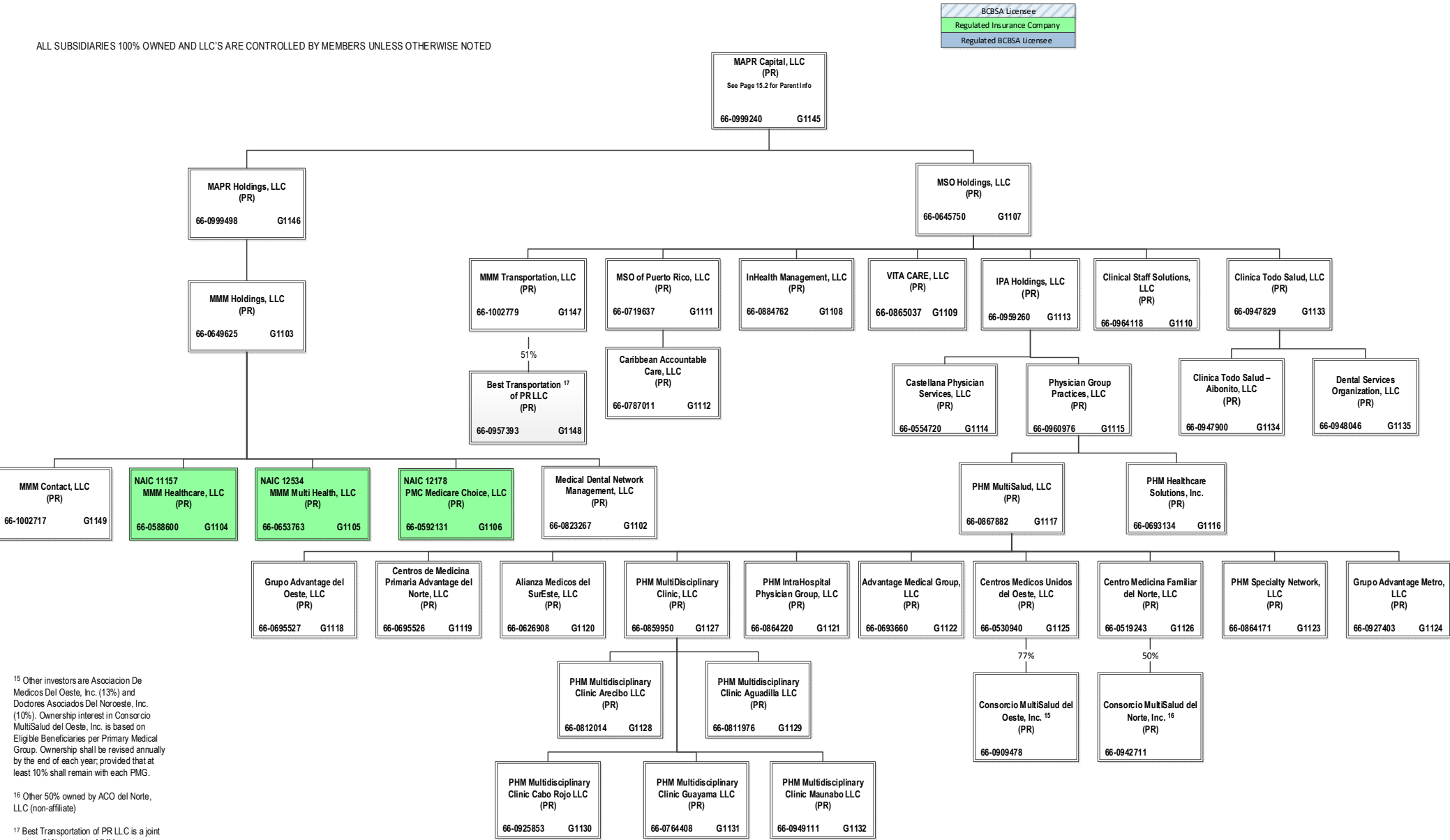
¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

¹² Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate).

¹³ APC PASSE, LLC (regulated entity) is a joint venture 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by Arkansas Provider Coalition, LLC (non-affiliate).

¹⁴ Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross and Blue Shield of Kansas (non-affiliate) and 5% owned by Blue Cross and Blue Shield of Kansas City (non-affiliate).

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



¹⁵ Other investors are Asociacion De Medicos Del Oeste, Inc. (13%) and Doctores Asociados Del Noroeste, Inc. (10%). Ownership interest in Consorcio MultiSalud del Oeste, Inc. is based on Eligible Beneficiaries per Primary Medical Group. Ownership shall be revised annually by the end of each year; provided that at least 10% shall remain with each PMG.

¹⁶ Other 50% owned by ACO del Norte, LLC (non-affiliate)

¹⁷ Best Transportation of PR LLC is a joint venture 51% owned by MMM Transportation, LLC and 49% owned by Best Transportation of PR LLC

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 Location	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)	*
.0671	Elevance Health, Inc.		66-0693660		0001156039		Advantage Medical Group, LLC	..PR	.....NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		66-0626908		0001156039		Alianza Medicos del SurEste, LLC	..PR	.....NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		84-2239629		0001156039		Alliance Care Management, LLC	..DE	.....NIA	HealthPlus HP, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
							AMERIGROUP Community Care of New Mexico, Inc.								
.0671	Elevance Health, Inc.	12354	20-2073598		0001156039			..NM	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	16168	81-4131800		0001156039		Amerigroup District of Columbia, Inc.	..DC	.....IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		45-4985009		0001156039		Amerigroup IPA of New York, LLC	..NY	.....NIA	CareMore, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	..MS	.....IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	16339	82-3734368		0001156039		Amerigroup Pennsylvania, Inc.	..PA	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	12229	06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	..GA	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	16774	84-4181695		0001156039		AMH Health Plans of Maine, Inc.	..ME	.....IA	AMH Health, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	16553	83-2435050		0001156039		AMH Health, LLC	..ME	.....IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Elevance Health, Inc.	...NO	0105
							Anthem Blue Cross Life and Health Insurance Company	..CA	.....IA	WellPoint California Services, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	62825	95-4331852		0001156039			..DE	.....NIA	Associated Group, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		35-1898945		0001156039		Anthem Financial, Inc.	..KY	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	..ME	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	52618	31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	..NH	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	53759	02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc.	..VA	.....IA	Anthem Southeast, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	71835	54-0357120	40003317	0001156039		Anthem Health Plans of Virginia, Inc.	..CT	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	60217	06-1475928		0001156039		Anthem Health Plans, Inc.	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		61-1459939		0001156039		Anthem Holding Corp.	..IN	.....IA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	28207	35-0781558		0001156039		Anthem Insurance Companies, Inc.	..KY	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc.	..NY	.....IA	WellPoint Acquisition, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	13573	20-5876774		0001156039		Anthem Life & Disability Insurance Company			Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	61069	35-0980405		0001156039		Anthem Life Insurance Company	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		81-3974489		0001156039		Anthem Partnership Holding Company, LLC	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		32-0031791		0001156039		Anthem Southeast, Inc.	..AR	.....NIA	Anthem Partnership Holding Company, LLC	Ownership	49.000	Elevance Health, Inc.	...NO	0113
.0671	Elevance Health, Inc.	16298	82-3062789		0001156039		APC Passe, LLC	..IL	.....NIA	Carelon Medical Benefits Management, Inc.	Ownership	53.520	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		80-0531799		0001156039		Applied Pathways, LLC	..IL	.....NIA	HEP AP Holdings, Inc.	Ownership	46.480	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		87-4518697		0001156039		APR, LLC	..IN	.....NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		95-4640529		0001156039		Arcus Enterprises, Inc.	..DE	.....NIA	Anthem Holding Corp.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		90-1057454		0001156039		Aspire Health, Inc.	..IN	.....NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		35-1292384		0001156039		Associated Group, Inc.	..UIP	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		11-3713086		0001156039		ATH Holding Company, LLC	..IN	.....NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		35-2129194		0001156039		AUMSI UM Services, Inc.	..DE	.....NIA	Beacon Health Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		27-4607996		0001156039		Beacon Health Financing LLC	..DE	.....NIA	FHC Health Systems, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		80-0429754		0001156039		Beacon Health Holdings, LLC	..DE	.....NIA	Carelon Behavioral Health Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		80-0427425		0001156039		Beacon Health Options Holdco, Inc.	..DE	.....NIA	Beacon Health Options Holdco, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		47-1871128		0001156039		Beacon Health Vista Parent, Inc.	..DE	.....NIA	Beacon Health Financing LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		46-2507551		0001156039		Beacon Plan Funding, LLC	..PR	.....NIA	MMM Transportation, LLC	Ownership	51.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		66-0957393		0001156039		Best Transportation, LLC	..DE	.....NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		85-0609453		0001156039		BioPlus Parent, LLC	..FL	.....NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.		59-2920860		0001156039		BioPlus Specialty Pharmacy Services, LLC								
							Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	..GA	.....IA	Cerulean Companies, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	96962	58-1638390		0001156039			..WI	.....IA	Crossroads Acquisition Corp.	Ownership	100.000	Elevance Health, Inc.	...NO	...
.0671	Elevance Health, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	..CA	.....IA	WellPoint California Services, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	0101
.0671	Elevance Health, Inc.		95-3760980		0001156039		Blue Cross of California								

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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	20-2994048 ..	.....	0001156039 ..	.....	Blue Cross of California Partnership Plan, Inc. ....	.. CA.....	..IA.....	Blue Cross of California	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.. 0101 ...
. 0671 ...	Elevance Health, Inc. ....	.....	82-5334761 ..	.....	0001156039 ..	.....	Carelon Behavioral Care, Inc. ....	.. DE.....	..NIA.....	FHC Health Systems, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-2272036 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Holdings, LLC .....	.. DE.....	..NIA.....	Elevance Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	13-39324920 ..	.....	0001156039 ..	.....	Carelon Behavioral Health IPA, Inc. ....	.. NY.....	..NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
							Carelon Behavioral Health of California, Inc.								
. 0671 ...	Elevance Health, Inc. ....	.....	95-4297571 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Strategies IPA, LLC .....	.. CA.....	..IA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.. 0101 ...
. 0671 ...	Elevance Health, Inc. ....	.....	45-5208205 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Strategies, LLC .....	.. NY.....	..NIA.....	Beacon Health Strategies LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	04-3324848 ..	.....	0001156039 ..	.....	Carelon Behavioral Health, Inc. ....	.. MA.....	..NIA.....	Beacon Health Financing LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1414194 ..	.....	0001156039 ..	.....	Carelon Behavioral Health, Inc. ....	.. VA.....	..NIA.....	FHC Health Systems, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1492098 ..	.....	0001156039 ..	.....	Carelon Digital Platforms Israel Ltd. ....	.. ISR.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	84-1782311 ..	.....	0001156039 ..	.....	Carelon Digital Platforms, Inc. ....	.. IN.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	46-0613946 ..	.....	0001156039 ..	.....	Carelon Employment Company, LLC. ....	.. IN.....	..NIA.....	The Elevance Health Companies, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1397080 ..	.....	0001156039 ..	.....	Carelon Global Solutions India LLP .....	.. IN.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..99.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1397080 ..	.....	0001156039 ..	.....	Carelon Global Solutions India LLP .....	.. IN.....	..NIA.....	Carelon Holdings II, LLC	Ownership.....	..1.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	.....	.....	0001156039 ..	.....	Carelon Global Solutions Ireland Limited .....	.. IRL.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1490582 ..	.....	0001156039 ..	.....	Carelon Global Solutions Philippines, Inc. ....	.. PHL.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
							Carelon Global Solutions Puerto Rico, L.L.C.								
. 0671 ...	Elevance Health, Inc. ....	.....	66-0976533 ..	.....	0001156039 ..	.....	Carelon Global Solutions U.S., Inc. ....	.. PR.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	87-2164713 ..	.....	0001156039 ..	.....	Carelon Global Solutions U.S., Inc. ....	.. IN.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-4238555 ..	.....	0001156039 ..	.....	Carelon Health Federal Services, Inc. ....	.. VA.....	..NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....15448 ..	46-2053405 ..	.....	0001156039 ..	.....	Carelon Health of New Jersey, Inc. ....	.. NJ.....	..IA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....47025 ..	23-2918735 ..	.....	0001156039 ..	.....	Carelon Health of Pennsylvania, Inc. ....	.. PA.....	..IA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1237939 ..	.....	0001156039 ..	.....	Carelon Health Solutions, Inc. ....	.. VA.....	..NIA.....	Southeast Services, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3030791 ..	.....	0001156039 ..	.....	Carelon Holdings I, Inc. ....	.. IN.....	..NIA.....	Elevance Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3031178 ..	.....	0001156039 ..	.....	Carelon Holdings II, LLC .....	.. IN.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3027094 ..	.....	0001156039 ..	.....	Carelon Holdings, Inc. ....	.. IN.....	..NIA.....	Elevance Health, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	85-0541810 ..	.....	0001156039 ..	.....	Carelon Insights IPA of New York, LLC .....	.. NY.....	..NIA.....	Carelon Post Acute Solutions, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3300542 ..	.....	0001156039 ..	.....	Carelon Insights, Inc. ....	.. IN.....	..NIA.....	Carelon Holdings, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3692630 ..	.....	0001156039 ..	.....	Carelon Medical Benefits Management, Inc. ....	.. IL.....	..NIA.....	Imaging Management Holdings, L.L.C.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-4671638 ..	.....	0001156039 ..	.....	Carelon Post Acute Solutions, Inc. ....	.. DE.....	..NIA.....	myNEXUS Management, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	51-0365660 ..	.....	0001156039 ..	.....	Carelon Research, Inc. ....	.. DE.....	..NIA.....	Arcus Enterprises, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
							Compcare Health Services Insurance Corporation								
. 0671 ...	Elevance Health, Inc. ....	.....	39-2013971 ..	.....	0001156039 ..	.....	Carelon Subrogation, LLC .....	.. WI.....	..NIA.....	Carelon Holdings I, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-3025203 ..	.....	0001156039 ..	.....	CarelonRx Pharmacy, Inc. ....	.. DE.....	..NIA.....	CarelonRx, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3062245 ..	.....	0001156039 ..	.....	CarelonRx, Inc. ....	.. IN.....	..NIA.....	Carelon Holdings, Inc.	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	86-2365191 ..	.....	0001156039 ..	.....	Caremore Health IPA of New York, Inc. ....	.. NY.....	..NIA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	92-0997812 ..	.....	0001156039 ..	.....	Caremore Health of Arizona, Inc. ....	.. AZ.....	..NIA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4694706 ..	.....	0001156039 ..	.....	CareMore Health Plan .....	.. CA.....	..IA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.. 0101 ...
. 0671 ...	Elevance Health, Inc. ....	.....13562 ..	38-3795280 ..	.....	0001156039 ..	.....	CareMore Health Plan of Arizona, Inc. ....	.. AZ.....	..IA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....13605 ..	26-4001602 ..	.....	0001156039 ..	.....	CareMore Health Plan of Nevada .....	.. NV.....	..IA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1625392 ..	.....	0001156039 ..	.....	CareMore Health Plan of Texas, Inc. ....	.. TX.....	..NIA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-2076421 ..	.....	0001156039 ..	.....	Caremore Health System .....	.. CA.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	32-0373216 ..	.....	0001156039 ..	.....	CareMore, LLC .....	.. IN.....	..NIA.....	CareMore Health System	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0787011 ..	.....	0001156039 ..	.....	Caribbean Accountable Care, LLC .....	.. PR.....	..NIA.....	MSO of Puerto Rico, LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0554720 ..	.....	0001156039 ..	.....	Castellana Physician Services, LLC .....	.. PR.....	..NIA.....	IPA Holdings, LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....16345 ..	82-1853423 ..	.....	0001156039 ..	.....	CCHA, LLC .....	.. CO.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	..50.000 ..	Elevance Health, Inc. ....	... NO.....	.. 0102 ...
							Centros de Medicina Primaria Advantage del Norte, LLC								
. 0671 ...	Elevance Health, Inc. ....	.....	66-0695526 ..	.....	0001156039 ..	.....	PHM MultiSalud, LLC .....	.. PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	..100.000 ..	Elevance Health, Inc. ....	... NO.....	.....

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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0519243		0001156039		Centros Medicina Familiar del Norte, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0530940		0001156039		Centros Medicos Unidos del Oeste, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	..GA.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		39-1413702		0001156039		Claim Management Services, Inc.	..WI.....	..NIA.....	Blue Cross Blue Shield of Wisconsin	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0947829		0001156039		Clinica Todo Salud, LLC	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0947900		0001156039		Clinica Todo Salud-Aibonito, LLC	..PR.....	..NIA.....	Clinica Todo Salud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0964118		0001156039		Clinical Staff Solutions, LLC	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	14276	45-3358287		0001156039		Community Care Health Plan of Kansas, Inc.	..KS.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	90.000	Elevance Health, Inc.	...NO.....	0112
							Community Care Health Plan of Louisiana, Inc.								
.0671	Elevance Health, Inc.	14064	26-4674149		0001156039			..LA.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	75.000	Elevance Health, Inc.	...NO.....	0104
.0671	Elevance Health, Inc.	15951	47-5456872		0001156039		Community Care Health Plan of Nebraska, Inc.	..NE.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	95.000	Elevance Health, Inc.	...NO.....	0110
.0671	Elevance Health, Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc.	..NV.....	..IA.....	Wellpoint Corporation	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	10345	31-1440175		0001156039		Community Insurance Company	..OH.....	..IA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
							Compcare Health Services Insurance Corporation								
.0671	Elevance Health, Inc.	95693	39-1462554		0001156039			..WI.....	..IA.....	Blue Cross Blue Shield of Wisconsin	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0942711		0001156039		Consorcio MultiSalud del Norte, Inc.	..PR.....	..NIA.....	Centros Medicina Familiar del Norte, LLC	Ownership.....	50.000	Elevance Health, Inc.	...NO.....	0108
.0671	Elevance Health, Inc.		66-0909478		0001156039		Consorcio MultiSalud del Oeste, Inc.	..PR.....	..NIA.....	Centros Medicos Unidos del Oeste, LLC	Ownership.....	77.000	Elevance Health, Inc.	...NO.....	0103
.0671	Elevance Health, Inc.		20-0334650		0001156039		Crossroads Acquisition Corp.	..DE.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		41-1905556		0001156039		DeCare Analytics, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		02-0574609		0001156039		DeCare Dental Health International, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		DeCare Dental Insurance Ireland, Ltd.	..IRL.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		73-1665525		0001156039		DeCare Dental Networks, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		01-0822645		0001156039		DeCare Dental, LLC	..MN.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		DeCare Operations Ireland, Limited	..IRL.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		20-0660775		0001156039		Delivery Network, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0948046		0001156039		Dental Services Organization, LLC	..PR.....	..NIA.....	Clinica Todo Salud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-2544715		0001156039		Designated Agent Company, Inc.	..KY.....	..NIA.....	Anthem Health Plans of Kentucky, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		45-3666871		0001156039		Dogwood Pharmacy, LLC	..FL.....	..NIA.....	BioPlus Parent, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		27-2844373		0001156039		EasyScripts Cutler Bay, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-2974996		0001156039		EasyScripts Hialeah, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		30-0478573		0001156039		EasyScripts LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		13-3934328		0001156039		EHC Benefits Agency, Inc.	..NY.....	..NIA.....	WellPoint Holding Corp	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
						New York Stock Exchange (NYSE)									
.0671	Elevance Health, Inc.		35-2145715		0001156039		Elevance Health, Inc.	..IN.....	..UIP.....				Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		93-3287081		0001156039		ELV Holding Company, LLC	..IN.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	55093	23-7391136		0001156039		Empire HealthChoice Assurance, Inc.	..NY.....	..IA.....	WellPoint Holding Corp	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	95433	13-3874803		0001156039		Empire HealthChoice HMO, Inc.	..NY.....	..IA.....	Empire HealthChoice Assurance, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	..WI.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		54-1230110		0001156039		FHC Health Systems, Inc.	..VA.....	..NIA.....	Beacon Health Vista Parent, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	10119	41-2128275		0001156039		Freedom Health, Inc.	..FL.....	..IA.....	Wellpoint Corporation	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		Freedom SPV, Inc.	..DE.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		95-2907752		0001156039		Golden West Health Plan, Inc.	..CA.....	..IA.....	WellPoint California Services, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	0101
.0671	Elevance Health, Inc.				0001156039		Government Healthcare Solutions LLC	..DE.....	..NIA.....	National Government Services, Inc.	Ownership.....	49.000	Elevance Health, Inc.	...NO.....	0114
.0671	Elevance Health, Inc.		84-4672692		0001156039		GR Health Solutions LLC	..PA.....	..NIA.....	Anthem Partnership Holding Company, LLC	Ownership.....	50.000	Elevance Health, Inc.	...NO.....	0107
										Blue Cross Blue Shield Healthcare Plan of					
.0671	Elevance Health, Inc.	97217	58-1473042		0001156039		Greater Georgia Life Insurance Company	..GA.....	..IA.....	Georgia, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	12812	30-0326654		0001156039		Group Retiree Health Solutions, Inc.	..PA.....	..IA.....	GR Health Solutions LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0695527		0001156039		Grupo Advantage del Oeste, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	

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 Location	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 Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	66-0927403 ..	.....	0001156039 ..	.....	Grupo Advantage Metro, LLC .....	.. PR.....	..... NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 16426 ..	82-1820099 ..	.....	0001156039 ..	.....	Health Colorado, Inc. ....	.. CO.....	..... IA.....	Carelon Behavioral Health, Inc.	Ownership.....	16.670 ...	Elevance Health, Inc. ....	... NO.....	.. 0109 ...
. 0671 ...	Elevance Health, Inc. ....	.....	36-3897701 ..	.....	0001156039 ..	.....	Health Ventures Partner, L.L.C. ....	.. IL.....	..... NIA.....	UNICARE National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-8188236 ..	.....	0001156039 ..	.....	Healthcare Subrogation Group, LLC .....	.. DE.....	..... NIA.....	Carelon Insights, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95169 ..	54-1356687 ..	.....	0001156039 ..	.....	HealthKeepers, Inc. ....	.. VA.....	..... IA.....	Anthem Southeast, Inc.	Ownership.....	92.510 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95169 ..	54-1356687 ..	.....	0001156039 ..	.....	HealthKeepers, Inc. ....	.. VA.....	..... IA.....	UNICARE National Services, Inc.	Ownership.....	7.490 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	43-1616135 ..	.....	0001156039 ..	.....	HealthLink Administrators, Inc. ....	.. MO.....	..... NIA.....	HealthLink, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	43-1364135 ..	.....	0001156039 ..	.....	HealthLink, Inc. ....	.. IL.....	..... NIA.....	RightCHOICE Managed Care, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 16574 ..	13-3865627 ..	.....	0001156039 ..	.....	HealthPlus HP, LLC .....	.. NY.....	..... IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0100 ...
. 0671 ...	Elevance Health, Inc. ....	..... 10122 ..	20-0982649 ..	.....	0001156039 ..	.....	HealthSun Health Plans, Inc. ....	.. FL.....	..... IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	46-3434016 ..	.....	0001156039 ..	.....	HealthSun Physicians Network I, LLC .....	.. FL.....	..... NIA.....	HealthSun Physicians Network, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	46-5250294 ..	.....	0001156039 ..	.....	HealthSun Physicians Network, LLC .....	.. FL.....	..... NIA.....	Delivery Network, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 78972 ..	86-0257201 ..	.....	0001156039 ..	.....	Healthy Alliance Life Insurance Company .....	.. MO.....	..... IA.....	RightCHOICE Managed Care, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-3953545 ..	.....	0001156039 ..	.....	HEP AP Holdings, Inc. ....	.. DE.....	..... NIA.....	Imaging Management Holdings, L.L.C.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-3471305 ..	.....	0001156039 ..	.....	Highland Acquisition Holdings, LLC .....	.. DE.....	..... NIA.....	Highland Intermediate Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-3487249 ..	.....	0001156039 ..	.....	Highland Intermediate Holdings, LLC .....	.. DE.....	..... NIA.....	Highland Investor Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-3493196 ..	.....	0001156039 ..	.....	Highland Investor Holdings, LLC .....	.. DE.....	..... NIA.....	ATH Holding Company, LLC	Ownership.....	98.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-3493196 ..	.....	0001156039 ..	.....	Highland Investor Holdings, LLC .....	.. DE.....	..... NIA.....	Wellpoint Corporation	Ownership.....	2.000 ...	Elevance Health, Inc. ....	... NO.....	.....
.....
. 0671 ...	Elevance Health, Inc. ....	..... 95473	84-1017384 ..	.....	0001156039 ..	.....	HMO Colorado, Inc. ....	.. CO.....	..... IA.....	Service, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95358	37-1216698 ..	.....	0001156039 ..	.....	HMO Missouri, Inc. ....	.. MO.....	..... IA.....	RightCHOICE Managed Care, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	83-2158120 ..	.....	0001156039 ..	.....	IEC Group Holdings, Inc. ....	.. ID.....	..... NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-0497661 ..	.....	0001156039 ..	.....	IEC Group, Inc. d/b/a AmeriBen .....	.. ID.....	..... NIA.....	IEC Group Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	75-2619605 ..	.....	0001156039 ..	.....	Imaging Management Holdings, L.L.C. ....	.. DE.....	..... NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0884762 ..	.....	0001156039 ..	.....	InHealth Management, LLC .....	.. PR.....	..... NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0959260 ..	.....	0001156039 ..	.....	IPA Holdings, LLC .....	.. PR.....	..... NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	02-0581429 ..	.....	0001156039 ..	.....	Living Complete Technologies, Inc. ....	.. MD.....	..... NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0999240 ..	.....	0001156039 ..	.....	MAPR Capital, LLC .....	.. PR.....	..... NIA.....	MAPR Global, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0999355 ..	.....	0001156039 ..	.....	MAPR Global, LLC .....	.. PR.....	..... NIA.....	APR, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0999498 ..	.....	0001156039 ..	.....	MAPR Holdings, LLC .....	.. PR.....	..... NIA.....	MAPR Capital, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	04-3307857 ..	.....	0001156039 ..	.....	Massachusetts Behavioral Health Partnership .....	.. MA.....	..... NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	50.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	04-3307857	0001156039	Massachusetts Behavioral Health Partnership MA..... NIA.....	OPTIONS Health Care, Inc.	Ownership.....	50.000 ...	Elevance Health, Inc. NO.....
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. 0671 ...	Elevance Health, Inc. 95527	02-0494919	0001156039	Matthew Thornton Health Plan, Inc. NH..... IA.....	Anthem Health Plans of New Hampshire, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. NO.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0823267 ..	.....	0001156039 ..	.....	Medical Dental Network Management, LLC .....	.. PR.....	..... NIA.....	MMH Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 12913	20-5862801 ..	.....	0001156039 ..	.....	Missouri Care, Incorporated .....	.. MO.....	..... IA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-1002717 ..	.....	0001156039 ..	.....	MMI Contact, LLC .....	.. PR.....	..... IA.....	MMH Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 11157	66-0588600 ..	.....	0001156039 ..	.....	MMI Healthcare, LLC .....	.. PR.....	..... IA.....	MMH Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0649625 ..	.....	0001156039 ..	.....	MMI Holdings, LLC .....	.. PR.....	..... NIA.....	MAPR Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 12534	66-0653763 ..	.....	0001156039 ..	.....	MMI Multi Health, LLC .....	.. PR.....	..... IA.....	MMH Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-1002779 ..	.....	0001156039 ..	.....	MMI Transportation, LLC .....	.. PR.....	..... NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-4684953 ..	.....	0001156039 ..	.....	Momentum Health Partners, LLC .....	.. NC.....	..... NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	50.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0106 ...
. 0671 ...	Elevance Health, Inc. ....	.....	66-0645750 ..	.....	0001156039 ..	.....	MSO Holdings, LLC .....	.. PR.....	..... NIA.....	MAPR Capital, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0719637 ..	.....	0001156039 ..	.....	MSO of Puerto Rico, LLC .....	.. PR.....	..... NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	84-1811105 ..	.....	0001156039 ..	.....	myNEXUS Holdings, Inc. ....	.. DE.....	..... NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	84-1801030 ..	.....	0001156039 ..	.....	myNEXUS Management, Inc. ....	.. DE.....	..... NIA.....	myNEXUS Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-4603181 ..	.....	0001156039 ..	.....	myNEXUS NPHO of TEXAS .....	.. TX.....	..... NIA.....	Carelon Post Acute Solutions, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	83-0892028 ..	.....	0001156039 ..	.....	Nash Holding Company, LLC .....	.. DE.....	..... NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	35-1840597 ..	.....	0001156039 ..	.....	National Government Services, Inc. ....	.. IN.....	..... NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	04-2919509 ..	.....	0001156039 ..	.....	New England Research Institute, Inc. ....	.. MA.....	.. NIA.....	Carelon Research, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-5476630 ..	.....	0001156039 ..	.....	NGS Federal, LLC ....	.. IN.....	.. NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	12259 ..	20-1336412 ..	.....	0001156039 ..	.....	Optimum Healthcare, Inc. ....	.. FL.....	.. IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1826967 ..	.....	0001156039 ..	.....	OPTIONS Health Care, Inc. ....	.. DE.....	.. NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1991772 ..	.....	0001156039 ..	.....	Pasteur Medical Bird Road, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-2749389 ..	.....	0001156039 ..	.....	Pasteur Medical Center, LLC ..	.. DE.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1366915 ..	.....	0001156039 ..	.....	Pasteur Medical Cutler Bay, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0610128 ..	.....	0001156039 ..	.....	Pasteur Medical Group, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	37-1668303 ..	.....	0001156039 ..	.....	Pasteur Medical Hialeah Gardens, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-3464152 ..	.....	0001156039 ..	.....	Pasteur Medical Kendall, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-2810478 ..	.....	0001156039 ..	.....	Pasteur Medical Management, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	33-1217936 ..	.....	0001156039 ..	.....	Pasteur Medical Miami Gardens, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-2651017 ..	.....	0001156039 ..	.....	Pasteur Medical North Miami Beach, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	26-0813665 ..	.....	0001156039 ..	.....	Pasteur Medical Partners, LLC ..	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0693134 ..	.....	0001156039 ..	.....	PHM Healthcare Solutions, Inc. ....	.. PR.....	.. NIA.....	Physician Group Practices, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0864220 ..	.....	0001156039 ..	.....	PHM Intrahospital Physician Group, LLC ..	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0811976 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Aguadilla LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0812014 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Arcibo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0925853 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Cabo Rojo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0764408 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Guayama LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0949111 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Maunabo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0859950 ..	.....	0001156039 ..	.....	PHM MultiDisciplinary Clinic, LLC ..	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0867882 ..	.....	0001156039 ..	.....	PHM MultiSalud, LLC ..	.. PR.....	.. NIA.....	Physician Group Practices, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0864171 ..	.....	0001156039 ..	.....	PHM Specialty Network, LLC ..	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0960976 ..	.....	0001156039 ..	.....	Physician Group Practices, LLC ..	.. PR.....	.. NIA.....	IPA Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	12178 ..	66-0592131 ..	.....	0001156039 ..	.....	PMC Medicare Choice, LLC ..	.. PR.....	.. IA.....	MMM Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-5139459 ..	.....	0001156039 ..	.....	Raina Rx LLC ..	.. NY.....	.. NIA.....	BioPlus Parent, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-0851593 ..	.....	0001156039 ..	.....	RightCHOICE Managed Care, Inc. ....	.. DE.....	.. NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-3667026 ..	.....	0001156039 ..	.....	River Medical Pharmacy, LLC ..	.. FL.....	.. NIA.....	BioPlus Parent, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	11011 ..	84-0747736 ..	.....	0001156039 ..	.....	Rocky Mountain Hospital and Medical Service, Inc. ....	.. CO.....	.. IA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	46-2787212 ..	.....	0001156039 ..	.....	Santa Barbara Specialty Pharmacy, LLC ..	.. CA.....	.. NIA.....	BioPlus Parent, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0473316 ..	.....	0001156039 ..	.....	SellCore, Inc. ....	.. DE.....	.. NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	13726 ..	27-0945036 ..	.....	0001156039 ..	.....	Simply Healthcare Plans, Inc. ....	.. FL.....	.. IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	55-0712302 ..	.....	0001156039 ..	.....	Southeast Services, Inc. ....	.. VA.....	.. NIA.....	Anthem Southeast, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-4071004 ..	.....	0001156039 ..	.....	State Sponsored Services, Inc. ....	.. IN.....	.. NIA.....	UNICARE Specialty Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-5443372 ..	.....	0001156039 ..	.....	The Elevance Health Companies of California, Inc. ....	.. CA.....	.. NIA.....	ATH Holding Company, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	35-1835818 ..	.....	0001156039 ..	.....	The Elevance Health Companies, Inc. ....	.. IN.....	.. NIA.....	ATH Holding Company, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	43-1967924 ..	.....	0001156039 ..	.....	TriadDD NY, LLC dba MyCompass ..	.. NY.....	.. NIA.....	Alliance Care Management, LLC ..	Ownership.....	25.000 ...	Elevance Health, Inc. ....	... NO.....	0111 ..
. 0671 ...	Elevance Health, Inc. ....	.....	84-1967924 ..	.....	0001156039 ..	.....	TrustSolutions, LLC ..	.. WI.....	.. NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	11810 ..	84-1620480 ..	.....	0001156039 ..	.....	UNICARE Health Plan of West Virginia, Inc. .	.. WV.....	.. IA.....	UNICARE National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3899137 ..	.....	0001156039 ..	.....	UNICARE Illinois Services, Inc. ....	.. IL.....	.. NIA.....	UNICARE National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4635507 ..	.....	0001156039 ..	.....	UNICARE National Services, Inc. ....	.. DE.....	.. NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	77-0494551 ..	.....	0001156039 ..	.....	UNICARE Specialty Services, Inc. ....	.. DE.....	.. NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	95799 ..	75-2749263 ..	.....	0001156039 ..	.....	ValueOptions of Texas, Inc. ....	.. TX.....	.. IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0865037 ..	.....	0001156039 ..	.....	VITA CARE, LLC ..	.. PR.....	.. NIA.....	MSO Holdings, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0660563 ..	.....	0001156039 ..	.....	WellMax Health Medical Centers, LLC ..	.. FL.....	.. NIA.....	Delivery Network, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0660644 ..	.....	0001156039 ..	.....	WellMax Health Physicians Network, LLC ..	.. FL.....	.. NIA.....	Delivery Network, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

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 Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	20-4405193 ..	.....	0001156039 ..	.....	WellPoint Acquisition, LLC .....	.. IN.....	.....NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4640531 ..	.....	0001156039 ..	.....	WellPoint California Services, Inc. ....	.. DE.....	.....NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1739323 ..	.....	0001156039 ..	.....	Wellpoint Corporation .....	.. DE.....	.....UDP.....	ATH Holding Company, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-1800037 ..	.....	0001156039 ..	.....	Wellpoint Delaware, Inc. ....	.. DE.....	.....NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4657170 ..	.....	0001156039 ..	.....	WellPoint Dental Services, Inc. ....	.. DE.....	.....NIA.....	UNICARE Specialty Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-2546820 ..	.....	0001156039 ..	.....	Wellpoint Federal Corporation .....	.. IN.....	.....NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-2874917 ..	.....	0001156039 ..	.....	WellPoint Health Solutions, Inc. ....	.. DE.....	.....NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-3620996 ..	.....	0001156039 ..	.....	WellPoint Holding Corp .....	.. DE.....	.....NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-2736438 ..	.....	0001156039 ..	.....	WellPoint Information Technology Services, Inc. ....	.. CA.....	.....NIA.....	Blue Cross of California	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 14078	45-2485907 ..	.....	0001156039 ..	.....	Wellpoint Insurance Company .....	.. TX.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-4595641 ..	.....	0001156039 ..	.....	WellPoint Insurance Services, Inc. ....	.. HI.....	.....NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 15807	47-3863197 ..	.....	0001156039 ..	.....	Wellpoint Iowa, Inc. ....	.. IA.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 80314	52-0913817 ..	.....	0001156039 ..	.....	Wellpoint Life and Health Insurance Company .....	.. IN.....	.....IA.....	UNICARE National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95832	51-0387398 ..	.....	0001156039 ..	.....	Wellpoint Maryland, Inc. ....	.. MD.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95373	22-3375292 ..	.....	0001156039 ..	.....	Wellpoint New Jersey, Inc. ....	.. NJ.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 10767	13-4212818 ..	.....	0001156039 ..	.....	Wellpoint Ohio, Inc. ....	.. OH.....	.....RE.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3897080 ..	.....	0001156039 ..	.....	Wellpoint Partnership Plan, LLC .....	.. IL.....	.....NIA.....	Health Ventures Partner, L.L.C.	Ownership.....	75.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3897080 ..	.....	0001156039 ..	.....	Wellpoint Partnership Plan, LLC .....	.. IL.....	.....NIA.....	UNICARE Illinois Services, Inc.	Ownership.....	25.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	92-3489706 ..	.....	0001156039 ..	.....	Wellpoint South Carolina, Inc. ....	.. SC.....	.....NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 12941	20-4776597 ..	.....	0001156039 ..	.....	Wellpoint Tennessee, Inc. ....	.. TN.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 95314	75-2603231 ..	.....	0001156039 ..	.....	Wellpoint Texas, Inc. ....	.. TX.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 14073	27-3510384 ..	.....	0001156039 ..	.....	Wellpoint Washington, Inc. ....	.. WA.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 15929	47-5569628 ..	.....	0001156039 ..	.....	Wisconsin Collaborative Insurance Company ...	.. WI.....	.....IA.....	Crossroads Acquisition Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10 and has an NAIC Company Code in column 3. However, it does not file an NAIC statutory statement because it is regulated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC, a non-affiliate.
0103	Owned 77% by Centros Medicos Unidos del Oeste, LLC, 13% by Asociacion de Medicos del Oeste, Inc. (a non-affiliate) and 10% by Doctores Asociados del Noroeste, Inc. (a non-affiliate).
0104	Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (a non-affiliate).
0105	AMH Health, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% by MaineHealth, a non-affiliate.
0106	Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina, a non-affiliate.
0107	GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC, a non-affiliate.
0108	Owned 50% by Centro Medicina Familiar del Norte, LLC and 50% by ACO del Norte, LLC, a non-affiliated entity.
0109	83.33% owned by unaffiliated investors
0110	Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, a non-affiliate.
0111	TriadDD NY , LLC dba MyCompass (NY) is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.
0112	Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross and Blue Shield of Kansas (a non-affiliate), and 5% owned by Blue Cross and Blue Shield of Kansas City, a non-affiliate.
0113	APC Passe, LLC is 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by the Arkansas Provider Coalition, LLC, which is not affiliated with Anthem, Inc.
0114	Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
AUGUST FILING	
2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A

Explanation:

1.

Bar Code:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,319,151	1,335,592
2. Cost of bonds and stocks acquired	30,999,770	
3. Accrual of discount	10,069	
4. Unrealized valuation increase (decrease)	0	
5. Total gain (loss) on disposals	43,630	
6. Deduct consideration for bonds and stocks disposed of	15,043,581	
7. Deduct amortization of premium	632,067	16,441
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	16,696,972	1,319,151
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	16,696,972	1,319,151

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	11,265,469	0	0	(523,317)	1,314,976	11,265,469	10,742,152	1,319,150
2. NAIC 2 (a)	5,979,878	0	0	(25,058)	0	5,979,878	5,954,820	
3. NAIC 3 (a)	0	0	0	0	0	0	0	
4. NAIC 4 (a)	0	0	0	0	0	0	0	
5. NAIC 5 (a)	0	0	0	0	0	0	0	
6. NAIC 6 (a)	0	0	0	0	0	0	0	
7. Total Bonds	17,245,347	0	0	(548,375)	1,314,976	17,245,347	16,696,972	1,319,150
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	17,245,347	0	0	(548,375)	1,314,976	17,245,347	16,696,972	1,319,150

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	3	
2. Cost of cash equivalents acquired	10,017,602	17,603
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	10,017,605	17,600
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	3
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	3

Schedule A - Part 2 - Real Estate Acquired and Additions Made
N O N E

Schedule A - Part 3 - Real Estate Disposed
N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made
N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid
N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made
N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid
N O N E

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired
N O N E

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of
N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date
0109999999	Total - U.S. Government Bonds			0	0	XXX
0309999999	Total - All Other Government Bonds			0	0	XXX
0509999999	Total - U.S. States, Territories and Possessions Bonds			0	0	XXX
0709999999	Total - U.S. Political Subdivisions Bonds			0	0	XXX
0909999999	Total - U.S. Special Revenues Bonds			0	0	XXX
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds			0	0	XXX
1309999999	Total - Hybrid Securities			0	0	XXX
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds			0	0	XXX
1909999999	Subtotal - Unaffiliated Bank Loans			0	0	XXX
2419999999	Total - Issuer Obligations			0	0	XXX
2429999999	Total - Residential Mortgage-Backed Securities			0	0	XXX
2439999999	Total - Commercial Mortgage-Backed Securities			0	0	XXX
2449999999	Total - Other Loan-Backed and Structured Securities			0	0	XXX
2459999999	Total - SVO Identified Funds			0	0	XXX
2469999999	Total - Affiliated Bank Loans			0	0	XXX
2479999999	Total - Unaffiliated Bank Loans			0	0	XXX
2489999999	Total - Unaffiliated Certificates of Deposit			0	0	XXX
2509999999	Total Bonds			0	0	XXX
4109999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Industrial and Miscellaneous (Unaffiliated)			0	0	XXX
4409999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Parent, Subsidiaries and Affiliates			0	0	XXX
4509999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type)			0	0	XXX
5109999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Industrial and Miscellaneous (Unaffiliated)			0	0	XXX
5409999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Mutual Funds			0	0	XXX
5609999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Unit Investment Trusts			0	0	XXX
5809999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Closed-End Funds			0	0	XXX
5979999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Parent, Subsidiaries and Affiliates			0	0	XXX
5989999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type)			0	0	XXX
5999999999	Total - Preferred and Common Stocks			0	0	XXX
000000-00-0	SKANDANAVISKA ENSKILDA BANKEN		1.B	51,197	51,176	12/15/2023
000000-00-0	UBS AG LONDON		1.B	51,176	51,176	11/27/2023
000000-00-0	ING (US) Funding LLC		1.B	40,941	40,941	06/13/2024
000000-00-0	PERSHING LLC		1.B	81,882	81,882	02/01/2024
000000-00-0	BOFA SECURITIES, INC		1.B	84,952	84,952	01/02/2024
000000-00-0	PERSHING LLC		1.B	102,352	102,352	02/01/2024
000000-00-0	MORGAN STANLEY		1.B	153,528	153,528	03/20/2024
9509999999	Subtotal - Short-Term Invested Assets (Schedule DA type)			566,028	566,007	XXX
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			50,688	50,452	12/01/2023
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			50,543	50,454	12/19/2023
000000-00-0	Mitsubishi UFJ Trust & Bank Co			71,456	70,627	10/17/2023
000000-00-0	MUFG Bank Ltd, London Branch			20,413	20,182	10/18/2023
000000-00-0	Mitsubishi UFJ Trust & Bank Co			10,205	10,090	10/19/2023
000000-00-0	Mitsubishi UFJ Trust & Bank Co			36,733	36,322	10/20/2023
000000-00-0	Mitsubishi UFJ Trust & Bank Co			4,069	4,035	11/09/2023
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			10,171	10,090	11/10/2023
000000-00-0	MUFG Bank Ltd, London Branch			14,263	14,120	10/30/2023
000000-00-0	MUFG Bank Ltd, London Branch			20,311	20,173	11/20/2023
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			20,078	20,084	01/29/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			39,867	39,757	03/13/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			2,005	1,987	02/08/2024
000000-00-0	National Westminster Bank PLC			29,945	29,799	03/04/2024
000000-00-0	National Westminster Bank PLC			20,006	19,865	02/20/2024
000000-00-0	NATIXIS NY			61,415	61,411	10/10/2023
000000-00-0	CREDIT AGRICOLE CIB, NY			28,662	28,659	11/01/2023
000000-00-0	BANK OF NOVA SCOTIA HOUSTON			40,944	40,942	11/20/2023
000000-00-0	CITIBANK NY			36,861	36,855	12/15/2023
000000-00-0	BANK OF AMERICA NA			20,472	20,470	03/08/2024
000000-00-0	CIBC NY			51,181	51,176	10/13/2023
000000-00-0	STANDARD CHARTERED NY			20,470	20,470	03/12/2024
000000-00-0	OCBC NEW YORK			20,479	20,470	12/20/2023
000000-00-0	SUMITOMO BK NY			51,222	51,176	01/16/2024
000000-00-0	BARCLAYS NEW YORK			40,944	40,941	02/14/2024
000000-00-0	OCBC NEW YORK			34,810	34,800	11/16/2023
000000-00-0	SUMITOMO BK NY			61,468	61,411	01/11/2024
000000-00-0	BANK OF AMERICA NA			40,946	40,941	11/17/2023
000000-00-0	NORDEA BANK ABP, NEW YORK BRANCH			61,457	61,411	04/26/2024
000000-00-0	SVENSKA NY			51,181	51,176	10/31/2023
000000-00-0	CIC NY			40,937	40,941	12/01/2023
000000-00-0	NORDEA BANK ABP, NEW YORK BRANCH			51,229	51,176	04/18/2024
000000-00-0	OCBC NEW YORK			40,942	40,941	12/08/2023
000000-00-0	SVENSKA NY			61,448	61,411	04/19/2024
000000-00-0	ROYAL BANK OF CANADA NY			20,494	20,470	04/15/2024
000000-00-0	ROYAL BANK OF CANADA NY			40,984	40,941	05/23/2024
000000-00-0	TORONTO DOMINION NY			102,352	102,352	10/06/2023
000000-00-0	TORONTO DOMINION LONDON			10,235	10,235	08/14/2024
000000-00-0	AUSTRALIA NEW ZEALAND NY			40,941	40,941	10/17/2023
06367C-ZJ-9	BANK OF MONTREAL CHICAGO			61,451	61,411	11/08/2023
06367D-BS-3	BANK OF MONTREAL CHICAGO			51,204	51,176	08/01/2024
06367D-BZ-7	BANK OF MONTREAL CHICAGO			40,957	40,941	08/07/2024
13606K-TZ-9	CIBC NY			30,702	30,706	03/08/2024
78015J-6P-7	ROYAL BANK OF CANADA NY			51,215	51,176	09/20/2024
89115B-R7-7	TORONTO DOMINION NY			26,622	26,612	01/23/2024
89115B-TT-7	TORONTO DOMINION NY			51,206	51,176	02/13/2024
000000-00-0	BANK OF NOVA SCOTIA HOUSTON			22,519	22,521	10/06/2023
000000-00-0	DNB NOR BANK ASA NEW YORK			30,706	30,706	10/02/2023
000000-00-0	DZ BANK AG NEW YORK			30,706	30,706	10/02/2023
000000-00-0	FIRST ABU DHABI BANK USA NY			20,470	20,470	10/02/2023
000000-00-0	LANDESBANK BADEN-WURTEMBERG LDN			20,470	20,470	10/02/2023
000000-00-0	LANDESBANK HESSEN THUR NY			30,706	30,706	10/02/2023
000000-00-0	NORDEA BANK ABP, NEW YORK BRANCH			29,068	29,068	10/02/2023
000000-00-0	NATL BANK CANADA			81,882	81,882	10/06/2023
000000-00-0	NATL BANK CANADA			138,175	138,175	10/06/2023
9609999999	Subtotal - Cash (Schedule E Part 1 type)			2,150,886	2,147,656	XXX
018616-74-8	ALLIANCE BERNSTEIN GOVT FD		1.A	4,094	4,094	10/02/2023

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date
(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date
261908-10-7	DREYFUS TREASURY & AGENCY LEX .....	.....	1.A	30,706	30,706	10/02/2023
31607A-70-3	FIDELITY INST GOVT LEX .....	.....	1.A	29,709	29,709	10/02/2023
31607A-70-3	FIDELITY INSTITUTIONAL GOVT .....	.....	1.A	8,188	8,188	10/02/2023
38141W-27-3	Goldman Sachs Fin Square Govt Fd .....	.....	1.A	20,470	20,470	10/02/2023
44330V-48-0	HSBC US GOVT FUND LEX .....	.....	1.A	2,866	2,866	10/02/2023
52470G-79-1	WESTERN ASST GOV FD .....	.....	1.A	3,521	3,521	10/02/2023
61747C-70-7	MS GOVT US LEX .....	.....	1.A	20,470	20,470	10/02/2023
61747C-70-7	MS GOVT US .....	.....	1.A	15,567	15,567	10/02/2023
74926P-69-6	RBC US GOVT MONEY MKT FUND .....	.....	1.A	20,470	20,470	10/02/2023
857492-70-6	STATE STREET INST US GOVT FUND .....	.....	1.A	20,470	20,470	10/02/2023
949921-12-6	WELLS FARGO GOVT FD LEX .....	.....	1.A	6,469	6,469	10/02/2023
.....	FAIRWAY FINANCE CORP .....	.....	1.B	16,377	16,435	10/04/2023
.....	UNITED OF OMAHA LIFE INSURANCE .....	.....	1.B	6,141	6,141	10/30/2023
.....	NOMURA SECURITIES .....	.....	1.A	165,811	165,811	10/02/2023
.....	RBC CAPITAL MKS .....	.....	1.B	102,352	102,352	10/02/2023
.....	BOFA SECURITIES, INC .....	.....	1.B	143,029	143,029	10/02/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	153,528	153,528	11/03/2023
.....	TD PRIME SVCS .....	.....	1.A	102,352	102,352	10/02/2023
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	51,176	51,176	11/03/2023
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	92,117	92,117	11/03/2023
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	51,176	51,176	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	102,352	102,352	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	102,352	102,352	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	102,352	102,352	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	51,176	51,176	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	204,704	204,704	11/03/2023
.....	TD PRIME SVCS .....	.....	1.A	51,176	51,176	10/02/2023
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	51,176	51,176	11/03/2023
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	81,882	81,882	11/03/2023
.....	BANK OF MONTREAL, LONDON SCM USD .....	.....	1.B	2,047	2,047	10/02/2023
.....	ING BANK NV, LONDON BRANCH .....	.....	1.B	108,497	108,497	11/03/2023
9709999999. Subtotal - Cash Equivalents (Schedule E Part 2 type)				1,924,773	1,924,831	XXX
9999999999 - Totals				4,641,687	4,638,494	XXX

General Interrogatories:

1. Total activity for the year
- Fair Value \$ 4,641,687
- Book/Adjusted Carrying Value \$ 4,638,494
2. Average balance for the year
- Fair Value \$ 4,419,924
- Book/Adjusted Carrying Value \$ 4,416,470
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
- NAIC 1 \$ 2,490,838
- NAIC 2 \$
- NAIC 3 \$
- NAIC 4 \$
- NAIC 5 \$
- NAIC 6 \$

STATEMENT AS OF SEPTEMBER 30, 2023 OF THE Wellpoint Ohio, Inc.

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedules A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page)

[illegible]

General Interrogatories:

General Interrogatories:

1. Total activity for the year
2. Average balance for the year

Fair Value \$	Book/Adjusted Carrying Value \$
Fair Value \$	Book/Adjusted Carrying Value \$

SCHEDULE E - PART 1 - CASH

[illegible]

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

N O N E