



HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
Community Insurance Company

NAIC Group Code	0671 (Current)	0671 (Prior)	NAIC Company Code	10345	Employer's ID Number	31-1440175
Organized under the Laws of	Ohio			State of Domicile or Port of Entry	OH	
Country of Domicile	United States of America					
Licensed as business type:	Property/Casualty					
Is HMO Federally Qualified?	Yes [] No [X]					
Incorporated/Organized	07/08/1995			Commenced Business	10/01/1995	
Statutory Home Office	4361 Irwin Simpson Road (Street and Number)			Mason, OH, US 45040-9498 (City or Town, State, Country and Zip Code)		
Main Administrative Office	4361 Irwin Simpson Road (Street and Number)			513-872-8100 (Area Code) (Telephone Number)		
	Mason, OH, US 45040-9498 (City or Town, State, Country and Zip Code)			513-872-8100 (Area Code) (Telephone Number)		
Mail Address	N17 W24222 Riverwood Drive, Suite 300 (Street and Number or P.O. Box)			Waukesha, WI, US 53188 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	N17 W24222 Riverwood Drive, Suite 300 (Street and Number)			800-331-1476 (Area Code) (Telephone Number)		
	Waukesha, WI, US 53188 (City or Town, State, Country and Zip Code)			800-331-1476 (Area Code) (Telephone Number)		
Internet Website Address	www.elevancehealth.com					
Statutory Statement Contact	Jill M. Waddell (Name)			262-202-1569 (Area Code) (Telephone Number)		
	jill.waddell@elevancehealth.com (E-mail Address)			262-523-4945 (FAX Number)		

OFFICERS

President/Chairperson	Jane Marie Peterson	Vice President/Treasurer	Vincent Edward Scher
Secretary	Kathleen Susan Kiefer	Assistant Secretary	Kristin Kim Cherie Howard

OTHER

Eric (Rick) Kenneth Noble, Assistant Treasurer	Jennie Lynne Reynolds #, Vice President	Bradley Scott Jackson, Medical Director
Gregory Alfonso LaManna, Vice President and Medicaid Plan President		

DIRECTORS OR TRUSTEES

Laurie Helm Benintendi	Ronald William Penczek	Bradley Scott Jackson
Jane Marie Peterson	Vincent Edward Scher	

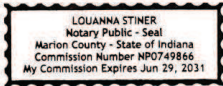
State of Indiana SS
County of Marion

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 si

DocuSigned by: Jane Peterson 283A17CE53F54BC... Jane Marie Peterson President/Chairperson	Signed by: Kathleen Susan Kiefer D85175EE05784B1... Kathleen Susan Kiefer Secretary	DocuSigned by: Vincent E. Scher A85A33722D4143E... Vincent Edward Scher Vice President/Treasurer
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Subscribed and sworn to before me this 3rd day of February 2025

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.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D)	1,837,343,875		1,837,343,875	1,906,490,617
2. Stocks (Schedule D):				
2.1 Preferred stocks	2,648,564		2,648,564	0
2.2 Common stocks	11,308,946		11,308,946	4,041,439
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	258,068,528	1,027,244	257,041,284	211,862,878
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$(23,491,447) , Schedule E - Part 1), cash equivalents (\$4,900,000 , Schedule E - Part 2) and short-term investments (\$0 , Schedule DA)	(18,591,447)		(18,591,447)	(269,823,780)
6. Contract loans, (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)	55,134,135	0	55,134,135	58,807,318
9. Receivables for securities	864,657	818,369	46,288	11,548
10. Securities lending reinvested collateral assets (Schedule DL)	222,378,094		222,378,094	162,618,335
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	2,369,155,351	1,845,613	2,367,309,738	2,074,008,355
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	18,686,047	11,633	18,674,414	16,509,255
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	211,513,123	8,263	211,504,860	235,296,302
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$192,357,367 earned but unbilled premiums)	192,357,367		192,357,367	139,431,791
15.3 Accrued retrospective premiums (\$19,478,742) and contracts subject to redetermination (\$169,009,749)	188,488,491		188,488,491	182,999,225
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	34,369,974		34,369,974	37,035,704
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans	472,986,591	67,855,416	405,131,175	360,053,278
18.1 Current federal and foreign income tax recoverable and interest thereon			0	10,847,167
18.2 Net deferred tax asset	132,273,969	25,563,186	106,710,783	78,899,186
19. Guaranty funds receivable or on deposit			0	1,675,629
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)	50,433,687	50,433,687	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	0		0	123,679,454
24. Health care (\$59,885,350) and other amounts receivable	116,778,410	56,893,060	59,885,350	48,893,516
25. Aggregate write-ins for other-than-invested assets	326,604,430	48,519,493	278,084,937	252,026,178
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	4,113,647,441	251,130,351	3,862,517,090	3,561,355,040
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	4,113,647,441	251,130,351	3,862,517,090	3,561,355,040
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. Investments in corporate-owned life insurance	266,374,595		266,374,595	246,971,660
2502. Premium tax credits	11,332,959		11,332,959	4,110,000
2503. Other miscellaneous accounts receivable	4,184,730	3,807,346	377,384	944,519
2598. Summary of remaining write-ins for Line 25 from overflow page	44,712,147	44,712,147	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	326,604,430	48,519,493	278,084,937	252,026,178

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$ 81,670,529 reinsurance ceded)	1,001,698,239	31,315,532	1,033,013,771	922,042,333
2. Accrued medical incentive pool and bonus amounts	116,398,890		116,398,890	144,239,822
3. Unpaid claims adjustment expenses.....	28,084,012		28,084,012	24,663,216
4. Aggregate health policy reserves, including the liability of \$ 15,066,066 for medical loss ratio rebate per the Public Health Service Act	118,228,964		118,228,964	118,061,114
5. Aggregate life policy reserves.....			0	0
6. Property/casualty unearned premium reserves.....			0	0
7. Aggregate health claim reserves.....			0	0
8. Premiums received in advance.....	63,871,821		63,871,821	63,766,597
9. General expenses due or accrued.....	173,378,745		173,378,745	133,598,892
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses))	8,432,914		8,432,914	0
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable.....	43,483,386		43,483,386	34,282,712
12. Amounts withheld or retained for the account of others.....	107,618,600		107,618,600	60,261,479
13. Remittances and items not allocated.....	55,209,530		55,209,530	57,447,891
14. Borrowed money (including \$ 150,000,000 current) and interest thereon \$ 38,750 (including \$ 38,750 current).....	150,038,750		150,038,750	0
15. Amounts due to parent, subsidiaries and affiliates.....	134,548,753		134,548,753	0
16. Derivatives.....			0	0
17. Payable for securities.....	1,943,636		1,943,636	1,858,751
18. Payable for securities lending	222,378,094		222,378,094	162,618,335
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans.....	150,679,477		150,679,477	160,795,779
23. Aggregate write-ins for other liabilities (including \$ 61,068,533 current).....	76,362,957	0	76,362,957	60,201,725
24. Total liabilities (Lines 1 to 23).....	2,452,356,768	31,315,532	2,483,672,300	1,943,838,646
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	923,850	1,427,769
26. Common capital stock.....	XXX	XXX	1,142,307	1,142,307
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX	395,393,523	395,393,523
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	981,385,111	1,219,552,795
32. Less treasury stock, at cost: 32.1 shares common (value included in Line 26 \$).....	XXX	XXX		
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	1,378,844,790	1,617,516,394
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	3,862,517,090	3,561,355,040
DETAILS OF WRITE-INS				
2301. Other premium liability	40,464,151		40,464,151	3,776,855
2302. Escheat liabilities	27,524,315		27,524,315	33,540,399
2303. Other accrued expenses - non trade	8,374,492		8,374,492	10,862,270
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	12,022,200
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	76,362,957	0	76,362,957	60,201,725
2501. Deferred gain on sale-leaseback transactions	XXX	XXX	923,850	1,427,769
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	923,850	1,427,769
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		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	27,934,419	27,483,025
2. Net premium income (including \$ non-health premium income)	XXX	10,275,437,538	9,890,936,370
3. Change in unearned premium reserves and reserve for rate credits	XXX	26,464,205	(39,134,498)
4. Fee-for-service (net of \$ medical expenses)	XXX	0	0
5. Risk revenue	XXX	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	10,301,901,743	9,851,801,872
Hospital and Medical:			
9. Hospital/medical benefits		6,112,016,905	5,615,823,184
10. Other professional services		885,340,911	753,863,481
11. Outside referrals	229,624,217	230,832,681	255,569,720
12. Emergency room and out-of-area	38,182,979	565,489,108	506,342,670
13. Prescription drugs		1,085,504,272	855,941,579
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		209,959,420	246,779,617
16. Subtotal (Lines 9 to 15)	267,807,196	9,089,143,296	8,234,320,251
Less:			
17. Net reinsurance recoveries		40,073,726	(39,194,870)
18. Total hospital and medical (Lines 16 minus 17)	267,807,196	9,049,069,570	8,273,515,121
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$155,321,217 cost containment expenses		268,999,788	285,538,794
21. General administrative expenses		704,027,381	721,445,883
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		51,413,848	(1,171,602)
23. Total underwriting deductions (Lines 18 through 22).....	267,807,196	10,073,510,587	9,279,328,196
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	228,391,156	572,473,676
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		130,744,308	118,300,489
26. Net realized capital gains (losses) less capital gains tax of \$ (402,263)		(9,379,733)	(28,607,688)
27. Net investment gains (losses) (Lines 25 plus 26)	0	121,364,576	89,692,801
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$1,631,707)]		(1,631,707)	(886,146)
29. Aggregate write-ins for other income or expenses	0	30,872,231	32,858,635
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	378,996,256	694,138,966
31. Federal and foreign income taxes incurred	XXX	102,927,171	176,853,345
32. Net income (loss) (Lines 30 minus 31)	XXX	276,069,085	517,285,621
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
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
2901. Change in cash surrender value of investment in corporate-owned life insurance		19,402,935	20,829,570
2902. Federal Employee Program interest income		8,135,439	9,558,262
2903. Miscellaneous income (expense)		3,333,856	2,470,803
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	30,872,231	32,858,635

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	1,617,516,394	1,340,623,509
34. Net income or (loss) from Line 32	276,069,085	517,285,621
35. Change in valuation basis of aggregate policy and claim reserves		
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ (1,194,687)	(4,494,298)	14,040,943
37. Change in net unrealized foreign exchange capital gain or (loss)		
38. Change in net deferred income tax	31,221,451	32,697,106
39. Change in nonadmitted assets	(23,763,923)	(14,766,534)
40. Change in unauthorized and certified reinsurance	0	0
41. Change in treasury stock	0	0
42. Change in surplus notes	0	0
43. Cumulative effect of changes in accounting principles.....		
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....		
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (Stock Dividend)		
45.3 Transferred from capital		
46. Dividends to stockholders	(517,200,000)	(271,200,000)
47. Aggregate write-ins for gains or (losses) in surplus	(503,918)	(1,164,251)
48. Net change in capital and surplus (Lines 34 to 47)	(238,671,604)	276,892,885
49. Capital and surplus end of reporting period (Line 33 plus 48)	1,378,844,790	1,617,516,394
DETAILS OF WRITE-INS		
4701. Deferred gain on sale-leaseback activity	(503,918)	(503,918)
4702. Change in Medicare supplement reserving methodology		(660,333)
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	(503,918)	(1,164,251)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	10,227,983,197	9,764,482,656
2. Net investment income	123,580,833	110,805,417
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	10,351,564,030	9,875,288,073
5. Benefit and loss related payments	8,975,646,206	8,234,314,392
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	984,474,684	940,326,804
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ (402,263) tax on capital gains (losses)	83,244,827	158,957,242
10. Total (Lines 5 through 9)	10,043,365,716	9,333,598,438
11. Net cash from operations (Line 4 minus Line 10)	308,198,314	541,689,635
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	746,622,380	808,959,175
12.2 Stocks	8,225,336	2,481,937
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	4,809,551	2,512,907
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	323,588	(248,533)
12.7 Miscellaneous proceeds	84,885	2,634,604
12.8 Total investment proceeds (Lines 12.1 to 12.7)	760,065,740	816,340,090
13. Cost of investments acquired (long-term only):		
13.1 Bonds	682,808,314	1,070,832,087
13.2 Stocks	17,942,100	1,506,331
13.3 Mortgage loans	45,493,528	136,595,000
13.4 Real estate	0	0
13.5 Other invested assets	7,064,884	2,234,126
13.6 Miscellaneous applications	59,980,312	95,453,347
13.7 Total investments acquired (Lines 13.1 to 13.6)	813,289,138	1,306,620,891
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(53,223,398)	(490,280,801)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	150,038,750	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	517,200,000	271,200,000
16.6 Other cash provided (applied)	363,418,667	121,640,129
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(3,742,583)	(149,559,871)
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)	251,232,333	(98,151,037)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	(269,823,780)	(171,672,743)
19.2 End of year (Line 18 plus Line 19.1)	(18,591,447)	(269,823,780)

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

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ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	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
1. Net premium income	10,275,437,538	674,010,493	1,949,202,872	180,101,427	28,955,265	74,015,758	1,163,451,048	4,319,019,974	1,171,906,179				714,774,522	
2. Change in unearned premium reserves and reserve for rate credit	26,464,205	0	(4,773,029)	(181,536)				43,467,782	(12,049,011)					
3. Fee-for-service (net of \$ medical expenses)	0													XXX.
4. Risk revenue	0													XXX.
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
6. Aggregate write-ins for other non-health care related revenues	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
7. Total revenues (Lines 1 to 6)	10,301,901,743	674,010,493	1,944,429,843	179,919,891	28,955,265	74,015,758	1,163,451,048	4,362,487,756	1,159,857,168	0	0	0	714,774,522	0
8. Hospital/medical benefits	6,112,016,905	348,014,545	981,198,799	116,494,608		0	1,016,649,729	2,935,217,068	544,626,312				169,815,844	XXX.
9. Other professional services	885,340,911	28,623,838	86,852,139	25,885,551	23,462,339	33,900,591	113,389,897	330,665,840	242,560,715					XXX.
10. Outside referrals	230,832,681	31,185,172	19,762,756		338,268	23,078,462	7,920,110	99,949,682	48,598,232					XXX.
11. Emergency room and out-of-area	565,489,108	31,118,507	276,054,278	4,239,797			50,503,264	166,140,472	37,432,791					XXX.
12. Prescription drugs	1,085,504,272	97,416,768	316,849,608	(4,211,394)			377,938,165	297,801,624	(1,149,077)				858,578	XXX.
13. Aggregate write-ins for other hospital and medical incentive pool, withhold adjustments and bonus amounts	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
14. Incentive pool, withhold adjustments and bonus amounts	209,959,420	5,991,590	11,279,459		59	323	8,240,493	166,238,606	18,156,406				52,484	XXX.
15. Subtotal (Lines 8 to 14)	9,089,143,296	542,350,419	1,691,997,040	142,408,562	23,800,666	56,979,376	1,574,641,658	3,996,013,291	890,225,378	0	0	0	170,726,906	XXX.
16. Net reinsurance recoveries	40,073,726				3,416,294		472,658,191		(26,727,610)				(409,273,149)	XXX.
17. Total medical and hospital (Lines 15 minus 16).....	9,049,069,570	542,350,419	1,691,997,040	142,408,562	20,384,372	56,979,376	1,101,983,467	3,996,013,291	916,952,988	0	0	0	580,000,055	XXX.
18. Non-health claims (net)	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
19. Claims adjustment expenses including \$ cost containment expenses	268,999,788	23,979,768	42,566,447	9,958,426	1,110,739	4,566,909	15,638,416	121,443,668	48,082,365				1,653,050	
20. General administrative expenses	704,027,381	69,182,372	122,805,517	28,730,368	3,204,518	13,175,674	45,117,315	350,368,742	138,719,110				(67,276,235)	
21. Increase in reserves for accident and health contracts	51,413,848			(1,813,215)				53,227,063						XXX.
22. Increase in reserves for life contracts	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
23. Total underwriting deductions (Lines 17 to 22)	10,073,510,587	635,512,559	1,857,369,003	179,284,141	24,699,629	74,721,959	1,162,739,198	4,521,052,765	1,103,754,463	0	0	0	514,376,870	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	228,391,156	38,497,934	87,060,840	635,750	4,255,636	(706,201)	711,850	(158,565,009)	56,102,705	0	0	0	200,397,652	0
DETAILS OF WRITE-INS														XXX.
0501.														XXX.
0502.														XXX.
0503.														XXX.
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0602.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0603.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.														XXX.
1302.														XXX.
1303.														XXX.
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual	674,010,493			674,010,493
2. Comprehensive (hospital and medical) group	1,949,202,872			1,949,202,872
3. Medicare Supplement	180,101,427			180,101,427
4. Vision only	32,630,573		3,675,308	28,955,265
5. Dental only	74,015,758			74,015,758
6. Federal Employees Health Benefits Plan	1,662,072,926		498,621,878	1,163,451,048
7. Title XVIII - Medicare	4,319,019,974			4,319,019,974
8. Title XIX - Medicaid	1,135,436,774	36,621,795	152,391	1,171,906,178
9. Credit A&H				0
10. Disability Income				0
11. Long-Term Care				0
12. Other health	224,141,110	490,810,876	177,463	714,774,523
13. Health subtotal (Lines 1 through 12)	10,250,631,907	527,432,671	502,627,040	10,275,437,538
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	10,250,631,907	527,432,671	502,627,040	10,275,437,538

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	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
1. Payments during the year:														
1.1 Direct	8,762,852,468	523,551,145	1,666,280,173	140,916,046	23,795,164	55,905,297	1,502,056,608	3,770,083,644	917,188,791				163,075,600	
1.2 Reinsurance assumed	436,271,508								31,662,705				404,608,803	
1.3 Reinsurance ceded	461,278,125				3,543,939		456,017,265		1,689,396				27,525	
1.4 Net	8,737,845,851	523,551,145	1,666,280,173	140,916,046	20,251,225	55,905,297	1,046,039,343	3,770,083,644	947,162,100	0	0	0	567,656,878	0
2. Paid medical incentive pools and bonuses	237,800,350	5,183,423	11,337,010				8,528,591	194,392,338	18,310,134				48,854	
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	1,052,995,631	74,814,639	190,414,882	16,702,494	1,302,518	4,666,353	264,198,961	353,736,975	115,977,767	0	0	0	31,181,042	0
3.2 Reinsurance assumed	61,688,669	0	0	0	0	0	0	0	5,987,320	0	0	0	55,701,349	0
3.3 Reinsurance ceded	81,670,529	0	0	0	184,687	0	79,233,853	0	2,177,183	0	0	0	74,805	0
3.4 Net	1,033,013,771	74,814,639	190,414,882	16,702,494	1,117,831	4,666,353	184,965,108	353,736,975	119,787,905	0	0	0	86,807,586	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	0													
4.2 Reinsurance assumed	0													
4.3 Reinsurance ceded	0													
4.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	116,398,888	2,506,957	1,517,731		59	323	1,537,751	97,787,039	13,042,351				6,677	
6. Net health care receivables (a)	12,372,869	2,308,344	1,417,885	939,271	(47,091)	(142,734)	(261,693)	6,711,683	1,540,383				(93,179)	
7. Amounts recoverable from reinsurers December 31, current year	34,369,974				256,168		34,096,383						17,423	
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	924,291,352	59,698,610	174,559,590	14,270,706	1,344,166	3,735,331	200,116,096	287,334,250	159,557,203	0	0	0	23,675,400	0
8.2 Reinsurance assumed	58,245,732	0	0	0	0	0	0	0	7,177,946	0	0	0	51,067,786	0
8.3 Reinsurance ceded	60,494,754	0	0	0	206,527	0	60,034,830	0	122,110	0	0	0	131,287	0
8.4 Net	922,042,330	59,698,610	174,559,590	14,270,706	1,137,639	3,735,331	140,081,266	287,334,250	166,613,039	0	0	0	74,611,899	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	0													
9.2 Reinsurance assumed	0													
9.3 Reinsurance ceded	0													
9.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	144,239,823	1,698,791	1,575,282				1,825,850	125,940,772	13,196,080				3,048	
11. Amounts recoverable from reinsurers December 31, prior year	37,035,703				361,973		36,654,480						19,250	
12. Incurred Benefits:														
12.1 Direct	8,879,183,878	536,358,830	1,680,717,580	142,408,563	23,800,607	56,979,053	1,566,401,166	3,829,774,686	872,068,972	0	0	0	170,674,421	0
12.2 Reinsurance assumed	439,714,445	0	0	0	0	0	0	0	30,472,079	0	0	0	409,242,366	0
12.3 Reinsurance ceded	479,788,171	0	0	0	3,416,294	0	472,658,191	0	3,744,469	0	0	0	(30,784)	0
12.4 Net	8,839,110,152	536,358,830	1,680,717,580	142,408,563	20,384,313	56,979,053	1,093,742,975	3,829,774,686	898,796,583	0	0	0	579,947,571	0
13. Incurred medical incentive pools and bonuses	209,959,415	5,991,589	11,279,459	0	59	323	8,240,492	166,238,605	18,156,405	0	0	0	52,483	0

(a) Excludes \$ 787,655 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	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
1. Reported in Process of Adjustment:														
1.1 Direct	263,131,182	13,228,622	38,787,173	3,385,964	198,521	2,356,343	51,546,088	138,530,800	15,246,007	0	0	0	(148,336)	0
1.2 Reinsurance assumed	9,108,532	0	0	0	0	0	0	0	1,926,533	0	0	0	7,181,999	0
1.3 Reinsurance ceded	16,138,781	0	0	0	0	0	15,437,991	0	700,550	0	0	0	241	0
1.4 Net	256,100,932	13,228,622	38,787,173	3,385,964	198,521	2,356,343	36,108,097	138,530,800	16,471,990	0	0	0	7,033,422	0
2. Incurred but Unreported:														
2.1 Direct	789,864,449	61,586,016	151,627,709	13,316,530	1,103,997	2,310,010	212,652,873	215,206,175	100,731,760	0	0	0	31,329,379	0
2.2 Reinsurance assumed	52,580,137	0	0	0	0	0	0	0	4,060,788	0	0	0	48,519,350	0
2.3 Reinsurance ceded	65,531,747	0	0	0	184,687	0	63,795,862	0	1,476,634	0	0	0	74,565	0
2.4 Net	776,912,839	61,586,016	151,627,709	13,316,530	919,310	2,310,010	148,857,011	215,206,175	103,315,914	0	0	0	79,774,164	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0													
3.2 Reinsurance assumed	0													
3.3 Reinsurance ceded	0													
3.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	1,052,995,631	74,814,639	190,414,882	16,702,494	1,302,518	4,666,353	264,198,961	353,736,975	115,977,767	0	0	0	31,181,042	0
4.2 Reinsurance assumed	61,688,669	0	0	0	0	0	0	0	5,987,320	0	0	0	55,701,349	0
4.3 Reinsurance ceded	81,670,529	0	0	0	184,687	0	79,233,853	0	2,177,183	0	0	0	74,805	0
4.4 Net	1,033,013,771	74,814,639	190,414,882	16,702,494	1,117,831	4,666,353	184,965,108	353,736,975	119,787,905	0	0	0	86,807,586	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual	38,151,695	485,399,450	5,891,492	68,923,146	44,043,187	59,698,610
2. Comprehensive (hospital and medical) group	130,809,563	1,535,470,610	11,145,800	179,269,082	141,955,363	174,559,590
3. Medicare Supplement	12,231,198	128,684,848	(53,170)	16,755,664	12,178,028	14,270,707
4. Vision Only	950,105	19,406,925	693	1,117,138	950,798	1,137,639
5. Dental Only	2,810,328	53,094,969	106,520	4,559,833	2,916,848	3,735,332
6. Federal Employees Health Benefits Plan	130,804,382	917,793,058	6,290,499	178,674,609	137,094,881	140,081,267
7. Title XVIII - Medicare	209,590,227	3,560,493,418	1,518,927	352,218,048	211,109,154	287,334,251
8. Title XIX - Medicaid	118,521,567	828,640,533	8,498,930	111,288,975	127,020,497	166,613,040
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	66,753,842	500,904,863	1,232,743	85,574,843	67,986,585	74,611,899
13. Health subtotal (Lines 1 to 12)	710,622,907	8,029,888,674	34,632,434	998,381,338	745,255,341	922,042,335
14. Health care receivables (a)	18,823,247	97,167,508	0	0	18,823,247	103,617,885
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	125,372,780	112,427,571	19,332,676	97,066,214	144,705,456	144,239,822
17. Totals (Lines 13 - 14 + 15 + 16)	817,172,440	8,045,148,737	53,965,110	1,095,447,552	871,137,550	962,664,272

(a) Excludes \$ 787,655 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	195,877	202,101	206,981	204,057	204,057
2.	2020	1,652,681	1,814,608	1,822,178	1,822,665	1,822,954
3.	2021	XXX	1,820,388	2,037,523	2,040,123	2,041,779
4.	2022	XXX	XXX	1,918,161	2,076,443	2,088,621
5.	2023	XXX	XXX	XXX	1,798,486	1,956,597
6.	2024	XXX	XXX	XXX	XXX	1,999,258

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	201,543	203,776	207,251	204,421	204,057
2.	2020	1,881,856	1,821,558	1,823,007	1,822,388	1,823,190
3.	2021	XXX	2,053,276	2,050,578	2,040,671	2,041,941
4.	2022	XXX	XXX	2,203,673	2,087,828	2,090,327
5.	2023	XXX	XXX	XXX	2,023,998	1,972,893
6.	2024	XXX	XXX	XXX	XXX	2,250,113

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2020	2,276,644	1,822,954	101,838	5.6	1,924,792	84.5	236	1	1,925,029	84.6
2. 2021	2,355,049	2,041,779	91,788	4.5	2,133,567	90.6	162	2	2,133,731	90.6
3. 2022	2,505,138	2,088,621	67,864	3.2	2,156,485	86.1	1,706	18	2,158,209	86.2
4. 2023	2,396,735	1,956,597	71,068	3.6	2,027,665	84.6	16,296	588	2,044,549	85.3
5. 2024	2,618,440	1,999,258	56,995	2.9	2,056,253	78.5	250,855	7,114	2,314,222	88.4

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Medicare Supplement

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	9,671	9,813	9,760	9,615	9,615
2.	2020	92,101	102,261	102,173	102,211	102,210
3.	2021	XXX	106,334	117,710	117,946	117,882
4.	2022	XXX	XXX	111,775	126,404	126,320
5.	2023	XXX	XXX	XXX	120,357	132,669
6.	2024	XXX	XXX	XXX	XXX	126,337

Section B - Incurred Health Claims - Medicare Supplement

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	9,788	9,989	9,760	9,615	9,615
2.	2020	104,633	102,438	102,173	102,211	102,211
3.	2021	XXX	119,102	117,722	117,909	117,873
4.	2022	XXX	XXX	128,241	126,462	126,282
5.	2023	XXX	XXX	XXX	134,606	132,662
6.	2024	XXX	XXX	XXX	XXX	143,093

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	150,044	102,210	12,370	12.1	114,580	76.4	1	0	114,581	76.4
2.	2021	159,689	117,882	13,219	11.2	131,101	82.1	(9)	0	131,092	82.1
3.	2022	165,695	126,320	10,204	8.1	136,524	82.4	(38)	(1)	136,485	82.4
4.	2023	171,894	132,669	10,268	7.7	142,937	83.2	(7)	0	142,930	83.2
5.	2024	179,920	126,337	8,585	6.8	134,922	75.0	16,756	474	152,152	84.6

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Dental Only

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	2,726	2,822	2,829	2,834	2,834
2.	2020	38,500	42,697	42,775	42,785	42,788
3.	2021	XXX	53,456	57,254	57,352	57,359
4.	2022	XXX	XXX	58,874	62,183	62,253
5.	2023	XXX	XXX	XXX	54,687	57,411
6.	2024	XXX	XXX	XXX	XXX	53,085

Section B - Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	2,787	2,831	2,829	2,834	2,834
2.	2020	42,820	42,793	42,790	42,784	42,788
3.	2021	XXX	57,801	57,392	57,370	57,359
4.	2022	XXX	XXX	63,192	62,325	62,262
5.	2023	XXX	XXX	XXX	58,263	57,508
6.	2024	XXX	XXX	XXX	XXX	57,645

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2020	62,545	42,788	6,150	14.4	48,938	78.2	0	0	48,938	78.2
2. 2021	74,521	57,359	6,925	12.1	64,284	86.3	0	0	64,284	86.3
3. 2022	80,082	62,253	5,848	9.4	68,101	85.0	9	0	68,110	85.1
4. 2023	72,980	57,411	5,261	9.2	62,672	85.9	97	2	62,771	86.0
5. 2024	74,016	53,085	4,010	7.6	57,095	77.1	4,560	97	61,752	83.4

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Vision Only

Year in Which Losses Were Incurred			Cumulative Net Amounts Paid				
			1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	1,320	1,316	1,314	1,316	1,316	
2.	2020	11,326	11,943	11,938	11,939	11,952	
3.	2021	XXX	13,346	14,097	14,098	14,094	
4.	2022	XXX	XXX	14,282	15,419	15,398	
5.	2023	XXX	XXX	XXX	16,503	17,465	
6.	2024	XXX	XXX	XXX	XXX	19,407	

Section B - Incurred Health Claims - Vision Only

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	1,320	1,316	1,314	1,316	1,316
2.	2020	12,112	11,944	11,938	11,939	11,952
3.	2021	xxx	14,284	14,097	14,098	14,094
4.	2022	xxx	xxx	15,224	15,421	15,398
5.	2023	xxx	xxx	xxx	17,638	17,466
6.	2024	xxx	xxx	xxx	xxx	20,524

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	21,075	11,952	1,547	12.9	13,499	64.1	0	0	13,499	64.1
2.	2021	23,412	14,094	1,731	12.3	15,825	67.6	0	0	15,825	67.6
3.	2022	23,931	15,398	1,332	8.7	16,730	69.9	0	0	16,730	69.9
4.	2023	26,575	17,465	1,186	6.8	18,651	70.2	1	0	18,652	70.2
5.	2024	28,955	19,407	973	5.0	20,380	70.4	1,117	32	21,529	74.4

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	76,135	76,256	75,728	76,668	76,668
2.	2020	703,203	786,526	790,404	791,009	791,681
3.	2021	XXX	769,691	902,229	907,301	909,043
4.	2022	XXX	XXX	762,329	893,885	897,899
5.	2023	XXX	XXX	XXX	840,216	965,549
6.	2024	XXX	XXX	XXX	XXX	922,725

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	75,840	76,275	75,650	76,646	76,668
2.	2020	788,740	786,690	790,405	791,520	791,693
3.	2021	XXX	895,871	903,292	908,444	909,085
4.	2022	XXX	XXX	887,408	896,901	898,883
5.	2023	XXX	XXX	XXX	977,475	971,086
6.	2024	XXX	XXX	XXX	XXX	1,102,653

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2020	844,535	791,681	19,089	2.4	810,770	96.0	12	0	810,782	96.0
2. 2021	943,730	909,043	17,106	1.9	926,149	98.1	42	1	926,192	98.1
3. 2022	948,371	897,899	13,782	1.5	911,681	96.1	984	25	912,690	96.2
4. 2023	1,048,943	965,549	14,857	1.5	980,406	93.5	5,537	126	986,069	94.0
5. 2024	1,163,451	922,725	12,292	1.3	935,017	80.4	179,928	4,348	1,119,293	96.2

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred						Cumulative Net Amounts Paid				
						1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	172,782	164,800	165,818	164,558	164,558
2.	2020	.....	.....	.....	.....	1,944,059	2,201,658	2,211,393	2,211,154	2,211,644
3.	2021	.....	.....	.....	.....	XXX	2,548,449	2,748,732	2,764,347	2,761,818
4.	2022	.....	.....	.....	.....	XXX	XXX	3,003,072	3,179,457	3,186,581
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	3,357,567	3,638,756
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	3,607,623

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred						Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
						1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	164,584	166,848	165,811	164,531	164,558
2.	2020	.....	.....	.....	.....	2,268,820	2,208,371	2,209,844	2,211,135	2,212,529
3.	2021	.....	.....	.....	.....	XXX	2,830,551	2,755,038	2,765,225	2,761,858
4.	2022	.....	.....	.....	.....	XXX	XXX	3,365,664	3,206,682	3,190,377
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	3,742,786	3,653,287
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	4,039,896

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	.....	.....	.....	.....	2,354,113	87.4	885	26	2,355,024	87.5
2.	2021	.....	.....	.....	.....	2,918,753	91.7	40	1	2,918,794	91.7
3.	2022	.....	.....	.....	.....	3,324,956	86.5	3,796	2	3,328,754	86.6
4.	2023	.....	.....	.....	.....	3,773,917	91.1	14,531	16	3,788,464	91.5
5.	2024	.....	.....	.....	.....	3,712,693	85.1	432,273	10,152	4,155,118	95.2

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	0	0	(73)	(30)	(30)
2.	2020	20,799	25,888	21,084	20,933	21,054
3.	2021	XXX	35,412	44,387	44,023	44,029
4.	2022	XXX	XXX	1,010,977	1,119,839	1,121,815
5.	2023	XXX	XXX	XXX	819,041	961,320
6.	2024	XXX	XXX	XXX	XXX	819,125

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	0	0	(73)	(30)	(30)
2.	2020	26,739	26,739	21,084	20,933	21,061
3.	2021	XXX	38,042	44,282	44,023	44,029
4.	2022	XXX	XXX	1,182,686	1,124,577	1,121,815
5.	2023	XXX	XXX	XXX	994,112	969,767
6.	2024	XXX	XXX	XXX	XXX	943,502

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2020	22,311	21,054	37	0.2	21,091	94.5	7	0	21,098	94.6
2. 2021	47,130	44,029	8,337	18.9	52,366	111.1	0	0	52,366	111.1
3. 2022	1,404,019	1,121,815	61,382	5.5	1,183,197	84.3	0	0	1,183,197	84.3
4. 2023	1,305,647	961,320	46,260	4.8	1,007,580	77.2	8,447	218	1,016,245	77.8
5. 2024	1,159,857	819,125	41,552	5.1	860,677	74.2	124,377	2,856	987,910	85.2

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Other

Year in Which Losses Were Incurred						Cumulative Net Amounts Paid				
						1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	41,169	41,279	41,337	40,186	40,186
2.	2020	.....	.....	.....	.....	350,879	399,563	399,755	398,607	397,584
3.	2021	.....	.....	.....	.....	XXX	422,998	484,535	481,022	481,224
4.	2022	.....	.....	.....	.....	XXX	XXX	524,558	537,242	539,848
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	496,724	561,542
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	497,589

Section B - Incurred Health Claims - Other

Year in Which Losses Were Incurred						Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
						1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	.....	.....	.....	39,941	41,285	41,340	40,186	40,186
2.	2020	.....	.....	.....	.....	410,303	400,099	399,913	399,189	397,584
3.	2021	.....	.....	.....	.....	XXX	492,919	487,944	481,395	481,149
4.	2022	.....	.....	.....	.....	XXX	XXX	608,433	539,188	540,365
5.	2023	.....	.....	.....	.....	XXX	XXX	XXX	568,438	562,333
6.	2024	.....	.....	.....	.....	XXX	XXX	XXX	XXX	583,171

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	.....233,608	.....397,584	.....17,777	.....4.5	.....415,361	.....177.8	.....0	.....(4)	.....415,357	.....177.8
2.	2021	.....235,887	.....481,224	.....19,546	.....4.1	.....500,770	.....212.3	.....(75)	.....1	.....500,696	.....212.3
3.	2022	.....244,956	.....539,848	.....1,717	.....0.3	.....541,565	.....221.1	.....517	.....9	.....542,091	.....221.3
4.	2023	.....687,413	.....561,542	.....284	.....0.1	.....561,826	.....81.7	.....791	.....227	.....562,844	.....81.9
5.	2024	.....714,775	.....497,589	.....1,168	.....0.2	.....498,757	.....69.8	.....85,582	.....1,753	.....586,092	.....82.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred			Cumulative Net Amounts Paid				
			1 2020	2 2021	3 2022	4 2023	5 2024
1.	Prior	.....	499,680	498,387	503,694	499,204	499,204
2.	2020	.....	4,813,548	5,385,144	5,401,700	5,401,303	5,401,867
3.	2021	.....	XXX	5,770,074	6,406,467	6,426,212	6,427,228
4.	2022	.....	XXX	XXX	7,404,028	8,010,872	8,038,735
5.	2023	.....	XXX	XXX	XXX	7,503,581	8,291,309
6.	2024	.....	XXX	XXX	XXX	XXX	8,045,149

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred						Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year					
						1 2020	2 2021	3 2022	4 2023	5 2024	
1.	Prior	.....	495,803	.....	502,320	.....	503,882	.....	499,519	.....	499,204
2.	2020	.....	5,536,023	.....	5,400,632	.....	5,401,154	.....	5,402,099	.....	5,403,008
3.	2021	.....	XXX	.....	6,501,846	.....	6,430,345	.....	6,429,135	.....	6,427,388
4.	2022	.....	XXX	.....	XXX	.....	8,454,521	.....	8,059,384	.....	8,045,709
5.	2023	.....	XXX	.....	XXX	.....	XXX	.....	8,517,316	.....	8,337,002
6.	2024	.....	XXX	.....	XXX	.....	XXX	.....	XXX	.....	9,140,597

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

		1	2	3	4	5	6	7	8	9	10
Years in which Premiums were Earned and Claims were Incurred		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	6,303,625	5,401,867	301,277	5.6	5,703,144	90.5	1,141	23	5,704,308	90.5
2.	2021	7,021,601	6,427,228	315,587	4.9	6,742,815	96.0	160	5	6,742,980	96.0
3.	2022	9,218,184	8,038,735	300,504	3.7	8,339,239	90.5	6,974	53	8,346,266	90.5
4.	2023	9,851,802	8,291,309	284,345	3.4	8,575,654	87.0	45,693	1,177	8,622,524	87.5
5.	2024	10,301,902	8,045,149	230,645	2.9	8,275,794	80.3	1,095,448	26,826	9,398,068	91.2

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		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
1. Unearned premium reserves	5,957,839			5,957,839									
2. Additional policy reserves (a)	65,635,538			12,408,475				53,227,063					
3. Reserve for future contingent benefits	0												
4. Reserve for rate credits or experience rating refunds (including \$ for investment income) ..	34,494,021		17,612,881	90,586				1,320,164	15,470,390				
5. Aggregate write-ins for other policy reserves	12,141,566	5,032,538	1,982,881	0	0	0	0	5,126,147	0	0	0	0	0
6. Totals (gross)	118,228,964	5,032,538	19,595,762	18,456,900	0	0	0	59,673,374	15,470,390	0	0	0	0
7. Reinsurance ceded	0												
8. Totals (Net)(Page 3, Line 4)	118,228,964	5,032,538	19,595,762	18,456,900	0	0	0	59,673,374	15,470,390	0	0	0	0
9. Present value of amounts not yet due on claims	0												
10. Reserve for future contingent benefits	0												
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross)	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Reinsurance ceded	0												
14. Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
0501. Policy reserves subject to redetermination	12,141,566	5,032,538	1,982,881					5,126,147					
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	12,141,566	5,032,538	1,982,881	0	0	0	0	5,126,147	0	0	0	0	0
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$53,227,063 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

	Claim Adjustment Expenses		3	4	5
	1	2			
	Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1. Rent (\$ for occupancy of own building)	2,077,060	2,665,990	799,993		5,543,043
2. Salary, wages and other benefits	104,541,956	73,916,715	438,008,548		616,467,220
3. Commissions (less \$ ceded plus \$ assumed)	0	0	252,867,814		252,867,814
4. Legal fees and expenses	47,687	371,959	79,626,629		80,046,275
5. Certifications and accreditation fees	0	0	0		0
6. Auditing, actuarial and other consulting services ...	14,382,358	3,238,487	57,056,958		74,677,803
7. Traveling expenses	185,203	73,912	3,084,805		3,343,920
8. Marketing and advertising	662,855	982,761	46,625,485		48,271,102
9. Postage, express and telephone	679,884	1,887,163	24,966,719		27,533,766
10. Printing and office supplies	213,579	11,026	4,728,613		4,953,219
11. Occupancy, depreciation and amortization	0	0	0		0
12. Equipment	730	2,632	1,578,865		1,582,227
13. Cost or depreciation of EDP equipment and software	7,702,554	1,516,965	78,057,749		87,277,268
14. Outsourced services including EDP, claims, and other services	18,291,723	9,161,328	159,969,175		187,422,225
15. Boards, bureaus and association fees	32,015	1,696	3,053,944		3,087,655
16. Insurance, except on real estate	0	0	2,891,700		2,891,700
17. Collection and bank service charges	3	3	3,159,437		3,159,442
18. Group service and administration fees	0	3,430,953	76,116,872		79,547,825
19. Reimbursements by uninsured plans	0	0	(707,530,447)		(707,530,447)
20. Reimbursements from fiscal intermediaries	0	0	0		0
21. Real estate expenses	676	1,415	7,430,777		7,432,868
22. Real estate taxes	0	0	538,625		538,625
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	(3,937,794)	(2,499,328)	83,454,128		77,017,006
23.2 State premium taxes	0	0	49,764,321		49,764,321
23.3 Regulatory authority licenses and fees	81,511	7,577	282,362		371,449
23.4 Payroll taxes	10,205,737	7,085,384	19,022,558		36,313,678
23.5 Other (excluding federal income and real estate taxes)	0	0	5,729,824		5,729,824
24. Investment expenses not included elsewhere	0	0	0	3,024,581	3,024,581
25. Aggregate write-ins for expenses	153,482	11,821,933	12,741,926	0	24,717,341
26. Total expenses incurred (Lines 1 to 25)	155,321,217	113,678,570	704,027,381	3,024,581	(a) 976,051,749
27. Less expenses unpaid December 31, current year		28,084,012	173,378,745		201,462,757
28. Add expenses unpaid December 31, prior year	0	24,663,216	133,598,892	0	158,262,108
29. Amounts receivable relating to uninsured plans, prior year	0	0	397,591,046	0	397,591,046
30. Amounts receivable relating to uninsured plans, current year			472,986,591		472,986,591
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	155,321,217	110,257,774	739,643,073	3,024,581	1,008,246,645
DETAILS OF WRITE-INS					
2501. Miscellaneous expenses	153,482	11,821,933	12,741,926		24,717,341
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	153,482	11,821,933	12,741,926	0	24,717,341

(a) Includes management fees of \$ 1,126,461,529 to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a) .....5,868,873	.....6,036,017
1.1	Bonds exempt from U.S. tax	(a) .....	.....
1.2	Other bonds (unaffiliated)	(a) .....92,666,626	.....94,408,635
1.3	Bonds of affiliates	(a) .....0	.....0
2.1	Preferred stocks (unaffiliated)	(b) .....0	.....0
2.11	Preferred stocks of affiliates	(b) .....0	.....0
2.2	Common stocks (unaffiliated) .....	.....279,955	.....279,955
2.21	Common stocks of affiliates .....	.....0	.....0
3.	Mortgage loans	(c) .....11,724,892	.....11,968,286
4.	Real estate	(d) .....0	.....0
5	Contract Loans .....	.....0	.....0
6	Cash, cash equivalents and short-term investments	(e) .....13,972,811	.....13,970,631
7	Derivative instruments	(f) .....0	.....0
8.	Other invested assets .....	.....5,980,814	.....5,980,814
9.	Aggregate write-ins for investment income .....	.....2,368,510	.....2,383,301
10.	Total gross investment income	132,862,480	135,027,639
11.	Investment expenses		(g) .....3,024,581
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) .....0
13.	Interest expense		(h) .....1,258,750
14.	Depreciation on real estate and other invested assets		(i) .....0
15.	Aggregate write-ins for deductions from investment income .....		.....0
16.	Total deductions (Lines 11 through 15) .....		.....4,283,331
17.	Net investment income (Line 10 minus Line 16)		130,744,308
DETAILS OF WRITE-INS			
0901.	Miscellaneous Income .....	.....1,996,259	.....1,996,259
0902.	Securities Lending .....	.....372,251	.....387,041
0903.	.....	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	2,368,510	2,383,301
1501.	.....	
1502.	.....	
1503.	.....	
1598.	Summary of remaining write-ins for Line 15 from overflow page .....		.....0
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$8,170,582 accrual of discount less \$3,119,795 amortization of premium and less \$2,604,332 paid for accrued interest on purchases.
- (b) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends on purchases.
- (c) Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (d) Includes \$0 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
- (e) Includes \$46,592 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
- (f) Includes \$0 accrual of discount less \$0 amortization of premium.
- (g) Includes \$.0 investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$0 interest on surplus notes and \$0 interest on capital notes.
- (i) Includes \$0 depreciation on real estate and \$0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(2,410,310)	.....0	(2,410,310)	.....0	.....0
1.1	Bonds exempt from U.S. tax .....	.....	.....	.....0	.....	.....
1.2	Other bonds (unaffiliated)	(7,785,917)	(92,894)	(7,878,811)	(94,352)	.....0
1.3	Bonds of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.1	Preferred stocks (unaffiliated) .....	.....0	.....0	.....0	43,314	.....0
2.11	Preferred stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
2.2	Common stocks (unaffiliated)	97,725	(232,812)	(135,087)	289,935	.....786
2.21	Common stocks of affiliates .....	.....0	.....0	.....0	.....0	.....0
3.	Mortgage loans .....	.....	.....0	.....0	.....0	.....0
4.	Real estate .....	.....	.....0	.....0	.....0	.....0
5.	Contract loans .....	.....0	.....0	.....0	.....0	.....0
6.	Cash, cash equivalents and short-term investments	323,588	(185,813)	137,775	.....0	.....0
7.	Derivative instruments .....	.....0	.....0	.....0	.....0	.....0
8.	Other invested assets .....	.....0	.....0	.....0	(5,928,516)	.....0
9.	Aggregate write-ins for capital gains (losses)	(759)	505,187	504,428	632	(154)
10.	Total capital gains (losses)	(9,775,673)	(6,332)	(9,782,005)	(5,688,987)	632
DETAILS OF WRITE-INS						
0901.	Gain on sale-leaseback activity .....	.....	503,918	503,918	.....	.....
0902.	Foreign exchange investments	(759)	1,269	510	632	(154)
0903.	.....	.....	.....	.....	.....	.....
0998.	Summary of remaining write-ins for Line 9 from overflow page .....	.....0	.....0	.....0	.....0	.....0
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	(759)	505,187	504,428	632	(154)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	1,027,244	712,122	(315,122)
3.2 Other than first liens			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income			0
4.3 Properties held for sale			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)	0		0
9. Receivables for securities	818,369	818,369	0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	1,845,613	1,530,491	(315,122)
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued	11,633	11,633	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	8,263	2,653,217	2,644,954
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			0
16.2 Funds held by or deposited with reinsured companies			0
16.3 Other amounts receivable under reinsurance contracts			0
17. Amounts receivable relating to uninsured plans	67,855,416	37,537,768	(30,317,648)
18.1 Current federal and foreign income tax recoverable and interest thereon			0
18.2 Net deferred tax asset	25,563,186	20,958,645	(4,604,541)
19. Guaranty funds receivable or on deposit			0
20. Electronic data processing equipment and software			0
21. Furniture and equipment, including health care delivery assets	50,433,687	22,402,820	(28,030,867)
22. Net adjustment in assets and liabilities due to foreign exchange rates			0
23. Receivable from parent, subsidiaries and affiliates			0
24. Health care and other amounts receivable	56,893,060	71,251,418	14,358,358
25. Aggregate write-ins for other-than-invested assets	48,519,491	71,020,434	22,500,943
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	251,130,349	227,366,426	(23,763,923)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. Total (Lines 26 and 27)	251,130,349	227,366,426	(23,763,923)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501. Intangibles	27,584,694	53,119,074	25,534,380
2502. Prepaid expenses	17,127,453	15,123,785	(2,003,668)
2503. Other miscellaneous accounts receivable	3,807,344	2,777,575	(1,029,769)
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	48,519,491	71,020,434	22,500,943

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations	588,107	587,965	580,677	581,286	579,095	7,020,107
2. Provider Service Organizations						
3. Preferred Provider Organizations	1,271,552	1,335,198	1,339,486	1,345,405	1,344,116	16,068,425
4. Point of Service	306	1,886	1,837	1,891	1,882	22,482
5. Indemnity Only	77,018	76,417	76,947	76,661	76,321	919,383
6. Aggregate write-ins for other lines of business.....	299,662	323,987	322,159	327,944	328,493	3,904,022
7. Total	2,236,645	2,325,453	2,321,106	2,333,187	2,329,907	27,934,419
DETAILS OF WRITE-INS						
0601. Consumer Driven Health Plans	289,590	313,354	311,412	317,337	317,990	3,776,113
0602. Supplemental Health Products	10,072	10,633	10,747	10,607	10,503	127,909
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	299,662	323,987	322,159	327,944	328,493	3,904,022

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Community Insurance Company (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 Insurance Department (the “Department”). The Company employed no permitted practices in preparing the accompanying statutory financial statements.

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

	SSAP #	F/S Page	F/S Line #	2024	2023
<u>Net Income</u>					
(1) Community Insurance Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 276,069,085	\$ 517,285,621
(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	\$ 276,069,085	\$ 517,285,621
<u>Surplus</u>					
(5) Community Insurance Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$1,378,844,790	\$1,617,516,394
(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	\$1,378,844,790	\$1,617,516,394

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

Preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policies

Health premiums are earned over the term of the related insurance policies and reinsurance contracts. Premiums written are reported net of excess loss reinsurance ceded and experience rating refunds. Unearned premium reserves are established to cover the unexpired portion of premiums written and are computed by pro rata methods for direct business and based on reports received from ceding companies for reinsurance. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period. Premium rates for certain lines of business are subject to approval by

NOTES TO FINANCIAL STATEMENTS

the Department or the Center for Medicare and Medicaid Services. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. All other costs, including underwriting expenses, are charged to operations as incurred.

The Company provides administrative services to various customers on an uninsured basis. Under these arrangements, the customer retains the risk of funding payments for health benefits provided, and the Company may be subject to credit risk of the customer from the time of the Company's claim payment until the Company receives the claim reimbursement. In accordance with SSAP No. 47, *Uninsured Plans*, these claims payments and subsequent reimbursements are excluded from the Company's statutory statement of revenue and expenses. Administrative fees for administering these arrangements are recognized as administrative services are performed and recorded as a reduction to general administrative expenses.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments with maturities of less than one year and more than three months at the date of acquisition and are reported at amortized cost, which approximates fair value. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (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 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.
- (3) Common stocks of unaffiliated companies are stated at fair value based upon security ratings prescribed by various third-party pricing sources.
- (4) Redeemable preferred stocks of unaffiliated companies of highest and high quality are stated at cost or amortized cost, and all other redeemable preferred stock are reported at lower of cost, amortized cost or fair value. Perpetual preferred stocks are carried at fair value, not to exceed any currently effective call prices.
- (5) Investments in residual tranche bonds or preferred stocks are reported at the lower of cost or fair value.
- (6) Mortgage loans held for investment are reported on the balance sheet at their amortized cost basis, which is the amount at which the loan is originated, adjusted for accrued interest, amortization of premium, discount and net deferred fees or costs, collection of cash, and write-offs.
- (7) Loan-backed securities are stated at amortized cost. Prepayment 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.
- (8) The Company has no investments in subsidiaries, controlled and affiliated companies.
- (9) The Company has ownership interests in unaffiliated joint ventures and limited liability companies. The Company reports these interests as Other Long-Term Invested Assets on Schedule BA. The Company carries these investments at their underlying GAAP equity value. The Company reports the net change in the equity, excluding changes in capital contributions and distributions received in excess of undistributed earnings, as a change in net unrealized capital gains and losses in unassigned surplus.
- (10) The Company has no derivative instruments.
- (11) The Company recognizes losses from other-than-temporary impairments ("OTTI") of investments in accordance with Statements of Standard Accounting Practice ("SSAP") No. 26, *Bonds*; and SSAP No. 30, *Common Stock*; and SSAP No. 32, *Preferred Stock*.

NOTES TO FINANCIAL STATEMENTS

- (12) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (13) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions and other factors that may materially affect the cost, frequency and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- (14) The Company has not modified its capitalization policy from the prior period.
- (15) Pharmacy rebate receivables are recorded when earned based upon actual rebate receivables billed and an estimate of receivables based upon current utilization of specific pharmaceuticals and provider contract terms.
- (16) Service fees earned from providing administrative services to self-insured customers are deducted from operating expenses, and related claim payments and subsequent reimbursements of those claim payments are excluded from net income.
- (17) The Company records a liability for future policy benefits relating to certain Medicare supplement and individual product contracts. The liability represents the present value of future benefits to be paid to or on behalf of policy holders and related expenses less the present value of future net premiums. Changes in the liability for future benefits are reported as a component of net income in the period in which the change occurs.
- (18) The Company sells policies where premiums vary based on loss experience or premium stabilization programs. Retrospectively rated refunds include minimum medical loss ratio ("MLR") rebates per the Affordable Care Act ("ACA"). Risk adjustment programs transfer premiums from insurers that enroll members with relatively lower health risks to insurers that enroll members with relatively higher health risks. Reserves for rate credits, risk adjustment programs or policy rating refunds are reported in aggregate policy reserves. Accrued retrospective premiums are reported in premiums receivable.
- (19) Premium under the Federal Employee Program ("FEP") is earned when chargeable benefit costs, allowable expenses and retentions are incurred. Deferred premiums are recorded to offset the FEP liabilities for incurred claims but not reported and claims adjustment expenses that are due from the Office of Personnel Management ("OPM") when the claims are ultimately paid.
- (20) For investments in corporate-owned life insurance ("COLI"), the amount that could be realized on a life insurance policy as of the date to which premiums have been paid is reported as an admitted asset. The change in the cash surrender value, or contract value, of COLI during the period is treated as income.
- (21) A discount rate is applied to guaranty fund liabilities and assets related to assessments from insolvencies of entities that wrote long-term care contracts.
- (22) Investments in non-rated residual tranches in bonds are reported as other invested assets valued on Schedule BA at the lower of cost or fair value.

D. Going Concern

Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

2. Accounting Changes and Corrections of Errors

Effective January 1, 2023, the Company adopted GAAP Accounting Standard Update (ASU) Number 2020-11 and 2018-18, *Targeted Improvements to the Accounting for Long-Duration Contracts*. The adoption of this new GAAP accounting guidance resulted in a reduction in GAAP active life reserves for Medicare Supplement products, which were previously used for statutory reporting purposes as the GAAP calculated reserves exceeded statutory reserve minimums. These reserves are now below the reserves required under NAIC SAP, therefore, the calculation for statutory active life reserves has been updated for these products to use the prescribed two-year preliminary term methodology. The financial impact of moving from the previous net level premium to the current two-year preliminary term method is \$660,333 increase in Aggregate Health Policy Reserves at January 1, 2023. This change in reserving methodology represents a change in accounting principle and was recorded to unassigned surplus in accordance with SSAP 3, *Accounting Changes and Corrections of Errors*.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

Not applicable.

4. Discontinued Operations

The Company had no operations that were discontinued during 2024 or 2023.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) The maximum and minimum lending rates for mortgage loans during 2024 were:

Farm loans 0.0% and 0.0%, City loans 0.0% and 0.0%, Purchase money mortgages 7.6% and 4.1%.

(2) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgages was: 83.9%

	Current Year	Prior Year
(3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total:	\$ —	\$ —

NOTES TO FINANCIAL STATEMENTS

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is Participant or Co-lender in a Mortgage Loan Agreement:

		Farm	Residential		Commercial		Mezzanine	Total			
			Insured	All Other	Insured	All Other					
a. Current Year											
1.	Recorded Investment (All)										
	(a) Current	\$	—	\$	—	\$	258,068,528	\$	—	\$	258,068,528
	(b) 30-59 Days Past Due		—		—		—		—		—
	(c) 60-89 Days Past Due		—		—		—		—		—
	(d) 90-179 Days Past Due		—		—		—		—		—
	(e) 180+ Days Past Due		—		—		—		—		—
2.	Accruing Interest 90-179 Days Past Due										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Interest Accrued		—		—		—		—		—
3.	Accruing Interest 180+ Days Past Due										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Interest Accrued		—		—		—		—		—
4.	Interest Reduced										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Number of Loans		—		—		—		—		—
	(c) Percent Reduced		— %		— %		— %		— %		— %
5.	Participant or Co-lender in a Mortgage Loan Agreement										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
b. Prior Year											
1.	Recorded Investment (All)										
	(a) Current	\$	—	\$	—	\$	212,575,000	\$	—	\$	212,575,000
	(b) 30-59 Days Past Due		—		—		—		—		—
	(c) 60-89 Days Past Due		—		—		—		—		—
	(d) 90-179 Days Past Due		—		—		—		—		—
	(e) 180+ Days Past Due		—		—		—		—		—
2.	Accruing Interest 90-179 Days Past Due										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Interest Accrued		—		—		—		—		—
3.	Accruing Interest 180+ Days Past Due										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Interest Accrued		—		—		—		—		—
4.	Interest Reduced										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
	(b) Number of Loans		—		—		—		—		—
	(c) Percent Reduced		— %		— %		— %		— %		— %
5.	Participant or Co-lender in a Mortgage Loan Agreement										
	(a) Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—

NOTES TO FINANCIAL STATEMENTS

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan:

Farm	Residential		Commercial		Mezzanine	Total
	Insured	All Other	Insured	All Other		

a. Current Year

1. With Allowance for Credit Losses	\$	—	\$	—	\$	—	\$	—	\$	—
2. No Allowances for Credit Losses		—		—		—		—		—
3. Total (1+2)		—		—		—		—		—
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan.		—		—		—		—		—

b. Prior Year

1. With Allowance for Credit Losses	\$	—	\$	—	\$	—	\$	—	\$	—
2. No Allowances for Credit Losses		—		—		—		—		—
3. Total (1+2)		—		—		—		—		—
4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan.		—		—		—		—		—

(6) Investment in Impaired Loans - Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

Farm	Residential		Commercial		Mezzanine	Total
	Insured	All Other	Insured	All Other		

a. Current Year

1. Average Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
2. Interest Income Recognized		—		—		—		—		—
3. Recorded Investments on Nonaccrual Status		—		—		—		—		—
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting		—		—		—		—		—

b. Prior Year

1. Average Recorded Investment	\$	—	\$	—	\$	—	\$	—	\$	—
2. Interest Income Recognized		—		—		—		—		—
3. Recorded Investments on Nonaccrual Status		—		—		—		—		—
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting		—		—		—		—		—

(7) Allowance for Credit Losses:

	Current Year		Prior Year	
a. Balance at beginning of period	\$	—	\$	—
b. Additions charged to operations	\$	—	\$	—
c. Direct write-downs charged against the allowances	\$	—	\$	—
d. Recoveries of amounts previously charged off	\$	—	\$	—
e. Balance at end of period	\$	—	\$	—

NOTES TO FINANCIAL STATEMENTS

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

		Current Year
a. Aggregate amount of mortgage loans derecognized	\$	—
b. Real estate collateral recognized	\$	—
c. Other collateral recognized	\$	—
d. Receivables recognized from a government guarantee of the foreclosed mortgage loan	\$	—

(9) The company recognizes interest income on its impaired loans upon receipt.

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at December 31, 2024 or 2023.

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at December 31, 2024 or 2023.

D. Loan-Backed Securities

- (1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize OTTI on its loan-backed securities during the years ended December 31, 2024 and 2023.
- (3) The Company did not recognize OTTI on its loan-backed securities at December 31, 2024 and 2023.
- (4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:		
	1. Less than 12 Months	\$ (4,636,739)
	2. 12 Months or Longer	\$ (35,619,841)
b. The aggregate related fair value of securities with unrealized losses:		
	1. Less than 12 Months	\$ 216,927,918
	2. 12 Months or Longer	\$ 282,919,795

(5) The Company’s bond portfolio is sensitive to interest rate fluctuations, which impact the fair value of individual securities. Unrealized losses on bonds were primarily caused by the effects of the interest rate environment and the widening of credit spreads on certain securities. The Company currently has the ability and intent to hold these securities until their full cost can be recovered. Therefore, the Company does not believe the unrealized losses represent an OTTI at December 31, 2024 or 2023.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) The Company did not enter into repurchase agreements at December 31, 2024 or 2023.

NOTES TO FINANCIAL STATEMENTS

(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 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	\$	181,064,638
(b) 30 days or less		—
(c) 31 to 60 days		—
(d) 61 to 90 days		—
(e) Greater than 90 days		—
(f) Sub-total	\$	181,064,638
(g) Securities received		41,313,456
(h) Total collateral received	\$	<u>222,378,094</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>222,378,094</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) Not applicable.

(5) Collateral Reinvestment

a. Aggregate amount collateral reinvested

1. Securities Lending	<u>Amortized Cost</u>	<u>Fair Value</u>
(a) Open	\$ —	\$ —
(b) 30 days or less	71,086,104	71,096,663
(c) 31 to 60 days	47,183,605	47,190,144
(d) 61 to 90 days	4,236,798	4,236,444
(e) 91 to 120 days	30,547,311	30,548,932
(f) 121 to 180 days	16,910,410	16,923,041
(g) 181 to 365 days	11,100,410	11,104,681
(h) 1 to 2 years	—	—
(i) 2 to 3 years	—	—
(j) Greater than 3 years	—	—
(k) Sub-total	181,064,638	181,099,905
(l) Securities received	41,313,456	41,313,456
(m) Total collateral reinvested	<u>\$ 222,378,094</u>	<u>\$ 222,413,361</u>

2. Dollar repurchase agreement - Not applicable.

b. Not applicable.

(6) Not applicable.

NOTES TO FINANCIAL STATEMENTS

(7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at December 31, 2024 or 2023.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) The Company participates in overnight bilateral reverse repurchase agreements, which provide cash in exchange for a U.S. Treasury (or other high-quality collateral) with an initial fair value equal to at least 102% of the amount lent. If the fair value of the collateral falls below 100%, the counterparty is required to provide additional collateral, to bring the fair value back to at least 102%.

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	YES	YES	YES	YES
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1 Open - No Maturity	\$ —	\$ —	\$ —	\$ —
2 Overnight	\$ 7,300,000	\$ 30,500,000	\$ 21,200,000	\$ 64,600,000
3 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4 >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5 >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6 >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7 >1 Year	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1 Open - No Maturity	\$ —	\$ —	\$ —	\$ —
2 Overnight	\$ —	\$ —	\$ 3,700,000	\$ 4,900,000
3 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4 >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5 >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6 >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7 >1 Year	\$ —	\$ —	\$ —	\$ —

(4) Aggregate Narrative Disclosure of Fair Value of Securities Sold and/or Acquired That Resulted in Default

Not applicable.

(5) Fair Value of Securities Acquired Under Repo-Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount	\$ 7,401,438	\$ 31,160,637	\$ 21,278,210	\$ 65,412,943
b. Ending Balance	\$ —	\$ —	\$ 3,789,696	\$ 4,959,110

NOTES TO FINANCIAL STATEMENTS

(6) Securities Acquired Under Repo - Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. Bonds - FV	\$ —	\$ 4,959,110	\$ —	\$ —
b. LB & SS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ 4,959,110	\$ —	\$ —

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
a. Bonds - FV	\$ —	\$ —	\$ —	\$ —
b. LB & SS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ —	\$ —	\$ —

(7) Collateral Pledged - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1 Cash	\$ 7,300,000	\$ 30,500,000	\$ 21,200,000	\$ 64,600,000
2 Securities (FV)	\$ —	\$ —	\$ —	\$ —
3 Securities (BACV)	XXX	XXX	XXX	XXX
4 Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1 Cash	\$ —	\$ —	\$ 3,700,000	\$ 4,900,000
2 Securities (FV)	\$ —	\$ —	\$ —	\$ —
3 Securities (BACV)	\$ —	\$ —	\$ —	\$ —
4 Nonadmitted Subset (BACV)	\$ —	\$ —	\$ —	\$ —

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous	\$ 4,900,000	\$ 4,959,110
b. 30 Days or Less	\$ —	\$ —
c. 31 to 90 Days	\$ —	\$ —
d. >90 Days	\$ —	\$ —

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

(9) Recognized Receivable for Return of Collateral - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1 Cash	\$ —	\$ —	\$ —	\$ —
2 Securities (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1 Cash	\$ —	\$ —	\$ —	\$ —
2 Securities (FV)	\$ —	\$ —	\$ —	\$ —

(10) Recognized Liability to Return Collateral - Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1 Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2 Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1 Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2 Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at December 31, 2024 or 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 December 31, 2024 or 2023.

J. Real Estate

The Company did not have investments in real estate and did not engage in retail land sales operations during 2024 or 2023.

K. Investments in Low-Income Housing Tax Credits

The Company did not invest in properties generating low-income housing tax credits during 2024 or 2023.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted assets (including pledged)

		1	2	3	4	5	6	7
Restricted Asset Category		Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a.	Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	— %	— %
b.	Collateral held under security lending agreements	222,378,094	162,618,335	59,759,759	—	222,378,094	5.41 %	5.76 %
c.	Subject to repurchase agreements	—	—	—	—	—	— %	— %
d.	Subject to reverse repurchase agreements	4,900,000	2,900,000	2,000,000	—	4,900,000	0.12 %	0.13 %
e.	Subject to dollar repurchase agreements	—	—	—	—	—	— %	— %
f.	Subject to dollar reverse repurchase agreements	—	—	—	—	—	— %	— %
g.	Placed under option contracts	—	—	—	—	—	— %	— %
h.	Letter stock or securities restricted as to sale-excluding FHLB capital stock	—	—	—	—	—	— %	— %
i.	FHLB capital stock	9,599,100	2,480,800	7,118,300	—	9,599,100	0.23 %	0.25 %
j.	On deposit with states	4,128,798	4,237,666	(108,868)	—	4,128,798	0.10 %	0.11 %
k.	On deposit with other regulatory bodies	—	—	—	—	—	— %	— %
l.	Pledged as collateral to FHLB (including assets backing funding agreements)	227,356,002	255,026,294	(27,670,292)	—	227,356,002	5.53 %	5.89 %
m.	Pledged as collateral not captured in other categories	—	—	—	—	—	— %	— %
n.	Other restricted assets	—	—	—	—	—	— %	— %
o.	Total Restricted Assets	\$ 468,361,994	\$ 427,263,095	\$ 41,098,899	\$ —	\$468,361,994	11.39 %	12.14 %

(a) Column 1 divided by Asset Page, Column 1, Line 28
(b) Column 5 divided by Asset Page, Column 3, Line 28

(2) Not applicable.

(3) Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

(4) Collateral Received and Reflected as Assets Within the Reporting Entity’s Financial Statements

Collateral Assets	1	2	3	4
	Book/Adjusted Carrying Value (BACV)	Fair Value	% of BACV to Total Assets (Admitted and Nonadmitted*)	% of BACV to Total Admitted Assets **
a. Cash	\$ —	\$ —	— %	— %
b. Schedule D, Part 1	—	—	—	—
c. Schedule D, Part 2 Section 1	—	—	—	—
d. Schedule D, Part 2 Section 2	—	—	—	—
e. Schedule B	—	—	—	—
f. Schedule A	—	—	—	—
g. Schedule BA, Part 1	—	—	—	—
h. Schedule DL, Part 1	222,378,094	222,413,361	5.41 %	5.76 %
i. Other	—	—	—	—
j. Total Collateral Assets (a+b+c+d+e+f+g+h+i)	\$ 222,378,094	\$222,413,361	5.41 %	5.76 %

* Column 1 divided by Asset Page, Line 26 (Column 1)

** Column 1 divided by Asset Page, Line 26 (Column 3)

	<u>1</u>	<u>2</u>
	<u>Amount</u>	<u>% of Liability to Total Liabilities *</u>
k. Recognized Obligation to Return Collateral Asset	\$ 222,378,094	8.95 %

* Column 1 divided by Liability Page, Line 24 (Column 3)

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at December 31, 2024 and 2023.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at December 31, 2024 and 2023.

O. 5GI Securities

The Company has no 5GI Securities as of December 31, 2024 and 2023.

P. Short Sales

The Company did not have any short sales at December 31, 2024 and 2023.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

Q. Prepayment Penalty and Acceleration Fees

	General Account
(1) Number of CUSIPs	7
(2) Aggregate Amount of Investment Income \$	44,059

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

The Company did not participate in a cash pool at December 31, 2024 or 2023.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

The Company did not have any aggregate collateral loans with qualifying investment collateral at December 31, 2024 or 2023.

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in joint ventures, partnerships or limited liability companies that exceeded 10% of its admitted assets at December 31, 2024 or 2023.
- B. The Company did not recognize any impairment write downs for its investments in joint ventures, partnerships, or limited liability companies during 2024 or 2023.

7. Investment Income

- A. All investment income due and accrued with amounts that are over 90 days past due is non-admitted.
- B. At December 31, 2024 and 2023 there was \$11,633 and \$11,633 of nonadmitted accrued investment income, respectively.
- C. At December 31, 2024 and 2023 the gross, nonadmitted and admitted amounts for interest income due and accrued are as follows:

Interest Income Due and Accrued	2024	2023
1. Gross	\$ 18,686,047	\$ 16,520,888
2. Nonadmitted	\$ 11,633	\$ 11,633
3. Admitted	\$ 18,674,414	\$ 16,509,255

- D. At December 31, 2024 and 2023 the Company had no aggregate deferred interest.
- E. At December 31, 2024 and 2023 the Company had cumulative amounts of paid-in-kind (“PIK”) interest included in the current principal balance as follows:

	2024	2023
Cumulative amounts of PIK interest included in the current principal balance	\$ 44,026	\$ 20,844

8. Derivative Instruments

The Company has no derivative instruments.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

A. The components of net deferred tax assets (liabilities):

(1) The components of net deferred tax asset (liabilities) are as follows:

12/31/2024			
(1)	(2)	(3)	
Ordinary	Capital	(Col 1+2) Total	
(a) Gross Deferred Tax Assets	\$ 136,199,087	\$ 1,050,695	\$ 137,249,782
(b) Statutory Valuation Allowance Adjustments	—	—	—
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	136,199,087	1,050,695	137,249,782
(d) Deferred Tax Assets Nonadmitted	25,563,186	—	25,563,186
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	110,635,901	1,050,695	111,686,596
(f) Deferred Tax Liabilities	1,060,131	3,915,682	4,975,813
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 109,575,770	\$ (2,864,987)	\$ 106,710,783

12/31/2023			
(4)	(5)	(6)	
Ordinary	Capital	(Col 4+5) Total	
(a) Gross Deferred Tax Assets	\$ 105,850,533	\$ —	\$ 105,850,533
(b) Statutory Valuation Allowance Adjustments	—	—	—
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	105,850,533	—	105,850,533
(d) Deferred Tax Assets Nonadmitted	20,958,645	—	20,958,645
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	84,891,888	—	84,891,888
(f) Deferred Tax Liabilities	573,397	5,419,305	5,992,702
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 84,318,491	\$ (5,419,305)	\$ 78,899,186

Change			
(7)	(8)	(9)	
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total	
(a) Gross Deferred Tax Assets	\$ 30,348,554	\$ 1,050,695	\$ 31,399,249
(b) Statutory Valuation Allowance Adjustments	—	—	—
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	30,348,554	1,050,695	31,399,249
(d) Deferred Tax Assets Nonadmitted	4,604,541	—	4,604,541
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	25,744,013	1,050,695	26,794,708
(f) Deferred Tax Liabilities	486,734	(1,503,623)	(1,016,889)
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 25,257,279	\$ 2,554,318	\$ 27,811,597

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

(2) The amount of admitted adjusted gross deferred tax assets under each component of SSAP No. 101, *Income Taxes* (“SSAP No. 101”) are as follows:

12/31/2024			
(1)	(2)	(3)	
Ordinary	Capital	(Col 1+2)	Total
Admission Calculation Components SSAP No. 101			
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 104,126,142	\$ —	\$ 104,126,142
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	2,584,641	—	2,584,641
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	2,584,641	—	2,584,641
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	190,820,101
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	3,925,118	1,050,695	4,975,813
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 110,635,901	\$ 1,050,695	\$ 111,686,596

12/31/2023		
(4)	(5)	(6)
Ordinary	Capital	(Col 4+5) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 76,384,088	\$ —	\$ 76,384,088
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	2,515,098	—	2,515,098
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	2,515,098	—	2,515,098
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	230,792,581
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	5,992,702	—	5,992,702
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 84,891,888	\$ —	\$ 84,891,888

Change		
(7)	(8)	(9)
(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 27,742,054	\$ —	\$ 27,742,054
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	69,543	—	69,543
1. Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	69,543	—	69,543
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	(39,972,480)
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	(2,067,584)	1,050,695	(1,016,889)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 25,744,013	\$ 1,050,695	\$ 26,794,708

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

(3)		2024	2023
(a)	Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	368.25 %	482.84 %
(b)	Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 1,272,134,007	\$ 1,538,617,208

(4)	12/31/2024		12/31/2023		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col 1-3) Ordinary	(Col 2-4) Capital

Impact of Tax-Planning Strategies

(a)	Determination of Adjusted Gross Deferred Tax Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.						
1.	Adjusted Gross DTAs Amount From Note 9A1(c)	\$136,199,087	\$1,050,695	\$105,850,533	\$ —	\$30,348,554	\$1,050,695
2.	Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	— %	— %	— %	— %	— %	— %
3.	Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	\$110,635,901	\$1,050,695	\$84,891,888	\$ —	\$25,744,013	\$1,050,695
4.	Percentage of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	— %	— %	— %	— %	— %	— %
(b)	Does the Company’s tax-planning strategies include the use of reinsurance?			Yes		No	X

B. The Company has no unrecognized deferred tax liabilities at December 31, 2024 and 2023.

C. Current income taxes incurred consist of the following major components:

(1)	(2)	(3)
12/31/2024	12/31/2023	(Col 1-2) Change
(1) Current Income Tax		
(a) Federal	\$ 102,927,171	\$ 176,853,345 \$ (73,926,174)
(b) Foreign	—	—
(c) Subtotal	102,927,171	176,853,345 (73,926,174)
(d) Federal income tax expense on net capital gains	(402,263)	(6,675,829) 6,273,566
(e) Utilization of capital loss carry-forwards	—	—
(f) Other	—	—
(g) Federal and foreign income taxes incurred	\$ 102,524,908	\$ 170,177,516 \$ (67,652,608)

NOTES TO FINANCIAL STATEMENTS

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
(2) Deferred Tax Assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 2,686,577	\$ 2,742,227	\$ (55,650)
(2) Unearned premium reserve	2,930,432	2,916,130	14,302
(3) Policyholder reserves	6,588,339	5,594,052	994,287
(4) Investments	—	—	—
(5) Deferred acquisition costs	2,736,201	2,751,907	(15,706)
(6) Policyholder dividends accrual	—	—	—
(7) Fixed assets	10,353,291	4,531,017	5,822,274
(8) Compensation and benefits accrual	—	—	—
(9) Pension accrual	—	—	—
(10) Receivables - nonadmitted	26,903,433	20,511,104	6,392,329
(11) Net operating loss carry-forward	—	—	—
(12) Tax credit carry-forward	—	—	—
(13) Other	84,000,814	66,804,096	17,196,718
(99) Subtotal (sum of 2a1 through 2a13)	136,199,087	105,850,533	30,348,554
(b) Statutory valuation allowance adjustment	—	—	—
(c) Nonadmitted	25,563,186	20,958,645	4,604,541
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	110,635,901	84,891,888	25,744,013
(e) Capital			
(1) Investments	151,852	—	151,852
(2) Net capital loss carry-forward	898,843	—	898,843
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (2e1+2e2+2e3+2e4)	1,050,695	—	1,050,695
(f) Statutory valuation allowance adjustment	—	—	—
(g) Nonadmitted	—	—	—
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	1,050,695	—	1,050,695
(i) Admitted deferred tax assets (2d + 2h)	\$ 111,686,596	\$ 84,891,888	\$ 26,794,708

	(1)	(2)	(3)
	12/31/2024	12/31/2023	(Col 1-2) Change
(3) Deferred Tax Liabilities:			
(a) Ordinary			
(1) Investments	\$ 1,051,207	\$ —	\$ 1,051,207
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Policyholder reserves	—	—	—
(5) Other	8,924	573,397	(564,473)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	1,060,131	573,397	486,734
(b) Capital			
(1) Investments	799,486	727,378	72,108
(2) Real estate	634,937	529,114	105,823
(3) Other	2,481,259	4,162,813	(1,681,554)
(99) Subtotal (3b1+3b2+3b3)	3,915,682	5,419,305	(1,503,623)
(c) Deferred tax liabilities (3a99 + 3b99)	4,975,813	5,992,702	(1,016,889)
(4) Net deferred tax assets/liabilities (2i - 3c)	\$ 106,710,783	\$ 78,899,186	\$ 27,811,597

The table above includes market discount under deferred tax liabilities as ordinary investments for 2024. Market discount had been netted with capital investments in 2023. This change did not materially impact any amounts presented in the financial statements. The difference of market discount netted with capital investments is immaterial in the prior year presented above.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

D. The Company’s income tax expense and change in deferred income taxes differs from the amount obtained by applying the federal statutory income tax rate of 21% for the year ended December 31 as follows:

	2024	2023
Tax expense computed using federal statutory rate	\$ 79,504,738	\$ 144,367,259
Change in nonadmitted assets	(4,023,470)	(1,583,752)
Tax exempt income and dividend received deduction net of proration	(521,267)	(839,624)
Prior year true-up and adjustments	405,926	(92,925)
Tax settlements and contingencies	(32,131)	(17,859)
Other, net	(4,030,339)	(4,352,689)
Total	<u>\$ 71,303,457</u>	<u>\$ 137,480,410</u>
Federal income taxes incurred	102,524,908	170,177,516
Change in net deferred income taxes	(31,221,451)	(32,697,106)
Total statutory income taxes	<u>\$ 71,303,457</u>	<u>\$ 137,480,410</u>

E. Operating loss carryforwards:

- (1) The Company has no operating loss carryforwards and no corporate alternative minimum tax (“AMT”) credit carryforwards as of December 31, 2024 or 2023.
- (2) The following are income taxes incurred in the current and prior year(s) that will be available for recoupment in the event of future net losses:

	Ordinary	Capital	Total
2024	\$ 101,784,838	\$ —	\$ 101,784,838
2023	167,257,717	—	167,257,717
2022	N/A	—	—

- (3) The Company has no protective tax deposits reported as admitted assets under Section 6603 of the Internal Revenue Service Code as of December 31, 2024 and 2023.

F. The following companies will be included in the consolidated federal income tax return with their parent Elevance Health, Inc. (“Elevance Health”) as of December 31, 2024 and either are current members of the consolidated tax sharing agreement or are in the process of being added to the consolidated tax sharing agreement. Allocation of federal income taxes, including corporate AMT, with affiliates subject to the tax sharing agreement is based upon separate income tax return calculations, including separate corporate AMT calculations, with credit for net operating losses and capital losses that can be used on a consolidated basis. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes. Intercompany income tax balances are settled based on the Internal Revenue Service due dates.

Albion Medical Group of Nevada, P.C.	Colorado State Infusion, Inc.
Albion Medical Partners of California, P.C.	Community Care Health Plan of Kansas, Inc.
Albion Medical Partners of California West, P.C.	Community Care Health Plan of Nebraska, Inc.
Albion Medical Partners of Illinois, S.C.	Community Care Health Plan of Nevada, Inc.
Alliance Care Management, LLC	Community Insurance Company
Amerigroup Mississippi, Inc.	Compcare Health Services Insurance Corporation
Amerigroup Pennsylvania, Inc.	Crossroads Acquisition Corp.
AMGP Georgia Managed Care Company, Inc.	DeCare Analytics, LLC
Anthem Benefits Agency, Inc.	DeCare Dental Health International, LLC
Anthem Blue Cross Life and Health Insurance Company	DeCare Dental Networks, LLC
Anthem Financial, Inc.	DeCare Dental, LLC
Anthem HealthChoice Assurance, Inc.	Designated Agent Company, Inc.
Anthem HealthChoice HMO, Inc.	Elevance Health, Inc

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

Anthem Health Plans of Kentucky, Inc.	Elevance Health Information Technology Services, Inc.
Anthem Health Plans of Maine, Inc.	ELV Holding Company 2, LLC
Anthem Health Plans of New Hampshire, Inc.	ELV Holding Company 3, LLC
Anthem Health Plans of Virginia, Inc.	ELV Holding Company 4, LLC
Anthem Health Plans, Inc.	Federal Government Solutions, LLC
Anthem Holding Corp.	Freedom Health, Inc.
Anthem HP, LLC	Freedom SPV, Inc.
Anthem Insurance Companies, Inc.	Golden West Health Plan, Inc.
Anthem Kentucky Managed Care Plan, Inc.	HaloCare Specialty Therapeutics, LLC
Anthem Southeast, Inc.	Healthkeepers, Inc.
APR, LLC	HealthLink Administrators, Inc.
Arcus Enterprises, Inc.	HealthLink, Inc.
Associated Group, Inc.	HealthSun Health Plan, Inc.
AUMSI UM Services, Inc.	Healthy Alliance Life Insurance Company
Beacon Health Financing, LLC	HMO Colorado, Inc.
Beacon Health Options Holdco, Inc.	HMO Missouri, Inc.
Beacon Health Vista Parent, Inc.	IEC Group Holdings, Inc.
BioPlus Parent, LLC	IEC Group, Inc. d/b/a AmeriBen
BioPlus Specialty Holding Company, LLC	Innovative Pharmacy Services, LLC
BioPlus Specialty Infusion Holdings, Inc.	LDNR Pharmacy, Inc.
BioPlus Specialty Pharmacy Holdings, Inc.	Living Complete Technologies, Inc.
BioPlus Specialty Pharmacy Holdings I, Inc.	Massachusetts Behavioral Health Partnership
BioPlus Specialty Pharmacy Holdings II, Inc.	Matthew Thornton Health Plan, Inc.
BioPlus Specialty Pharmacy, Inc.	Missouri Care, Incorporated
BioPlus Specialty Pharmacy LA, LLC	Nash Holding Company, LLC
Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	National Government Services, Inc.
Blue Cross Blue Shield of Wisconsin	New England Research Institutes, Inc.
Blue Cross of California	Optimum Healthcare, Inc.
Blue Cross of California Partnership Plan, Inc.	OPTIONS Health Care, Inc.
Carebridge Holding Company, LLC	Paragon Healthcare, Inc.
Carelon Behavioral Care, Inc.	Paragon Holding Company, LLC
Carelon Behavioral Health Holdings, Inc.	Paragon Infusion Care Inc.
Carelon Behavioral Health, Inc.	Pathwrite, Inc.
Carelon Behavioral Health IPA, Inc.	PHI Parent, LLC
Carelon Behavioral Health of California, Inc.	RightCHOICE Managed Care, Inc.
Carelon Behavioral Health Strategies IPA, LLC	Rocky Mountain Hospital and Medical Service, Inc.
Carelon Digital Platforms, Inc.	RSV QOZB LTSS, Inc.
Carelon Global Solutions U.S., Inc.	SellCore, Inc.
Carelon Health Federal Services, Inc.	Simply Healthcare Plans, Inc.
Carelon Health, Inc.	Southeast Services, Inc.
Carelon Health IPA of California	State Sponsored Services, Inc.
Carelon Health IPA of New York, Inc.	The Elevance Health Companies, Inc.
Carelon Health of Arizona, Inc.	The Elevance Health Companies of California, Inc.
Carelon Health of California, Inc.	TrustSolutions, LLC
Carelon Health of Nevada, Inc.	WellPoint California Services, Inc.
Carelon Health of New Jersey, Inc.	Wellpoint Corporation
Carelon Health of Pennsylvania, Inc.	Wellpoint Delaware, Inc.
Carelon Health Solutions, Inc.	WellPoint Dental Services, Inc.
Carelon Holdings I, Inc.	Wellpoint District of Columbia, Inc.
Carelon, Inc.	WellPoint Federal Corporation
Carelon Insights, Inc.	WellPoint Health Solutions, Inc.
Carelon Management Services, Inc.	WellPoint Holding Corporation
Carelon Medical Benefits Management, Inc.	Wellpoint Illinois Services, Inc.
Carelon Medical Partners, P.C.	Wellpoint Insurance Company
Carelon Medical Partners of Arizona, P.C.	WellPoint Insurance Services, Inc.
Carelon Medical Partners of Colorado, P.C.	Wellpoint Iowa, Inc.
Carelon Medical Partners of Kansas, P.A.	Wellpoint IPA Holding Company, Inc.
Carelon Medical Partners of New York, P.C.	Wellpoint Life and Health Insurance Company
Carelon Medical Partners of North Carolina, P.C.	Wellpoint Maryland, Inc.
Carelon Medical Partners of Texas, P.A.	Wellpoint National Services, Inc.
Carelon Palliative Care, Inc.	Wellpoint New Jersey, Inc.
Carelon Post Acute Solutions, Inc.	Wellpoint New Mexico, Inc.
Carelon Research, Inc.	Wellpoint Ohio, Inc.
CarelonRx, Inc.	Wellpoint South Carolina, Inc.
CarelonRx Pharmacy, Inc.	Wellpoint Specialty Services, Inc.

NOTES TO FINANCIAL STATEMENTS

Caremax Pharmacy of Loudon, Inc.	Wellpoint Tennessee, Inc.
CareMore Health of Arizona, Inc.	Wellpoint Texas, Inc.
CareMore Health Plan of Texas, Inc.	Wellpoint Washington, Inc.
Centers Plan for Healthy Living LLC	Wellpoint West Virginia, Inc.
Cerulean Companies, Inc.	WestCare, Inc.
Claim Management Services, Inc.	Wisconsin Collaborative Insurance Company

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

(1) On August 16, 2022, the U.S. government enacted the Inflation Reduction Act which includes a new 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 2024.

The Company is an applicable reporting entity, not individually as an unaffiliated corporation, but as a member of a tax-controlled group of corporations. The Company does not expect to be subject to the corporate AMT in 2024.

(2) An accounting policy election has been made to disregard corporate AMT when evaluating the need for a valuation allowance for its regular tax deferred tax assets.

(3) The controlled group of corporations, of which the Company is a member, has not made any material modifications to the methodology used to project the corporate AMT liability.

(4) Does the Company’s tax-planning strategies include the use of corporate AMT?
Yes_____ No X

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

A. Nature of the Relationship

The Company is an Ohio domiciled stock insurance company and is a wholly-owned subsidiary of ATH Holding Company, LLC (“ATH Holding”), which is a wholly-owned subsidiary of Elevance Health, a publicly traded company.

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 \$517,200,000 on August 21, 2024. The Company paid the dividend to its parent company, ATH Holding, on September 6, 2024.

The Board of Directors of the Company declared an ordinary dividend in the amount of \$271,200,000 on August 23, 2023. The Company paid the dividend to its parent company, ATH Holding, on September 5, 2023.

NOTES TO FINANCIAL STATEMENTS

For changes to the intercompany management and service arrangements see Note 10E. The amounts of transactions under such agreements are presented in Schedule Y, Part 2.

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

The Company has no transactions with related parties who are not reported on Schedule Y.

D. Amounts Due to or from Related Parties

At December 31, 2024, the Company reported no amounts due from affiliates. At December 31, 2024, the Company reported \$134,548,753 due to affiliates. At December 31, 2023, the Company reported \$123,679,454 due from affiliates. At December 31, 2023, the Company reported no amounts due to affiliates. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

E. Management and Service Contracts and Cost Sharing Arrangements

The Company has entered into administrative services agreements with its affiliated companies. Pursuant to these agreements, various administrative, management and support services are provided to or provided by the Company. The costs and expenses related to these administrative management and support services are allocated to or allocated by the Company in an amount equal to the direct and indirect costs and expenses incurred in providing these services. Costs include expenses such as salaries, employee benefits, information technology, pharmacy benefits administration, dental benefits management services, health care management services, communications, advertising, consulting services, rent, utilities, billing, accounting, underwriting, and product development, which support the Company's operations. These costs are allocated based on various utilization statistics.

In addition, the Company is party to the Fair Market Value ("FMV") Services Attachment, to the master administrative services agreement with affiliates, the costs and expenses related to certain services including behavioral health, palliative care, utilization management, payment integrity services, subrogation services as well as health and wellness programs are allocated to or allocated by the Company in an amount equal to the fair market value of the services provided. These costs are allocated based on various utilization statistics.

The Company is party to a cash concentration agreement with its affiliated companies. Under this agreement, any of the Company's affiliates may be designated as a cash manager to handle the collection and/or payment of funds on behalf of the Company. Conversely, the Company may be designated as a cash manager to handle the collection and/or payment of funds on behalf of its affiliates. Cash services covered under this agreement include the collection of premiums and other revenue, the collection of benefit and administrative expense reimbursements, the payment of policy benefits, payroll expense, general and administrative expense, and accounts payable disbursements.

There were no changes to the intercompany management and service arrangements, and there were no additional arrangements entered into during 2024 or 2023. The amounts of transactions under such agreements are presented in Schedule Y, Part 2.

F. Guarantees or Contingencies for Related Parties

The Company did not enter into guarantees or undertakings for the benefit of an affiliate which would result in a material contingent exposure of the Company's or any affiliated insurer's assets or liabilities.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

G. Nature of Control Relationships that Could Affect Operations or Financial Position

ATH Holding owns all outstanding shares of the Company. The Company’s ultimate parent is Elevance Health.

H. Amount Deducted for Investment in Upstream Company

The Company and its subsidiary do not own shares of upstream intermediate entities or Elevance Health.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

The Company does not have investments in affiliates greater than 10% of admitted assets.

J. Write-down for Impairments of Investments in Subsidiaries, Controlled or Affiliated ("SCA") Companies

Not applicable.

K. Investment in a Foreign Insurance Subsidiary

The Company does not have investments in foreign insurance subsidiaries.

L. Investment in Downstream Non-insurance Holding Companies

The Company does not have investments in downstream non-insurance holding companies.

M. All SCA Investments

The Company has no SCA Investments.

N. Investment in Insurance SCAs

The Company does not have investments in Insurance SCAs.

O. SCA or SSAP 48 Entity Loss Tracking

The Company does not have losses on investments in Insurance SCAs and/or joint ventures, partnerships or LLCs.

11. Debt

A. Capital Notes and Other Debt

The Company had no capital notes or other debt outstanding at December 31, 2024 and 2023.

B. FHLB (Federal Home Loan Bank) Agreements

(1) The Company is a member of the Federal Home Loan Bank of Cincinnati (“FHLBC”). Through its membership, the Company has conducted business activity (borrowings) with the FHLBC. It is part of the Company’s strategy to utilize these funds as working capital. The Company has determined the actual maximum borrowing capacity as \$186,111,305. The Company calculated this amount in accordance with current FHLBC capital stock.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

(2) FHLB Capital Stock

a. Aggregate Totals

1. Current year

	Total
(a) Membership stock - Class A	\$ —
(b) Membership stock - Class B	2,849,084
(c) Activity stock	6,750,000
(d) Excess stock	16
(e) Aggregate total (a+b+c+d)	\$ 9,599,100
(f) Actual or estimated borrowing capacity as determined by the insurer	\$ 186,111,305

2. Prior year-end

	Total
(a) Membership stock - Class A	\$ —
(b) Membership stock - Class B	2,480,786
(c) Activity stock	—
(d) Excess stock	14
(e) Aggregate total (a+b+c+d)	\$ 2,480,800
(f) Actual or estimated borrowing capacity as determined by the insurer	\$ 213,798,454

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d)

11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

	1	2	Eligible for Redemption			
			3	4	5	6
Membership Stock	Current Year Total (2+3+4+5+6)	Not Eligible for Redemption	Less Than 6 Months	6 Months to Less Than 1 Year	1 to Less Than 3 Years	3 to 5 Years

1. Class A \$ — \$ — \$ — \$ — \$ — \$ —

2. Class B \$ 2,849,084 \$ 2,849,084 \$ — \$ — \$ — \$ —

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1)

11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

NOTES TO FINANCIAL STATEMENTS

(3) Collateral Pledged to FHLB

a. Amount pledged as of reporting date

	1	2	3
	Fair Value	Carrying Value	Aggregate Total Borrowing
1. Current Year Total Collateral Pledged	\$ 198,875,505	\$ 227,356,002	\$ 150,000,000
2. Prior Year-end Total Collateral Pledged	\$ 227,888,166	\$ 255,026,294	\$ —
11B(3)a1 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b1 (Columns 1, 2 and 3 respectively)			
11B(3)a2 (Columns 1, 2 and 3) should be equal to or less than 11B(3)b2 (Columns 1, 2 and 3 respectively)			

b. Maximum amount pledged during reporting period

	1	2	3
	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
1. Current Year Total Maximum Collateral Pledged	\$ 217,818,421	\$ 249,727,848	\$ —
2. Prior Year-end Total Maximum Collateral Pledged	\$ 245,255,703	\$ 272,938,241	\$ —

(4) Borrowing from FHLB

a. Amount as of the reporting date

	Total	Funding Agreements Reserves Established
1. Current year		
(a) Debt	\$ 150,000,000	XXX
(b) Funding agreements	— \$	—
(c) Other	—	XXX
(d) Aggregate total (a+b+c)	\$ 150,000,000	\$ —
2. Prior year-end		
(a) Debt	\$ —	XXX
(b) Funding agreements	— \$	—
(c) Other	—	XXX
(d) Aggregate total (a+b+c)	\$ —	\$ —

b. Maximum amount during reporting period (current year)

	Total
1. Debt	\$ 150,000,000
2. Funding agreements	—
3. Other	—
4. Aggregate total (Lines 1+2+3)	\$ 150,000,000

c. FHLB - Prepayment obligations

	Does the Company have prepayment obligations under the following arrangements (YES/NO)?
1. Debt	NO
2. Funding agreements	NO
3. Other	NO

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

C. All Other Debt

The Company had no other debt outstanding at December 31, 2024 and 2023.

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

A. Defined Benefit Plan

Not applicable - See Note 12G.

B. Not applicable - See Note 12G.

C. Not applicable - See Note 12G.

D. Not applicable - See Note 12G.

E. Defined Contribution Plans

Not applicable - See Note 12G.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

The Company participates in the 401(k) Plan, sponsored by ATH Holding and covering substantially all employees. Voluntary employee contributions are matched by ATH Holding subject to certain limitations. ATH Holding allocates a share of the total accumulated costs of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

The Company participates in a stock incentive compensation plan, sponsored by Elevance Health, providing incentive awards to non-employee directors and employees, consisting of Elevance Health stock options, restricted stock, restricted stock units, stock appreciation rights, performance shares, and performance units. Elevance Health allocates a share of the total share-based compensation expense of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

During 2024 and 2023, the Company was allocated the following costs or (credits) for these retirement benefits:

	2024	2023
Defined contribution plan	\$ 14,950,270	\$ 14,897,728
Stock incentive compensation plan	16,709,632	15,953,059

H. Post Employment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

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

A. Outstanding Shares

As of December 31, 2024, the Company has 750 shares of \$10,000 par value common stock authorized. The number of shares issued and outstanding is 114.23.

B. Preferred Stock

The Company has no preferred stock outstanding.

C. Dividend Restrictions

The maximum amount of dividends which can be paid by State of Ohio insurance companies to shareholders without prior approval of the Insurance Commissioner is subject to restrictions relating to statutory surplus and net income. Within any 12 month period, cumulative dividends may not exceed the greater of 10% of statutory surplus at the prior December 31, or net income for the 12 month period ending at the prior December 31. Also, any dividend paid from other than earned surplus shall be considered an extraordinary dividend.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2025

Within the limitations of (C) above, the Company may pay \$276,069,085 in ordinary dividends during 2025 without restrictions, other than state notification requirements.

F. Unassigned Surplus Restrictions

Unassigned surplus funds are not restricted at December 31, 2024.

G. Mutual Surplus Advances

Not applicable.

H. Company Stock Held for Special Purpose

There are no shares of stock held for special purposes at December 31, 2024.

I. Changes in Special Surplus Funds

The change in balances of special surplus funds from the prior year are due to changes in the amounts segregated for the deferred gain on the Company's sale-leaseback transaction.

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment gains and losses was (\$6,793,467) at December 31, 2024.

K. Surplus Notes

The Company has not issued any surplus notes or debentures or similar obligations.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

L. Restatement due to Prior Quasi-reorganizations

The Company had no restatements due to prior quasi-reorganizations.

M. Quasi-reorganizations over Prior 10 Years

The Company has not been involved in a quasi-reorganization during the past 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

- (1) The Company has a commitment to contribute an additional \$23,179,079, in subsequent years, related to the Company’s investments in joint ventures, limited partnerships and limited liability companies.
- (2) Not applicable.
- (3) Not applicable.

B. Assessments

- (1) The Company is subject to guaranty fund and other assessments by the state(s) in which it writes business. Guaranty fund assessments are accrued at the time of covered insurer insolvencies. Other assessments are accrued at the time the assessment obligation is incurred.
- (2) Guaranty Fund Assets Recognized Reconciliation
- | | | | |
|----|--|----|-----------|
| a. | Guaranty fund assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end | \$ | 1,675,629 |
| b. | Decreases current year: | | |
| | Policy surcharges collected | | — |
| | Policy surcharges charged off | | — |
| | Premium tax offset applied | | 1,675,629 |
| c. | Increases current year: | | |
| | Policy surcharges recognized | | — |
| | Premium tax offset recognized | | — |
| d. | Guaranty fund assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end | \$ | — |

- (3) Not applicable.

C. Gain Contingencies

The Company has no gain contingencies at December 31, 2024 or 2023.

D. Claims-Related Extra Contractual Obligation and the Bad Faith Losses Stemming From Lawsuits

Not applicable.

E. Joint and Several Liabilities

Not applicable.

NOTES TO FINANCIAL STATEMENTS

F. All Other Contingencies***Litigation and regulatory proceedings*****Blue Cross Blue Shield Antitrust Litigation**

Elevance Health, Inc. is a defendant in multiple lawsuits that were initially filed in 2012 against the BCBSA and Blue Cross and/or Blue Shield licensees (the “Blue plans”) across the country. Cases filed in twenty-eight states were consolidated into a single, multi-district proceeding captioned *In re Blue Cross Blue Shield Antitrust Litigation* that is pending in the U.S. District Court for the Northern District of Alabama (the “Court”). Generally, the suits allege that the BCBSA and the Blue plans have conspired to horizontally allocate geographic markets through license agreements, best efforts rules that limit the percentage of non-Blue revenue of each plan, restrictions on acquisitions, rules governing the BlueCard[®] and National Accounts programs and other arrangements in violation of the Sherman Antitrust Act and related state laws. The cases were brought by two putative nationwide classes of plaintiffs, health plan subscribers and providers.

The BCBSA and Blue plans approved a settlement agreement and release with the subscriber plaintiffs (the “Subscriber Settlement Agreement”), which agreement required the Court’s approval to become effective. The Subscriber Settlement Agreement requires the defendants to make a monetary settlement payment and contains certain terms imposing non-monetary obligations including (i) eliminating the “national best efforts” rule in the BCBSA license agreements (which rule limits the percentage of non-Blue revenue permitted for each Blue plan) and (ii) allowing for some large national employers with self-funded benefit plans to request a bid for insurance coverage from a second Blue plan in addition to the local Blue plan.

In November 2020, the Court issued an order preliminarily approving the Subscriber Settlement Agreement, following which members of the subscriber class were provided notice of the Subscriber Settlement Agreement and an opportunity to opt out of the class. A small number of subscribers submitted valid opt-outs by the opt-out deadline.

In August 2022, the Court issued a final order approving the Subscriber Settlement Agreement (the “Final Approval Order”). The Court amended its Final Approval Order in September 2022, further clarifying the injunctive relief that may be available to subscribers who submitted valid opt-outs. The ultimate amount paid by Elevance Health under the Subscriber Settlement Agreement was \$604,000,000.

Four notices of appeal of the Final Approval Order were heard by a panel of the United States Court of Appeals for the Eleventh Circuit (the “Eleventh Circuit”) in September 2023, and the Eleventh Circuit affirmed the Court’s Final Approval Order approving the Subscriber Settlement Agreement in October 2023. Petitions for rehearing were filed by certain appellants in November 2023 and December 2023 and were denied in January 2024. As a result, the Eleventh Circuit issued a mandate terminating the jurisdiction of the Eleventh Circuit in February 2024. In March 2024, Home Depot, one of the appellants, filed a petition for certiorari to the United States Supreme Court (the “Supreme Court”). On the respondents’ request, the Supreme Court granted an extension to respond until May 2024. In April 2024, David Behenna, another appellant, filed a petition for certiorari to the Supreme Court, and the defendants and the subscriber plaintiffs filed briefs in opposition in May 2024. In June 2024, the Supreme Court declined to grant certiorari, exhausting all appellate rights. The Subscriber Settlement Agreement and the defendants’ payment and non-monetary obligations under the Subscriber Settlement Agreement became effective in June 2024, with the request for second Blue plan bid provisions effective in September 2024. The funds held in escrow will be distributed in accordance with the Subscriber Settlement Agreement.

A number of follow-on cases involving entities that opted out of the Subscriber Settlement Agreement have been filed. Those actions are: *Alaska Air Group, Inc., et al. v.*

NOTES TO FINANCIAL STATEMENTS

Anthem, Inc., et al., No. 2:21-cv-01209-AMM (N.D. Ala.); *JetBlue Airways Corp., et al. v. Anthem, Inc., et al.*, No. 2:22-cv-00558-GMB (N.D. Ala.); *Metropolitan Transportation Authority v. Blue Cross and Blue Shield of Alabama et al.*, No. 2:22-cv-00265-RDP (N.D. Ala.) (dismissed without prejudice in June 2023); *Bed Bath & Beyond Inc. v. Anthem, Inc.*, No. 2:22-cv-01256-SGC (N.D. Ala.); *Hoover, et al. v. Blue Cross Blue Shield Association, et al.*, No. 2:22-cv-00261-RDP (N.D. Ala.); and *VHS Liquidating Trust v. Blue Cross of California, et al.*, No. RG21106600 (Cal. Super.). In February 2023, the Court denied the defendants' motion to dismiss based on a statute of limitations defense in *Alaska Air* and *Jet Blue*. In September 2023, the California court presiding over the *VHS* case, upheld its prior order granting in part defendants' motion to strike based on the statute of limitations. Elevance Health intends to continue to vigorously defend these follow-on cases, which they believe are without merit; however, their ultimate outcome cannot be presently determined.

In October 2020, after the Court lifted the stay as to the provider litigation, provider plaintiffs filed a renewed motion for class certification, which defendants opposed. In March 2021, the Court issued an order terminating the pending motion for class certification until the Court determined the standard of review applicable to the providers' claims. In response to that order, the parties filed renewed standard of review motions, and in June 2021, the parties filed summary judgment motions not critically dependent on class certification. In February 2022, the court issued orders (i) granting certain defendants' motion for partial summary judgment against the provider plaintiffs who had previously released claims against such defendants, and (ii) granting the provider plaintiffs' motion for partial summary judgment, determining that *Ohio v. American Express Co.* does not affect the standard of review in this case. In August 2022, the Court issued orders (i) granting in part the defendants' motion regarding the antitrust standard of review, holding that for the period of time after the elimination of the "national best efforts" rule, the rule of reason applies to the provider plaintiffs' market allocation conspiracy claims, and (ii) denying the provider plaintiffs' motion for partial summary judgment on the standard of review, reaffirming its prior holding that the provider groups' boycott claims are subject to the rule of reason. In December 2023, the Court denied defendants' motion for summary judgment on providers' damage claims as time-barred and speculative and provider plaintiffs' motion for partial summary judgment on the defendants' single entity defense due to the existence of genuine issues of material fact. In January 2024, the Court issued orders (i) denying defendants' motion for summary judgment on (a) all claims by certain hospital providers and (b) any claims based on the Blue system's rules other than exclusive services areas or BlueCard and (ii) denying provider plaintiffs' motion for partial summary judgment on defendants' common law trademark claims. Provider plaintiffs' motion for partial summary judgment on defendants' common law trademark claims.

In the third quarter of 2024, the BCBSA, along with individually named Blue plans approved a settlement agreement and release (the "Provider Settlement Agreement") with the provider plaintiffs, and in October 2024 the provider plaintiffs filed a motion for preliminary approval with the Court. The Court granted preliminary approval of the provider settlement on December 4, 2024. If finally approved by the Court, the Provider Settlement Agreement will require defendants to make a monetary settlement payment, Elevance Health's portion of which is estimated to be \$666,000,000, and will contain certain non-monetary terms including (i) expansion of certain opportunities to contract with providers in contiguous service areas, (ii) certain prompt pay commitments, and (iii) various technological enhancements to the BlueCard program. Elevance Health recognized their estimated payment obligation under the Provider Settlement Agreement of \$666,000,000 in September 2024. Providers Plaintiff's motion for class certification remain pending. The Company recorded its portion of the Provider Settlement Agreement in 2024.

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Express Scripts, Inc. Pharmacy Benefit Management Litigation

In March 2016, Elevance Health, Inc. filed a lawsuit against Express Scripts, Inc. (“Express Scripts”), their vendor at the time for pharmacy benefit management services, captioned *Anthem, Inc. v. Express Scripts, Inc.*, in the U.S. District Court for the Southern District of New York (the “District Court”). The lawsuit sought to recover over \$14,800,000,000 in damages for pharmacy pricing that is higher than competitive benchmark pricing under the agreement between the parties (the “ESI Agreement”), over \$158,000,000 in damages related to operational breaches, as well as various declarations under the ESI Agreement, including that Express Scripts: (i) breached its obligation to negotiate in good faith and to agree in writing to new pricing terms (the “Pricing Claim”); (ii) was required to provide competitive benchmark pricing to Elevance Health through the term of the ESI Agreement; (iii) has breached the ESI Agreement; and (iv) is required under the ESI Agreement to provide post-termination services, at competitive benchmark pricing, for one year following any termination.

Express Scripts has disputed Elevance Health’s contractual claims and it sought declaratory judgments: (i) regarding the timing of the periodic pricing review under the ESI Agreement, and (ii) that it has no obligation to ensure that Elevance Health receives any specific level of pricing, that Elevance Health has no contractual right to any change in pricing under the ESI Agreement and that its sole obligation is to negotiate proposed pricing terms in good faith. In the alternative, Express Scripts claims that Elevance Health has been unjustly enriched by its payment of \$4,675,000,000 at the time they entered into the ESI Agreement. In March 2017, the District Court granted Elevance Health’s motion to dismiss Express Scripts’ counterclaims for (i) breach of the implied covenant of good faith and fair dealing, and (ii) unjust enrichment with prejudice. After such ruling, Express Scripts’ only remaining claims were for breach of contract and declaratory relief. In August 2021, Express Scripts filed a motion for summary judgment, which Elevance Health opposed. In March 2022, the District Court granted in part and denied in part Express Scripts’ motion for summary judgment. The District Court dismissed Elevance Health’s declaratory judgment claim, Elevance Health’s breach of contract claim for failure to prove damages and most of Elevance Health’s operational breach claims. As a result of the summary judgment decision, the only remaining claims as of the filing of this Annual Report are (i) Elevance Health’s operational breach claim based on Express Scripts’ prior authorization processes and (ii) Express Scripts’ counterclaim for breach of the market check provision of the ESI Agreement. Express Scripts filed a second motion for summary judgment in June 2022, challenging Elevance Health’s remaining operational breach claims, which the District Court denied in March 2023. In November 2023, the District Court issued a final judgment ending the lawsuit in the District Court after the parties settled and stipulated to dismiss the only remaining claim that had not been disposed of by the court order or stipulation. In December 2023, Elevance Health filed a notice of appeal with the United States Court of Appeals for the Second Circuit, regarding the Pricing Claim. Mediation ordered by the Second Circuit occurred in March 2024 and was unsuccessful. Oral argument before the Second Circuit was held in October 2024. In November 2024, the Court affirmed the trial court’s decision dismissing the case. A motion for rehearing was submitted which was denied. The matter is now closed.

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice (“DOJ”) filed a civil lawsuit against Elevance Health, Inc. in the District Court in a case captioned *United States v. Anthem, Inc.* The DOJ’s suit alleges, among other things, that Elevance Health falsely certified the accuracy of the diagnosis data they submitted to the Centers for Medicare and Medicaid Services (“CMS”) for risk-adjustment purposes under Medicare Part C and knowingly failed to delete inaccurate diagnosis codes. The DOJ further alleges that, as a result of these purported acts, Elevance Health caused CMS to calculate the risk-adjustment payments based on inaccurate diagnosis information, which enabled Elevance Health to obtain unspecified amounts of payments in Medicare funds in violation of the False

NOTES TO FINANCIAL STATEMENTS

Claims Act. The DOJ filed an amended complaint in July 2020, alleging the same causes of action but revising some of its factual allegations. In September 2020, Elevance Health filed a motion to transfer the lawsuit to the Southern District of Ohio, a motion to dismiss part of the lawsuit, and a motion to strike certain allegations in the amended complaint, all of which the District Court denied in October 2022. In November 2022, Elevance Health filed an answer. In March 2023, discovery commenced, and an initial case management conference was held in April 2023. Fact discovery is ongoing. In December 2024, the District Court issued a scheduling order setting the deadlines for the completion of fact discovery in August 2025 and April 2026 for the completion of expert discovery. Elevance Health intends to continue to vigorously defend this suit, which they believe is without merit; however, the ultimate outcome cannot be presently determined.

Other Contingencies

From time to time, the Company and certain of its subsidiaries are parties to various legal proceedings, many of which involve claims for coverage encountered in the ordinary course of business. The Company, like Health Maintenance Organizations (“HMOs”) and health insurers generally, exclude certain healthcare and other services from coverage under their HMO, Preferred Provider Organizations and other plans. The Company is, in the ordinary course of business, subject to the claims of their enrollees arising out of decisions to restrict or deny reimbursement for uncovered services. The loss of even one such claim, if it results in a significant punitive damage award, could have a material adverse effect on the Company. In addition, the risk of potential liability under punitive damage theories may increase significantly the difficulty of obtaining reasonable reimbursement of coverage claims.

In addition to the lawsuits described above, the Company is also involved in other pending and threatened litigation of the character incidental to their business and is from time to time involved as a party in various governmental investigations, audits, reviews and administrative proceedings. These investigations, audits, reviews and administrative proceedings include routine and special inquiries by state insurance departments, state attorneys general, the U.S. Attorney General and subcommittees of the U.S. Congress. Such investigations, audits, reviews and administrative proceedings could result in the imposition of civil or criminal fines, penalties, other sanctions and additional rules, regulations or other restrictions on the Company’s business operations. Any liability that may result from any one of these actions, or in the aggregate, could have a material adverse effect on the Company’s consolidated financial position or results of operations.

The Company has no other known material contingencies.

Provisions for uncollectible amounts

At December 31, 2024 and 2023, the Company reported admitted assets of \$997,481,893 and \$917,780,597, respectively, in premium receivables and receivables due from uninsured plans. Based upon the Company’s experience, any uncollectible receivables are not expected to exceed \$67,863,679 that was nonadmitted at December 31, 2024; therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company’s financial condition.

15. Leases**A. Lessee Operating Lease**

- (1) The Company leases office space, office equipment, EDP equipment, and software under various noncancelable operating leases. Related lease expense for 2024 and 2023 was \$3,857,363 and \$2,687,140, respectively.

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The Company reevaluated its future office space needs and determined that it would permanently cease use of space under certain operating leases. At December 31, 2024 and 2023, the Company has lease exit costs liabilities of \$6,644,079 and \$9,872,267, respectively, included in general expenses due or accrued on the balance sheet.

(2) At December 31, 2024, the minimum aggregate rental commitments are as follows:

	Year Ending December 31	Operating Leases
1.	2025	\$ 6,755,279
2.	2026	5,979,310
3.	2027	3,834,056
4.	2028	3,152,739
5.	2029	3,247,321
6.	Thereafter	6,362,328
7.	Total (sum of 1 through 6)	<u>\$ 29,331,033</u>

- (3)
- a. During 2014, the Company entered into a sale-leaseback transaction with an unaffiliated entity to lease the Mason, Ohio building for 12 years.
 - b. Not applicable.

B. Lessor Leases

- (1) The Company has not entered into any operating leases as a lessor.
- (2) The Company has not entered into any leveraged leases.

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

The Company has no significant financial instruments with off-balance sheet risk.

Financial instruments that potentially subject the Company to concentrations of credit risk consist primarily of investment securities. All investment securities are managed by professional investment managers within policies authorized by the board of directors. Such policies limit the amounts that may be invested in any one issuer and prescribe certain investee company criteria. As of December 31, 2024, there were no significant concentrations.

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

A. Transfers of Receivables Reported as Sales

Not applicable at December 31, 2024 and 2023.

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 December 31, 2024 the fair value of securities loaned was \$217,421,006, and the carrying value of securities loaned was \$213,232,599.
- (2) - (7) Not applicable.

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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 December 31, 2024 and 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 ("ASO") Plans

The gain or (loss) from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2024 was:

	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative expenses (including administrative fees) in excess of (less than) actual expenses	\$ 8,426,752	\$ —	\$ 8,426,752
b. Total net other income or expenses (including interest paid to or received from plans)	—	—	—
c. Net gain or (loss) from operations	\$ 8,426,752	\$ —	\$ 8,426,752
d. Total claim payment volume	\$ 1,576,874,175	\$ —	\$ 1,576,874,175

B. Administrative Services Contract ("ASC") Plans

The gain or (loss) from operations from ASC uninsured plans and the uninsured portion of partially insured plans during 2024 was:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred	\$ 8,911,969,386	\$ —	\$ 8,911,969,386
b. Gross administrative fees accrued	547,940,232	—	547,940,232
c. Other income or expenses (including interest paid to or received from plans)	—	—	—
d. Gross expenses incurred (claims and administrative)	(9,379,693,806)	—	(9,379,693,806)
e. Total gain or (loss) from operations	\$ 80,215,812	\$ —	\$ 80,215,812

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

- (1) The Company does not record revenue explicitly attributable to the cost share and reinsurance components of administered Medicare.
- (2)

Receivable from	Related to	2024	2023
Federal government	ACA and Medicare cost sharing and reinsurance programs	\$ 44,971,035	\$ 42,074,537
Uninsured plans	Uninsured business, not including pharmaceutical rebate or provider receivables	\$ 331,066,491	\$ 279,163,239

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

- (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company’s Medicare or similarly structured cost-based reimbursement arrangements, the Company has recorded no allowances and reserves for the adjustment of recorded revenues and receivables.
- (4) The Company has made no adjustment to revenue resulting from the audit of cost-reimbursement receivables related to revenues recorded in the prior period.

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

No premiums were written by managing general agents or third party administrators during the years ended December 31, 2024 and 2023.

20. Fair Value Measurements

- A.
- (1) Fair Value Measurements at Reporting Date:

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Perpetual preferred stock					
Industrial and misc	\$ —	\$ 2,648,564	\$ —	\$ —	\$ 2,648,564
Total perpetual preferred stocks	\$ —	\$ 2,648,564	\$ —	\$ —	\$ 2,648,564
Bonds					
Industrial and misc	\$ —	\$ 10,125,858	\$ 9,197,595	\$ —	\$ 19,323,453
Bank loans	—	1,497,936	—	—	1,497,936
Total bonds	\$ —	\$ 11,623,794	\$ 9,197,595	\$ —	\$ 20,821,389
Common stock					
Industrial and misc	\$ —	\$ 1,149,204	\$ 10,159,742	\$ —	\$ 11,308,946
Total common stocks	\$ —	\$ 1,149,204	\$ 10,159,742	\$ —	\$ 11,308,946
Total assets at fair value/NAV	\$ —	\$ 15,421,562	\$ 19,357,337	\$ —	\$ 34,778,899

- (2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Description	Beginning Balance at 01/01/2024	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2024
a. Assets										
Common Stock										
Industrial and misc	\$2,747,156	—	—	(7,154)	29,113	9,965,389	—	(2,574,762)	—	\$10,159,742
Bonds										
Industrial and misc	10,053,833	—	—	—	277,098	—	—	(1,133,336)	—	9,197,595
Total assets	\$12,800,989	—	—	(7,154)	306,211	9,965,389	—	(3,708,098)	—	\$19,357,337

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

NOTES TO FINANCIAL STATEMENTS

- (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.

Fair values of common and preferred stock are generally designated as Level 1 and are based on quoted market prices. For certain common and preferred stock, quoted market prices for the identical security are not always available and the fair value is estimated by reference to similar securities for which quoted prices are available. These securities are designated as Level 2. Certain equity securities, including private equity securities, for which the fair value is estimated based on each security's current condition and future cash flow projections. Such securities are designated as Level 3. The fair values of these private equity securities are generally based on either broker quotes, or discounted cash flow projections using assumptions for inputs such as the weighted-average cost of capital, long-term revenue growth rates and earnings before interest, taxes, depreciation and amortization, and/or revenue multiples that are not observable in the markets.

Cash equivalents primarily consist of highly rated money market funds or bonds with original maturities of three months or less. Due to the high ratings and short-term nature, these investments are designated as Level 1. The Company also holds bonds purchased with less than three months to maturity. Fair value of these bonds are based on quoted market prices obtained from third party pricing services which generally use Level 1 or Level 2 inputs.

Fair values of investments in residual bond tranches are based on the 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. Certain residual bond tranches are designated Level 3. For these securities, the valuation methodology may incorporate broker quotes or discounted cash flows using internal modeling and assumptions.

Fair Values of mortgage loans on real estate are designated Level 3. The fair values are calculated using discounted cash flows benchmarked against the 10 Year U.S. Treasury plus a market rate spread.

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

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NOTES TO FINANCIAL STATEMENTS

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2024 and 2023.

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	\$1,796,205,018	\$1,837,343,875	\$ —	\$ 1,666,990,933	\$ 129,214,085	\$ —	\$ —
Perpetual preferred stock	2,648,564	2,648,564	—	2,648,564	—	—	—
Unaffiliated common stock	11,308,946	11,308,946	—	1,149,204	10,159,742	—	—
Cash equivalents	4,900,000	4,900,000	—	4,900,000	—	—	—
Securities lending collateral asset	222,413,361	222,378,094	—	222,413,361	—	—	—
Mortgage loans on real estate	237,869,292	257,041,284	—	—	237,869,292	—	—
Residual tranches securities	18,317,995	18,246,994	—	—	18,317,995	—	—

D. Not Practicable to Estimate Fair Value

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

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

A. Unusual or Infrequent Items

Not applicable at December 31, 2024.

A. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2024 and 2023.

B. Other Disclosures

The Company participates in the Federal Employee Health Benefits Program (“FEHBP”) with other Blue Cross Blue Shield Plans. This program includes a fully-insured experience-rated contract, commonly known as the FEP, between the OPM and BCBSA, which acts as an agent for the participating Blue Cross Blue Shield plans. In addition, each participating plan, including the Company, executes a contract with BCBSA which obligates each participating plan to underwrite FEP benefits in its service area.

FEP premium is earned when chargeable benefit costs, allowable expenses or retentions are incurred. Deferred premiums are recorded to offset the FEP liabilities for incurred claims but not reported and claims adjustment expenses that are due from the OPM, when the claims are ultimately paid. Premium rates are developed by BCBSA and negotiated with OPM annually. These rates determine the funds that will be available to the participating Blue Cross Blue Shield plans to provide insurance to Federal employees that enroll with the Blue Cross Blue Shield FEP. The excess of gross premiums for the life of the program over the charges for the life of the program on an accrual basis is accounted for as a rate stabilization reserve (commonly referred to as the special reserve), as required by the contract between OPM and BCBSA. Each year, OPM also allocates a portion of the premiums to a contingency reserve, which may be utilized by the participating plans in the event that annual premiums paid to the insurance carrier are insufficient or the rate stabilization reserve falls below certain levels prescribed by OPM. Premiums paid to the carrier and available to each participating Blue Cross Blue Shield plan, including the special reserve and the contingency reserve, are held at the U.S.

NOTES TO FINANCIAL STATEMENTS

Treasury, including amounts unused from prior periods. Any premiums that remain in the rate stabilization reserve upon termination of the BCBSA contract after the claims run-out and reimbursement of allowable administrative expenses would be returned to OPM for the benefit of the FEHBP. The FEP contract renews automatically each year unless written notice of termination is given by either party.

In accordance with the FEP contract, premium funds that exceed daily operating needs are held on behalf of the Company in letter of credit accounts at the U.S. Treasury to provide funding for claims, administrative expenses, and other charges to the contract. The Company, along with other Blue Cross Blue Shield plans who participate in the FEHBP contract, have an unrestricted right to draw funds being held in the U.S. Treasury, other than those allocated to the contingency reserve, for any valid claim or expense. If the balance of the special reserve is exhausted or falls below certain prescribed levels, OPM will transfer funds from the contingency reserve to the special reserve to the extent that funds are available in the contingency reserve. Amounts incurred in excess of the total reserves held at the U.S. Treasury for the FEP would not be reimbursed to the Company.

A rate stabilization reserve was not required for the Company at December 31, 2024 or 2023.

FEP represented approximately 33.4% and 26.4% of premiums receivable as of December 31, 2024 and 2023, respectively. FEP represented approximately 11.3% and 10.6% of net premiums written for the years ended December 31, 2024 and 2023, respectively.

D. Business Interruption Insurance Recoveries

The Company has reported no recoveries for business interruption for the years ended December 31, 2024 and 2023.

E. State Transferable and Non-Transferable Tax Credits

(1) Carrying value of transferable and non-transferable state tax credits gross of any related tax liabilities and total unused transferable and non-transferable state tax credits by state and in total.

Description of State Transferable and Non-transferable Tax Credits	State	Carrying Value	Unused Amount
Premium Tax Credits	OH	\$ 11,332,959	\$ 11,332,959
Total		\$ 11,332,959	\$ 11,332,959

(2) Method of Estimating Utilization of Remaining Transferable and Non-transferable State Tax Credits

Utilization of remaining transferable state tax credits is estimated based on prior year information and current business trends.

(3) Impairment Loss

There were no impairment losses recognized on state tax credits during the years ended December 31, 2024 or 2023.

(4) State Tax Credits Admitted and Nonadmitted

	Total Admitted	Total Nonadmitted
a. Transferable	\$ —	\$ —
b. Non-transferable	\$ 11,332,959	\$ —

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NOTES TO FINANCIAL STATEMENTS

F. Subprime Mortgage-Related Risk Exposure

- (1) The Company’s investment strategy of providing safety and preservation of capital, sufficient liquidity to meet cash flow requirements and the attainment of a competitive after-tax investment return is supported by a well diversified portfolio consisting of many different types of investments. The portion of the Company’s investment portfolio with subprime mortgage-related risk exposure is relatively small in comparison to the overall investment portfolio, and consists of investment grade securities with no exposure to collateralized debt obligations. All mortgage related investments are monitored closely as part of the quarterly investment review performed by the Elevance Health Investment Impairment Review Committee.
- (2) The Company did not carry investments in subprime mortgage loans in its portfolio at December 31, 2024 or 2023.
- (3) At December 31, 2024, the Company’s subprime mortgage-related risk exposure is detailed below:

	Actual Cost	Book/ Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a. Residential mortgage-backed securities	\$ 6,352,836	\$ 6,281,092	\$ 6,039,280	\$ —
b. Commercial mortgage-backed securities	—	—	—	—
c. Collateralized debt obligations	—	—	—	—
d. Structured securities	—	—	—	—
e. Equity investments in SCAs	—	—	—	—
f. Other assets	—	—	—	—
g. Total	\$ 6,352,836	\$ 6,281,092	\$ 6,039,280	\$ —

- (4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2024 or 2023.

G. Retained Assets

The Company does not have retained assets at December 31, 2024 and 2023.

H. Insurance-Linked Securities Contracts

Not applicable.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

(1) Amount of admitted balance that could be realized from an investment vehicle	\$ 266,374,595
(2) Percentage bonds	6 %
(3) Percentage stocks	5 %
(4) Percentage mortgage loans	— %
(5) Percentage real estate	— %
(6) Percentage cash and short-term investments	2 %
(7) Percentage derivatives	— %
(8) Percentage other invested assets	87 %

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

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22. Events Subsequent

Subsequent events have been considered through February 26, 2025 for the statutory statement issued on February 27, 2025. There were no events occurring subsequent to December 31, 2024 requiring recognition or disclosure.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

(1) Are any of the reinsurers that are listed in Schedule S as non-affiliated owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes () No (X)

If yes, give full details.

(2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled, directly or indirectly, by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

(1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

If yes, give full details.

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

If yes, give full details.

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Section 3 - Ceded Reinsurance Report - Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

(\$7,948,839)

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

Yes () No (X)

If yes, give full details.

B. Uncollectible Reinsurance

The Company has no uncollectible reinsurance at December 31, 2024 and 2023.

C. Commutation of Ceded Reinsurance

The Company has not commuted ceded reinsurance during 2024 and 2023.

D. Certified Reinsurer Rating Downgraded or Status Subject Revocation

The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2024 and 2023.

E. Reinsurance Credit

(1) The Company has the following reinsurance contracts subject to Life and Health Reinsurance Agreements Model Regulation Appendix A-791 (“A-791”) that includes a provision which limits the reinsurer’s assumption of risks, such as a deductible, a loss ratio corridor, a loss cap, or an aggregate limit, as defined in A-791:

Name of Reinsurer	Number of contracts to which such provisions apply	Was Deposit Accounting Applied (Yes or No)
Anthem Insurance Companies, Inc.	1	N

(2) Not applicable.

(3) Not applicable.

(4) Not applicable.

(5) Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. The Company sells accident and health policies for which the premiums vary based on loss experience. The Company estimates retrospective premium adjustments through the review of each retrospectively rated account, comparing the claim development with that anticipated in the policy contracts.

NOTES TO FINANCIAL STATEMENTS

- B.** The Company records accrued retrospective premium as an adjustment to earned premium.
- C.** The amount of net premiums written by the Company at December 31, 2024 and 2023 that were subject to retrospective rating features was \$9,449,995,905 and \$9,097,456,895, respectively, which represented, 92.0% and 92.0%, respectively, of the total net premiums written.
- D.** In accordance with the NAIC SAP, medical loss ratio rebates in accordance with the Federal 2010 Patient Protection and Affordable Care Act and Public Health Service Act (“ACA Act” or “ACA”), are to be reported in accordance with SSAP No. 66 - *Retrospectively Rated Contracts* (“SSAP No. 66”). A retrospectively rated contract is one that has the final policy premium calculated based on the loss experience of the insured during the term of the policy (including loss development after the term of the policy) and the stipulated formula set forth in the policy, or in the case of medical loss ratio rebates, a formula required by law. The Company based the incurred and unpaid liability amounts reported below based on its underwriting experience; actuarial, tax, and accounting estimates and assumptions at the financial statement date; as well as regulations and guidance available that is not final and subject to change prior to settlement. Accordingly, the Company’s use of estimates and assumptions in the preparation of the statutory based financial statements and related footnote disclosures may differ from actual results. Hence, the amounts reported herein are for financial reporting purposes solely and not intended to be used for settlement purposes.

Medical loss ratio rebates accrued pursuant to the ACA Act are as follows:

	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Year Reporting:					
(1) Medical loss ratio rebates incurred	\$ —	\$ 8,885,176	\$ —	\$ (375,639)	\$ 8,509,537
(2) Medical loss ratio rebates paid	—	6,141,602	—	—	6,141,602
(3) Medical loss ratio rebates unpaid	—	7,519,702	—	—	7,519,702
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 7,519,702
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ —	\$14,637,131	\$ 600,214	\$ 775,696	\$ 16,013,041
(8) Medical loss ratio rebates paid	—	8,284,630	—	182,047	8,466,677
(9) Medical loss ratio rebates unpaid	—	13,872,203	600,214	593,649	15,066,066
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 15,066,066

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

E. Risk-Sharing Provisions of the 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)?

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

a. Permanent ACA Risk Adjustment Program

Assets

Premium adjustments receivable due to ACA Risk Adjustment

1. (including high risk pool payments)

\$9,002,069

Liabilities

2. Risk adjustment user fees payable for ACA Risk Adjustment

\$245,636

Premium adjustments payable due to ACA Risk Adjustment (including

3. high risk pool premiums)

\$5,755,139

Operations (Revenue & Expense)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment

\$(2,653,675)

5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)

\$244,942

Line items where the amount is zero is due to no balance and/or no activity as of the reporting date.

- (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.

Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Ref	Unsettled Balances as of the Reporting Date	
				Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
1	2	3	4	5	6	7	8		9	10
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)

a. Permanent ACA Risk Adjustment Program										
1. Premium adjustments receivable (including high risk pool payments)	\$7,804,934	\$—	\$9,378,689	\$—	\$(1,573,755)	\$—	\$1,574,115	\$—	A	\$360
2. Premium adjustments (payable) (including high risk pool premiums)	\$—	\$38,004,373	\$—	\$43,102,984	\$—	\$(5,098,611)	\$—	\$5,098,611	B	\$—
3. Total ACA Permanent Risk Adjustment Program	\$7,804,934	\$38,004,373	\$9,378,689	\$43,102,984	\$(1,573,755)	\$(5,098,611)	\$1,574,115	\$5,098,611		\$360

Explanations of Adjustments

A Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2023 Benefit Year."

B Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2023 Benefit Year."

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 \$80,316,622 during 2024. This is approximately 8.1% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$987,327,488 as of December 31, 2023. 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 2024. 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.

26. Intercompany Pooling Arrangements

Not applicable at December 31, 2024 and 2023.

27. Structured Settlements

Not applicable at December 31, 2024 and 2023.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

NOTES TO FINANCIAL STATEMENTS

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2024	\$ 69,022,099	\$ 191,044,415	\$ 122,022,316	\$ —	\$ —
9/30/2024	\$ 66,724,257	\$ 178,760,557	\$ 168,057,701	\$ —	\$ —
6/30/2024	\$ 62,737,527	\$ 169,877,680	\$ 157,950,057	\$ 11,927,623	\$ —
3/31/2024	\$ 48,363,031	\$ 159,049,655	\$ 146,611,394	\$ 12,438,261	\$ —
12/31/2023	\$ 56,412,712	\$ 152,330,571	\$ 141,405,934	\$ 10,924,637	\$ —
9/30/2023	\$ 61,572,286	\$ 164,705,553	\$ 153,971,497	\$ 10,734,056	\$ —
6/30/2023	\$ 59,750,774	\$ 156,408,364	\$ 145,521,047	\$ 10,887,316	\$ —
3/31/2023	\$ 66,838,755	\$ 150,593,984	\$ 138,483,338	\$ 12,110,646	\$ —
12/31/2022	\$ 55,771,261	\$ 139,506,553	\$ 129,435,672	\$ 10,070,881	\$ —
9/30/2022	\$ 52,050,307	\$ 136,006,211	\$ 125,756,465	\$ 10,249,746	\$ —
6/30/2022	\$ 51,550,942	\$ 137,315,682	\$ 127,541,011	\$ 9,774,671	\$ —
3/31/2022	\$ 53,530,682	\$ 125,153,621	\$ 114,430,986	\$ 10,722,635	\$ —

Note: Amounts within column "Estimated pharmacy rebates as reported on financial statements" include \$9,136,749 of uninsured admitted pharmacy rebate receivables at December 31, 2024 that are reported within Pg 2, Ln 17 "Amounts receivable relating to uninsured plans."

B. Risk Sharing Receivables

Not applicable at December 31, 2024 and 2023.

29. Participating Policies

Not applicable at December 31, 2024 and 2023.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$ 53,227,063
2. Date of the most recent evaluation of this liability	December 31, 2024
3. Was anticipated investment income utilized in the calculation?	Yes No X

The Company had no liabilities related to premium deficiency reserves as of December 31, 2023.

31. Anticipated Salvage and Subrogation

The Company took into account estimated anticipated subrogation and other recoveries in its determination of the liability for unpaid claims and reduced the liability by \$8,345,313 and \$2,796,444 at December 31, 2024 and 2023, respectively.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

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, 1A, 2 and 3.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [X] No [] N/A []

1.3

State Regulating?

Ohio

1.4

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

Yes [X] No []

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0001156039

2.1

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

Yes [] No [X]

2.2

If yes, date of change:

3.1

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

12/31/2022

3.2

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.

12/31/2022

3.3

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).

06/25/2024

3.4

By what department or departments?
Ohio Department of Insurance

3.5

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 [X]

3.6

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

Yes [] No [] N/A [X]

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

Yes [] No [X]
Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

Yes [] No [X]
Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes [] No [X]

5.2

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 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1

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

Yes [] No [X]

6.2

If yes, give full information
.....

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,
7.21 State the percentage of foreign control %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

- 8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes [] No [X]
- 8.2

If the response to 8.1 is yes, please identify the name of the DIHC.

.....
- 8.3

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

Yes [] No [X]
- 8.4

If response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial 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
.....

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes [] No [X]
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?

Yes [] No [X] N/A []
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit? Ernst & Young LLP 111 Monument Circle, Suite 4000, Indianapolis, IN 46204

.....
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:

.....
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]
- 10.4

If the response to 10.3 is yes, provide information related to this exemption:

.....
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [X] No [] N/A []
- 10.6

If the response to 10.5 is no or n/a, please explain.

.....
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Evan R. Hagenaaers (employee) FSA, MAAA, CERA, Staff VP & Actuary 220 Virginia Ave Indianapolis, IN 46204

.....
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [] No [X]
- 12.11

Name of real estate holding company

.....
- 12.12

Number of parcels involved

.....
- 12.13

Total book/adjusted carrying value

\$
- 12.2

If yes, provide explanation

.....
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

.....
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []
- 14.1

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

Yes [X] No []
- a.

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

.....
- b.

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

.....
- c.

Compliance with applicable governmental laws, rules and regulations;

.....
- d.

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

.....
- e.

Accountability for adherence to the code.

.....
- 14.11

If the response to 14.1 is No, please explain:

.....
- 14.2

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s). 1.Changes to lobbying section to clarify that the policies in the section apply to foreign government officials as well as domestic. 2.Changes to the Gifts and Special Courtesies section to ensure language on the process for requesting an exception to the prohibition on gifts to government officials. 3.Changes to the Code of Conduct to strengthen and clarify the scope and guiding principles for human rights and the grievance process. 4.Added provisions for the use of Generative AI and Large Language Models (LLMs) and expanded to clarify that vendors / suppliers are required to adhere to RAI policies and guidelines. 5.Added references to the Ireland Criminal Justice Act.

.....
- 14.3

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

Yes [] No [X]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.
- Yes [] No [X]

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?
- Yes [X] No []
- Yes [X] No []
- Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?
- 22.2 If answer is yes:
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.
- Yes [] No [X]
- Yes [] No [X]
- Yes [X] No []
- 22.21 Amount paid as losses or risk adjustment \$
- 22.22 Amount paid as expenses \$
- 22.23 Other amounts paid \$
- Yes [] No [X]
- Yes [] No [X]
- 263,121

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)
- Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided) See Notes 5E, 5L and 17B.

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 222,378,094

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$ 0

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [X] No [] N/A []

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [X] No [] N/A []

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [X] No [] N/A []

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 222,413,361

25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 222,378,094

25.093 Total payable for securities lending reported on the liability page \$ 222,378,094

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$ 0

26.22 Subject to reverse repurchase agreements \$ 4,900,000

26.23 Subject to dollar repurchase agreements \$ 0

26.24 Subject to reverse dollar repurchase agreements \$ 0

26.25 Placed under option agreements \$ 0

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ 0

26.27 FHLB Capital Stock \$ 9,599,100

26.28 On deposit with states \$ 4,128,798

26.29 On deposit with other regulatory bodies \$ 0

26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0

26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 227,356,002

26.32 Other \$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		0

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 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.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No []

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [] No []

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$ 0

29. 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 []

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

29.02 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)
.....

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

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

29.05 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. This includes both primary and sub-advisors. 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.....
Ares Management LLC	U.....
Bain Capital Credit, LP	U.....
BlackRock Financial Management	U.....
Kayne Anderson Capital Advisors	U.....
Loomis, Sayles & Company, LP	U.....
NB Alternatives Advisers LLC	U.....
Pacific Investment Management Company	U.....
R4CF Mortgage	U.....
Western Asset Management	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, 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 [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []

29.06 For those firms or individuals listed in the table for 29.05 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	5 Investment Management Agreement (IMA) Filed
130074	Ares Management LLC	549300Z3CV0BET4MRT08	Securities Exchange Commission	NO.....
134852	Bain Capital Credit, LP	WBV05W75IL9CPDJW0453	Securities Exchange Commission	NO.....
107105	BlackRock Financial Management	549300LVXYIVJKE13M84	Securities Exchange Commission	NO.....
104536	Kayne Anderson Capital Advisors	5493001WLB6CGZ0JVX22	Securities Exchange Commission	NO.....
105377	Loomis, Sayles & Company, LP	JIZPN2RX3UMNOYID1313	Securities Exchange Commission	NO.....
149822	NB Alternatives Advisers LLC	549300DBQULCAC1K1E25	Securities Exchange Commission	NO.....
104559	Pacific Investment Management Company	549300KGPYQZXGMYYN38	Securities Exchange Commission	NO.....
.....	R4CF Mortgage .....	.....	Not a Registered Investment Advisor	NO.....
110441	Western Asset Management	549300C5A561UXU1CN46	Securities Exchange Commission	NO.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
..... 0
30.2999 - Total		0

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
..... 0	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	1,842,243,874	1,801,105,018	(41,138,856)
31.2 Preferred stocks	2,648,564	2,648,564	0
31.3 Totals	1,844,892,438	1,803,753,582	(41,138,856)

31.4 Describe the sources or methods utilized in determining the fair values:
Fair values were obtained from third-party pricing sources. If a security was not priced by a third-party pricing source, internal analytical systems or broker quotes were utilized.

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....

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

33.2 If no, list exceptions:
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of 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]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
a. The security was either:
i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
c. The NAIC Designation and NAIC Designation Category were 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, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

36. 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]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [X] N/A []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

- 38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]
- 38.2 If the response to 38.1 is yes, on what schedule are they reported?
- 39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]
- 39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly Yes [] No []

39.22 Immediately converted to U.S. dollars Yes [] No []
- 39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums
.....

OTHER

- 40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$ 2,578,827
- 40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
Blue Cross Blue Shield Association	2,578,827
.....
- 41.1 Amount of payments for legal expenses, if any?\$ 14,275,301
- 41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
.....
- 42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any?\$ 228,000
- 42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
Government Advocates	96,000
Ice Miller	60,000
Ockerman Consulting	72,000
Lobbying expenses disclosed reflect amounts reported in the Lobbyist Disclosure Reports filed with the Secretary of State as well as the cost of external contractors who provided lobbying services to the Company. The amount may include expenses that may have been paid by an affiliate on behalf of the Company and, as a result, may not be included in the Underwriting Gain reported on page 4 of the 2024 Annual Statement. ....	.....
.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [X] No []

1.2

If yes, indicate premium earned on U.S. business only.

\$ 179,919,891

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

1.31

Reason for excluding

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above

\$

1.5

Indicate total incurred claims on all Medicare Supplement Insurance.

\$ 142,408,562

1.6

Individual policies:

Most current three years:

1.61 Total premium earned \$ 35,586,216

1.62 Total incurred claims \$ 31,750,924

1.63 Number of covered lives 16,723

All years prior to most current three years:

1.64 Total premium earned \$ 119,002,601

1.65 Total incurred claims \$ 89,814,167

1.66 Number of covered lives 45,567

1.7

Group policies:

Most current three years:

1.71 Total premium earned \$ 0

1.72 Total incurred claims \$ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned \$ 25,331,074

1.75 Total incurred claims \$ 20,843,472

1.76 Number of covered lives 6,628

2.

Health Test:

1

Current Year

2

Prior Year

2.1 Premium Numerator 10,301,022,840 9,851,013,203

2.2 Premium Denominator 10,301,901,743 9,851,801,872

2.3 Premium Ratio (2.1/2.2) 1.000 1.000

2.4 Reserve Numerator 1,267,442,984 1,184,177,317

2.5 Reserve Denominator 1,267,641,623 1,184,343,267

2.6 Reserve Ratio (2.4/2.5) 1.000 1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes [] No [X]

3.2

If yes, give particulars:

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [X] No []

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [] No []

5.1

Does the reporting entity have stop-loss reinsurance?

Yes [X] No []

5.2

If no, explain:
The Company has a \$1,000,000 maximum risk per Individual for its Medicaid business.

5.3

Maximum retained risk (see instructions)

5.31 Comprehensive Medical \$

5.32 Medical Only \$

5.33 Medicare Supplement \$

5.34 Dental & Vision \$

5.35 Other Limited Benefit Plan \$

5.36 Other \$

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
If the Company becomes insolvent, Elevance Health, Inc. has agreed to the full extent of its assets, to assume all contractual and financial obligations of the Company. The Company's provider contracts include insolvency provisions, continuity of care provisions, and hold harmless language. Benefit certificates include continuation language allowing subscribers and dependents to continue under certain circumstances.

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?.....

Yes [X] No []

7.2

If no, give details

8.

Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year 109,033

8.2 Number of providers at end of reporting year 110,549

9.1

Does the reporting entity have business subject to premium rate guarantees?

Yes [X] No []

9.2

If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months.. \$ 57,527,126

9.22 Business with rate guarantees over 36 months \$ 4,236,299

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

GENERAL INTERROGATORIES

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? Yes [X] No []
- 10.2 If yes:

10.21 Maximum amount payable bonuses.....\$116,398,890

10.22 Amount actually paid for year bonuses.....\$237,800,352

10.23 Maximum amount payable withholds.....\$

10.24 Amount actually paid for year withholds.....\$
- 11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, Yes [] No [X]

11.13 An Individual Practice Association (IPA), or, Yes [] No [X]

11.14 A Mixed Model (combination of above)? Yes [] No [X]
- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? Yes [X] No []
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus. Ohio
- 11.4 If yes, show the amount required. \$ 2,500,000
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity? Yes [] No [X]
- 11.6 If the amount is calculated, show the calculation
.....

12. List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
State of Ohio
State of Indiana
.....

- 13.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 13.2 If yes, please provide the amount of custodial funds held as of the reporting date. \$
- 13.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 13.4 If yes, please provide the balance of funds administered as of the reporting date. \$
- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [] No [] N/A [X]
- 14.2 If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other
.....

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written \$

15.2 Total Incurred Claims \$

15.3 Number of Covered Lives

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurantee)
Universal Life (with or without secondary gurantee)
Variable Universal Life (with or without secondary gurantee)

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 16.1 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 []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

FIVE-YEAR HISTORICAL DATA

	1 2024	2 2023	3 2022	4 2021	5 2020
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	3,862,517,090	3,561,355,040	3,100,983,104	2,354,905,400	2,054,011,521
2. Total liabilities (Page 3, Line 24)	2,483,672,300	1,943,838,646	1,760,359,595	1,349,982,698	1,203,107,333
3. Statutory minimum capital and surplus requirement	2,500,000	2,500,000	2,500,000	2,500,000	2,500,000
4. Total capital and surplus (Page 3, Line 33)	1,378,844,790	1,617,516,394	1,340,623,509	1,004,922,702	850,904,188
Income Statement (Page 4)					
5. Total revenues (Line 8)	10,301,901,743	9,851,801,872	9,663,101,593	7,379,553,203	6,568,884,001
6. Total medical and hospital expenses (Line 18)	9,049,069,570	8,273,515,121	8,385,109,656	6,372,968,211	5,507,058,132
7. Claims adjustment expenses (Line 20)	268,999,788	285,538,794	308,987,451	224,128,777	215,946,654
8. Total administrative expenses (Line 21)	704,027,381	721,445,883	718,844,908	438,124,490	621,144,326
9. Net underwriting gain (loss) (Line 24)	228,391,156	572,473,676	251,993,435	346,322,537	226,608,730
10. Net investment gain (loss) (Line 27)	121,364,576	89,692,801	37,417,274	39,507,155	34,148,387
11. Total other income (Lines 28 plus 29)	29,240,524	31,972,489	27,185,353	14,401,211	11,313,464
12. Net income or (loss) (Line 32)	276,069,085	517,285,621	271,239,930	319,740,524	175,040,427
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	308,198,314	541,689,635	554,538,371	105,578,514	431,357,414
Risk-Based Capital Analysis					
14. Total adjusted capital	1,378,844,790	1,617,516,394	1,340,623,509	1,004,922,702	850,904,188
15. Authorized control level risk-based capital	345,456,709	318,663,254	343,973,192	267,712,803	232,544,489
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	2,329,907	2,236,645	2,640,223	2,319,841	2,200,781
17. Total members months (Column 6, Line 7)	27,934,419	27,483,025	31,631,604	27,569,562	26,301,882
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	87.8	84.0	86.8	86.4	83.8
20. Cost containment expenses	1.5	1.6	1.9	1.9	1.9
21. Other claims adjustment expenses	1.1	1.3	1.3	1.1	1.4
22. Total underwriting deductions (Line 23)	97.8	94.2	97.4	95.3	96.6
23. Total underwriting gain (loss) (Line 24)	2.2	5.8	2.6	4.7	3.4
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	871,137,550	674,249,100	681,777,688	589,722,232	495,805,992
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	962,664,272	918,053,304	751,189,738	718,598,435	524,770,166
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)		0		0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)				0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate				10,016,993	
31. All other affiliated					
32. Total of above Lines 26 to 31	0	0	0	10,016,993	0
33. Total investment in parent included in Lines 26 to 31 above.					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? Yes [] No []

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories												
			1	Direct Business Only								
				2	3	4	5	6	7	8	9	10
States, etc.			Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & 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	N.....								0	
4.	Arkansas	AR	N.....								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	L.....	5,551,595	155,369,335						160,920,930	
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.....	3,128,550,638	4,163,650,639	1,135,436,774		1,662,072,926			10,089,710,977	
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		3,134,102,233	4,319,019,974	1,135,436,774	0	1,662,072,926	0	0	10,250,631,907	0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX									0	
61.	Totals (Direct Business)	XXX		3,134,102,233	4,319,019,974	1,135,436,774	0	1,662,072,926	0	0	10,250,631,907	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..... 2

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..... 55

(b) Explanation of basis of allocation by states, premiums by state, etc.
Not applicable

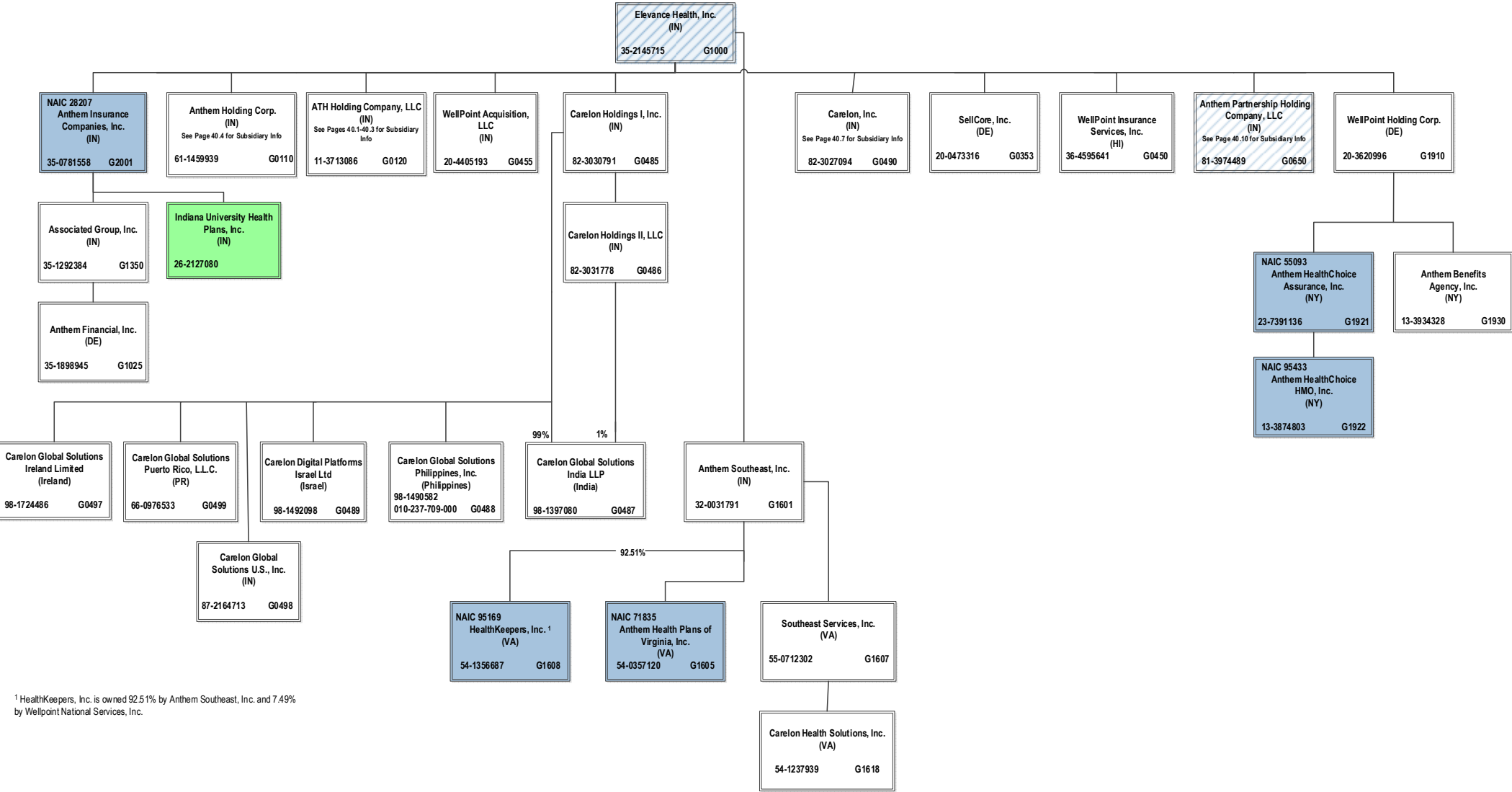
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

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

BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee

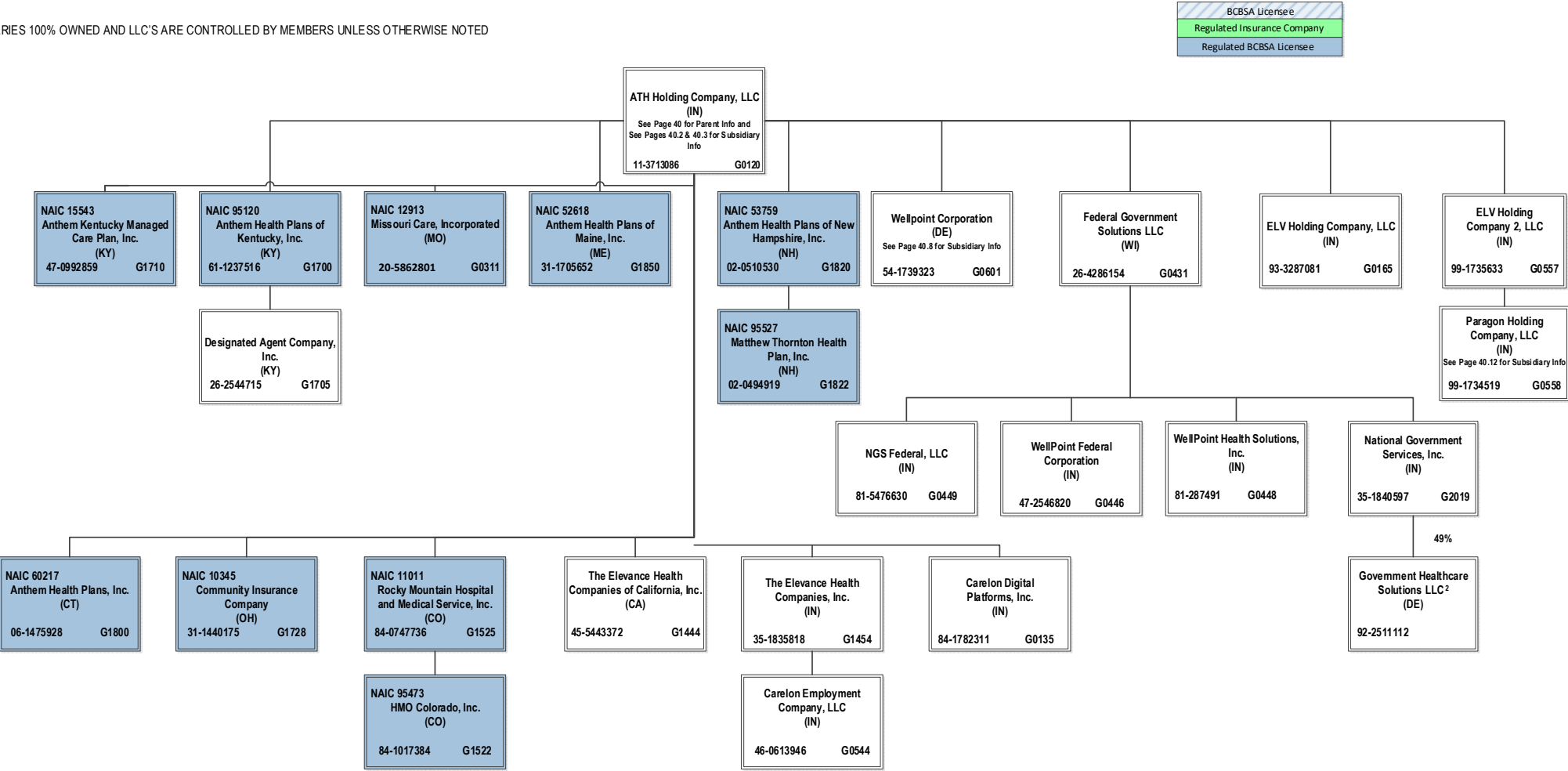


¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

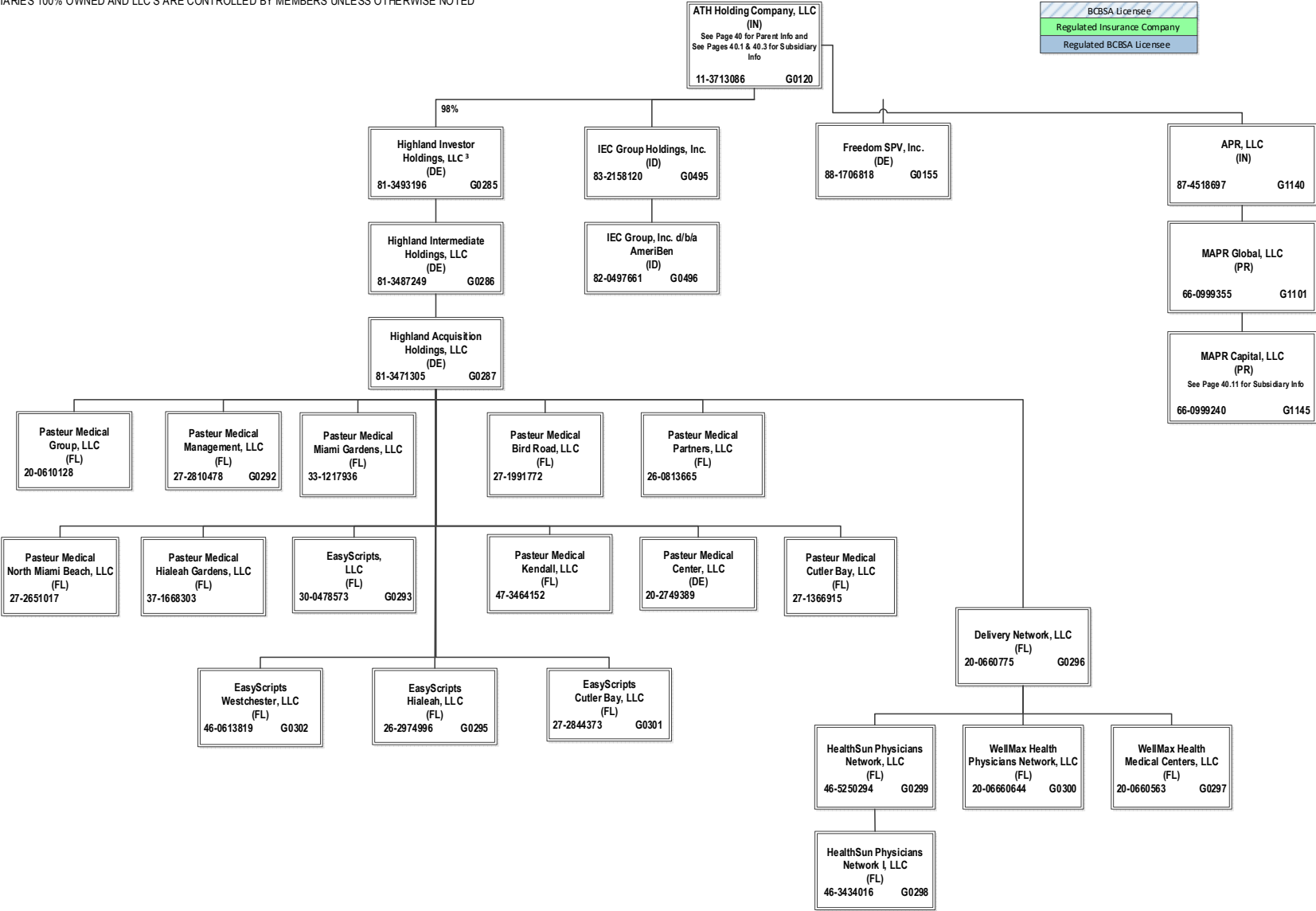
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

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

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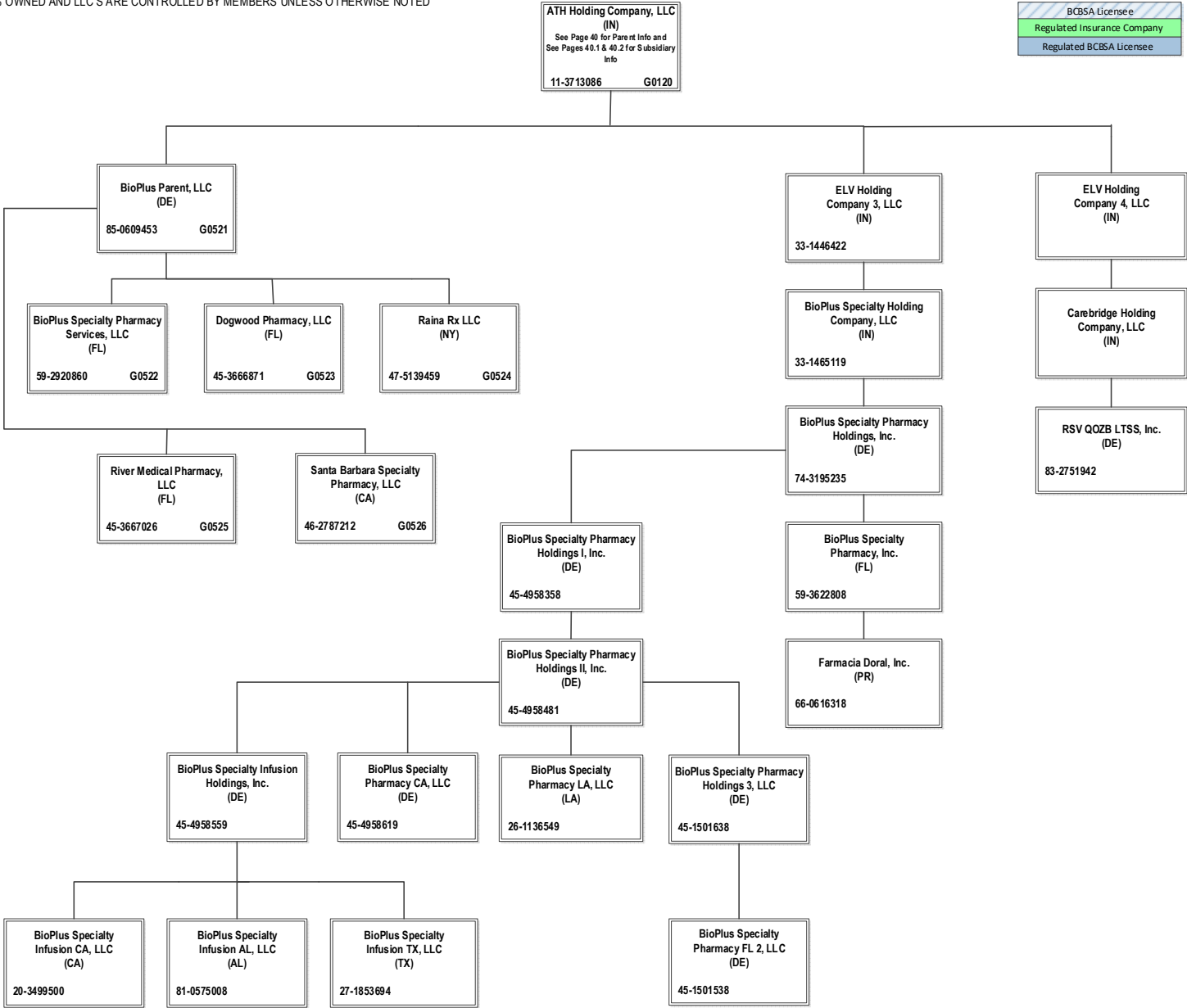


³ ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Wellpoint Corporation holds the remaining 2% interest.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

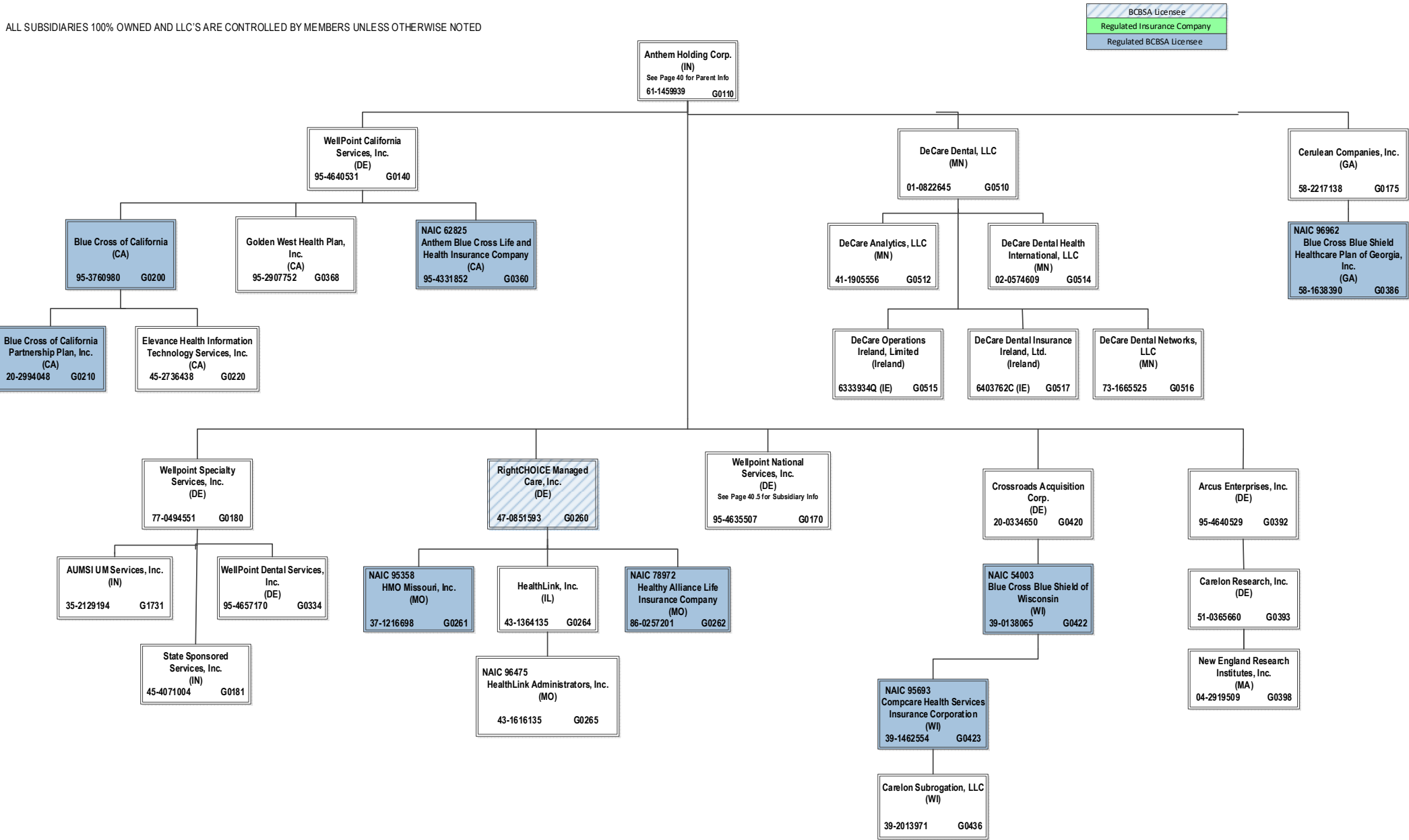
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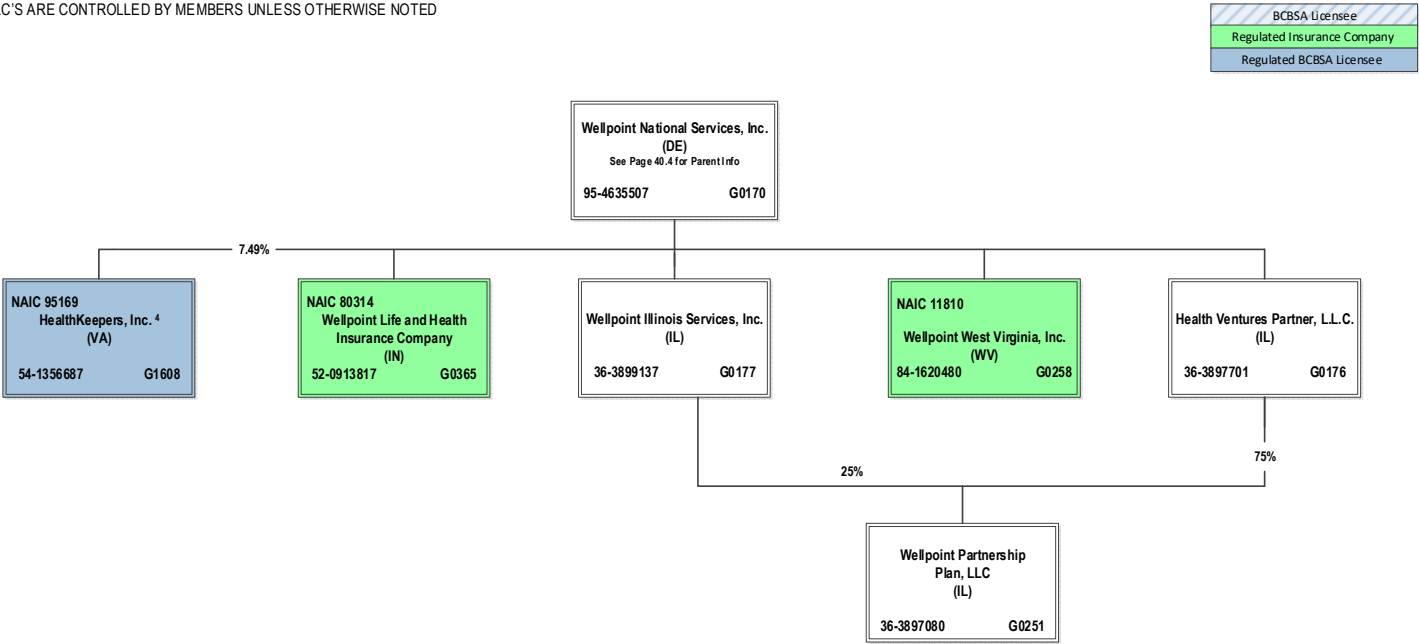
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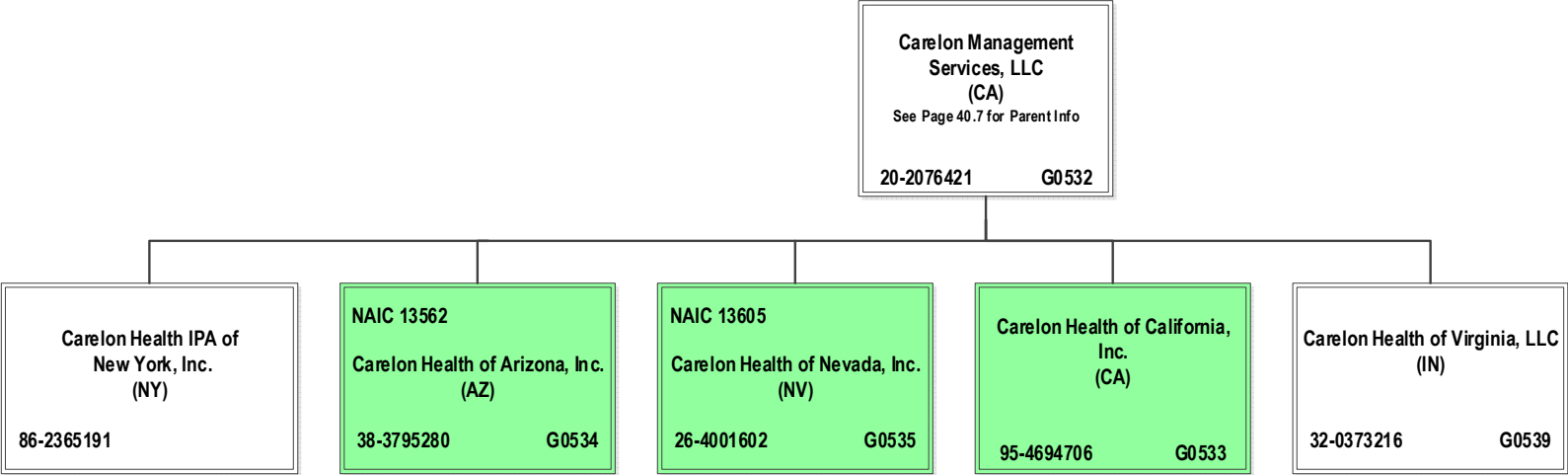
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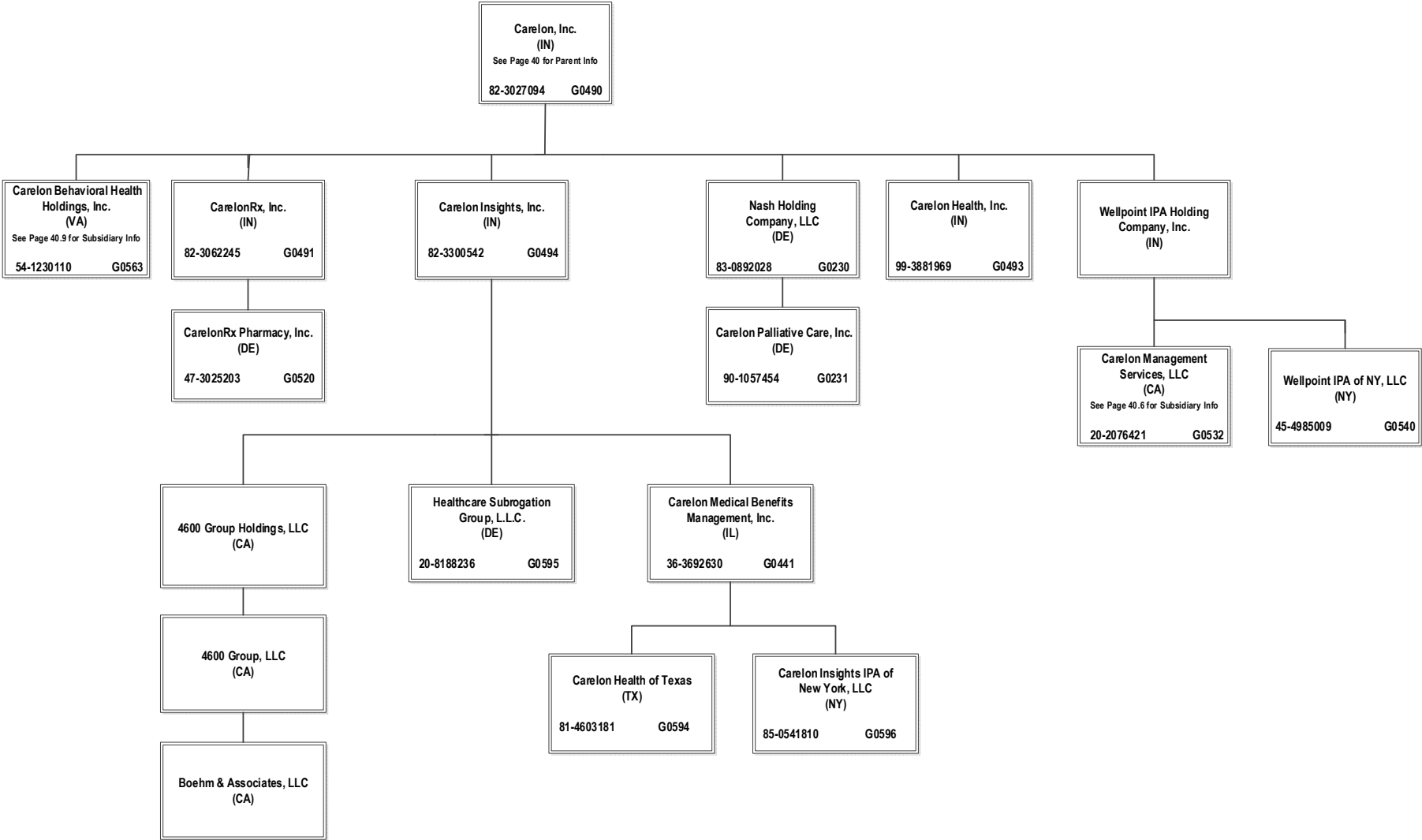
BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



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

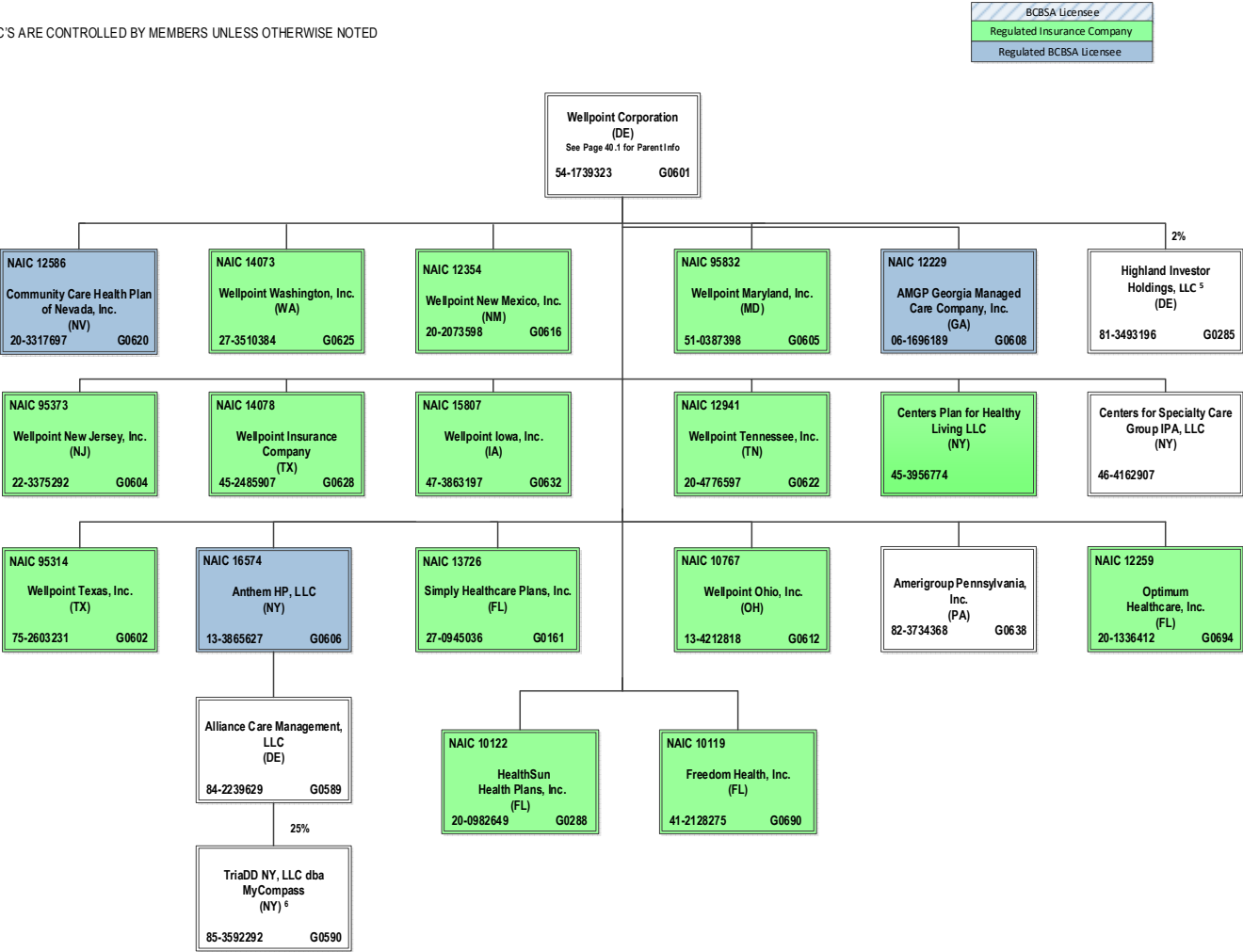
BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



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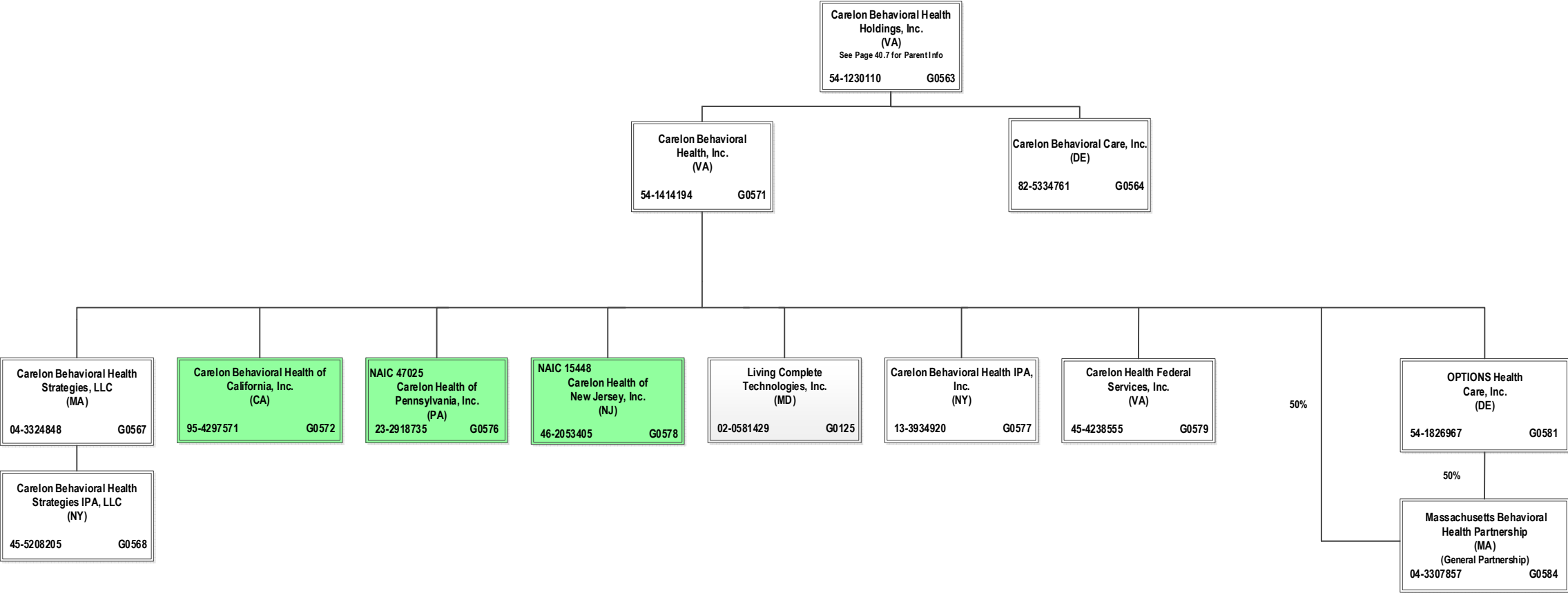
⁵ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

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

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BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



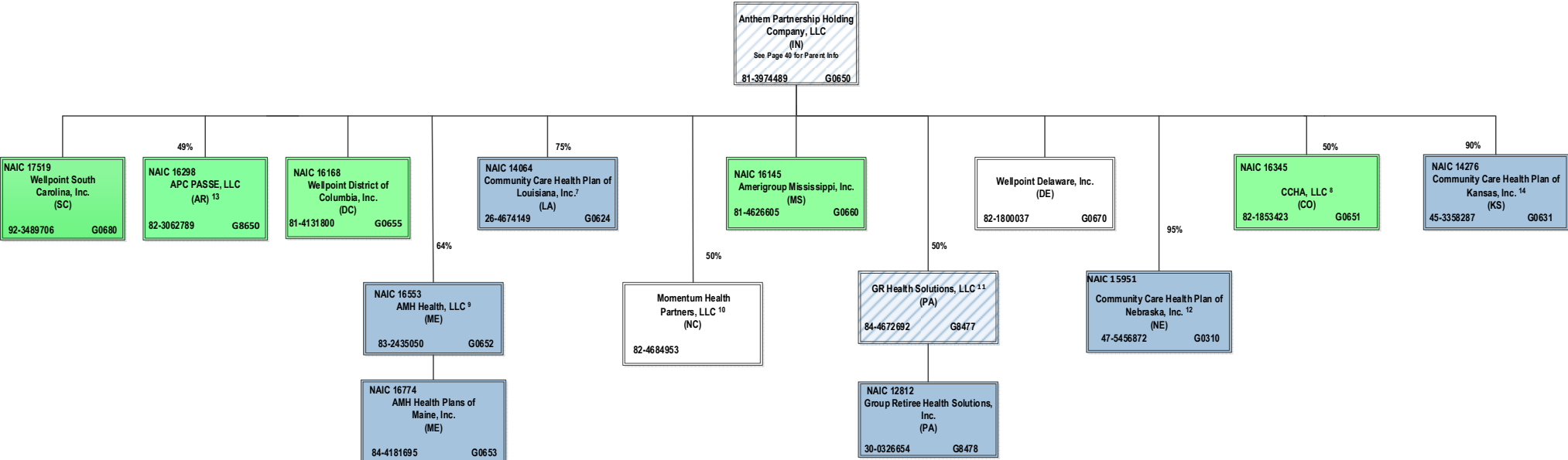
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BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee



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 36% owned by MaineHealth (non-affiliate) and 64% 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)

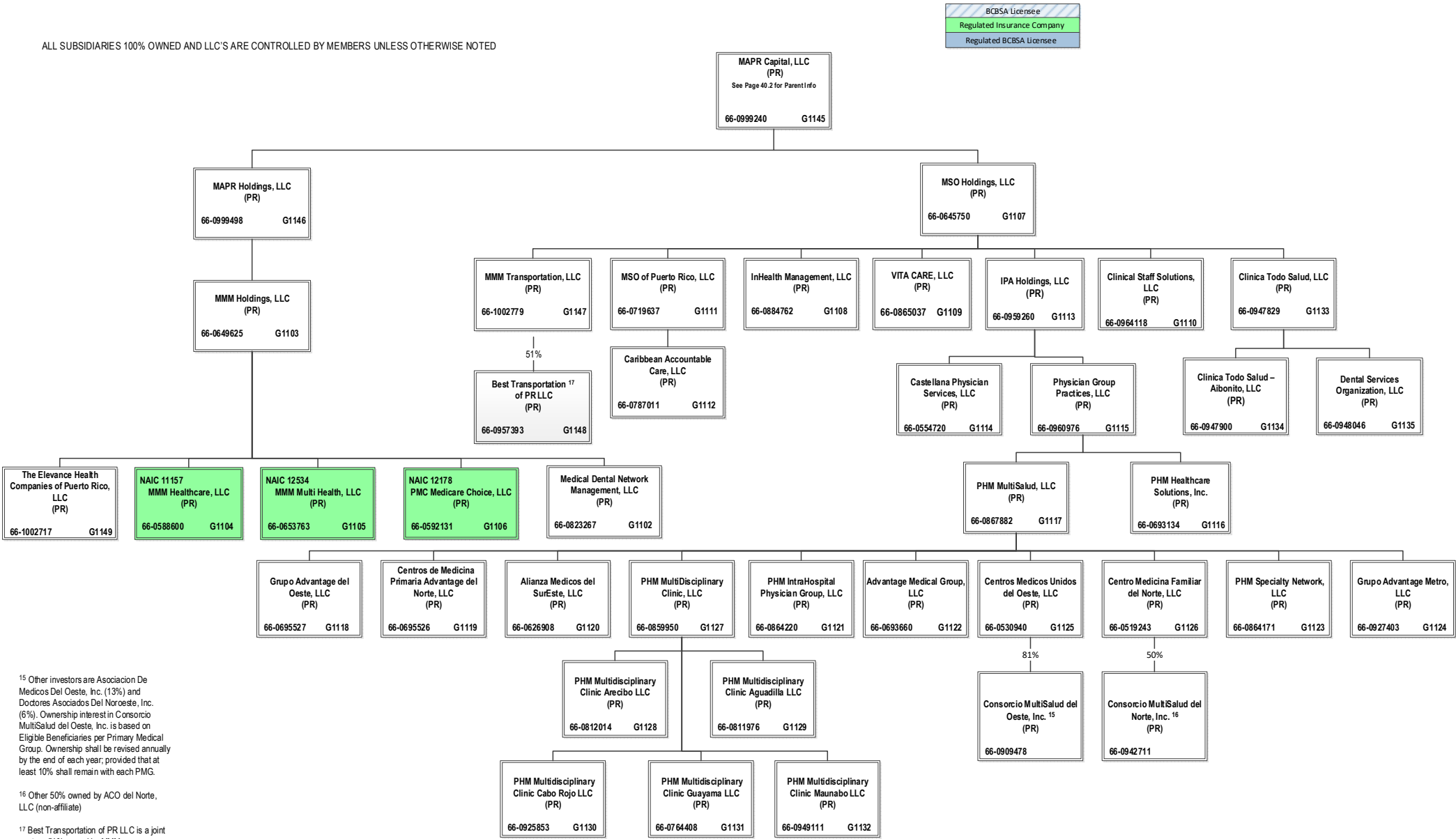
¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

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 Blue Shield of Kansas, Inc. (non-affiliate) and 5% owned by Blue Cross and Blue Shield of Kansas City (non-affiliate).

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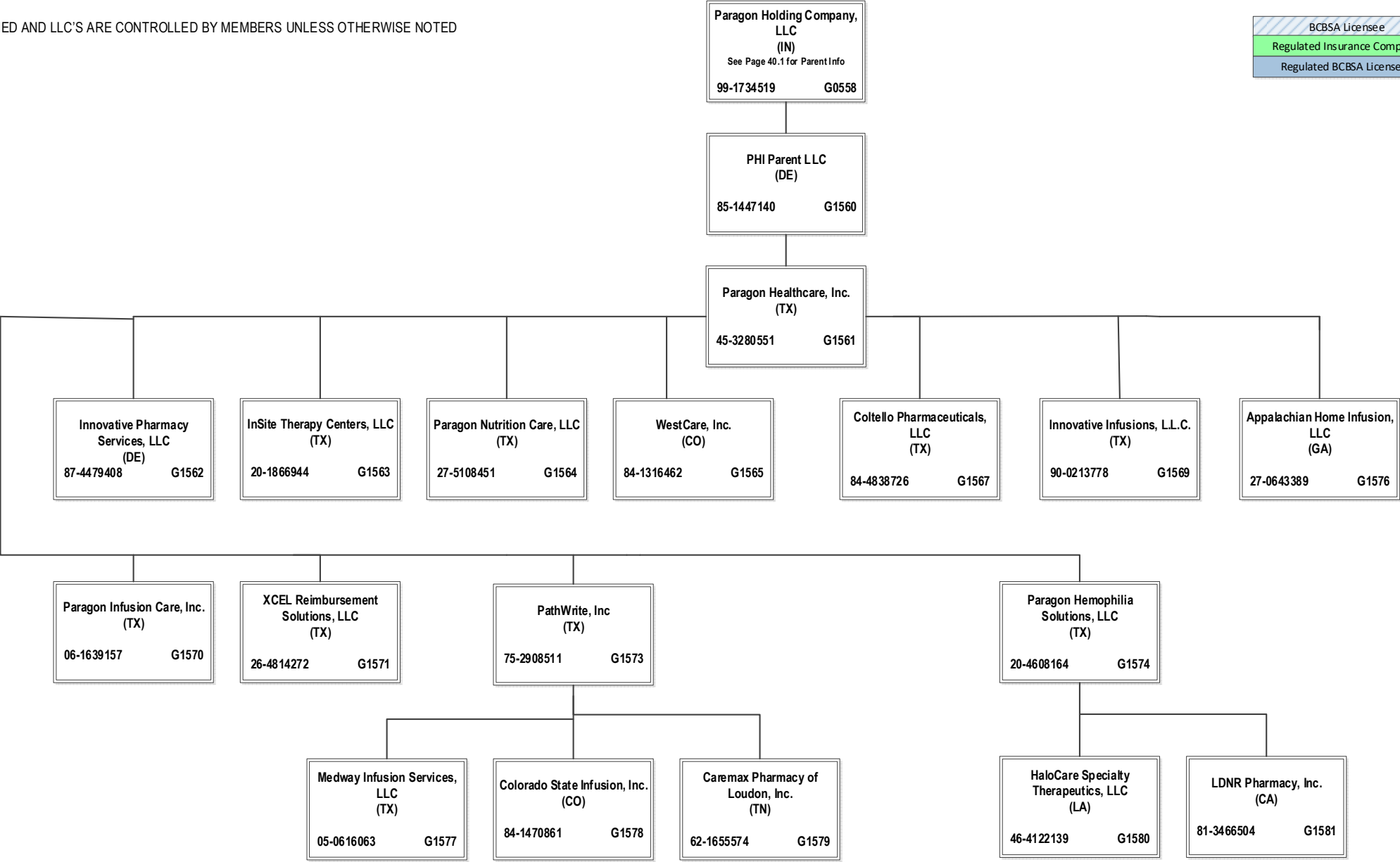


40.11

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
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BCBSA License e
Regulated Insurance Company
Regulated BCBSA Licensee



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Community Insurance Company

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

		Current Year			Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
2504.	Intangibles	27,584,694	27,584,694	0	0
2505.	Prepaid expenses	17,127,453	17,127,453	0	0
2597.	Summary of remaining write-ins for Line 25 from overflow page	44,712,147	44,712,147	0	0

Additional Write-ins for Liabilities Line 23

		Current Year			Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
2304.	Performance guaranty			0	12,022,200
2397.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	12,022,200