



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
AULTCARE INSURANCE COMPANY

NAIC Group Code 4805, 4805 NAIC Company Code 77216 Employer's ID Number 34-1624818
(Current) (Prior)
Organized under the Laws of OH State of Domicile or Port of Entry OH
Country of Domicile US
Licensed as business type: Life, Accident & Health Is HMO Federally Qualified? YES
Incorporated/Organized 08/15/1989 Commenced Business 11/01/1989
Statutory Home Office 2600 Sixth Street SW Canton, OH, US 44710
Main Administrative Office 2600 Sixth Street SW 330-363-3325
Canton, OH, US 44710 (Telephone)
Mail Address 2600 Sixth Street SW Canton, OH, US 44710
Primary Location of Books and Records 2600 Sixth Street SW 330-363-4057
Canton, OH, US 44710 (Telephone)
Internet Website Address www.aultcare.com
Statutory Statement Contact Melissa Rapp 330-363-4880
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(E-Mail) (Fax)

OFFICERS

Mark D. Wright#, President Barbara Hammontree-Bennett#, Secretary
Todd Hawke#, Treasurer Robert Mullen J.D.#, Executive Vice President

DIRECTORS OR TRUSTEES

Michael E. Hanke Nihad Boutros M.D.
Brian Belden# Michael A. Rich M.D.
Mark D. Wright John B. Humphrey Jr., M.D.
Darryl J. Dillenback Joseph J. Feltes Esq.
Barbara Hammontree-Bennett Todd Hawke
John Westerbeck M.D. Richard V. Maggiore
Robert Mullen J.D.

State of Ohio
County of Stark SS

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

x Mark D. Wright
President
x Melissa A. Rapp
Chief Financial Officer
x Todd Hawke
Treasurer

Subscribed and sworn to before me
this 14th day of
March, 2025

x

a. Is this an original filing? Yes

b. If no:

1. State the amendment number: _____
2. Date filed: _____
3. Number of pages attached: _____



Andrew Gerringer
Notary Public, State of Ohio
My Commission Expires:
July 11, 2026

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).....	43,541,172		43,541,172	44,919,485
2.	Stocks (Schedule D):				
	2.1 Preferred stocks.....				
	2.2 Common stocks.....	14,270,633		14,270,633	16,993,683
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens.....				
	3.2 Other than first liens.....				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$..... encumbrances).....				
	4.2 Properties held for the production of income (less \$..... encumbrances).....				
	4.3 Properties held for sale (less \$..... encumbrances).....				
5.	Cash (\$.....2,545,325, Schedule E - Part 1), cash equivalents (\$....., Schedule E - Part 2) and short-term investments (\$....., Schedule DA).....	2,545,325		2,545,325	5,394,628
6.	Contract loans (including \$..... premium notes).....				
7.	Derivatives (Schedule DB).....				
8.	Other invested assets (Schedule BA).....	9,655,702		9,655,702	10,308,992
9.	Receivables for securities.....				
10.	Securities lending reinvested collateral assets (Schedule DL).....				
11.	Aggregate write-ins for invested assets.....				
12.	Subtotals, cash and invested assets (Lines 1 to 11).....	70,012,832		70,012,832	77,616,788
13.	Title plants less \$..... charged off (for Title insurers only).....				
14.	Investment income due and accrued.....	447,391		447,391	333,213
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection.....	8,151,802		8,151,802	9,733,800
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$..... earned but unbilled premiums).....				
	15.3 Accrued retrospective premiums (\$.....) and contracts subject to redetermination (\$.....).....				
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers.....	3,296,139		3,296,139	1,045,591
	16.2 Funds held by or deposited with reinsured companies.....				
	16.3 Other amounts receivable under reinsurance contracts.....				
17.	Amounts receivable relating to uninsured plans.....				
18.1	Current federal and foreign income tax recoverable and interest thereon.....				2,423,924
18.2	Net deferred tax asset.....	2,954,486		2,954,486	637,164
19.	Guaranty funds receivable or on deposit.....				
20.	Electronic data processing equipment and software.....				591,922
21.	Furniture and equipment, including health care delivery assets (\$.....).....				
22.	Net adjustment in assets and liabilities due to foreign exchange rates.....				
23.	Receivables from parent, subsidiaries and affiliates.....	6,075,765		6,075,765	1,354,002
24.	Health care (\$.....7,641,671) and other amounts receivable.....	10,896,390	3,254,719	7,641,671	6,351,664
25.	Aggregate write-ins for other-than-invested assets.....				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	101,834,805	3,254,719	98,580,086	100,088,068
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28.	Total (Lines 26 and 27).....	101,834,805	3,254,719	98,580,086	100,088,068
Details of Write-Ins					
1101.	.....				
1102.	.....				
1103.	.....				
1198.	Summary of remaining write-ins for Line 11 from overflow page.....				
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....				
2501.	.....				
2502.	.....				
2503.	.....				
2598.	Summary of remaining write-ins for Line 25 from overflow page.....				
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....				

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$.....1,552,300 reinsurance ceded)	33,448,105		33,448,105	32,147,456
2. Accrued medical incentive pool and bonus amounts	293,489		293,489	204,746
3. Unpaid claims adjustment expenses	308,700		308,700	253,300
4. Aggregate health policy reserves, including the liability of \$..... for medical loss ratio rebate per the Public Health Service Act				
5. Aggregate life policy reserves				
6. Property/casualty unearned premium reserves				
7. Aggregate health claim reserves				
8. Premiums received in advance	3,641,758		3,641,758	5,006,189
9. General expenses due or accrued	7,239,323		7,239,323	5,492,269
10.1 Current federal and foreign income tax payable and interest thereon (including \$..... on realized capital gains (losses))				
10.2 Net deferred tax liability				
11. Ceded reinsurance premiums payable	2,370,743		2,370,743	3,984,601
12. Amounts withheld or retained for the account of others				
13. Remittances and items not allocated				
14. Borrowed money (including \$..... current) and interest thereon \$..... (including \$..... current)				
15. Amounts due to parent, subsidiaries and affiliates	2,788,175		2,788,175	3,522,909
16. Derivatives				
17. Payable for securities				
18. Payable for securities lending				
19. Funds held under reinsurance treaties (with \$..... authorized reinsurers, \$..... unauthorized reinsurers and \$..... certified reinsurers)				
20. Reinsurance in unauthorized and certified (\$.....) companies				
21. Net adjustments in assets and liabilities due to foreign exchange rates				
22. Liability for amounts held under uninsured plans	284,272		284,272	
23. Aggregate write-ins for other liabilities (including \$..... current)				
24. Total liabilities (Lines 1 to 23)	50,374,565		50,374,565	50,611,470
25. Aggregate write-ins for special surplus funds	XXX	XXX		
26. Common capital stock	XXX	XXX	1,000,000	1,000,000
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	24,387,534	18,387,534
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX		
31. Unassigned funds (surplus)	XXX	XXX	22,817,987	30,089,067
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	48,205,521	49,476,601
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	98,580,086	100,088,070
Details of Write-Ins				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

		Current Year		Prior Year
		1	2	3
		Uncovered	Total	Total
1.	Member Months	XXX	872,637	969,978
2.	Net premium income (including \$..... non-health premium income)	XXX	265,136,595	259,707,473
3.	Change in unearned premium reserves and reserve for rate credits	XXX		
4.	Fee-for-service (net of \$..... medical expenses)	XXX		
5.	Risk revenue	XXX		
6.	Aggregate write-ins for other health care related revenues	XXX		
7.	Aggregate write-ins for other non-health revenues	XXX		
8.	Total revenues (Lines 2 to 7)	XXX	265,136,595	259,707,473
Hospital and Medical:				
9.	Hospital/medical benefits		151,489,499	130,440,300
10.	Other professional services			
11.	Outside referrals		9,552,198	20,211,414
12.	Emergency room and out-of-area		3,969,130	4,660,054
13.	Prescription drugs		32,759,343	33,234,874
14.	Aggregate write-ins for other hospital and medical		61,671,869	53,235,465
15.	Incentive pool, withhold adjustments and bonus amounts		406,980	396,534
16.	Subtotal (Lines 9 to 15)		259,849,019	242,178,641
Less:				
17.	Net reinsurance recoveries		17,568,174	16,818,086
18.	Total hospital and medical (Lines 16 minus 17)		242,280,845	225,360,555
19.	Non-health claims (net)			
20.	Claims adjustment expenses, including \$.....6,429,563 cost containment expenses		8,571,012	6,257,529
21.	General administrative expenses		26,806,681	29,088,607
22.	Increase in reserves for life and accident and health contracts (including \$..... increase in reserves for life only)			
23.	Total underwriting deductions (Lines 18 through 22)		277,658,538	260,706,691
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(12,521,943)	(999,218)
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)		2,809,436	916,591
26.	Net realized capital gains (losses) less capital gains tax of \$.....324,956		2,127,537	5,631,527
27.	Net investment gains (losses) (Lines 25 plus 26)		4,936,973	6,548,118
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....) (amount charged off \$.....)]			
29.	Aggregate write-ins for other income or expenses			
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(7,584,970)	5,548,900
31.	Federal and foreign income taxes incurred	XXX	1,582,765	(996,806)
32.	Net income (loss) (Lines 30 minus 31)	XXX	(9,167,735)	6,545,706
Details of Write-Ins				
0601.	.....	XXX		
0602.	.....	XXX		
0603.	.....	XXX		
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX		
0701.	.....	XXX		
0702.	.....	XXX		
0703.	.....	XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX		
0799.	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX		
1401.	Reinsurance Claims		61,671,869	53,235,465
1402.	.....			
1403.	.....			
1498.	Summary of remaining write-ins for Line 14 from overflow page			
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)		61,671,869	53,235,465
2901.	.....			
2902.	.....			
2903.	.....			
2998.	Summary of remaining write-ins for Line 29 from overflow page			
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)			

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

		1	2
CAPITAL & SURPLUS ACCOUNT		Current Year	Prior Year
33.	Capital and surplus prior reporting year	49,476,598	42,537,403
34.	Net income or (loss) from Line 32	(9,167,735)	6,545,706
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....(229,904)	(919,614)	2,344,362
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax	2,087,418	(2,078,099)
39.	Change in nonadmitted assets	728,853	127,226
40.	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		
42.	Change in surplus notes		
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
44.1	Paid in		
44.2	Transferred from surplus (Stock Dividend)		
44.3	Transferred to surplus		
45.	Surplus adjustments:		
45.1	Paid in	6,000,000	—
45.2	Transferred to capital (Stock Dividend)		
45.3	Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus		
48.	Net change in capital and surplus (Lines 34 to 47)	(1,271,078)	6,939,195
49.	Capital and surplus end of reporting year (Line 33 plus 48)	48,205,520	49,476,598
Details of Write-Ins			
4701.	.....		
4702.	.....		
4703.	.....		
4798.	Summary of remaining write-ins for Line 47 from overflow page		
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)		

CASH FLOW

		1	2
		Current Year	Prior Year
Cash from Operations			
1.	Premiums collected net of reinsurance	263,740,304	256,444,969
2.	Net investment income	2,792,242	1,047,657
3.	Miscellaneous income	(561,154)	—
4.	Total (Lines 1 to 3)	265,971,392	257,492,626
5.	Benefit and loss related payments	243,142,001	222,407,614
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	33,290,967	36,908,221
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$..... tax on capital gains (losses)	(516,203)	2,835,000
10.	Total (Lines 5 through 9)	275,916,765	262,150,836
11.	Net cash from operations (Line 4 minus Line 10)	(9,945,372)	(4,658,210)
Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:		
12.1	Bonds	16,723,746	8,271,715
12.2	Stocks	5,994,439	24,784
12.3	Mortgage loans		
12.4	Real estate		
12.5	Other invested assets	1,500,000	
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7	Miscellaneous proceeds	—	9,646,304
12.8	Total investment proceeds (Lines 12.1 to 12.7)	24,218,185	17,942,803
13.	Cost of investments acquired (long-term only):		
13.1	Bonds	15,834,371	12,819,171
13.2	Stocks	1,283,875	4,133,855
13.3	Mortgage loans		
13.4	Real estate		
13.5	Other invested assets	846,707	
13.6	Miscellaneous applications	—	—
13.7	Total investments acquired (Lines 13.1 to 13.6)	17,964,953	16,953,026
14.	Net increase / (decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	6,253,232	989,777
Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):		
16.1	Surplus notes, capital notes		
16.2	Capital and paid in surplus, less treasury stock	6,000,000	—
16.3	Borrowed funds		
16.4	Net deposits on deposit-type contracts and other insurance liabilities		
16.5	Dividends to stockholders		
16.6	Other cash provided (applied)	(5,157,162)	425,447
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	842,838	425,447
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)	(2,849,303)	(3,242,986)
19.	Cash, cash equivalents and short-term investments:		
19.1	Beginning of year	5,394,628	8,637,614
19.2	End of year (Line 18 plus Line 19.1)	2,545,325	5,394,628

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

20.0001		
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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.....	265,136,595	51,465,261	168,052,639	4,287,758		1,852,070	982,311						38,496,556	
2.	Change in unearned premium reserves and reserve for rate credit.....														
3.	Fee-for-service (net of \$..... medical expenses).....														XXX
4.	Risk revenue.....														XXX
5.	Aggregate write-ins for other health care related revenues.....														XXX
6.	Aggregate write-ins for other non-health care related revenues.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7.	Total revenues (Lines 1 to 6).....	265,136,595	51,465,261	168,052,639	4,287,758		1,852,070	982,311						38,496,556	
8.	Hospital/medical benefits.....	151,489,499	35,376,330	110,189,456	3,874,458		1,835,904	213,351							XXX
9.	Other professional services.....														XXX
10.	Outside referrals.....	9,552,198	2,886,033	6,573,449				92,716							XXX
11.	Emergency room and out-of-area.....	3,969,130	882,496	3,060,332				26,302							XXX
12.	Prescription drugs.....	32,759,343	12,117,081	20,403,168				239,094							XXX
13.	Aggregate write-ins for other hospital and medical.....	61,671,869		25,673,133										35,998,736	XXX
14.	Incentive pool, withhold adjustments and bonus amounts.....	406,980	210,298	179,811				16,871							XXX
15.	Subtotal (Lines 8 to 14).....	259,849,019	51,472,238	166,079,349	3,874,458		1,835,904	588,334						35,998,736	XXX
16.	Net reinsurance recoveries.....	17,568,174	3,029,544	7,121,182				284,280						7,133,168	XXX
17.	Total hospital and medical (Lines 15 minus 16).....	242,280,845	48,442,694	158,958,167	3,874,458		1,835,904	304,054						28,865,568	XXX
18.	Non-health claims (net).....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19.	Claims adjustment expenses including \$.....6,429,563 cost containment expenses.....	8,571,011	717,336	4,778,444				150,088						2,925,143	
20.	General administrative expenses.....	26,806,681	8,200,762	13,698,790	773,403		801,547	(9,250)						3,341,429	
21.	Increase in reserves for accident and health contracts.....														XXX
22.	Increase in reserves for life contracts.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23.	Total underwriting deductions (Lines 17 to 22).....	277,658,537	57,360,792	177,435,401	4,647,861		2,637,451	444,892						35,132,140	
24.	Net underwriting gain or (loss) (Line 7 minus Line 23).....	(12,521,942)	(5,895,531)	(9,382,762)	(360,103)		(785,381)	537,419						3,364,416	
Details of Write-Ins															
0501.	.....														XXX
0502.	.....														XXX
0503.	.....														XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page.....														XXX
0599.	Totals (Lines 0501 through 0503 plus 0598) (Line 5 above).....														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.....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1301.	Reinsurance Claims.....	61,671,869		25,673,133										35,998,736	XXX
1302.	.....														XXX
1303.	.....														XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page.....														XXX
1399.	Totals (Lines 1301 through 1303 plus 1398) (Line 13 above).....	61,671,869		25,673,133										35,998,736	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 – PREMIUMS

Line of Business		1	2	3	4
		Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1+2-3)
1.	Comprehensive (hospital and medical) individual	53,281,260		1,815,999	51,465,261
2.	Comprehensive (hospital and medical) group	146,792,965	28,528,352	7,268,678	168,052,639
3.	Medicare Supplement	4,287,758			4,287,758
4.	Vision only				
5.	Dental only	1,852,070			1,852,070
6.	Federal Employees Health Benefits Plan	982,477		166	982,311
7.	Title XVIII – Medicare				
8.	Title XIX – Medicaid				
9.	Credit A&H				
10.	Disability Income				
11.	Long-Term Care				
12.	Other health	41,662,569		3,166,013	38,496,556
13.	Health subtotal (Lines 1 through 12)	248,859,099	28,528,352	12,250,856	265,136,595
14.	Life				
15.	Property/casualty				
16.	Totals (Lines 13 to 15)	248,859,099	28,528,352	12,250,856	265,136,595

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											
			Individual	Group											
		Total			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	258,224,757	49,925,123	166,685,933	3,874,458		1,646,815	1,806,720						34,285,708	
	1.2 Reinsurance assumed														
	1.3 Reinsurance ceded	17,809,274	2,915,444	7,413,937				346,725						7,133,168	
	1.4 Net	240,415,483	47,009,679	159,271,996	3,874,458		1,646,815	1,459,995						27,152,540	
2.	Paid medical incentive pools and bonuses	318,235		332,835				(14,600)							
3.	Claim liability December 31, current year from Part 2A:														
	3.1 Direct	34,786,005	5,969,300	20,173,912			235,105	5,703						8,401,985	
	3.2 Reinsurance assumed														
	3.3 Reinsurance ceded	1,337,900	339,500	998,400											
	3.4 Net	33,448,105	5,629,800	19,175,512			235,105	5,703						8,401,985	
4.	Claim reserve December 31, current year from Part 2D:														
	4.1 Direct														
	4.2 Reinsurance assumed														
	4.3 Reinsurance ceded														
	4.4 Net														
5.	Accrued medical incentive pools and bonuses, current year	293,489	210,298	39,372				43,819							
6.	Net health care receivables (a)	(157,732)		(157,732)											
7.	Amounts recoverable from reinsurers December 31, current year														
8.	Claim liability December 31, prior year from Part 2A:														
	8.1 Direct	33,726,455	5,437,090	23,258,134			46,016	1,276,515						3,708,700	
	8.2 Reinsurance assumed														
	8.3 Reinsurance ceded	1,579,000	225,400	1,288,481				65,119							
	8.4 Net	32,147,456	5,211,690	21,969,654			46,016	1,211,396						3,708,700	
9.	Claim reserve December 31, prior year from Part 2D:														
	9.1 Direct														
	9.2 Reinsurance assumed														
	9.3 Reinsurance ceded														
	9.4 Net														
10.	Accrued medical incentive pools and bonuses, prior year	204,746		192,396				12,350							
11.	Amounts recoverable from reinsurers December 31, prior year														
12.	Incurred benefits:														
	12.1 Direct	259,442,039	50,457,333	163,759,443	3,874,458		1,835,904	535,908						38,978,993	
	12.2 Reinsurance assumed														
	12.3 Reinsurance ceded	17,568,174	3,029,544	7,123,856				281,606						7,133,168	
	12.4 Net	241,873,864	47,427,789	156,635,586	3,874,458		1,835,904	254,302						31,845,825	
13.	Incurred medical incentive pools and bonuses	406,978	210,298	179,811				16,869							

(a) Excludes \$ 1,970,477 loans or advances to providers not yet expensed.

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.....														
1.2 Reinsurance assumed.....														
1.3 Reinsurance ceded.....														
1.4 Net.....														
2. Incurred but Unreported:														
2.1 Direct.....	34,786,005	5,969,300	20,173,912			235,105	5,703						8,401,985	
2.2 Reinsurance assumed.....														
2.3 Reinsurance ceded.....	1,337,900	339,500	998,400											
2.4 Net.....	33,448,105	5,629,800	19,175,512			235,105	5,703						8,401,985	
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct.....														
3.2 Reinsurance assumed.....														
3.3 Reinsurance ceded.....														
3.4 Net.....														
4. TOTALS:														
4.1 Direct.....	34,786,005	5,969,300	20,173,912			235,105	5,703						8,401,985	
4.2 Reinsurance assumed.....														
4.3 Reinsurance ceded.....	1,337,900	339,500	998,400											
4.4 Net.....	33,448,105	5,629,800	19,175,512			235,105	5,703						8,401,985	

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		Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1.	Comprehensive (hospital and medical) individual	7,496,946	39,512,736	184,860	5,870,060	7,681,806	5,211,690
2.	Comprehensive (hospital and medical) group	24,360,330	134,922,485	2,347,450	16,772,661	26,707,780	21,969,654
3.	Medicare Supplement		3,874,458				
4.	Vision Only						
5.	Dental Only	164,888	1,481,927	12,225	222,879	177,113	46,016
6.	Federal Employees Health Benefits Plan	1,457,554	2,441		5,703	1,457,554	1,211,396
7.	Title XVIII – Medicare						
8.	Title XIX – Medicaid						
9.	Credit A&H						
10.	Disability Income						
11.	Long-Term Care						
12.	Other health	2,045,979	25,095,741	(369,720)	8,401,985	1,676,259	3,708,700
13.	Health subtotal (Lines 1 to 12)	35,525,697	204,889,788	2,174,815	31,273,288	37,700,512	32,147,456
14.	Health care receivables (a)	57,734				57,734	215,466
15.	Other non-health						
16.	Medical incentive pools and bonus amounts	318,235		(77,849)	371,338	240,386	204,746
17.	Totals (Lines 13 - 14 + 15 + 16)	35,786,198	204,889,788	2,096,966	31,644,626	37,883,164	32,136,736

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

GRAND TOTAL

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	188,107	188,107	188,107	188,107	188,107
3. 2021.....	XXX	195,992	195,992	195,992	195,992
4. 2022.....	XXX	XXX	201,506	201,507	201,507
5. 2023.....	XXX	XXX	XXX	195,211	195,210
6. 2024.....	XXX	XXX	XXX	XXX	55,286

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	213,350	188,107	188,107	188,107	188,107
3. 2021.....	XXX	224,363	195,992	195,992	195,992
4. 2022.....	XXX	XXX	232,563	201,507	201,507
5. 2023.....	XXX	XXX	XXX	227,563	227,563
6. 2024.....	XXX	XXX	XXX	XXX	56,674

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	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.....	259,386	188,107			188,107	72.520	–		188,107	72.520
2. 2021.....	227,209	195,992			195,992	86.261	–		195,992	86.261
3. 2022.....	233,302	201,507	8,544	4.240	210,051	90.034	–		210,051	90.034
4. 2023.....	227,154	195,210	226	0.116	195,436	86.037	32,353		227,789	100.280
5. 2024.....	236,609	55,286	252	0.456	55,538	23.472	1,388	308	57,234	24.189

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

HOSPITAL & MEDICAL

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	146,528	146,528	146,528	146,528	146,528
3. 2021.....	XXX	169,640	169,640	169,640	169,640
4. 2022.....	XXX	XXX	164,862	164,862	164,862
5. 2023.....	XXX	XXX	XXX	160,935	160,934
6. 2024.....	XXX	XXX	XXX	XXX	24,822

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	164,634	146,528	146,528	146,528	146,528
3. 2021.....	XXX	194,037	169,640	169,640	169,640
4. 2022.....	XXX	XXX	191,004	164,862	164,862
5. 2023.....	XXX	XXX	XXX	188,321	188,321
6. 2024.....	XXX	XXX	XXX	XXX	48,043

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	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.....	202,807	146,528			146,528	72.250	–		146,528	72.250
2. 2021.....	192,218	169,640			169,640	88.254	–		169,640	88.254
3. 2022.....	194,419	164,862	5,529	3.354	170,391	87.641	–		170,391	87.641
4. 2023.....	187,535	160,934	196	0.122	161,130	85.920	27,387		188,517	100.524
5. 2024.....	190,990	24,822	162	0.653	24,984	13.081	23,221	297	48,502	25.395

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

MEDICARE SUPPLEMENT

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	1,714	1,714	1,714	1,714	1,714
3. 2021.....	XXX	1,953	1,953	1,953	1,953
4. 2022.....	XXX	XXX	2,483	2,483	2,483
5. 2023.....	XXX	XXX	XXX	3,127	3,127
6. 2024.....	XXX	XXX	XXX	XXX	3,874

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	1,714	1,714	1,714	1,714	1,714
3. 2021.....	XXX	1,953	1,953	1,953	1,953
4. 2022.....	XXX	XXX	2,483	2,483	2,483
5. 2023.....	XXX	XXX	XXX	3,127	3,127
6. 2024.....	XXX	XXX	XXX	XXX	–

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	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.....	2,233	1,714			1,714	76.758	–	–	1,714	76.758
2. 2021.....	2,482	1,953			1,953	78.687	–	–	1,953	78.687
3. 2022.....	2,892	2,483			2,483	85.858	–	–	2,483	85.858
4. 2023.....	3,594	3,127			3,127	87.006	–	–	3,127	87.006
5. 2024.....	4,288	3,874			3,874	90.345	(3,874)	–	–	–

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

DENTAL ONLY

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	1,414	1,414	1,414	1,414	1,414
3. 2021.....	XXX	1,585	1,585	1,585	1,585
4. 2022.....	XXX	XXX	1,511	1,511	1,511
5. 2023.....	XXX	XXX	XXX	1,408	1,408
6. 2024.....	XXX	XXX	XXX	XXX	1,481

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	1,561	1,414	1,414	1,414	1,414
3. 2021.....	XXX	1,771	1,585	1,585	1,585
4. 2022.....	XXX	XXX	1,656	1,511	1,511
5. 2023.....	XXX	XXX	XXX	1,454	1,454
6. 2024.....	XXX	XXX	XXX	XXX	223

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	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.....	2,607	1,414			1,414	54.239	–		1,414	54.239
2. 2021.....	2,415	1,585			1,585	65.631	–		1,585	65.631
3. 2022.....	2,196	1,511			1,511	68.807	–		1,511	68.807
4. 2023.....	2,250	1,408			1,408	62.578	46		1,454	64.622
5. 2024.....	1,852	1,481			1,481	79.968	(1,258)		223	12.041

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)
VISION ONLY

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior.....					
2. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

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. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	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. 2021.....										
3. 2022.....										
4. 2023.....										
5. 2024.....										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

FEDERAL EMPLOYEES HEALTH BENEFITS PLAN

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	11,607	11,607	11,607	11,607	11,607
3. 2021.....	XXX	9,634	9,634	9,634	9,634
4. 2022.....	XXX	XXX	9,417	9,417	9,417
5. 2023.....	XXX	XXX	XXX	9,435	9,435
6. 2024.....	XXX	XXX	XXX	XXX	2

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....	–	–	–	–	–
2. 2020.....	12,927	11,607	11,607	11,607	11,607
3. 2021.....	XXX	10,516	9,634	9,634	9,634
4. 2022.....	XXX	XXX	10,589	9,417	9,417
5. 2023.....	XXX	XXX	XXX	10,646	10,646
6. 2024.....	XXX	XXX	XXX	XXX	6

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payments	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.....		13,393	11,607			11,607	86.665	–		11,607	86.665
2. 2021.....		12,491	9,634			9,634	77.128	–		9,634	77.128
3. 2022.....		11,124	9,417	156	1.657	9,573	86.057	–		9,573	86.057
4. 2023.....		10,068	9,435	10	0.106	9,445	93.812	1,211		10,656	105.840
5. 2024.....		982	2	4	200.000	6	0.611	4	11	21	2.138

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

TITLE XVIII MEDICARE

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....					
2. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

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	2	3	4	5
	2020	2021	2022	2023	2024
1. Prior.....					
2. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	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. 2021.....										
3. 2022.....										
4. 2023.....										
5. 2024.....										

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)
TITLE XIX MEDICAID

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior.....					
2. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

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. 2020.....					
3. 2021.....	XXX				
4. 2022.....	XXX	XXX			
5. 2023.....	XXX	XXX	XXX		
6. 2024.....	XXX	XXX	XXX	XXX	

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	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. 2021.....										
3. 2022.....										
4. 2023.....										
5. 2024.....										

UNDERWRITING AND INVESTMENT EXHIBIT
PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)
OTHER HEALTH

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2020	2 2021	3 2022	4 2023	5 2024
1. Prior.....	–	–	–	–	–
2. 2020.....	26,844	26,844	26,844	26,844	26,844
3. 2021.....	XXX	13,180	13,180	13,180	13,180
4. 2022.....	XXX	XXX	23,234	23,234	23,234
5. 2023.....	XXX	XXX	XXX	20,306	20,306
6. 2024.....	XXX	XXX	XXX	XXX	25,107

Section B – Incurred Health Claims

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. 2020.....	32,514	26,844	26,844	26,844	26,844
3. 2021.....	XXX	16,087	13,180	13,180	13,180
4. 2022.....	XXX	XXX	26,831	23,234	23,234
5. 2023.....	XXX	XXX	XXX	24,015	24,015
6. 2024.....	XXX	XXX	XXX	XXX	8,402

Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	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.....	38,346	26,844			26,844	70.005	–		26,844	70.005
2. 2021.....	17,602	13,180			13,180	74.878	–		13,180	74.878
3. 2022.....	22,670	23,234	2,859	12.305	26,093	115.099	–		26,093	115.099
4. 2023.....	23,707	20,306	20	0.098	20,326	85.738	3,709		24,035	101.384
5. 2024.....	38,497	25,107	86	0.343	25,193	65.441	(16,705)		8,488	22.048

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													
2. Additional policy reserves (a)													
3. Reserve for future contingent benefits													
4. Reserve for rate credits or experience rating refunds (including \$..... for investment income)													
5. Aggregate write-ins for other policy reserves													
6. Totals (gross)													
7. Reinsurance ceded													
8. Totals (Net) (Page 3, Line 4)													
9. Present value of amounts not yet due on claims													
10. Reserve for future contingent benefits													
11. Aggregate write-ins for other claim reserves													
12. Totals (gross)													
13. Reinsurance ceded													
14. Totals (Net) (Page 3, Line 7)													
Details of Write-Ins													
0501.													
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page													
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)													
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page													
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)													

NONE

(a) Includes \$ – premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT
PART 3 – ANALYSIS OF EXPENSES

	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)	4,672	278,599	106,459		389,730
2. Salaries, wages and other benefits	4,111,532		7,440,447		11,551,979
3. Commissions (less \$..... ceded plus \$..... assumed)			8,058,357		8,058,357
4. Legal fees and expenses	329,549		(138,809)		190,740
5. Certifications and accreditation fees			1,841,624		1,841,624
6. Auditing, actuarial and other consulting services	367,748		1,448,291		1,816,039
7. Traveling expenses	368,619		(376,261)		(7,642)
8. Marketing and advertising	7,949		247,004		254,953
9. Postage, express and telephone	5,097	333,622	221,431		560,150
10. Printing and office supplies	89,743		320,731		410,474
11. Occupancy, depreciation and amortization	12,951	1,529,228	(97,927)		1,444,252
12. Equipment	51,058		(42,617)		8,441
13. Cost or depreciation of EDP equipment and software	733,776		704,942		1,438,718
14. Outsourced services including EDP, claims, and other services	2,059		1,012,377		1,014,436
15. Boards, bureaus and association fees	47,725		(55,472)		(7,747)
16. Insurance, except on real estate					
17. Collection and bank service charges	–		402,769		402,769
18. Group service and administration fees	58,343		770,976		829,319
19. Reimbursements by uninsured plans					
20. Reimbursements from fiscal intermediaries					
21. Real estate expenses					
22. Real estate taxes					
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes			21,502		21,502
23.2 State premium taxes			3,295,512		3,295,512
23.3 Regulatory authority licenses and fees			1,055,778		1,055,778
23.4 Payroll taxes	238,742		438,673		677,415
23.5 Other (excluding federal income and real estate taxes)			130,894		130,894
24. Investment expenses not included elsewhere					
25. Aggregate write-ins for expenses					
26. Total expenses incurred (Lines 1 to 25)	6,429,563	2,141,449	26,806,681		(a) 35,377,693
27. Less expenses unpaid December 31, current year			7,239,322		7,239,322
28. Add expenses unpaid December 31, prior year	253,300		5,492,269		5,745,569
29. Amounts receivable relating to uninsured plans, prior year					
30. Amounts receivable relating to uninsured plans, current year					
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	6,682,863	2,141,449	25,059,628		33,883,940
Details of Write-Ins					
2501.					
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page					
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)					

(a) Includes management fees of \$ 18,180,306 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) 476,818	484,717
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 824,333	872,860
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	418,798	418,798
2.21	Common stocks of affiliates		
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e)	
7.	Derivative instruments	(f)	
8.	Other invested assets		1,033,061
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	1,719,949	2,809,436
11.	Investment expenses		(g)
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		2,809,436
Details of Write-Ins			
0901.	.....		
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

- (a) Includes \$147,112 accrual of discount less \$244,096 amortization of premium and less \$ paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ 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	(238,698)		(238,698)		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	(153,255)		(153,255)		
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)	2,844,446		2,844,446	(1,149,521)	
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments					
7.	Derivative instruments					
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	2,452,493		2,452,493	(1,149,521)	
Details of Write-Ins						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED 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).....			
2.	Stocks (Schedule D):			
2.1	Preferred stocks.....			
2.2	Common stocks.....			
3.	Mortgage loans on real estate (Schedule B):			
3.1	First liens.....			
3.2	Other than first liens.....			
4.	Real estate (Schedule A):			
4.1	Properties occupied by the company.....			
4.2	Properties held for the production of income.....			
4.3	Properties held for sale.....			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			
6.	Contract loans.....			
7.	Derivatives (Schedule DB).....			
8.	Other invested assets (Schedule BA).....			
9.	Receivables for securities.....			
10.	Securities lending reinvested collateral assets (Schedule DL).....			
11.	Aggregate write-ins for invested assets.....			
12.	Subtotals, cash and invested assets (Lines 1 to 11).....			
13.	Title plants (for Title insurers only).....			
14.	Investment income due and accrued.....			
15.	Premiums and considerations:			
15.1	Uncollected premiums and agents' balances in the course of collection.....			
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			
15.3	Accrued retrospective premiums and contracts subject to redetermination.....			
16.	Reinsurance:			
16.1	Amounts recoverable from reinsurers.....			
16.2	Funds held by or deposited with reinsured companies.....			
16.3	Other amounts receivable under reinsurance contracts.....			
17.	Amounts receivable relating to uninsured plans.....			
18.1	Current federal and foreign income tax recoverable and interest thereon.....			
18.2	Net deferred tax asset.....			
19.	Guaranty funds receivable or on deposit.....			
20.	Electronic data processing equipment and software.....			
21.	Furniture and equipment, including health care delivery assets.....			
22.	Net adjustment in assets and liabilities due to foreign exchange rates.....			
23.	Receivables from parent, subsidiaries and affiliates.....			
24.	Health care and other amounts receivable.....	3,254,719	3,983,572	728,853
25.	Aggregate write-ins for other-than-invested assets.....			
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	3,254,719	3,983,572	728,853
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28.	Total (Lines 26 and 27).....	3,254,719	3,983,572	728,853
Details of Write-Ins				
1101.	.....			
1102.	.....			
1103.	.....			
1198.	Summary of remaining write-ins for Line 11 from overflow page.....			
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....			
2501.	.....			
2502.	.....			
2503.	.....			
2598.	Summary of remaining write-ins for Line 25 from overflow page.....			
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....			

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.....	937	4	4	4	4	372
2. Provider Service Organizations.....						
3. Preferred Provider Organizations.....	45,864	37,852	37,803	37,348	36,922	451,091
4. Point of Service.....						
5. Indemnity Only.....						
6. Aggregate write-ins for other lines of business.....	37,714	35,537	35,138	35,065	35,003	421,174
7. Total.....	84,515	73,393	72,945	72,417	71,929	872,637
Details of Write-Ins						
0601. Reinsurance.....	36,086	33,878	33,443	33,374	33,328	401,052
0602. Medicare Supplement.....	1,628	1,659	1,695	1,691	1,675	20,122
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page.....						
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	37,714	35,537	35,138	35,065	35,003	421,174

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of AultCare Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners’ (NAIC) Accounting Practices and Procedures manual, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio.

	SSAP #	F/S Page	F/S Line #	2024	2023
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ (9,167,735)	\$ 6,545,706
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ (9,167,735)</u>	<u>\$ 6,545,706</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 48,205,521	\$ 49,476,601
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 48,205,521</u>	<u>\$ 49,476,601</u>

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

The preparation of financial statement in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds were stated at amortized cost using the straight-line method.
- (3) Common stock is stated at market value.
- (4) The Company had no preferred stock during the periods reported.
- (5) The Company had no mortgage loans during the periods reported.
- (6) The Company had no loan backed securities during the periods reported.
- (7) The Company has investments in subsidiaries and affiliates with a book adjusted carrying value totaling \$9,655,702. Of this amount, \$155,975 is invested in McKinley Life Agency, Ltd, which is carried at GAAP equity value. In addition, \$9,499,727 invested in West Tuscarawas Property Management, carried at GAAP equity.
- (8) The Company had no investments in joint ventures, partnerships, or limited liability companies during the periods reported.
- (9) The Company had no derivatives during the periods reported.
- (10) The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.
- (11) Claims unpaid and claim adjustment expenses include an amount based on individual case estimates and loss reports and an amount based on past experience for losses incurred but not reported (IBNR). Such liabilities are necessarily based on assumptions and estimates. While management believes the amounts to be adequate, the ultimate liabilities may be in excess of or less than the amounts provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined. The Company obtains an estimate of the liabilities for unpaid losses from its independent actuary calculations quarterly.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company uses current year received pharmacy rebates as a percentage of current year claim expense to estimate current rebate receivable off of the most recent quarter’s pharmacy claim expense in accordance with SSAP. 84.

D. Going Concern

Management has concluded that there is no substantial doubt of the Company’s ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company has moved the assumed reinsurance premiums, claims and allocated expenses of a MEWA from the other health to the Comprehensive category in the annual statement.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

The Company had no business combinations accounted for under the statutory purchase method during the periods reported.

Notes to the Financial Statements

3. Business Combinations and Goodwill (Continued)

B. Statutory Merger

The Company was not part of any merger during the periods reported.

- (1) Name and description of entities - Not Applicable
- (2) Method of accounting - Not Applicable
- (3) Shares of stock issued in transaction - Not Applicable
- (4) Results of operations for period prior - Not Applicable
- (5) Adjustments recorded to surplus - Not Applicable

C. Assumption Reinsurance

The Company had no assumption of reinsurance during the periods reported.

- (1) Name of ceding entity - Not Applicable
- (2) Type of business assumed - Not Applicable
- (3) Cost of acquired business and amount of goodwill - Not Applicable
- (4) Amount of amortization of goodwill recorded for prior year - Not Applicable

D. Impairment Loss

An impairment loss was not recognized during the periods reported.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill - Not Applicable

4. Discontinued Operations

A. Discontinued Operation Disposed of or Classified as Held for Sale

The Company did not discontinue any operations during the periods reported.

- (1) List of discontinued operations disposed of or classified as held for sale - Not Applicable
- (2) Facts and circumstances of disposal - Not Applicable
- (3) Loss recognized on discontinued operations - Not Applicable
- (4) Carrying amount and fair value of discontinued operations and the effect on assets, liabilities, surplus and income - Not Applicable

B. Change in Plan of Sale of Discontinued Operation

The Company did not discontinue any operations during the periods reported.

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal

The Company did not discontinue any operations during the periods reported.

D. Equity Interest Retained in the Discontinued Operation After Disposal

The Company did not discontinue any operations during the periods reported.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company had no investment in Mortgage Loan during the periods reported.

- (1) Maximum and minimum lending rates for mortgage loans - Not Applicable
- (2) Maximum percentage of any one loan to the value of security - Not Applicable
- (3) Taxes, assessments and any amounts advanced and not included in mortgage loan total - Not Applicable
- (4) Age analysis of mortgage loans and identification of mortgage loans in which the insurer is a participant or co-lender in a mortgage loan agreement - Not Applicable
- (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 - Not Applicable
- (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 - Not Applicable
- (7) Allowance for credit losses - Not Applicable
- (8) Mortgage loans derecognized as a result of foreclosure - Not Applicable
- (9) Policy for recognizing interest income and impaired loans - Not Applicable

B. Debt Restructuring

The Company had no investments in Restructured Loans during the periods reported.

C. Reverse Mortgages

The Company had no investments in Reverse Mortgages during the periods reported.

- (1) Accounting policies and methods - Not Applicable

Notes to the Financial Statements

5. Investments (Continued)

- (2) Commitment under agreement - Not Applicable
- (3) Reserve netted against reverse mortgage assets - Not Applicable
- (4) Investment income or loss recognized as a result of re-estimated cash flows - Not Applicable

D. Loan-Backed Securities

The Company had no investments in Loan-Backed Securities during the periods reported.

- (1) Prepayment assumptions - Not Applicable
- (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) - Not Applicable
- (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities - Not Applicable
- (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss - Not Applicable
- (5) Support for concluding impairments are not other-than-temporary - Not Applicable

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

The Company had no investments in Repurchase Agreements during the periods reported..

- (1) Policy for requiring collateral or security - Not Applicable
- (2) Carrying amount and classification of assets pledged as collateral and not reclassified and separately reported - Not Applicable
- (3) Collateral received - Not Applicable
- (4) Securities lending transactions administered by an affiliated agent - Not Applicable
- (5) Collateral reinvestment - Not Applicable
- (6) Collateral not permitted by contract or custom to sell or repledge - Not Applicable
- (7) Collateral for securities lending transactions that extend beyond one year from the reporting date - Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Repurchase Transaction - Cash Taker - Overview of Secured Borrowing Transactions

The Company had no repurchase agreements accounted for a secured borrowing.

- (1) Information regarding the company policy or strategies for engaging in repo programs, policy for requiring collateral - Not Applicable
- (2) Type of repo trades used - Not Applicable
- (3) Original (flow) & residual maturity - Not Applicable
- (4) Fair value of securities sold and/or acquired that resulted in default - Not Applicable
- (5) Securities "sold" under repo - secured borrowing - Not Applicable
- (6) Securities sold under repo - secured borrowing by NAIC designation - Not Applicable
- (7) Collateral received - secured borrowing - Not Applicable
- (8) Cash & non-cash collateral received - secured borrowing by NAIC designation - Not Applicable
- (9) Allocation of aggregate collateral by remaining contractual maturity - Not Applicable
- (10) Allocation of aggregate collateral reinvested by remaining contractual maturity - Not Applicable
- (11) Liability to return collateral - secured borrowing (total) - Not Applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Repurchase Transaction - Cash Provider - Overview of Secured Borrowing Transactions

The Company had no reverse repurchase agreements accounted for a secured borrowing.

- (1) Information regarding the company policy or strategies for engaging in repo programs, policy for requiring collateral - Not Applicable
- (2) Type of repo trades used - Not Applicable
- (3) Original (flow) & residual maturity - Not Applicable
- (4) Fair value of securities sold and/or acquired that resulted in default - Not Applicable
- (5) Fair value of securities acquired under repo - secured borrowing - Not Applicable
- (6) Securities acquired under repo - secured borrowing by NAIC designation - Not Applicable
- (7) Collateral provided - secured borrowing - Not Applicable
- (8) Allocation of aggregate collateral pledged by remaining contractual maturity - Not Applicable
- (9) Recognized receivable for return of collateral - secured borrowing - Not Applicable
- (10) Recognized liability to return collateral - secured borrowing (total) - Not Applicable

Notes to the Financial Statements

5. Investments (Continued)

H. Repurchase Agreements Transactions Accounted for as a Sale

Repurchase Transaction - Cash Taker - Overview of Sale Transactions

The Company had no repurchase agreements accounted for as sales.

- (1) Information regarding the company policy or strategies for engaging in repo programs and policy for requiring collateral - Not Applicable
- (2) Type of repo trades used - Not Applicable
- (3) Original (flow) & residual maturity - Not Applicable
- (4) Fair value of securities sold and/or acquired that resulted in default - Not Applicable
- (5) Securities "sold" under repo - sale - Not Applicable
- (6) Securities sold under repo - sale by NAIC designation - Not Applicable
- (7) Proceeds received - sale - Not Applicable
- (8) Cash & non-cash collateral received - sale by NAIC designation - Not Applicable
- (9) Recognized forward resale commitment - Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Repurchase Transaction - Cash Provider - Overview of Sale Transactions

The Company had no reverse repurchase agreements accounted for as sales.

- (1) Information regarding the company policy or strategies for engaging in repo programs, policy for requiring collateral - Not Applicable
- (2) Type of repo trades used - Not Applicable
- (3) Original (flow) & residual maturity - Not Applicable
- (4) Fair value of securities sold and/or acquired that resulted in default - Not Applicable
- (5) Securities acquired under repo - sale - Not Applicable
- (6) Securities acquired under repo - sale by NAIC designation - Not Applicable
- (7) Proceeds provided - sale - Not Applicable
- (8) Recognized forward resale commitment - Not Applicable

J. Real Estate

The Company owns \$9,499,727 worth of shares in West Tuscarawas Property Management, an affiliate company that hold certain real estate properties for the production of income.

- (1) Impairment loss - Not Applicable
- (2) Real estate sold or classified held for sale - Not Applicable
- (3) Changes to a plan of sale for an investment in real estate - Not Applicable
- (4) Retail land sales operations - Not Applicable
- (5) Participating mortgage loan features - Not Applicable

K. Low-Income Housing Tax Credits (LIHTC)

The Company has no investments in Low-Income Housing Tax Credits.

- (1) Remaining years of unexpired tax credits - Not Applicable
- (2) Amount of LIHTC and other tax benefits - Not Applicable
- (3) Balance of investment recognized - Not Applicable
- (4) Regulatory reviews - Not Applicable
- (5) Significance of an investment - Not Applicable
- (6) Impaired assets - Not Applicable
- (7) Write-downs and reclassifications - Not Applicable

L. Restricted Assets

The Company has a deposit with a fair market value of \$503,905 with Ohio.

Notes to the Financial Statements

5. Investments (Continued)

(1) Restricted assets (including pledged)

Restricted Asset Category	(1) Total Gross (Admitted & Nonadmitted) Restricted from Current Year	(2) Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	(3) Increase / (Decrease) (1 - 2)	(4) Total Current Year Nonadmitted Restricted	(5) Total Current Year Admitted Restricted (1 - 4)	(6) Gross (Admitted & Nonadmitted) Restricted to Total Assets	(7) Admitted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$	\$	\$	\$	\$	%	%
b. Collateral held under security lending agreements							
c. Subject to repurchase agreements							
d. Subject to reverse repurchase agreements							
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							
j. On deposit with states	503,905		503,905		503,905	0.495	0.511
k. On deposit with other regulatory bodies							
l. Pledged as collateral to FHLB (including assets backing funding agreements)							
m. Pledged as collateral not captured in other categories							
n. Other restricted assets							
o. Total restricted assets (Sum of a through n)	\$ 503,905	\$	\$ 503,905	\$	\$ 503,905	0.495 %	0.511 %

(2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable

(3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) - Not Applicable

(4) Collateral received and reflected as assets within the reporting entity's financial statements - Not Applicable

M. Working Capital Finance Investments

The Company had no Working Capital Finance Investments during the periods reported.

(1) Aggregate working capital finance investments (WCFI) book/adjusted carrying value by NAIC designation - Not Applicable

(2) Aggregate maturity distribution on the underlying working capital finance programs - Not Applicable

(3) Events of default of working capital finance investments during the reporting period - Not Applicable

N. Offsetting and Netting of Assets and Liabilities

The Company was not involved in any Offsetting and Netting of Assets and Liabilities during the periods reported.

O. 5GI Securities

The Company had no 5*Securities during the periods reported.

P. Short Sales

The Company had no short sale securities.

(1) Unsettled short sale transactions (outstanding as of reporting date) - Not Applicable

(2) Settled short sale transactions - Not Applicable

Q. Prepayment Penalty and Acceleration Fees

The Company had \$21,310 in penalties and/or acceleration fees.

	General Account
(1) Number of CUSIPs	—
(2) Aggregate amount of investment income	\$ 21,310

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

The Company had no reporting of the cash pool by asset type during the periods reported.

Notes to the Financial Statements

5. Investments (Continued)

S. Aggregate Collateral Loans by Qualifying Investment Collateral

	Collateral Type	Aggregate Collateral Loan	Admitted	Nonadmitted
(1)	Cash, Cash Equivalent & ST Investments			
	a. Affiliated	\$	\$	\$
	b. Unaffiliated			
(2)	Bonds			
	a. Affiliated			
	b. Unaffiliated			
(3)	Loan-Backed and Structured Securities			
	a. Affiliated			
	b. Unaffiliated			
(4)	Preferred Stocks			
	a. Affiliated			
	b. Unaffiliated			
(5)	Common Stocks			
	a. Affiliated			
	b. Unaffiliated			
(6)	Real Estate			
	a. Affiliated			
	b. Unaffiliated			
(7)	Mortgage Loans			
	a. Affiliated			
	b. Unaffiliated			
(8)	Joint Ventures, Partnerships, LLC			
	a. Affiliated			
	b. Unaffiliated			
(9)	Other Qualifying Investments			
	a. Affiliated			
	b. Unaffiliated			
(10)	Collateral Does not Qualify as an Investment			
	a. Affiliated			
	b. Unaffiliated			
(11)	Total	\$	\$	\$

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. Investments in Joint Ventures, Partnerships or Limited Liability Companies that Exceed 10% of Admitted Assets
The Company had no investments in joint ventures, partnerships or limited liability companies during the periods reported.
- B. Impaired Investments in Joint Ventures, Partnerships and Limited Liability Companies
The Company had no impaired investments in joint ventures, partnerships or limited liability companies during the periods reported.

7. Investment Income

- A. Due and Accrued Income Excluded from Surplus
The Company did not exclude any investment income due and accrued during the periods reported.
- B. Total Amount Excluded
The Company did not exclude any investment income due and accrued during the periods reported.
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

	Interest Income Due and Accrued	Amount
1. Gross		\$ 447,391
2. Nonadmitted		\$
3. Admitted		\$ 447,391

- D. The aggregate deferred interest - Not Applicable
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance - Not Applicable

8. Derivative Instruments

- A. Derivatives under SSAP No. 86 - Derivatives
- (1) The Company did not own derivative financial instruments during the periods reported.
- (2) Description of objectives - Not Applicable

Notes to the Financial Statements

8. Derivative Instruments (Continued)

- (3) Description of accounting policies - Not Applicable
- (4) Derivative contracts with financing premiums - Not Applicable
- (5) Net gain or loss recognized - Not Applicable
- (6) Net gain or loss recognized from derivatives no longer qualifying for hedge accounting - Not Applicable
- (7) Derivatives accounted for as cash flow hedges of a forecasted transaction - Not Applicable
- (8) Premium Cost for Derivative Contracts - Not Applicable
- (9) Derivative Component Values - Not Applicable

B. Derivatives under SSAP No. 108 - Derivative Hedging Variable Annuity Guarantees (Life/Fraternal Only) - Not Applicable

9. Income Taxes

A. Components of the Net Deferred Tax Asset/(Liability)

- (1) Change between years by tax character

	2024			2023			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets	\$ 2,771,210	\$ 358,166	\$ 3,129,376	\$ 959,718	\$ 101,045	\$ 1,060,763	\$ 1,811,492	\$ 257,121	\$ 2,068,613
(b) Statutory valuation allowance adjustments									
(c) Adjusted gross deferred tax assets (1a - 1b)	2,771,210	358,166	3,129,376	959,718	101,045	1,060,763	1,811,492	257,121	2,068,613
(d) Deferred tax assets nonadmitted									
(e) Subtotal net admitted deferred tax asset (1c - 1d)	\$ 2,771,210	\$ 358,166	\$ 3,129,376	\$ 959,718	\$ 101,045	\$ 1,060,763	\$ 1,811,492	\$ 257,121	\$ 2,068,613
(f) Deferred tax liabilities	10,196	164,694	174,890		423,599	423,599	10,196	(258,905)	(248,709)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 2,761,014	\$ 193,472	\$ 2,954,486	\$ 959,718	\$ (322,554)	\$ 637,164	\$ 1,801,296	\$ 516,026	\$ 2,317,322

- (2) Admission calculation components SSAP No. 101

	2024			2023			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
(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 (lesser of 2(b)1 and 2(b)2 below)	2,771,210	358,166	3,129,376	959,718	101,045	1,060,763	1,811,492	257,121	2,068,613
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	2,771,210	358,166	3,129,376	959,718	101,045	1,060,763	1,811,492	257,121	2,068,613
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX		XXX	XXX	7,823,638	XXX	XXX	(7,823,638)
(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	(10,196)	(164,694)	(174,890)		(423,599)	(423,599)	(10,196)	258,905	248,709
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.									
Total (2(a) + 2(b) + 2(c))	\$ 2,761,014	\$ 193,472	\$ 2,954,486	\$ 959,718	\$ (322,554)	\$ 637,164	\$ 1,801,296	\$ 516,026	\$ 2,317,322

- (3) Ratio used as basis of admissibility

	2024	2023
(a) Ratio percentage used to determine recovery period and threshold limitation amount	356.858 %	427.000 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 48,205,521	\$ 52,157,587

Notes to the Financial Statements

9. Income Taxes (Continued)

(4) 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

	2024		2023		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
1. Adjusted gross DTAs amount from Note 9A1(c)....	\$ 2,771,210	\$ 358,166	\$ 959,718	\$ 101,045	\$ 1,811,492	\$ 257,121
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).....	\$ 2,771,210	\$ 358,166	\$ 959,718	\$ 101,045	\$ 1,811,492	\$ 257,121
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies.....	 %	 %	 %	 %	 %	 %

(b) Use of reinsurance-related tax-planning strategies

Does the company's tax-planning strategies include the use of reinsurance?.....NO.....

B. Regarding Deferred Tax Liabilities That Are Not Recognized - Not Applicable

C. Major Components of Current Income Taxes Incurred

		(1)	(2)	(3)
		2024	2023	Change (1-2)
Current income taxes incurred consist of the following major components:				
1. Current Income Tax				
(a) Federal.....	\$ 1,907,721	\$ 411,076	\$ 1,496,645	
(b) Foreign.....				
(c) Subtotal (1a+1b).....	\$ 1,907,721	\$ 411,076	\$ 1,496,645	
(d) Federal income tax on net capital gains.....	406,195		406,195	
(e) Utilization of capital loss carry-forwards.....				
(f) Other.....				
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f).....	\$ 2,313,916	\$ 411,076	\$ 1,902,840	
		(1)	(2)	(3)
		2024	2023	Change (1-2)
2. Deferred Tax Assets				
(a) Ordinary				
(1) Discounting of unpaid losses.....	\$ 59,871	\$ 54,936	\$ 4,935	
(2) Unearned premium reserve.....	166,692	210,260	(43,568)	
(3) Policyholder reserves.....	117,785	94,301	23,484	
(4) Investments.....		275,046	(275,046)	
(5) Deferred acquisition costs.....				
(6) Policyholder dividends accrual.....				
(7) Fixed assets.....				
(8) Compensation and benefits accrual.....	334,950		334,950	
(9) Pension accrual.....				
(10) Receivables - nonadmitted.....				
(11) Net operating loss carry-forward.....	2,064,660	276,565	1,788,095	
(12) Tax credit carry-forward.....				
(13) Other.....	27,252	48,610	(21,358)	
(99) Subtotal (Sum of 2a1 through 2a13).....	\$ 2,771,210	\$ 959,718	\$ 1,811,492	
(b) Statutory valuation allowance adjustment.....				
(c) Nonadmitted.....				
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c).....	\$ 2,771,210	\$ 959,718	\$ 1,811,492	
(e) Capital				
(1) Investments.....	\$ 248,045	\$ 248,045		
(2) Net capital loss carry-forward.....	110,121	101,045	9,076	
(3) Real estate.....				
(4) Other.....				
(99) Subtotal (2e1+2e2+2e3+2e4).....	\$ 358,166	\$ 101,045	\$ 257,121	
(f) Statutory valuation allowance adjustment.....				
(g) Nonadmitted.....				
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g).....	358,166	101,045	257,121	
(i) Admitted deferred tax assets (2d + 2h).....	\$ 3,129,376	\$ 1,060,763	\$ 2,068,613	

Notes to the Financial Statements

9. Income Taxes (Continued)

	(1) 2024	(2) 2023	(3) Change (1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
(5) Other	10,196		10,196
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 10,196	\$	\$ 10,196
(b) Capital			
(1) Investments	\$ 164,694	\$ 423,599	\$ (258,905)
(2) Real estate			
(3) Other			
(99) Subtotal (3b1+3b2+3b3)	\$ 164,694	\$ 423,599	\$ (258,905)
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 174,890	\$ 423,599	\$ (248,709)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 2,954,486	\$ 637,164	\$ 2,317,322

The change in deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	Current Period	Prior Year	Change (Col. 1 - Col. 2)
Adjusted gross deferred tax assets	\$	\$	\$
Total deferred tax liabilities			
Net deferred tax assets (liabilities)			
Statutory valuation allowance adjustment			
Net deferred tax assets (liabilities) after statutory valuation allowance			
Tax effect of unrealized gains (losses)			
Change in net deferred income tax			\$

D. Among the More Significant Book to Tax Adjustments

	2024	Effective Tax Rate
Provision computed at statutory rate	\$ (1,613,122)	21.000 %
Change in nonadmitted assets		
Tax exempt income, net of proration		
Dividends received deduction, net of proration		
Nondeductible expenses	41,443	-0.540
Elimination of IMR Amortization		
Small Life Insurance Company Deduction		
Prior year under (over) accrual	(447,959)	5.832
Other	2,523,182	-32.847
Total	\$ 503,544	-6.555 %

	2024	Effective Tax Rate
Federal and foreign income taxes incurred	\$ 1,907,721	-24.835 %
Realized capital gains (losses) tax	406,195	-5.288
Change in net deferred income taxes	(1,810,372)	23.568
Total statutory income taxes	\$ 503,544	-6.555 %

E. Operating Loss and Tax Credit Carryforwards

- (1) At December 31, 2024, the Company had \$289,683 in net operating loss carry forwards available to offset against future taxable income.
- (2) Income tax expense available for recoupment

The following are income taxes incurred in the current and prior years that will be available for recoupment in the event of future net losses:

	Total
2022	\$
2023	
2024	

- (3) The Company did not have any deposits admitted under Section 6603 of the Internal Revenue Service Code.

F. Consolidated Federal Income Tax Return

- (1) The Company is included in a consolidated federal income tax return with the following affiliates: Aultra Administrative Group; North Central Medical Resources; Aultman Medical Group, Inc.; and MainSite Solutions ASO, LLC.

Notes to the Financial Statements

9. Income Taxes (Continued)

(2) The Company has a written agreement, approved by the Company's Board of Directors, which sets forth the manner in which the total combined federal income tax is allocated to each entity in which is a party to the consolidation. In the event any federal Tax Benefit Item of the AultCare Companies for any taxable period after they cease being Members of the Consolidated Group is eligible to be carried back to a taxable period while the AultCare Companies were Members of the Consolidated Group, the AultCare Companies shall, where possible, elect to carry such amounts forward to subsequent taxable periods. If the AultCare Companies are required by law to carry back any such federal Tax Benefit Item, the AultCare Companies shall be entitled to a payment at the time and to the extent that such Tax Benefit Item reduces the federal income Tax liability of the Consolidated Group. For purposes of computing the amount of the payment described in this section, one or more federal Tax Benefit Items shall be considered to have reduced the Consolidated Group's federal income Tax liability in a given taxable period by an amount equal to the difference, if any, between (i) the amount of the Consolidated Group's federal income Tax liability for the taxable period computed without regard to such federal Tax Benefit Item or Items and (ii) the amount of the Consolidated Group's federal income Tax liability for the taxable period computed with regard to such federal Tax Benefit Item or Items. For the avoidance of doubt, if the AultCare Companies are required to carry back a federal Tax Benefit Item, such federal Tax Benefit Item shall reduce the Consolidated Group's federal income Tax liability only after all federal Tax Benefit Items of AultCare Holdings have been applied to reduce the Consolidated Group's federal income Tax liability in such taxable period. Appropriate reconciliation payments shall be made in the event that it is subsequently determined that a Tax Benefit Item did not reduce the Consolidated Group's federal income Tax liabilities, including by reason of any such Tax Benefit Item being subsequently disallowed in whole or in part or by reason of other Tax benefits becoming available.

- G. Federal or Foreign Income Tax Loss Contingencies - Not Applicable
- H. Repatriation Transition Tax (RTT) - Not Applicable
- I. Alternative Minimum Tax (AMT) Credit - Not Applicable

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

- A. A, B, C - The Company had the following transactions with affiliates.

The Company is a party to a Master Services Agreement with Aultman Health Foundation, the ultimate controlling person, under which AHF provides the Company with certain professional management, administration, billing, purchasing, physical plant, and staffing services and support. The Company paid Aultman Health Foundation \$944,103 and \$1,044,212, respectively, for services provided under the Master Services Agreement as of December 31, 2024, and 2023, respectively.

The Company has a capitation arrangement with Aultman Hospital and has paid \$22,774,682 and \$20,319,745 in capitated claims for its commercial enrollees as of December 31, 2024, and 2023, respectively. The company paid claims to affiliated companies in the amount of \$10,885,366and \$13,193,213 of December 31, 2024, and 2023, respectively.

The Company also is a party to a Management and Administrative Services Agreement with AultCare Corporation under which AultCare Corporation provides the Company with certain specified services, including (among others) management and administrative services, provider networking services, marketing and sales services, and office facilities. The Company paid AultCare Corporation \$17,236,203and \$21,505,091, respectively, for services provided under the Management and Administrative Services Agreement thru December 31, 2024, and 2023, respectively.

- D. The Company has an amount due to an affiliate, Mckinley Life Agency, Ltd. The company reported \$79,330 due to the subsidiary as of December 31, 2024 and 2023.

The Company has an intercompany revolving credit facility in place with AultCare Corporation, an affiliate that allows AultCare to borrow and repay operating funds. As of December 31, 2024, AultCare Corporation owes \$727,567 the terms of this agreement.

The Company also has a capitation arrangement with Aultman Hospital for anticipation of future services. As of December 31, 2024, the Company has paid \$1,651,432 Aultman Hospital for these future services.

The Company received approval from ODI to record a capital contribution of \$6,000,000 from its affiliate, AultCare Health Insuring Company (AHIC), on February 28, 2025, and approval was given by ODI to include this amount in the financial statements as of December 31, 2024.

- E. The Company did not make any guarantees or undertakings, written or otherwise, for the benefit of an affiliate or related party which resulted in a material contingent exposure of the Company's assets to any liabilities during the periods reported.
- F. Both Aultman Health Foundation, the ultimate controlling entity, and AultCare Corporation, an affiliate, provided various administrative, marketing, and claims processing services for the Company.
- G. All outstanding shares of the Company were owned by the Company's parent, AultCare Health Insuring Corporation, a not-for-profit corporation domiciled in the State of Ohio.
- H. The Company did not own any shares, directly or indirectly, of an upstream intermediate entity or ultimate parent during the periods reported.
- I. The Company did not have an investment in an SCA entity that exceeds 10% of admitted assets of the insurer.
- J. The Company did not realize any impairment write down for its investments in Subsidiary, Controlled or Affiliated Companies during the statement period.
- K. The Company does not have an investment in a foreign insurance subsidiary.
- L. The Company did not hold an investment in a downstream non insurance holding company during the periods reported.

- M. All SCA Investments

The Company did not hold any other SCA Investments.

- (1) Balance sheet value (admitted and nonadmitted) all SCAs (except 8b(i) entities) - Not Applicable
- (2) NAIC filing response information - Not Applicable

- N. Investment in Insurance SCAs

The Company did not hold any insurance SCA investments that departed from NAIC statutory accounting practices and procedures during the periods reported.

- (1) Not Applicable

Notes to the Financial Statements

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

- (2) The monetary effect on net income and surplus - Not Applicable
- (3) Not Applicable

O. SCA and SSAP No. 48 Entity Loss Tracking
The company did not have any SCA losses.

11. Debt

- A. The Company did not have any debt including capital notes.
- B. FHLB (Federal Home Loan Bank) Agreements
The Company did not have any debt including capital notes.
- (1) FHLB agreements - Not Applicable
 - (2) FHLB capital stock - Not Applicable
 - (3) Collateral pledged to FHLB - Not Applicable
 - (4) Borrowing from FHLB - Not Applicable

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

- A. Defined Benefit Plan
The Company had no defined benefit plans.
- (1) Change in benefit obligation - Not Applicable
 - (2) Change in plan assets - Not Applicable
 - (3) Funded status - Not Applicable
 - (4) Components of net periodic benefit cost - Not Applicable
 - (5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost - Not Applicable
 - (6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost - Not Applicable
 - (7) Weighted-average assumptions used to determine net periodic benefit cost - Not Applicable
 - (8) Accumulated benefit obligation - Not Applicable
 - (9) Multiple non-pension postretirement benefit plans - Not Applicable
 - (10) Estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated - Not Applicable
 - (11) Contributions expected to be paid to the plan during the next fiscal year - Not Applicable
 - (12) Amounts and types of securities of the reporting entity and related parties included in plan assets - Not Applicable
 - (13) Alternative method used to amortize prior service amounts or net gains and losses - Not Applicable
 - (14) Substantive commitments used as the basis for accounting for the benefit obligation - Not Applicable
 - (15) Special or contractual termination benefits recognized during the period - Not Applicable
 - (16) Significant changes in the benefit obligation or plan assets not otherwise disclosed - Not Applicable
 - (17) Funded status of the plan and surplus impact - Not Applicable
- B. Investment Policies and Strategies of Plan Assets
The Company had no defined benefit plans.
- C. Fair Value of Each Class of Plan Assets
The Company had no defined benefit plans.
- (1) Fair value measurements of plan assets at reporting date - Not Applicable
 - (2) Valuation technique(s) and inputs to measure fair value - Not Applicable
- D. Expected Long-Term Rate of Return for the Plan Assets
The Company had no defined benefit plans.
- E. Defined Contribution Plans
The Company participates in a defined contribution plan sponsored by Aultman Health Foundation. Contributions of 3% of each employee's compensation are made each year to the plan. The Company's contributions for the defined contribution plan were \$312,756 and \$305,033 as of December 31, 2024 and 2023 respectively.
- F. Multiemployer Plans
The Company had no multiemployer plans, consolidated company plans, post-employment plans, compensated absences, or postretirement benefit plans during the periods reported.

Notes to the Financial Statements

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

- G. Consolidated/Holding Company Plans
The Company had no multiemployer plans, consolidated company plans, post-employment plans, compensated absences, or postretirement benefit plans during the periods reported.
- H. Postemployment Benefits and Compensated Absences
The Company had no multiemployer plans, consolidated company plans, post-employment plans, compensated absences, or postretirement benefit plans during the periods reported.
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
The Company had no multiemployer plans, consolidated company plans, post-employment plans, compensated absences, or postretirement benefit plans during the periods reported.
 - (1) Recognition of the existence of the Act - Not Applicable
 - (2) Effects of the subsidy in measuring the net postretirement benefit cost - Not Applicable
 - (3) Disclosure of gross benefit payments - Not Applicable

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

- A. The Company has \$1,000,000 in common stock outstanding, which is owned by its direct parent, Aultman Health Foundation.
- B. The Company had no preferred stock outstanding.
- C. Without prior approval of its domiciliary commissioner, dividends to shareholders are limited by the laws of the Company's state of incorporation, Ohio, to an amount that is based on restrictions relating to statutory surplus and net income.
- D. The Company paid \$0 dividends in 2024 to AultCare Health Insurance Company.
- E. There were no restrictions placed on the Company's profits that may be paid as ordinary dividends to stock holders.
- F. There were no restrictions placed on the Company's surplus.
- G. The Total Amount of advances to surplus not repaid is \$0 as of December 31, 2024.
- H. Stock Held for Special Purposes
 - (a) For conversion of preferred stock: 0 shares
 - (b) For employee stock options: 0 shares
 - (c) For stock purchase warrants: 0 shares
- I. The Company did not have changes in the balances of any special surplus funds.
- J. Unassigned Funds (Surplus)
The Company did not have any surplus funds represented that were reduced.
- K. Company-Issued Surplus Debentures or Similar Obligations
The Company had no outstanding surplus debentures or similar obligations during the periods reported.
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations
The Company had no restatements due to quasi-reorganizations during the periods reported.
- M. The Company was not involved in a quasi-reorganization during the periods reported.

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments
The Company is not aware of any material contingent commitments.
 - (1) Commitments or contingent commitment(s) to an SCA entity, joint venture, partnership, or limited liability company - Not Applicable
 - (2) Nature and circumstances of guarantee - Not Applicable
 - (3) Aggregate compilation of guarantee obligations - Not Applicable
- B. Assessments
The Company is subject to the Ohio Life and Health Insurance Guaranty and does not know of any assessments that could have a material financial effect.
 - (1) Not Applicable
 - (2) Assets (Liabilities) recognized from paid and accrued premium tax offsets and policy surcharges - Not Applicable
 - (3) Guaranty fund liabilities and assets related to long-term care insolvencies - Not Applicable
- C. Gain Contingencies
The Company has no gain contingencies.
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits
Contingent liabilities arising from litigation, income taxes and other matters were not considered material in relation to the financial position of the Company.

Notes to the Financial Statements

14. Liabilities, Contingencies and Assessments (Continued)

- E. Joint and Several Liabilities
- Contingent liabilities arising from litigation, income taxes and other matters were not considered material in relation to the financial position of the Company.
- F. All Other Contingencies
- Contingent liabilities arising from litigation, income taxes and other matters were not considered material in relation to the financial position of the Company.

15. Leases

- A. Lessee Operating Lease
- (1) Leasing arrangements

The Company has no operating leases. Corporate office facilities expense is covered through the management service agreement with AultCare Corporation in Note 10 above.
- (2) For leases having initial or remaining noncancelable lease terms in excess of one year

(a) Minimum aggregate rental commitments at year end

	Year Ending December 31	Operating Leases
1. 2025		\$ 141,996
2. 2026		44,264
3. 2027		
4. 2028		
5. 2029		
6. Thereafter		
7. Total (sum of 1 through 6)		<u>\$ 186,260</u>

(b) Sublease minimum rentals to be received - Not Applicable
- (3) For sale-leaseback transactions - Not Applicable
- B. Lessor Leases
- Leasing is not a significant part of the lessor’s business activities in terms of revenue, net income, or assets.
- (1) Operating leases - Not Applicable

(2) Leveraged leases - Not Applicable

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

1. Face Amount of the Company's Financial Instruments with Off-Balance-Sheet Risk
- The Company had no financial instruments with off-balance sheet risk during the periods reported.
2. Nature of Terms - Not Applicable
3. Exposure to Credit Related Losses - Not Applicable
4. Collateral Policy - Not Applicable

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

- A. Transfers of Receivables Reported as Sales
- The Company had no transfers of receivables reported as sales.
- (1) Proceeds to the transferor - Not Applicable

(2) Gain or loss recorded on the sale - Not Applicable
- B. Transfer and Servicing of Financial Assets
- The Company had no transfers of financial assets.
- (1) Not Applicable

(2) Servicing assets and servicing liabilities - Not Applicable

(3) Not Applicable

(4) Securitizations, asset-backed financing arrangements and similar transfers accounted for as sales when the transferor has continued involvement with the transferred financial assets - Not Applicable

(5) Not Applicable

(6) Not Applicable

(7) Not Applicable
- C. Wash Sales
- The Company had no wash sales.
- (1) Objectives - Not Applicable

Notes to the Financial Statements

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

- (2) Details by NAIC designation 3 or below, or unrated of securities sold during the year ended December 31, 2024 and reacquired within 30 days of the sale date - Not Applicable

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

A. ASO Plans

The Company had no Uninsured A&H Plans or Uninsured Portion of Partially Insured Plans during the periods reported.

B. ASC Plans

The Company had no Uninsured A&H Plans or Uninsured Portion of Partially Insured Plans during the periods reported.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

The Company had no Uninsured A&H Plans or Uninsured Portion of Partially Insured Plans during the periods reported.

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

The Company had no direct premium written or produced by managing general agents or third party administrators during the periods reported.

20. Fair Value Measurements

The fair value of financial instruments represents estimates of fair values at a specific point in time determined by the Company using available market information and appropriate valuation methodologies. These estimates are subjective in nature and involve uncertainties and significant judgement in the interpretation of current market data. Therefore, the fair values presented are not necessarily indicative of amounts the Company could realize or settle currently.

The level in the fair value hierarchy within which fair value measurement in its entirety falls is determined based on the lowest level input that is significant to the fair value measurement in its entirety. The three levels of the hierarchy are as follows:

Level 1: Inputs are unadjusted, quoted prices in active markets for identical assets at the measurement date.

Level 2: Inputs (other than quoted prices included in Level 1 are either directly or indirectly observable for the asset through correlation with market data at the measurement date and for the duration of the instrument's anticipated life.

Level 3: Unobservable inputs that are supported by little or no market activity and are significant to the fair value of the assets or liabilities. Unobservable inputs reflect the Company's own assumptions about the assumptions that market participants would use in pricing the asset or liability at the measurement date.

A. Fair Value Measurement

(1) Fair value 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					
	Common Stock	\$ 14,270,633	\$	\$	\$	\$ 14,270,633
	Total assets at fair value/NAV	<u>\$ 14,270,633</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$ 14,270,633</u>
b.	Liabilities at fair value					
	Total liabilities at fair value	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy

The Company had no assets with fair value measurements using significant unobservable inputs.

(3) The Company uses the valuation technique that is based on the quoted prices in the active markets.

(4) The Company has no Level 2 or Level 3 assets.

(5) The Company does not have any derivative assets or liabilities.

B. Other Fair Value Disclosures

The Company does not have any other fair value assets to disclose.

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 18,547,522	\$ 18,547,522	\$	\$ 18,547,522	\$	\$	\$
Industrial and Misc.	19,167,868	19,167,868	9,666,847	9,501,021			
Common Stock	14,270,633	14,270,633	14,270,633				

D. Not Practicable to Estimate Fair Value

The Company had no fair value instruments or classes of financial instruments where it was not practical to estimate the fair value at either December 31, 2024, or 2023.

E. Nature and Risk of Investments Reported at NAV

The Company had no fair value instruments or classes of financial instruments where it was not practical to estimate the fair value at either December 31, 2024, or 2023.

21. Other Items

A. Unusual or Infrequent Items

The Company did not experience an unusual or infrequent item that resulted in a gain or loss.

Notes to the Financial Statements

21. Other Items (Continued)

- B. Troubled Debt Restructuring
- The Company had no troubled debt to restructure.
- C. Other Disclosures
- There are no other applicable disclosures.
- D. Business Interruption Insurance Recoveries
- The Company did not have any Business Interruption Insurance Recoveries.
- E. State Transferable and Non-Transferable Tax Credits
- The Company did not have any State 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 - Not Applicable
- (2) Method of estimating utilization of remaining transferable and non-transferable state tax credits - Not Applicable
- (3) Impairment loss - Not Applicable
- (4) State tax credits admitted and nonadmitted - Not Applicable
- F. Subprime-Mortgage-Related Risk Exposure
- The Company had no Subprime Mortgage Related Risk Exposure.
- (1) Subprime mortgage exposure - Not Applicable
- (2) Direct exposure through investments in subprime mortgage loans - Not Applicable
- (3) Direct exposure through other investments - Not Applicable
- (4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage - Not Applicable
- G. Retained Assets
- The Company had no retained assets.
- H. Insurance-Linked Securities (ILS) Contracts
- The Company has no Insurance Linked Securities.
- 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 - Not Applicable

22. Events Subsequent

Type I – Recognized Subsequent Events:

Subsequent events have been considered through the filing date for the statutory statement as of December 31, 2024. The Company received approval from ODI to record a capital contribution of \$6,000,000 from its affiliate, AHIC, on February 28, 2025, and approval was given by ODI to include this amount in the financial statements as of December 31, 2024. Besides this capital contribution, the Company is not aware of any other events or transactions that provide evidence with respect to conditions that did not exist at December 31, 2024, but arose after that date, which would have a material effect on its financial condition.

Type II – Nonrecognized Subsequent Events:

Subsequent events have been considered through the filing date for the statutory statement as of December 31, 2024. The Company is not aware of any events or transactions that provide evidence with respect to conditions that did not exist at December 31, 2024, but arose after that date, which would have a material effect on its financial condition.

23. Reinsurance

- A. Ceded Reinsurance Report
- Section 1 – General Interrogatories
- (1) Are any of the reinsurers, 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)
- (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 any other person not primarily engaged in the insurance business?
- Yes () No (X)

Notes to the Financial Statements

23. Reinsurance (Continued)

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)
- (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)

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. \$ –
- (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)

B. Uncollectible Reinsurance

The Company did not write off any uncollectible reinsurance during the periods reported.

C. Commutation of Reinsurance Reflected in Income and Expenses

The Company did not have any commutation of ceded reinsurance during the periods reported.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

The Company did not have a Reinsurer Rating Downgrade or Status Subject to Revocation during the periods reported.

- (1) Reporting entity ceding to certified reinsurer whose rating was downgraded or status subject to revocation - Not Applicable
- (2) Reporting entity's certified reinsurer rating downgraded or status subject to revocation - Not Applicable

E. Reinsurance Credit - Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

The Company has a contract with CMS that is subject to redetermination upon audits performed by the Inspector General. CMS adjusts its payments to the Company based on how actual benefit cost varied from estimated benefit costs included in the bid.

B. Method Used to Record

The Company records accrued retrospective premiums as an adjustment to earned premiums.

C. Amount and Percent of Net Retrospective Premiums

The Company has no group health plans as of December 31, 2024. No other net premiums written by the Company are subject to retrospective rating features.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - Not Applicable

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

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? YES

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year

	Amount
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to the ACA risk adjustment (including high-risk pool payments).....	\$.....(227,914)
Liabilities	
2. Risk adjustment user fees payable for ACA risk adjustment.....	\$.....
3. Premium adjustments payable due to ACA risk adjustment (including high-risk pool premium).....	.....
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment.....	\$.....
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid).....	.....

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(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

						Differences		Adjustments		Unsettled Balances as of the Reporting Date	
		Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year	Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year			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)		
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable (Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)											
		\$.....	- \$.....	\$.....	\$.....	\$.....	- \$.....	\$.....	\$.....	A	\$..... - \$.....
2. Premium adjustments (payable) (including high risk pool premium)											
										B	
3. Subtotal ACA Permanent Risk Adjustment Program											
		\$.....	- \$.....	\$.....	\$.....	\$.....	- \$.....	\$.....	\$.....		\$..... - \$.....

Explanations of Adjustments: None

25. Change in Incurred Claims and Claim Adjustment Expenses

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

Reserves as of December 31, 2023 were \$32,147,455. As of December 31, 2024, \$35,470,297 had been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$2,174,815. Therefore, there has been a unfavorable development of \$5,497,657 since December 31, 2023. Original estimates are increased or decreased as additional information becomes known regarding individual claims.

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

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses for the current reporting period. The Company utilizes an independent actuary who performs these calculations on an annual basis for year-end reporting.

26. Intercompany Pooling Arrangements

The Company had no intercompany pooling arrangements.

27. Structured Settlements

Note 27 is Not Applicable for Health Entities

The Company had no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

The Company follows the guidance of Statement of Statutory Accounting Principles (SSAP) No. 84 for its pharmacy rebates receivable. Pharmacy rebates receivable consist of estimated amounts and billed amounts. Estimated amounts are related to prescriptions filled during the three months immediately following quarter-end. Billed amounts represent those that have been accepted in writing, but not collected at the time of the reporting date. Being that the company does not confirm billed amounts within two months of the reporting date, only estimated amounts are admitted at the time of quarter-end.

Pharmacy rebates receivable are estimated based on pharmacy claims eligible for rebates reported during the period multiplied by agreed-upon rates. Pharmacy rebates as of the end of each quarter for the years of 2024, 2023, and 2022, are as follows:

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.....	\$.....2,921,898	\$.....3,108,114	\$.....	\$.....	\$.....
.....09/30/2024.....	4,316,456	4,658,798			
.....06/30/2024.....	4,247,071	4,618,056			
.....03/31/2024.....	3,828,685	4,226,480	771,976		
.....12/31/2023.....	3,475,784	4,840,438	1,983,975	3,286,951	
.....09/30/2023.....	4,389,285	5,096,494	926,768	3,706,941	450,798
.....06/30/2023.....	3,827,663	4,868,283	595,584	3,876,934	210,391
.....03/31/2023.....	3,410,168	4,320,871	532,955	3,467,021	5,529,958
.....12/31/2022.....	3,886,419	2,518,620	3,884,012	438,499	217,184
.....09/30/2022.....	3,743,626	1,298,390	445,531	3,256,226	-
.....06/30/2022.....	3,718,637	2,934,926	143,449	4,187,060	(637,468)
.....03/31/2022.....	2,635,867	576,167	365,703	2,980,623	108,392

B. Risk-Sharing Receivables

The Company did not have any risk sharing receivables during the periods reported.

29. Participating Policies

The Company does not have participating policies or policyholder dividends.

Notes to the Financial Statements

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves:.....\$—
2. Date of the most recent evaluation of this liability:.....12/31/2024
3. Was anticipated investment income utilized in the calculation?.....NO

31. Anticipated Salvage and Subrogation

The Company did not have anticipated salvage and subrogation included as a reduction of loss reserves.

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?

YES

If yes, complete Schedule Y, Parts 1, 1A, 2, and 3.

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

1.3.

State Regulating?

Ohio

1.4.

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

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.

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?

NO

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.

12/31/2023

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.

12/31/2020

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).

06/09/2022

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?

N/A

3.6.

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

N/A

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?

NO

4.12.

renewals?

NO

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?

NO

4.22.

renewals?

NO

5.1.

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

NO

If yes, complete and file the merger history data file with the NAIC.

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	2	3
Name of Entity	NAIC Company Code	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?

NO

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?

NO

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	2
Nationality	Type of Entity

8.1.

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

NO

8.2.

If 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?

NO

8.4.

If response to 8.3 is yes, please provide 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.

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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?.....NO
- 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?.....N/A
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Clifton Larson Allen, LLP, 4505 Stephen Circle NW, Suite 200, Canton, OH 44718
- 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?.....NO
- 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?.....NO
- 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
- 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?
Lee Benefits Consulting, 702 Saxony Drive, Seven Fields, PA 16046 - Actuary - Mr. Duane P. Lee
- 12.1. Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?.....YES
- 12.11 Name of real estate holding company
West Tuscarawas Property Management
- 12.12 Number of parcels involved.....
- 12.13 Total book / adjusted carrying value.....\$ 9,499,727
- 12.2. If yes, provide explanation
AultCare Insurance Company owns \$9,499,727 worth of shares of West Tusc. Property Management, which is a for profit real estate holding company located in Canton OH.
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?.....NO
- 13.3. Have there been any changes made to any of the trust indentures during the year?.....NO
- 13.4. If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?.....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
- 14.11. 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?.....NO
- 14.21. If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3. Have any provisions of the code of ethics been waived for any of the specified officers?.....NO
- 14.31. If the response to 14.3 is yes, provide the nature of any waiver(s).
- 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?.....NO
- 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.

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	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? YES
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? YES
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

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? NO
- 20.1. Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers \$ -

20.12 To stockholders not officers \$ -

20.13 Trustees, supreme or grand (Fraternal only) \$ -
- 20.2. Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers \$ -

20.22 To stockholders not officers \$ -

20.23 Trustees, supreme or grand (Fraternal only) \$ -
- 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? NO
- 21.2. If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others \$ -

21.22 Borrowed from others \$ -

21.23 Leased from others \$ -

21.24 Other \$ -
- 22.1. Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? NO
- 22.2. If answer is yes:

22.21 Amount paid as losses or risk adjustment \$ -

22.22 Amount paid as expenses \$ -

22.23 Other amounts paid \$ -
- 23.1. Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? YES
- 23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 6,075,765
- 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? NO
- 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.

1	2
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
- 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)
- 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. \$
- 25.05. For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 25.06. Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? N/A
- 25.07. Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? 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? N/A

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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.....\$
25.092. Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.....\$
25.093. Total payable for securities lending reported on the liability page.....\$

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).....NO

26.2. If yes, state the amount thereof at December 31 of the current year:
26.21. Subject to repurchase agreements.....\$
26.22. Subject to reverse repurchase agreements.....\$
26.23. Subject to dollar repurchase agreements.....\$
26.24. Subject to reverse dollar repurchase agreements.....\$
26.25. Placed under option agreements.....\$
26.26. Letter stock or securities restricted as to sale - excluding FHLB Capital Stock.....\$
26.27. FHLB Capital Stock.....\$
26.28. On deposit with states.....\$
26.29. On deposit with other regulatory bodies.....\$
26.30. Pledged as collateral - excluding collateral pledged to an FHLB.....\$
26.31. Pledged as collateral to FHLB - including assets backing funding agreements.....\$
26.32. Other.....\$

26.3. For category (26.26) provide the following:

1	2	3
Nature of Restriction	Description	Amount
		\$.....

27.1. Does the reporting entity have any hedging transactions reported on Schedule DB?.....NO

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

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?.....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.....NO
27.42 Permitted accounting practice.....NO
27.43 Other accounting guidance.....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:.....NO

- 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?.....NO

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

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

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

1	2
Name of Custodian(s)	Custodian's Address
Huntington National Bank.....	220 Market Avenue South, Canton, Oh 44702.....
The Vanguard Group.....	P.O. Box 2600 Valley Forge, PA 19482.....
Richmond Capital.....	10800 Midlothian Turnpike, Suite 217, Richmond, VA 23235.....

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	2	3
Name(s)	Location(s)	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?.....NO

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

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

1	2	3	4
Old Custodian	New Custodian	Date of Change	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	2
Name of Firm or Individual	Affiliation
Clearstead Advisors LLC - Invesment Advisor.....	U.....
Huntington Bank - Custodial.....	U.....
AultCare Investment Committee.....	A.....
Richmond Capital.....	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?.....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?.....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	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
105674.....	Clearstead Advisors LLC.....	549300CYW1YPZG7GYG08.....	SEC-801-33554.....	NO.....
104636.....	Richmond Capital.....	2549000Y1PM6HPB5PO6O.....	801-17534.....	DS.....

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.....

30.2. If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
60934N708.....	WILLIAM BLAIR INT EQUITY FUND.....	\$.....851,763
89354D338.....	TRANSAMERICA INT. EQUITY FUND.....	828,661
922908728.....	VANGUARD TOTAL MKT IDX ADMIRAL FUND.....	6,642,645
31428Q739.....	FEDERATED TOTAL RETURN.....	5,947,564
30.2999 TOTAL		\$.....14,270,633

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

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the Holding	Date of Valuation
WILLIAM BLAIR INT EQUITY FUND.....	Microsoft Corp.....	\$.....48,976	12/31/2024
TRANSAMERICA INT. EQUITY FUND.....	SAP SE.....	20,219	12/31/2024
VANGUARD TOTAL MKT IDX ADMIRAL FUND.....	Apple Inc.....	405,201	12/31/2024
FEDERATED TOTAL RETURN BOND.....		1,244,230	12/31/2024

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.....	\$.....43,451,182	\$.....42,675,499	\$.....(775,683)
31.2. Preferred Stocks.....			
31.3. Totals.....	\$.....43,451,182	\$.....42,675,499	\$.....(775,683)

31.4. Describe the sources or methods utilized in determining the fair values:

The market value of the bonds reported on the Huntington Investment statements are used to report Fair Value.

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.....

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?.....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.....

33.2. If no, list exceptions:

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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?.....NO.....
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 an 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?.....NO.....
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?.....NO.....
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?.....N/A.....
- 38.1. Does the reporting entity directly hold cryptocurrencies?.....NO.....
- 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?.....NO.....
- 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.....NO.....

39.22 Immediately converted to U.S. dollars.....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?.....\$.....264,492.....
- 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
Alliance of Community Health Plans.....	\$.....138,923.....
- 41.1. Amount of payments for legal expenses, if any?.....\$.....217,311.....
- 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
Squire Patton Boggs (US) LLP.....	\$.....79,741.....

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 42.1. Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any?.....\$..... 214,438 .
- 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
	\$.....

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?.....YES
- 1.2 If yes, indicate premium earned on U.S. business only.....\$ 4,302,690
- 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.....\$ 3,874,458
- 1.6 Individual policies:
Most current three years:
1.61 Total premium earned.....\$ 4,302,690
1.62 Total incurred claims.....\$ 3,874,458
1.63 Number of covered lives.....1,675
All years prior to most current three years:
1.64 Total premium earned.....\$
1.65 Total incurred claims.....\$
1.66 Number of covered lives.....
- 1.7 Group policies:
Most current three years:
1.71 Total premium earned.....\$
1.72 Total incurred claims.....\$
1.73 Number of covered lives.....
All years prior to most current three years:
1.74 Total premium earned.....\$
1.75 Total incurred claims.....\$
1.76 Number of covered lives.....

2. Health Test:

		1	2
		Current Year	Prior Year
2.1	Premium Numerator.....	\$..... 265,136,595	\$..... 259,707,473
2.2	Premium Denominator.....	\$..... 265,136,595	\$..... 259,707,473
2.3	Premium Ratio (2.1/2.2).....	100.000 %	100.000 %
2.4	Reserve Numerator.....	\$..... 33,503,505	\$..... 31,056,248
2.5	Reserve Denominator.....	\$..... 33,741,594	\$..... 32,352,202
2.6	Reserve Ratio (2.4/2.5).....	99.294 %	95.994 %

- 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?.....NO
- 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
- 4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?.....NO
- 5.1 Does the reporting entity have stop-loss reinsurance?.....YES
- 5.2 If no, explain:
- 5.3 Maximum retained risk (see instructions)
5.31 Comprehensive Medical.....\$ 400,000
5.32 Medical Only.....\$ 600,000
5.33 Medicare Supplement.....\$
5.34 Dental and Vision.....\$
5.35 Other Limited Benefit Plan.....\$ 35,000
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:
N/A
- 7.1 Does the reporting entity set up its claim liability for provider services on a service date basis?.....YES
- 7.2 If no, give details
8. Provide the following information regarding participating providers:
8.1 Number of providers at start of reporting year.....4,149
8.2 Number of providers at end of reporting year.....4,258
- 9.1 Does the reporting entity have business subject to premium rate guarantees?.....NO
- 9.2 If yes, direct premium earned:

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

9.21 Business with rate guarantees between 15-36 months\$

9.22 Business with rate guarantees over 36 months\$

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?YES

10.2 If yes:

10.21 Maximum amount payable bonuses\$318,235

10.22 Amount actually paid for year bonuses\$293,489

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,NO

11.13 An Individual Practice Association (IPA), or,NO

11.14 A Mixed Model (combination of above)?NO

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?YES

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.\$1,500,000

11.5 Is this amount included as part of a contingency reserve in stockholder's equity?NO

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
Ohio

13.1 Do you act as a custodian for health savings accounts?NO

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?NO

13.4 If yes, please provide the balance of the funds administered as of the reporting date.\$

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?N/A

14.2. If the answer to 14.1 is yes, please provide the following:

1	2	3	4	Assets Supporting Reserve Credit		
				5	6	7
Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	Letters of Credit	Trust Agreements	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 guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?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?NO

FIVE-YEAR HISTORICAL DATA

	1	2	3	4	5
	2024	2023	2022	2021	2020
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	98,580,086	100,088,068	93,121,441	93,262,438	95,556,885
2. Total liabilities (Page 3, Line 24)	50,374,565	50,611,470	50,584,037	43,534,811	44,762,394
3. Statutory minimum capital and surplus requirement	1,500,000	1,500,000	1,500,000	1,500,000	1,500,000
4. Total capital and surplus (Page 3, Line 33)	48,205,521	49,476,601	42,537,403	49,727,627	50,794,491
Income Statement (Page 4)					
5. Total revenues (Line 8)	265,136,595	259,707,473	262,188,022	254,852,081	259,386,323
6. Total medical and hospital expenses (Line 18)	242,280,845	225,360,555	232,027,342	224,803,513	213,767,016
7. Claims adjustment expenses (Line 20)	8,571,012	6,257,529	6,042,716	8,469,984	8,101,648
8. Total administrative expenses (Line 21)	26,806,681	29,088,607	33,787,448	34,599,052	37,657,844
9. Net underwriting gain (loss) (Line 24)	(12,521,943)	(999,218)	(9,669,484)	(13,020,469)	(140,185)
10. Net investment gain (loss) (Line 27)	4,936,973	6,548,118	1,335,911	5,389,213	4,011,075
11. Total other income (Lines 28 plus 29)					
12. Net income or (loss) (Line 32)	(9,167,735)	6,545,706	(8,134,988)	(6,707,660)	2,772,775
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	(9,945,372)	(4,658,210)	(5,328,685)	(3,841,681)	(4,451,705)
Risk-Based Capital Analysis					
14. Total adjusted capital	48,205,521	49,476,600	42,537,403	49,727,627	50,794,491
15. Authorized control level risk-based capital	13,537,623	12,114,810	12,509,396	11,923,417	11,288,210
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	71,929	84,515	79,612	81,846	85,886
17. Total members months (Column 6, Line 7)	872,637	969,978	970,156	970,990	1,055,082
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)	91.4	86.8	88.5	88.2	82.4
20. Cost containment expenses	2.4	1.7	1.6	2.6	2.3
21. Other claims adjustment expenses	0.8	0.7	0.7	0.7	0.8
22. Total underwriting deductions (Line 23)	104.7	100.4	103.7	105.1	100.1
23. Total underwriting gain (loss) (Line 24)	(4.7)	(0.4)	(3.7)	(5.1)	(0.1)
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	37,883,164	29,264,160	27,836,617	25,234,943	25,317,417
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	32,136,736	31,048,104	28,371,920	25,242,984	25,531,351
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)					
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)					
29. Affiliated short-term investments (subtotal included in Sch. DA Verification, Col. 5, Line 10)					
30. Affiliated mortgage loans on real estate					
31. All other affiliated		10,308,995	12,206,552	12,004,662	12,852,856
32. Total of above Lines 26 to 31		10,308,995	12,206,552	12,004,662	12,852,856
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?
If no, please explain

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

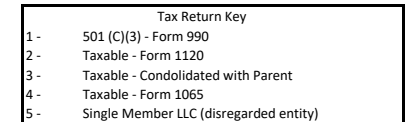
Allocated by States and Territories

			1	Direct Business Only								
			2	3	4	5	6	7	8	9	10	
States, Etc.			Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property / Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	N									
2.	Alaska	AK	N									
3.	Arizona	AZ	N									
4.	Arkansas	AR	N									
5.	California	CA	N									
6.	Colorado	CO	N									
7.	Connecticut	CT	N									
8.	Delaware	DE	N									
9.	District of Columbia	DC	N									
10.	Florida	FL	N									
11.	Georgia	GA	N									
12.	Hawaii	HI	N									
13.	Idaho	ID	N									
14.	Illinois	IL	N									
15.	Indiana	IN	N									
16.	Iowa	IA	N									
17.	Kansas	KS	N									
18.	Kentucky	KY	N									
19.	Louisiana	LA	N									
20.	Maine	ME	N									
21.	Maryland	MD	N									
22.	Massachusetts	MA	N									
23.	Michigan	MI	N									
24.	Minnesota	MN	N									
25.	Mississippi	MS	N									
26.	Missouri	MO	N									
27.	Montana	MT	N									
28.	Nebraska	NE	N									
29.	Nevada	NV	N									
30.	New Hampshire	NH	N									
31.	New Jersey	NJ	N									
32.	New Mexico	NM	N									
33.	New York	NY	N									
34.	North Carolina	NC	N									
35.	North Dakota	ND	N									
36.	Ohio	OH	L	247,876,622				982,477			248,859,099	
37.	Oklahoma	OK	N									
38.	Oregon	OR	N									
39.	Pennsylvania	PA	N									
40.	Rhode Island	RI	N									
41.	South Carolina	SC	N									
42.	South Dakota	SD	N									
43.	Tennessee	TN	N									
44.	Texas	TX	N									
45.	Utah	UT	N									
46.	Vermont	VT	N									
47.	Virginia	VA	N									
48.	Washington	WA	N									
49.	West Virginia	WV	N									
50.	Wisconsin	WI	N									
51.	Wyoming	WY	N									
52.	American Samoa	AS	N									
53.	Guam	GU	N									
54.	Puerto Rico	PR	N									
55.	U.S. Virgin Islands	VI	N									
56.	Northern Mariana Islands	MP	N									
57.	Canada	CAN	N									
58.	Aggregate Other Alien	OT	XXX									
59.	Subtotal	XXX		247,876,622				982,477			248,859,099	
60.	Reporting entity contributions for Employee Benefit Plans	XXX										
61.	Total (Direct Business)	XXX		247,876,622				982,477			248,859,099	
Details of Write-Ins												
58001.		XXX										
58002.		XXX										
58003.		XXX										
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX										
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX										

(a) Active Status Counts
1. L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG 1 4. Q – Qualified - Qualified or accredited reinsurer —
2. R – Registered – Non-domiciled RRGs — 5. N – None of the above - Not allowed to write business in the state 56
3. E – Eligible - Reporting entities eligible or approved to write surplus lines in the state —

(b) Explanation of basis of allocation by states, premiums by state, etc
The company only has business in the State of Ohio.

Aultman Health Foundation Organization Chart



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

