



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
Wellpoint Ohio, Inc.

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

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

Country of DomicileUnited States of America

Licensed as business type:Health Maintenance Organization

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

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

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

Main Administrative Office5800 Northampton Blvd
(Street and Number)
Norfolk, VA, US 23502757-490-6900
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

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

Primary Location of Books and Records5800 Northampton Blvd
(Street and Number)
Norfolk, VA, US 23502800-331-1476
(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.elevancehealth.com

Statutory Statement ContactJill M Waddell262-202-1569
(Name)(Area Code) (Telephone Number)
jill.waddell@elevancehealth.com262-523-4945
(E-mail Address)(FAX Number)

OFFICERS

President/ChairpersonKristen Louise MetzgerTreasurerVincent Edward Scher

SecretaryKathleen Susan KieferAssistant TreasurerEric (Rick) Kenneth Noble

OTHER

Jennifer Ann Dewane, Vice President

DIRECTORS OR TRUSTEES

Kristen Louise MetzgerRonald William PenczekJennifer Ann Dewane

State ofIndianaSS:

County ofMarion

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

DocuSigned by:
kristen l. Metzger
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DocuSigned by:
kathly kiefer
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DocuSigned by:
Vincent E. Scher
A85A33722D4143E...

Kristen Louise Metzger
President/Chairperson

Kathleen Susan Kiefer
Secretary

Vincent Edward Scher
Treasurer

Subscribed and sworn to before me this
29th day of April 2024

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

Yes [X] No []

Louanna Stiner
Executive Admin Assistant
06/29/31

LOUANNA STINER
Notary Public - Seal
Marion County - State of Indiana
Commission Number NP0749866
My Commission Expires Jun 29, 2031

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	16,339,756		16,339,756	16,944,717
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$179,139), cash equivalents (\$0) and short-term investments (\$)	179,139		179,139	6,334,386
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets	4,133,813		4,133,813	2,630,043
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	20,652,708	0	20,652,708	25,909,146
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	16,617		16,617	35,678
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	60,544	45,730	14,814	15,929
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$108,337) and contracts subject to redetermination (\$4,254,691)	4,363,028		4,363,028	3,180,088
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans	2,650,381		2,650,381	11,358,100
18.1 Current federal and foreign income tax recoverable and interest thereon	298,472		298,472	361,285
18.2 Net deferred tax asset	373,689	50,301	323,388	214,589
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	5,735,645		5,735,645	0
24. Health care (\$307,071) and other amounts receivable	441,678	134,607	307,071	52,223
25. Aggregate write-ins for other than invested assets	206,277	206,277	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	34,799,039	436,915	34,362,124	41,127,038
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	34,799,039	436,915	34,362,124	41,127,038
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid expenses	204,872	204,872	0	0
2502. Miscellaneous receivables	1,405	1,405	0	0
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	206,277	206,277	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	1,494,459		1,494,459	831,061
2. Accrued medical incentive pool and bonus amounts	129,235		129,235	227,351
3. Unpaid claims adjustment expenses	29,420		29,420	17,090
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act	1,162,137		1,162,137	1,317,268
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	1,448		1,448	998
9. General expenses due or accrued	1,126		1,126	1,069
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others.....			0	0
13. Remittances and items not allocated	1,181,445		1,181,445	496,978
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates			0	13,908,482
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending	4,133,813		4,133,813	2,630,043
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	4,861,013		4,861,013	0
23. Aggregate write-ins for other liabilities (including \$ 85,389 current)	85,389	0	85,389	92,956
24. Total liabilities (Lines 1 to 23)	13,079,485	0	13,079,485	19,523,296
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000	1,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	15,147,882	15,147,882
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	6,133,757	6,454,860
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		0
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	21,282,639	21,603,742
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	34,362,124	41,127,038
DETAILS OF WRITE-INS				
2301. Miscellaneous liabilities	85,389		85,389	92,956
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	85,389	0	85,389	92,956
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	15,551	19,065	73,997
2. Net premium income (including \$ non-health premium income).....	XXX	18,882,194	26,073,875	98,730,820
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(112,350)	(466,068)	(1,991,192)
4. Fee-for-service (net of \$ medical expenses)	XXX			0
5. Risk revenue	XXX			0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	18,769,844	25,607,807	96,739,628
Hospital and Medical:				
9. Hospital/medical benefits		13,694,436	21,279,085	79,889,992
10. Other professional services		316,063	140,416	1,296,082
11. Outside referrals				0
12. Emergency room and out-of-area		760,425	428,654	1,390,638
13. Prescription drugs		2,241,413	160,121	(394,687)
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		(20,594)	(6,369)	177,963
16. Subtotal (Lines 9 to 15)	0	16,991,743	22,001,907	82,359,988
Less:				
17. Net reinsurance recoveries				0
18. Total hospital and medical (Lines 16 minus 17)	0	16,991,743	22,001,907	82,359,988
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 85,191 cost containment expenses		135,833	102,320	609,338
21. General administrative expenses		1,537,216	2,543,884	10,382,427
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) .		(129,670)		518,680
23. Total underwriting deductions (Lines 18 through 22).....	0	18,535,122	24,648,111	93,870,433
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	234,722	959,696	2,869,195
25. Net investment income earned		(345,858)	302,637	1,122,133
26. Net realized capital gains (losses) less capital gains tax of \$0				34,468
27. Net investment gains (losses) (Lines 25 plus 26)	0	(345,858)	302,637	1,156,601
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$6,269)].		(6,269)	(3,794)	(19,740)
29. Aggregate write-ins for other income or expenses	0	(152)	(99)	(1,725)
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	(117,557)	1,258,440	4,004,331
31. Federal and foreign income taxes incurred	XXX	62,812	641,334	1,033,038
32. Net income (loss) (Lines 30 minus 31)	XXX	(180,369)	617,106	2,971,293
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Other income (expense)		(152)	(99)	(1,725)
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	(152)	(99)	(1,725)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	21,603,742	22,718,419	22,718,419
34. Net income or (loss) from Line 32	(180,369)	617,106	2,971,293
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	141,104	439,466	220,994
39. Change in nonadmitted assets	(281,838)	(296,337)	(106,964)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in			0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			(4,200,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	(321,103)	760,235	(1,114,677)
49. Capital and surplus end of reporting period (Line 33 plus 48)	21,282,639	23,478,654	21,603,742
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	17,559,665	33,730,341	98,442,037
2. Net investment income	278,220	319,529	1,480,808
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	17,837,885	34,049,870	99,922,845
5. Benefit and loss related payments	16,725,876	21,986,570	81,830,765
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	(11,901,593)	1,113,376	18,561,106
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0	1,036,009
10. Total (Lines 5 through 9)	4,824,283	23,099,946	101,427,880
11. Net cash from operations (Line 4 minus Line 10)	13,013,602	10,949,924	(1,505,035)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	0	0	15,043,581
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	0	15,043,581
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	0	30,999,770
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	1,503,770	0	2,630,043
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,503,770	0	33,629,813
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,503,770)	0	(18,586,232)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	4,200,000
16.6 Other cash provided (applied)	(17,665,079)	395,812	9,318,230
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(17,665,079)	395,812	5,118,230
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) .	(6,155,247)	11,345,736	(14,973,036)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	6,334,386	21,307,422	21,307,422
19.2 End of period (Line 18 plus Line 19.1)	179,139	32,653,158	6,334,386

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

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
1. Prior Year	5,971	0	0	0	0	0	0	5,971	0	0	0	0	0	0
2. First Quarter	5,127							5,127						
3. Second Quarter	0													
4. Third Quarter	0													
5. Current Year	0													
6. Current Year Member Months	15,551							15,551						
Total Member Ambulatory Encounters for Period:														
7 Physician	11,594							11,594						
8. Non-Physician	12,507							12,507						
9. Total	24,101	0	0	0	0	0	0	24,101	0	0	0	0	0	0
10. Hospital Patient Days Incurred	825							825						
11. Number of Inpatient Admissions	176							176						
12. Health Premiums Written (a)	18,882,194							18,882,194						
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned.....	18,769,844							18,769,844						
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	16,725,875							16,725,875						
18. Amount Incurred for Provision of Health Care Services	16,991,743							16,991,743						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 18,882,194

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

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UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	0	0	0	0	0	0
2. Comprehensive (hospital and medical) group	0	0	0	0	0	0
3. Medicare Supplement	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0
5. Dental only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	0	0	0	0	0	0
7. Title XVIII - Medicare	364,702	16,283,652	411,422	1,083,037	776,124	831,061
8. Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	364,702	16,283,652	411,422	1,083,037	776,124	831,061
14. Health care receivables (a)	94,903	346,775	0	0	94,903	142,263
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	101,339	(23,817)	128,633	602	229,972	227,351
17. Totals (Lines 13 - 14 + 15 + 16)	371,138	15,913,060	540,055	1,083,639	911,193	916,149

(a) Excludes \$ 0 loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2023. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Wellpoint Ohio, Inc. (the “Company”) have been prepared in conformity with the National Association of Insurance Commissioners’ (“NAIC”) *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* (“NAIC SAP”), subject to any deviations prescribed or permitted by the Ohio Department of Insurance (“ODI”). The Company employed no permitted practices in preparing the accompanying statutory financial statements.

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

	SSAP #	F/S Page	F/S Line #	March 31, 2024	December 31, 2023
<u>Net Income</u>					
(1) Wellpoint Ohio, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (180,369)	\$ 2,971,293
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (180,369)	\$ 2,971,293
<u>Surplus</u>					
(5) Wellpoint Ohio, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 21,282,639	\$ 21,603,742
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 21,282,639	\$ 21,603,742

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

No significant change.

NOTES TO FINANCIAL STATEMENTS

C. Accounting Policies

(1) No significant change.

(2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.

The Company holds 16 SVO-Identified bond exchange trade funds (“ETFs”) reported as bonds on Schedule D-1 in which the Company has made an irrevocable decision to report at systematic value. Systematic valuation has been consistently applied to these ETFs held at March 31, 2024 and previous periods.

(3) - (5) Not applicable.

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

(7) - (14) Not applicable.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

Not applicable.

3. Business Combinations and Goodwill

Not applicable.

4. Discontinued Operations

Not applicable.

5. Investments

A. - C.

Not applicable.

D. Loan-Backed Securities

(1) The Company did not have loan-backed securities at March 31, 2024.

(2) The Company did not recognize other-than-temporary impairments ("OTTI") on its loan-backed securities during the three months ended March 31, 2024.

(3) The Company did not hold OTTI on its loan-backed securities at March 31, 2024.

(4) The Company had no impaired loan-backed securities for which an OTTI had not been recognized in earnings at March 31, 2024.

(5) The Company had no impaired loan-backed securities at March 31, 2024.

NOTES TO FINANCIAL STATEMENTS

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) Not applicable.
- (2) No significant change.
- (3) Collateral Received
 - a. No significant change.
 - b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged \$ 4,133,813
 - c. No significant change.
- (4) Not applicable.
- (5) No significant change.
- (6) Not applicable.
- (7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

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

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at March 31, 2024.

H. Repurchase Agreements Transactions Accounted for as a Sale

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

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at March 31, 2024.

J. Real Estate

Not applicable.

K. Investments in Low-Income Housing Tax Credits

Not applicable.

L. Restricted Assets

No significant change.

M. Working Capital Finance Investments

Not applicable.

N. Offsetting and Netting of Assets and Liabilities

The Company had no netted assets and liabilities at March 31, 2024.

O. 5GI Securities

The Company has no 5GI Securities as of March 31, 2024.

P. Short Sales

The Company did not have any short sales at March 31, 2024.

NOTES TO FINANCIAL STATEMENTS

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at March 31, 2024.

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

The Company did not participate in a cash pool at March 31, 2024.

6. Joint Ventures, Partnerships and Limited Liability Companies

Not applicable.

7. Investment Income

No significant change.

8. Derivative Instruments

Not applicable.

9. Income Taxes

A. - F.

No significant change.

G. - H.

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

No significant change.

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

A. Nature of the Relationship

No significant change.

B. Significant Transactions for Each Period

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

The Company remits a monthly capitation amount to Carelon Health of Arizona, Inc. (“Carelon”), an affiliate, who is responsible for providing health care services to the Company’s Medicare enrollees. During 2024, the Company incurred capitation expense to Carelon of \$11,516,492. CareMore Health Plan of Arizona Inc. changed its name to Carelon Health of Arizona, Inc. on January 1, 2024.

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

No significant change.

D. Amounts Due to or from Related Parties

At March 31, 2024, the Company reported \$5,735,645 due from affiliates and no amounts due to affiliates. The receivable balance represents intercompany transactions

NOTES TO FINANCIAL STATEMENTS

that will be settled in accordance with the settlement terms of the intercompany agreement.

E. - O.

No significant change.

11. Debt

Not applicable.

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

A. Defined Benefit Plan

Not applicable.

B. Not applicable.

C. Not applicable.

D. Not applicable.

E. Defined Contribution Plans

Not applicable.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

No significant change.

H. Post Employment Benefits and Compensated Absences

Not applicable.

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

Not applicable.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

Not applicable.

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

No significant change.

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

A. Transfers of Receivables Reported as Sales

Not applicable.

NOTES TO FINANCIAL STATEMENTS

B. Transfer and Servicing of Financial Assets

(1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At March 31, 2024 the fair value of securities loaned was \$4,041,545 and the carrying value of securities loaned was \$3,897,157.

(2) - (7) Not applicable.

C. Wash Sales

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

(2) At March 31, 2024, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

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

A. Administrative Services Only Plans

Not applicable.

B. Administrative Services Contract Plans

Not applicable.

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

No significant change.

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

Not applicable.

20. Fair Value Measurements

A. (1) There are no assets or liabilities measured at fair value as of March 31, 2024.

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

There are no investments in Level 3 as of March 31, 2024.

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

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

NOTES TO FINANCIAL STATEMENTS

qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

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

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

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value ("NAV")	Not Practicable (Carrying Value)
Bonds	\$ 17,405,964	\$ 16,339,756	\$ 16,129,013	\$ 1,276,951	\$ —	\$ —	\$ —
Securities lending collateral asset	4,137,217	4,133,813	—	4,137,217	—	—	—

D. Not Practicable to Estimate Fair Value

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

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through May 9, 2024 for the statutory statement issued on May 10, 2024. There were no other events occurring subsequent to March 31, 2024 requiring recognition or disclosure.

23. Reinsurance

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

NOTES TO FINANCIAL STATEMENTS

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

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

No
- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year.

Not applicable.
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

Not applicable.
- (4) Roll-forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.

Not applicable.
- (5) ACA Risk Corridors Receivable as of Reporting Date.

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$11,242 during 2024. This is approximately 1.2% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$933,239 as of December 31, 2023. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2024. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- B. There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$	389,010
2. Date of the most recent evaluation of this liability	March 31, 2024	
3. Was anticipated investment income utilized in the calculation?	Yes	No X

NOTES TO FINANCIAL STATEMENTS

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

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

Yes [] No [X]

1.2

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

Yes [] No []

2.1

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

Yes [] No [X]

2.2

If yes, date of change:

3.1

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

Yes [X] No []

3.2

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

Yes [] No [X]

3.3

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

3.4

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

Yes [X] No []

3.5

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

0001156039

4.1

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

Yes [] No [X]

4.2

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

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

5.

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

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

6.1

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

12/31/2022

6.2

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

12/31/2017

6.3

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

05/23/2019

6.4

By what department or departments?
Ohio Department of Insurance

6.5

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

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

6.6

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

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

7.1

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

Yes [] No [X]

7.2

If yes, give full information:

8.1

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

Yes [] No [X]

8.2

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

8.3

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

Yes [] No [X]

8.4

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

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

GENERAL INTERROGATORIES

- 9.1

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

Yes [X] No []
- 9.11

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

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
1.Changes to lobbying section to clarify that the policies in the section apply to foreign government officials as well as domestic, 2.Changes to the Gifts and Special Courtesies section to ensure language on the process for requesting an exception to the prohibition on gifts to government officials, 3.Changes to the Code of Conduct to strengthen and clarify the scope and guiding principles for human rights and the grievance process, 4.Added provisions for the use of Generative AI and Large Language Models (LLMs) and expanded to clarify that vendors / suppliers are required to adhere to RAI policies and guidelines, and 5.Added references to the Ireland Criminal Justice Act.
- 9.3

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

Yes [] No [X]
- 9.31

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

FINANCIAL

- 10.1

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

Yes [X] No []
- 10.2

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

5,735,645

INVESTMENT

- 11.1

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

Yes [] No [X]
- 11.2

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

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

\$.....

0
13.

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

\$.....

0
- 14.1

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

Yes [] No [X]
- 14.2

If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$.....0	\$.....0
14.22 Preferred Stock	\$.....0	\$.....0
14.23 Common Stock	\$.....0	\$.....0
14.24 Short-Term Investments	\$.....0	\$.....0
14.25 Mortgage Loans on Real Estate	\$.....0	\$.....0
14.26 All Other	\$.....0	\$.....0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$.....0	\$.....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$.....0	\$.....0
- 15.1

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

Yes [] No [X]
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.
.....
16.

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

16.1

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

\$.....

4,137,217

16.2

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

\$.....

4,133,813

16.3

Total payable for securities lending reported on the liability page.

\$.....

4,133,813

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

GENERAL INTERROGATORIES

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

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

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

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

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

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

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

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

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

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

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

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

.....

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

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

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

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

90.3 %

1.2 A&H cost containment percent

0.5 %

1.3 A&H expense percent excluding cost containment expenses

8.5 %
- 2.1

Do you act as a custodian for health savings accounts?

Yes [☐] No [☒]
- 2.2

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

\$
- 2.3

Do you act as an administrator for health savings accounts?

Yes [☐] No [☒]
- 2.4

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

\$
3.

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

Yes [☒] No [☐]
- 3.1

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

Yes [☐] No [☐]

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

[illegible]

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories											
		1	Direct Business Only								
		Active Status (a)	2	3	4	5	6	7	8	9	10
States, etc.			Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	..N							..0	
2.	Alaska	AK	..N							..0	
3.	Arizona	AZ	..L	18,882,194						18,882,194	
4.	Arkansas	AR	..L							..0	
5.	California	CA	..N							..0	
6.	Colorado	CO	..N							..0	
7.	Connecticut	CT	..N							..0	
8.	Delaware	DE	..N							..0	
9.	District of Columbia	DC	..N							..0	
10.	Florida	FL	..N							..0	
11.	Georgia	GA	..N							..0	
12.	Hawaii	HI	..N							..0	
13.	Idaho	ID	..N							..0	
14.	Illinois	IL	..N							..0	
15.	Indiana	IN	..N							..0	
16.	Iowa	IA	..N							..0	
17.	Kansas	KS	..N							..0	
18.	Kentucky	KY	..N							..0	
19.	Louisiana	LA	..N							..0	
20.	Maine	ME	..N							..0	
21.	Maryland	MD	..N							..0	
22.	Massachusetts	MA	..N							..0	
23.	Michigan	MI	..N							..0	
24.	Minnesota	MN	..N							..0	
25.	Mississippi	MS	..N							..0	
26.	Missouri	MO	..N							..0	
27.	Montana	MT	..N							..0	
28.	Nebraska	NE	..N							..0	
29.	Nevada	NV	..N							..0	
30.	New Hampshire	NH	..N							..0	
31.	New Jersey	NJ	..N							..0	
32.	New Mexico	NM	..N							..0	
33.	New York	NY	..N							..0	
34.	North Carolina	NC	..N							..0	
35.	North Dakota	ND	..N							..0	
36.	Ohio	OH	..L							..0	
37.	Oklahoma	OK	..N							..0	
38.	Oregon	OR	..N							..0	
39.	Pennsylvania	PA	..N							..0	
40.	Rhode Island	RI	..N							..0	
41.	South Carolina	SC	..N							..0	
42.	South Dakota	SD	..N							..0	
43.	Tennessee	TN	..N							..0	
44.	Texas	TX	..N							..0	
45.	Utah	UT	..N							..0	
46.	Vermont	VT	..N							..0	
47.	Virginia	VA	..N							..0	
48.	Washington	WA	..N							..0	
49.	West Virginia	WV	..N							..0	
50.	Wisconsin	WI	..N							..0	
51.	Wyoming	WY	..N							..0	
52.	American Samoa	AS	..N							..0	
53.	Guam	GU	..N							..0	
54.	Puerto Rico	PR	..N							..0	
55.	U.S. Virgin Islands	VI	..N							..0	
56.	Northern Mariana Islands	MP	..N							..0	
57.	Canada	CAN	..N							..0	
58.	Aggregate Other Aliens	OT	..XXX	..0	..0	..0	..0	..0	..0	..0	..0
59.	Subtotal .....	..XXX	..0	18,882,194	..0	..0	..0	..0	..0	18,882,194	..0
60.	Reporting Entity Contributions for Employee Benefit Plans .....	..XXX								..0	
61.	Totals (Direct Business) .....	..XXX	0	18,882,194	0	0	0	0	0	18,882,194	0
DETAILS OF WRITE-INS											
58001.	.....	..XXX									
58002.	.....	..XXX									
58003.	.....	..XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page .....	..XXX	..0	..0	..0	..0	..0	..0	..0	..0	..0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) .....	..XXX	0	0	0	0	0	0	0	0	0

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

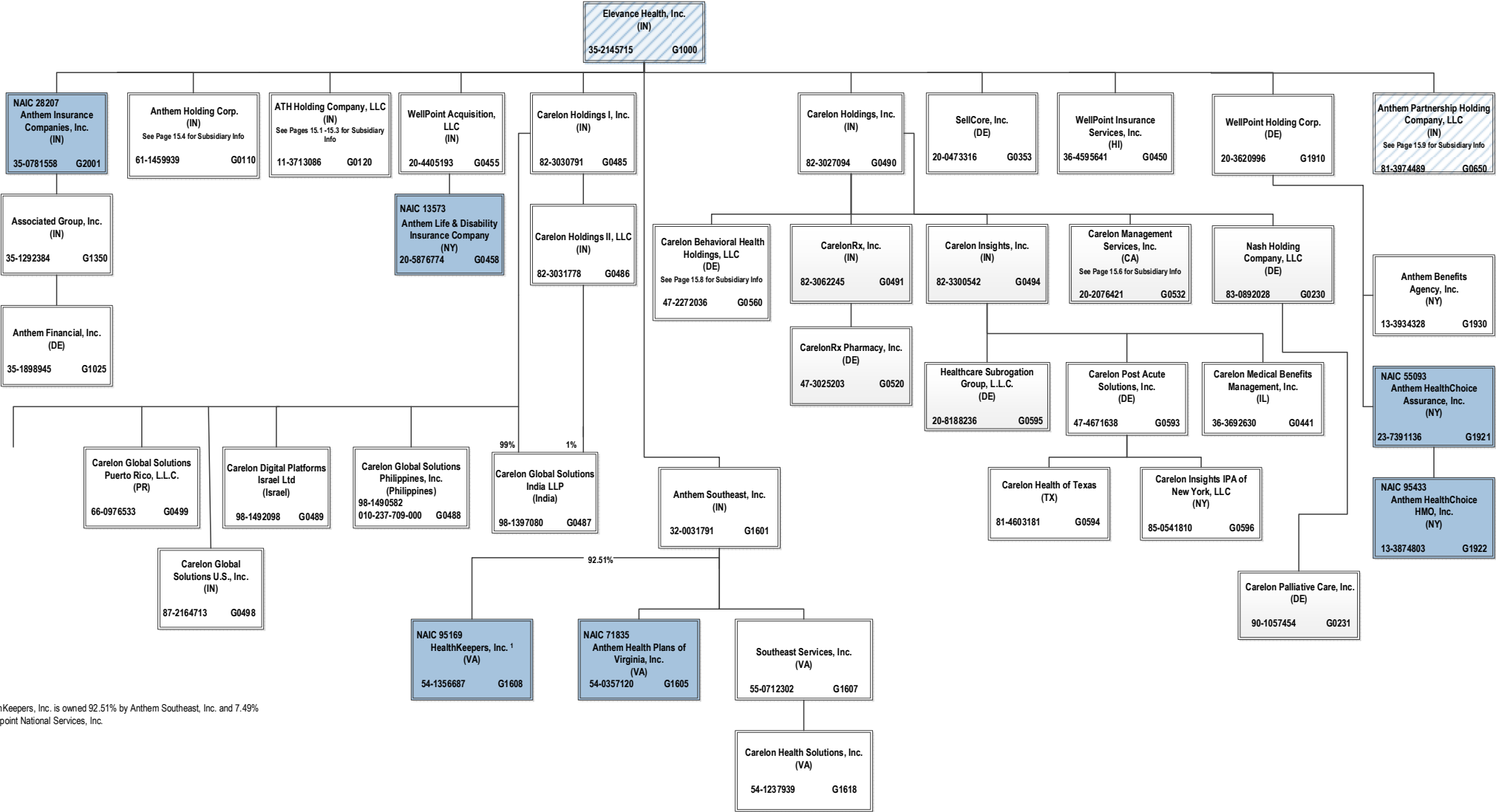
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

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

BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee

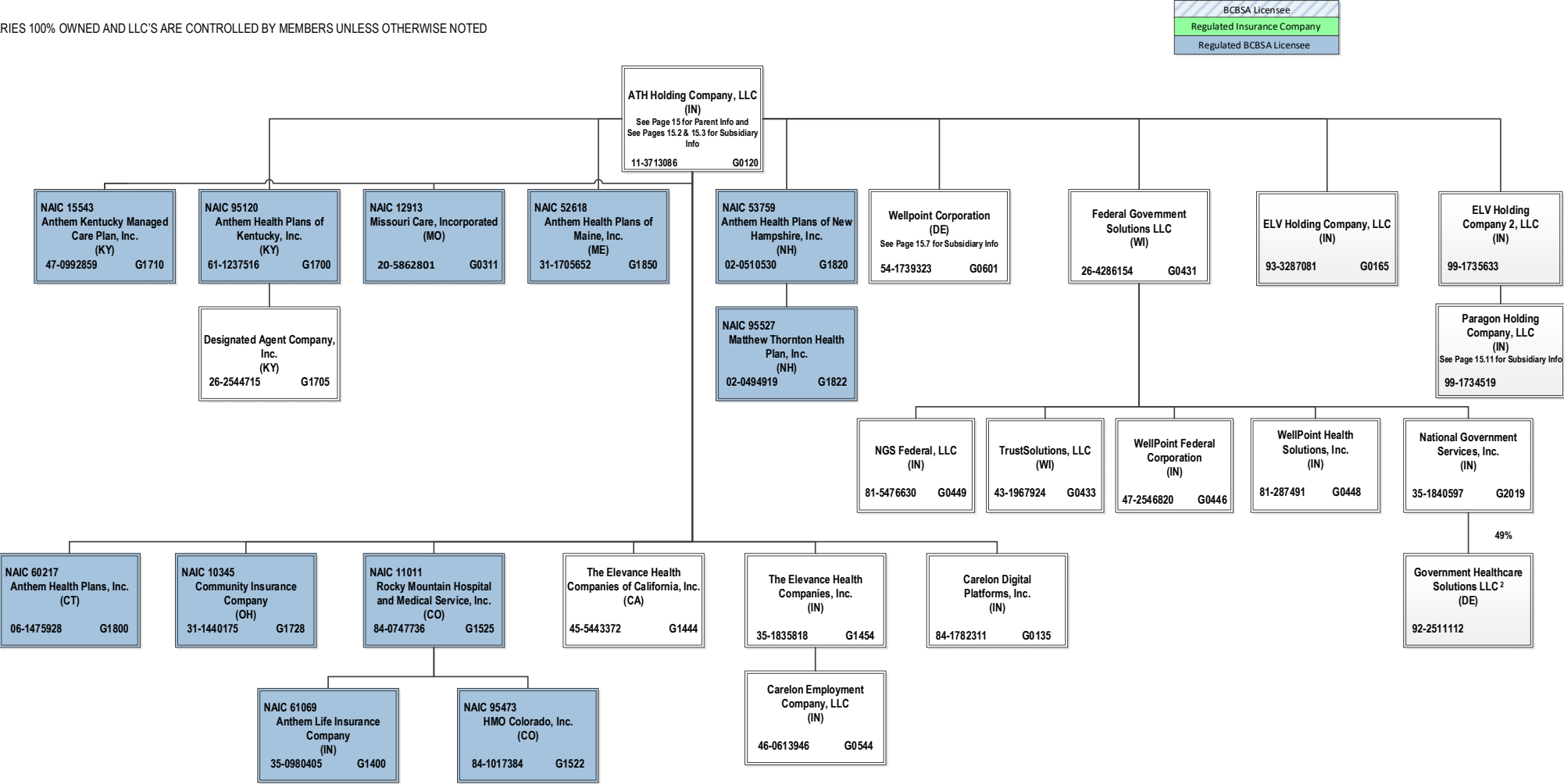


¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

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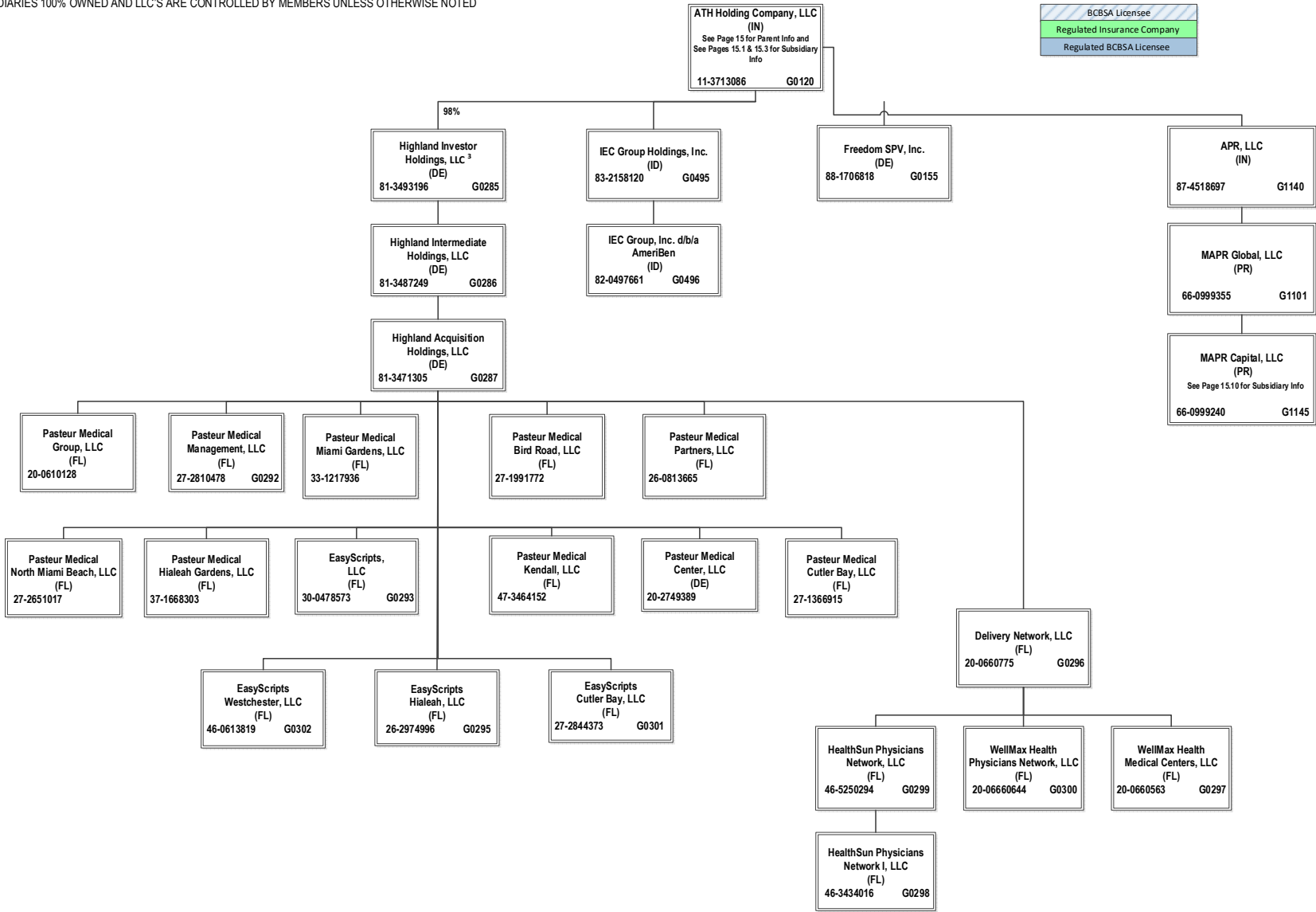


² Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

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

PART 1 – ORGANIZATIONAL CHART

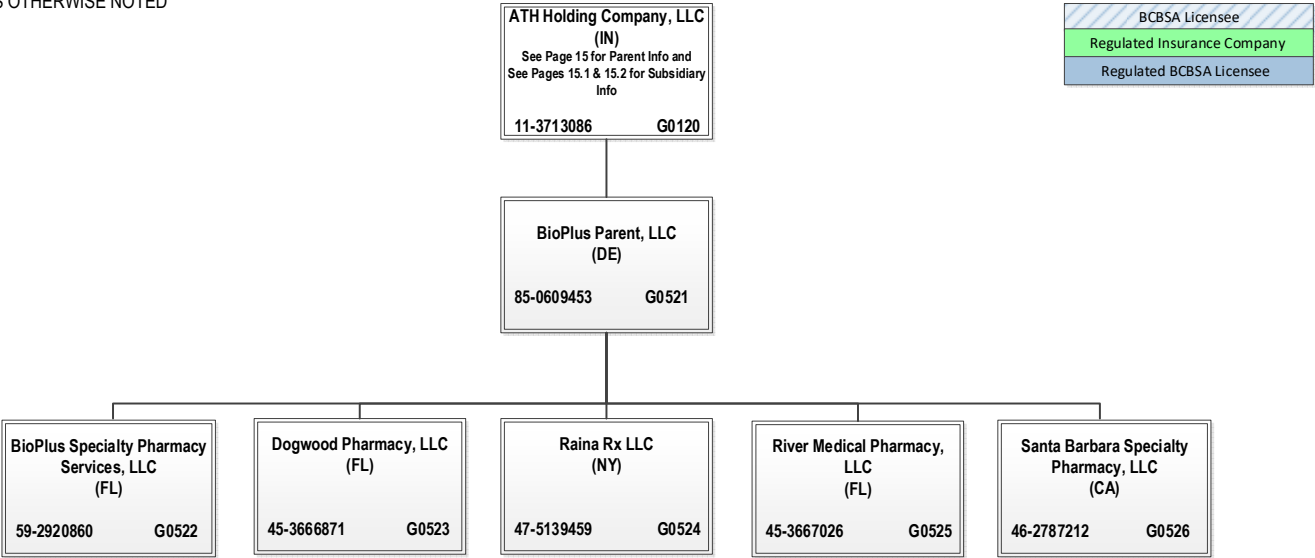
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



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

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

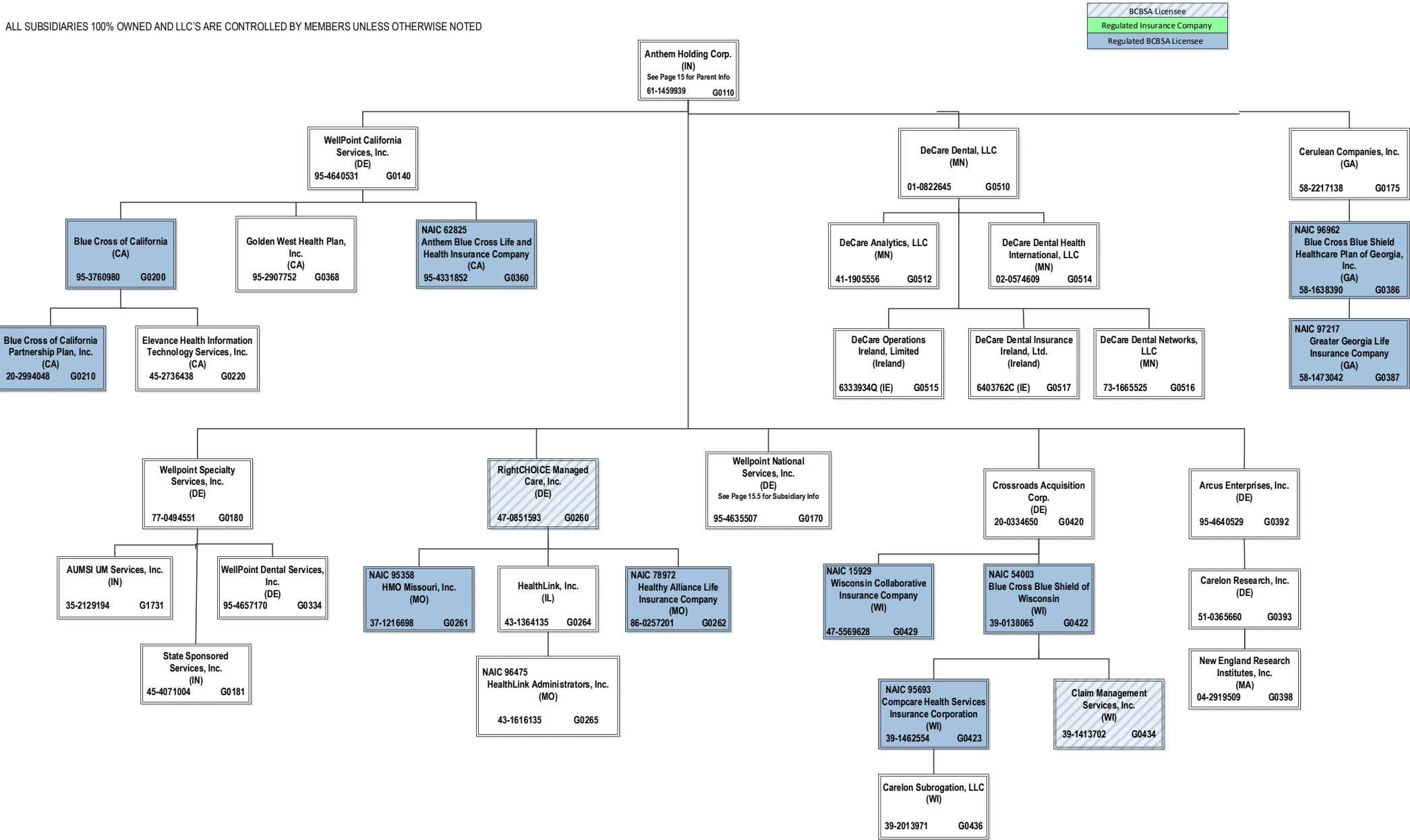
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

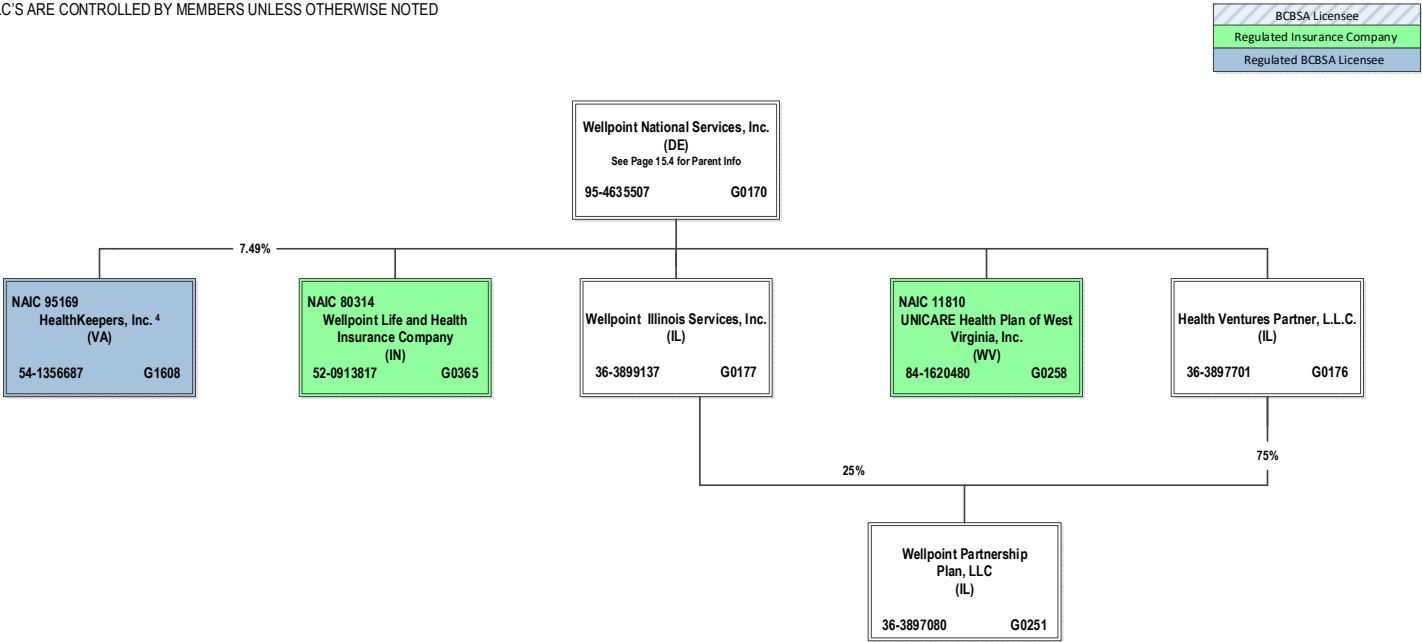
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PART 1 – ORGANIZATIONAL CHART

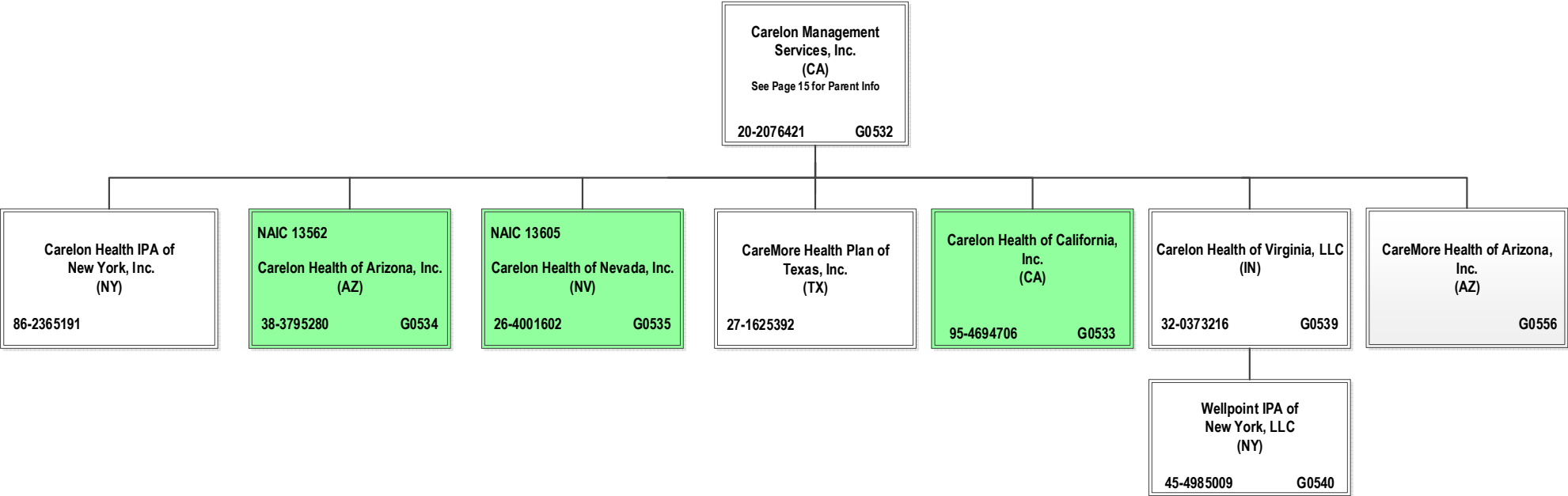
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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

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BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



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

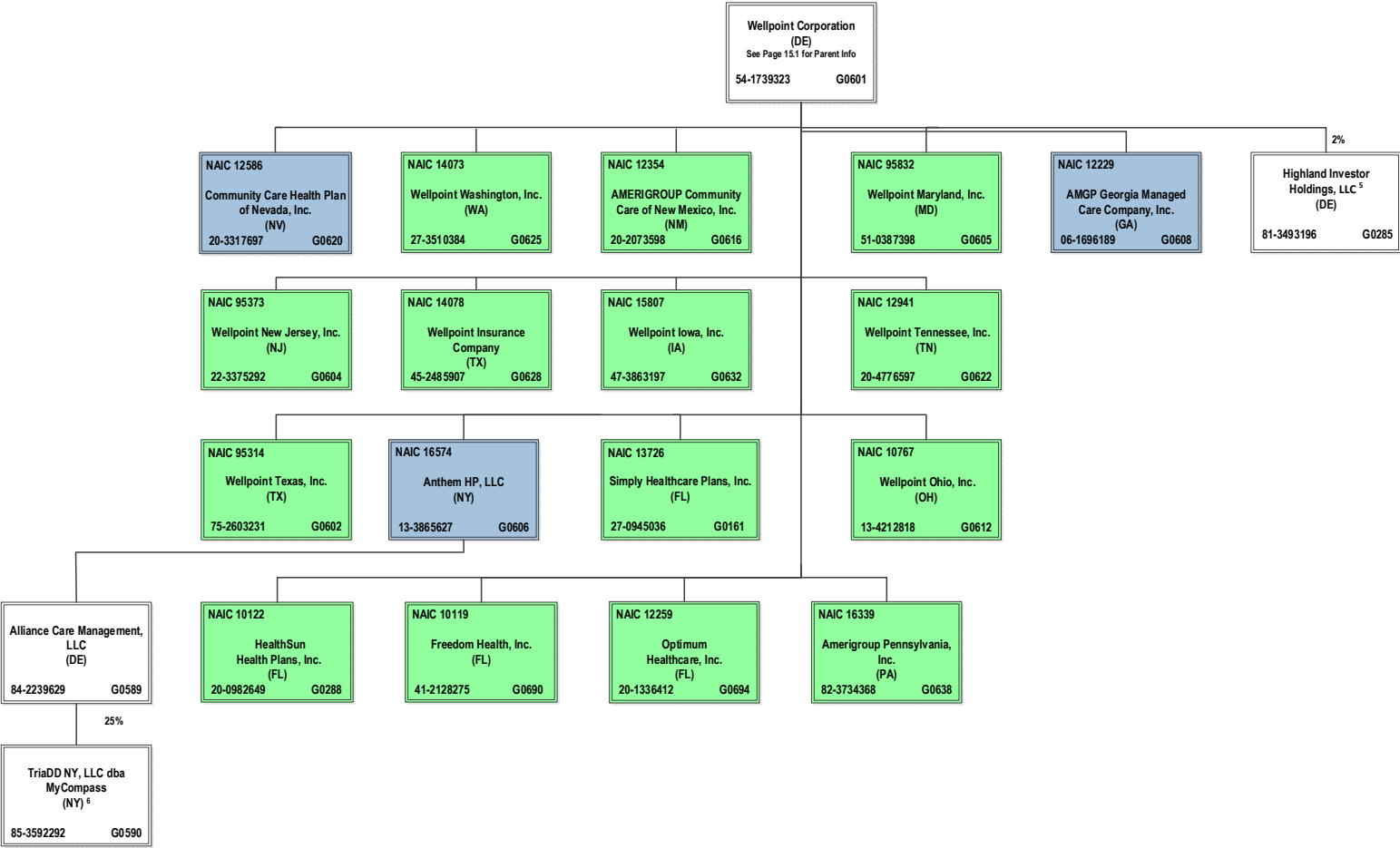
PART 1 – ORGANIZATIONAL CHART

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

BCBSA Licensee

Regulated Insurance Company

Regulated BCBSA Licensee



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

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

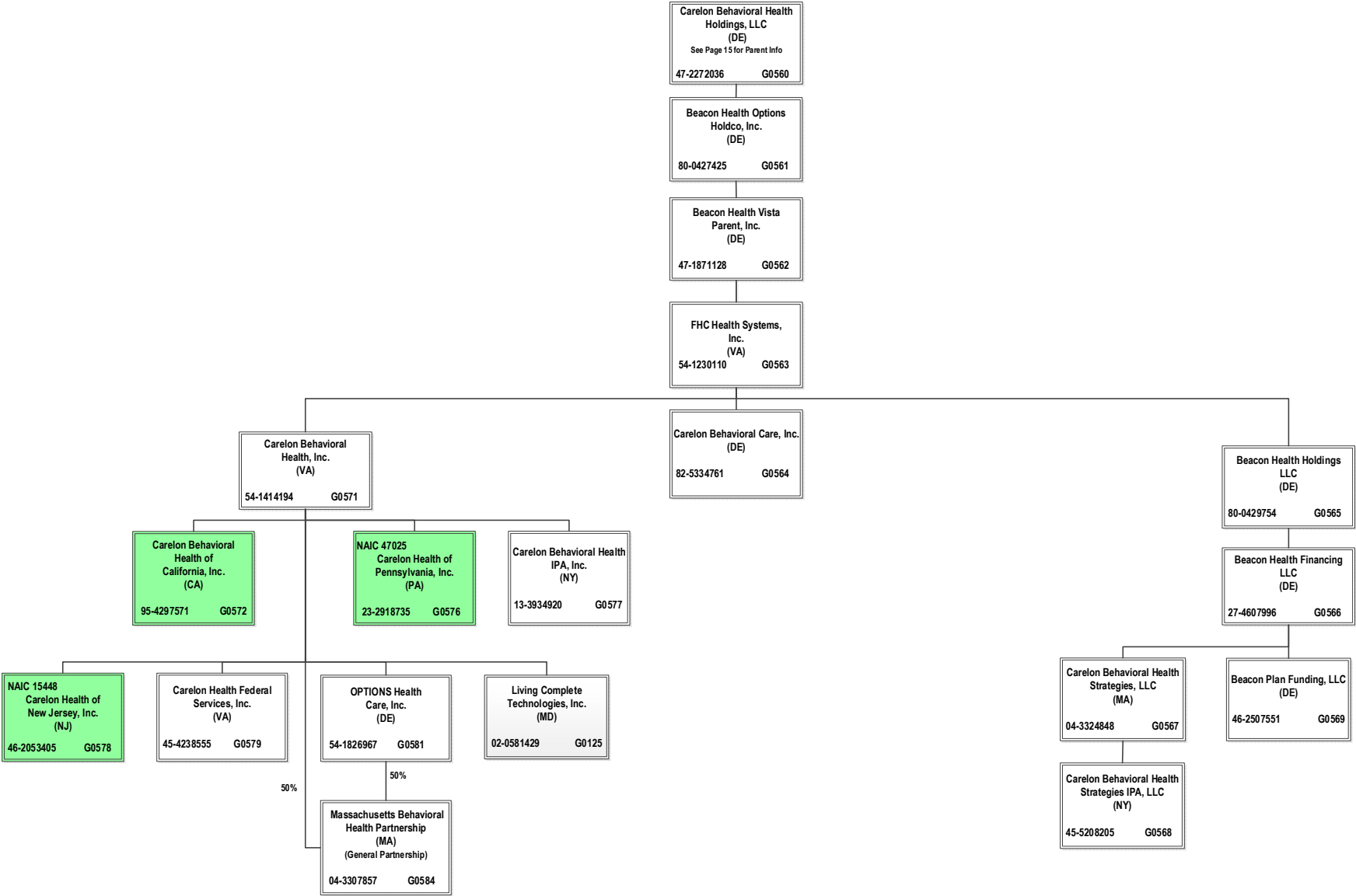
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

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BCBSA Licensee

Regulated Insurance Company

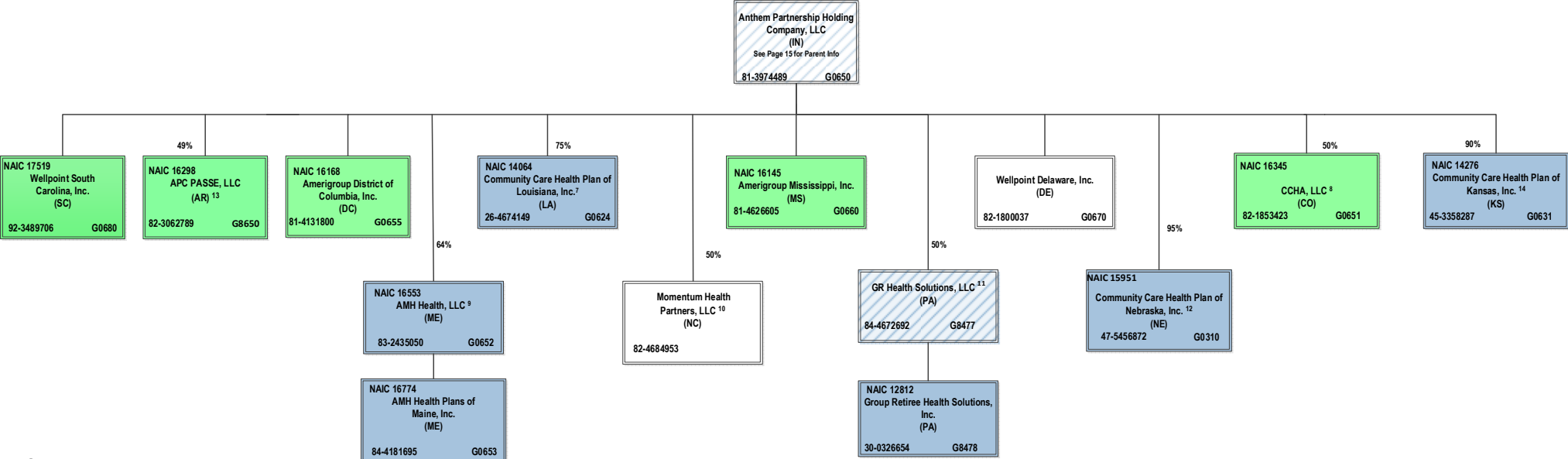
Regulated BCBSA Licensee



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

PART 1 – ORGANIZATIONAL CHART

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

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

⁹ AMH Health, LLC is a joint venture 36% owned by MaineHealth (non-affiliate) and 64% owned by Anthem Partnership Holding Company, LLC

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

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

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

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

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

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

The organizational chart for MAPR Capital, LLC (PR) is structured as follows:

- MAPR Capital, LLC (PR)** (66-0999240, G1145)
 - MAPR Holdings, LLC (PR)** (66-0999498, G1146)
 - MMM Holdings, LLC (PR)** (66-0649625, G1103)
 - The Elevance Health Companies of Puerto Rico, LLC (PR)** (66-1002717, G1149)
 - NAIC 11157 MMM Healthcare, LLC (PR)** (66-0588600, G1104)
 - NAIC 12534 MMM Multi Health, LLC (PR)** (66-0653763, G1105)
 - NAIC 12178 PMC Medicare Choice, LLC (PR)** (66-0592131, G1106)
 - Medical Dental Network Management, LLC (PR)** (66-0823267, G1102)
 - MSO Holdings, LLC (PR)** (66-0645750, G1107)
 - MMM Transportation, LLC (PR)** (66-1002779, G1147)
 - Best Transportation¹⁷ of PR LLC (PR)** (66-0957393, G1148) (51% ownership)
 - MSO of Puerto Rico, LLC (PR)** (66-0719637, G1111)
 - Caribbean Accountable Care, LLC (PR)** (66-0787011, G1112)
 - InHealth Management, LLC (PR)** (66-0884762, G1108)
 - VITA CARE, LLC (PR)** (66-0865037, G1109)
 - IPA Holdings, LLC (PR)** (66-0959260, G1113)
 - Castellana Physician Services, LLC (PR)** (66-0554720, G1114)
 - Physician Group Practices, LLC (PR)** (66-0960976, G1115)
 - PHM MultiSalud, LLC (PR)** (66-0867882, G1117)
 - Grupo Advantage del Oeste, LLC (PR)** (66-0695527, G1118)
 - Centros de Medicina Primaria Advantage del Norte, LLC (PR)** (66-0695526, G1119)
 - Alianza Medicos del SurEste, LLC (PR)** (66-0626908, G1120)
 - PHM MultiDisciplinary Clinic, LLC (PR)** (66-0859950, G1127)
 - PHM Multidisciplinary Clinic Arecibo LLC (PR)** (66-0812014, G1128)
 - PHM Multidisciplinary Clinic Cabo Rojo LLC (PR)** (66-0925853, G1130)
 - PHM Multidisciplinary Clinic Guayama LLC (PR)** (66-0764408, G1131)
 - PHM Multidisciplinary Clinic Maunabo LLC (PR)** (66-0949111, G1132)
 - PHM Multidisciplinary Clinic Aguadilla LLC (PR)** (66-0811976, G1129)
 - PHM IntraHospital Physician Group, LLC (PR)** (66-0864220, G1121)
 - Advantage Medical Group, LLC (PR)** (66-0693660, G1122)
 - Centros Medicos Unidos del Oeste, LLC (PR)** (66-0530940, G1125)
 - Consortio MultiSalud del Oeste, Inc.¹⁵ (PR)** (66-0909478) (81% ownership)
 - Centro Medicina Familiar del Norte, LLC (PR)** (66-0519243, G1126)
 - Consortio MultiSalud del Norte, Inc.¹⁶ (PR)** (66-0942711) (50% ownership)
 - PHM Specialty Network, LLC (PR)** (66-0864171, G1123)
 - Grupo Advantage Metro, LLC (PR)** (66-0927403, G1124)
 - Clinical Staff Solutions, LLC (PR)** (66-0964118, G1110)
 - Clinica Todo Salud, LLC (PR)** (66-0947829, G1133)
 - Clinica Todo Salud – Aibonito, LLC (PR)** (66-0947900, G1134)
 - Dental Services Organization, LLC (PR)** (66-0948046, G1135)

¹⁵ Other investors are Asociacion De Medicos Del Oeste, Inc. (13%) and Doctores Asociados Del Noroeste, Inc. (6%). Ownership interest in Consortio MultiSalud del Oeste, Inc. is based on Eligible Beneficiaries per Primary Medical Group. Ownership shall be revised annually by the end of each year; provided that at least 10% shall remain with each PMG.

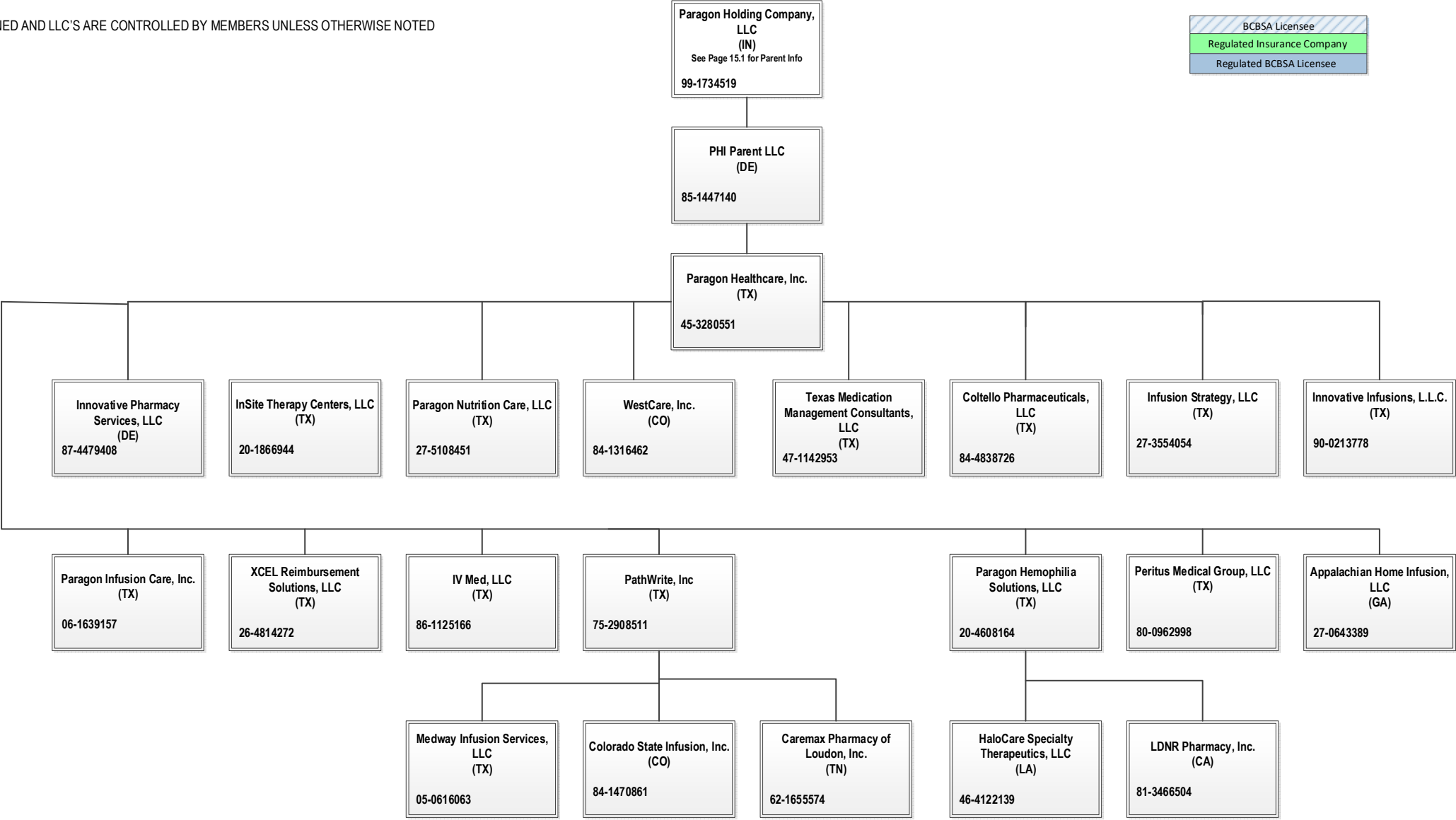
¹⁶ Other 50% owned by ACO del Norte, LLC (non-affiliate)

¹⁷ Best Transportation of PR LLC is a joint

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

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

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



BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0693660		0001156039		Advantage Medical Group, LLC	..PR	.....NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		66-0626908		0001156039		Alianza Medicos del SurEste, LLC	..PR	.....NIA	PHM MultiSalud, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		84-2239629		0001156039		Alliance Care Management, LLC	..DE	.....NIA	Anthem HP, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
							AMERIGROUP Community Care of New Mexico, Inc.								
.0671	Elevance Health, Inc.	12354	20-2073598		0001156039			..NM	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	16168	81-4131800		0001156039		Amerigroup District of Columbia, Inc.	..DC	.....IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	..MS	.....IA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	16339	82-3734368		0001156039		Amerigroup Pennsylvania, Inc.	..PA	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	12229	06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	..GA	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	16774	84-4181695		0001156039		AMH Health Plans of Maine, Inc.	..ME	.....IA	AMH Health, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	16553	83-2435050		0001156039		AMH Health, LLC	..ME	.....IA	Anthem Partnership Holding Company, LLC	Ownership	64.000	Elevance Health, Inc.	...NO	0104
.0671	Elevance Health, Inc.		13-3934328		0001156039		Anthem Benefits Agency, Inc.	..NY	.....NIA	WellPoint Holding Corp	Ownership	100.000	Elevance Health, Inc.	...NO	
							Anthem Blue Cross Life and Health Insurance Company	..CA	.....IA	WellPoint California Services, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	62825	95-4331852		0001156039			..DE	.....NIA	Associated Group, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.						Anthem Financial, Inc.	..KY	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	..ME	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	52618	31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	..NH	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	53759	02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc.	..VA	.....IA	Anthem Southeast, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	71835	54-0357120	40003317	0001156039		Anthem Health Plans of Virginia, Inc.	..CT	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	60217	06-1475928		0001156039		Anthem Health Plans, Inc.	..NY	.....IA	WellPoint Holding Corp	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	55093	23-7391136		0001156039		Anthem HealthChoice Assurance, Inc.	..NY	.....IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	95433	13-3874803		0001156039		Anthem HealthChoice HMO, Inc.	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		11-1459939		0001156039		Anthem Holding Corp.	..NY	.....IA	Wellpoint Corporation	Ownership	100.000	Elevance Health, Inc.	...NO	0100
.0671	Elevance Health, Inc.	16574	13-3865627		0001156039		Anthem HP, LLC	..IN	.....IA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	28207	35-0781558		0001156039		Anthem Insurance Companies, Inc.	..KY	.....IA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc.	..NY	.....IA	WellPoint Acquisition, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	13573	20-5876774		0001156039		Anthem Life & Disability Insurance Company			Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	61069	35-0980405		0001156039		Anthem Life Insurance Company	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		81-3974489		0001156039		Anthem Partnership Holding Company, LLC	..IN	.....NIA	Elevance Health, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		32-0031791		0001156039		Anthem Southeast, Inc.	..AR	.....IA	Anthem Partnership Holding Company, LLC	Ownership	49.000	Elevance Health, Inc.	...NO	0111
.0671	Elevance Health, Inc.	16298	82-3062789		0001156039		APC Passe, LLC	..GA	.....NIA	Paragon Healthcare, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		27-0643389		0001156039		Appalachian Home Infusion, LLC	..IN	.....NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		87-4518697		0001156039		APR, LLC	..DE	.....NIA	FHC Health Systems, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		95-4640529		0001156039		Arcus Enterprises, Inc.	..IN	.....NIA	Wellpoint Specialty Services, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		35-1292384		0001156039		Associated Group, Inc.	..IN	.....NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		11-3713086		0001156039		ATH Holding Company, LLC	..DE	.....NIA	Beacon Health Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		35-2129194		0001156039		AUMSI UM Services, Inc.	..DE	.....NIA	Carelon Behavioral Health Holdings, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		27-4607996		0001156039		Beacon Health Financing LLC	..DE	.....NIA	Beacon Health Options Holdco, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		80-0429754		0001156039		Beacon Health Holdings, LLC	..DE	.....NIA	Beacon Health Options Holdco, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		80-0427425		0001156039		Beacon Health Options Holdco, Inc.	..DE	.....NIA	Beacon Plan Funding, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		47-1871128		0001156039		Beacon Health Vista Parent, Inc.	..PR	.....NIA	MMM Transportation, LLC	Ownership	51.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		46-2507551		0001156039		Beacon Plan Funding, LLC	..DE	.....NIA	ATH Holding Company, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		66-0957393		0001156039		Best Transportation, LLC	..FL	.....NIA	BioPlus Parent, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		85-0609453		0001156039		BioPlus Parent, LLC			BioPlus Specialty Pharmacy Services, LLC	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.		59-2920860		0001156039		BioPlus Specialty Pharmacy Services, LLC			Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	96962	58-1638390		0001156039		Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	..GA	.....IA	Cerulean Companies, Inc.	Ownership	100.000	Elevance Health, Inc.	...NO	
.0671	Elevance Health, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	..WI	.....IA	Crossroads Acquisition Corp.	Ownership	100.000	Elevance Health, Inc.	...NO	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	95-3760980 ..	.....	0001156039 ..	.....	Blue Cross of California Blue Cross of California Partnership Plan, Inc. ....	.. CA.....	..... IA.....	WellPoint California Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0100 ...
. 0671 ...	Elevance Health, Inc. ....	.....	20-2994048 ..	.....	0001156039 ..	.....	Blue Cross of California Blue Cross of California Partnership Plan, Inc. ....	.. CA.....	..... IA.....	Blue Cross of California FHC Health Systems, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0100 ...
. 0671 ...	Elevance Health, Inc. ....	.....	82-5334761 ..	.....	0001156039 ..	.....	Carelon Behavioral Care, Inc. ....	.. DE.....	..... NIA.....	Carelon Behavioral Health Holdings, LLC Carelon Behavioral Health IPA, Inc. Carelon Behavioral Health of California, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-2272036 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Holdings, LLC Carelon Behavioral Health IPA, Inc. Carelon Behavioral Health of California, Inc. ....	.. DE.....	..... NIA.....	Carelon Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	13-39324920 ..	.....	0001156039 ..	.....	Carelon Behavioral Health IPA, Inc. Carelon Behavioral Health of California, Inc. ....	.. NY.....	..... NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4297571 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Strategies IPA, LLC ..	.. CA.....	..... IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0100 ...
. 0671 ...	Elevance Health, Inc. ....	.....	45-5208205 ..	.....	0001156039 ..	.....	Carelon Behavioral Health Strategies, LLC ...	.. NY.....	..... NIA.....	Carelon Behavioral Health Strategies, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	04-3324848 ..	.....	0001156039 ..	.....	Carelon Behavioral Health, Inc. ....	.. MA.....	..... NIA.....	Beacon Health Financing LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1414194 ..	.....	0001156039 ..	.....	Carelon Behavioral Health, Inc. ....	.. VA.....	..... NIA.....	FHC Health Systems, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1492098 ..	.....	0001156039 ..	.....	Carelon Digital Platforms Israel Ltd. ....	.. ISR.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	84-1782311 ..	.....	0001156039 ..	.....	Carelon Digital Platforms, Inc. ....	.. IN.....	..... NIA.....	ATH Holding Company, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	46-0613946 ..	.....	0001156039 ..	.....	Carelon Employment Company, LLC. ....	.. IN.....	..... NIA.....	The Elevance Health Companies, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1397080 ..	.....	0001156039 ..	.....	Carelon Global Solutions India LLP ..	.. IN.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	99.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1397080 ..	.....	0001156039 ..	.....	Carelon Global Solutions India LLP ..	.. IN.....	..... NIA.....	Carelon Holdings II, LLC ..	Ownership.....	1.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	.....	.....	0001156039 ..	.....	Carelon Global Solutions Ireland Limited ..	.. IRL.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	98-1490582 ..	.....	0001156039 ..	.....	Carelon Global Solutions Philippines, Inc. Carelon Global Solutions Puerto Rico, L.L.C. ....	.. PHL.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0976533 ..	.....	0001156039 ..	.....	Carelon Global Solutions U.S., Inc. ....	.. PR.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	87-2164713 ..	.....	0001156039 ..	.....	Carelon Health Federal Services, Inc. ....	.. IN.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-4238555 ..	.....	0001156039 ..	.....	Carelon Health Federal Services, Inc. ....	.. VA.....	..... NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	86-2365191 ..	.....	0001156039 ..	.....	Carelon Health IPA of New York, Inc. ....	.. NY.....	..... NIA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4694706 ..	.....	0001156039 ..	.....	Carelon Health of California, Inc. ....	.. CA.....	..... IA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0100 ...
. 0671 ...	Elevance Health, Inc. ....	..... 15448 ..	46-2053405 ..	.....	0001156039 ..	.....	Carelon Health of New Jersey, Inc. ....	.. NJ.....	..... IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 47025 ..	23-2918735 ..	.....	0001156039 ..	.....	Carelon Health of Pennsylvania, Inc. ....	.. PA.....	..... IA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-4603181 ..	.....	0001156039 ..	.....	Carelon Health of Texas ..	.. TX.....	..... NIA.....	Carelon Post Acute Solutions, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	32-0373216 ..	.....	0001156039 ..	.....	Carelon Health of Virginia, LLC ..	.. IN.....	..... NIA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 13562 ..	38-3795280 ..	.....	0001156039 ..	.....	Carelon Health of Arizona, Inc. ....	.. AZ.....	..... IA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	..... 13605 ..	26-4001602 ..	.....	0001156039 ..	.....	Carelon Health of Nevada, Inc. ....	.. NV.....	..... IA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1237939 ..	.....	0001156039 ..	.....	Carelon Health Solutions, Inc. ....	.. VA.....	..... NIA.....	Southeast Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3030791 ..	.....	0001156039 ..	.....	Carelon Holdings I, Inc. ....	.. IN.....	..... NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3031178 ..	.....	0001156039 ..	.....	Carelon Holdings II, LLC ..	.. IN.....	..... NIA.....	Carelon Holdings I, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3027094 ..	.....	0001156039 ..	.....	Carelon Holdings, Inc. ....	.. IN.....	..... NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	85-0541810 ..	.....	0001156039 ..	.....	Carelon Insights IPA of New York, LLC ..	.. NY.....	..... NIA.....	Carelon Post Acute Solutions, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3300542 ..	.....	0001156039 ..	.....	Carelon Insights, Inc. ....	.. IN.....	..... NIA.....	Carelon Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-2076421 ..	.....	0001156039 ..	.....	Carelon Management Services, Inc. ....	.. CA.....	..... NIA.....	Carelon Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3692630 ..	.....	0001156039 ..	.....	Carelon Medical Benefits Management, Inc. ...	.. IL.....	..... NIA.....	Carelon Insights, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	90-1057454 ..	.....	0001156039 ..	.....	Carelon Palliative Care, Inc. ....	.. DE.....	..... NIA.....	Nash Holding Company, LLC ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-4671638 ..	.....	0001156039 ..	.....	Carelon Post Acute Solutions, Inc. ....	.. DE.....	..... NIA.....	Carelon Insights, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	51-0365660 ..	.....	0001156039 ..	.....	Carelon Research, Inc. ....	.. DE.....	..... NIA.....	Arcus Enterprises, Inc. Compcare Health Services Insurance Corporation ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	39-2013971 ..	.....	0001156039 ..	.....	Carelon Subrogation, LLC ..	.. WI.....	..... NIA.....	Corporation ..	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-3025203 ..	.....	0001156039 ..	.....	CarelonRx Pharmacy, Inc. ....	.. DE.....	..... NIA.....	CarelonRx, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-3062245 ..	.....	0001156039 ..	.....	CarelonRx, Inc. ....	.. IN.....	..... NIA.....	Carelon Holdings, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	62-1655574 ..	.....	0001156039 ..	.....	Caremax Pharmacy of Loudon, Inc. ....	.. TN.....	..... NIA.....	PathWrite, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	92-0997812 ..	.....	0001156039 ..	.....	Caremore Health of Arizona, Inc. ....	.. AZ.....	..... NIA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1625392 ..	.....	0001156039 ..	.....	Caremore Health Plan of Texas, Inc. ....	.. TX.....	..... NIA.....	Carelon Management Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0671	Elevance Health, Inc.		66-0787011		0001156039		Caribbean Accountable Care, LLC	..PR.....	..NIA.....	MSO of Puerto Rico, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0554720		0001156039		Castellana Physician Services, LLC	..PR.....	..NIA.....	IPA Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	16345	82-1853423		0001156039		CCHA, LLC	..CO.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	50.000	Elevance Health, Inc.	...NO.....	0101
.0671	Elevance Health, Inc.		66-0695526		0001156039		Centros de Medicina Primaria Advantage del Norte, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0519243		0001156039		Centros Medicina Familiar del Norte, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0530940		0001156039		Centros Medicos Unidos del Oeste, LLC	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	..GA.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		39-1413702		0001156039		Claim Management Services, Inc.	..WI.....	..NIA.....	Blue Cross Blue Shield of Wisconsin	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0947829		0001156039		Clinica Todo Salud, LLC	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0947900		0001156039		Clinica Todo Salud-Aibonito, LLC	..PR.....	..NIA.....	Clinica Todo Salud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0964118		0001156039		Clinical Staff Solutions, LLC	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		84-1470861		0001156039		Colorado State Infusion, Inc.	..CO.....	..NIA.....	PathWrite, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		84-4838726		0001156039		Coltello Pharmaceuticals, LLC	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	14276	45-3358287		0001156039		Community Care Health Plan of Kansas, Inc.	..KS.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	90.000	Elevance Health, Inc.	...NO.....	0110
.0671	Elevance Health, Inc.		26-4674149		0001156039		Community Care Health Plan of Louisiana, Inc.	..LA.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	75.000	Elevance Health, Inc.	...NO.....	0103
.0671	Elevance Health, Inc.	14064	47-5456872		0001156039		Community Care Health Plan of Nebraska, Inc	..NE.....	..IA.....	Anthem Partnership Holding Company, LLC	Ownership.....	95.000	Elevance Health, Inc.	...NO.....	0108
.0671	Elevance Health, Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc.	..NV.....	..IA.....	Wellpoint Corporation	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	10345	31-1440175		0001156039		Community Insurance Company	..OH.....	..IA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	95693	39-1462554		0001156039		Compcare Health Services Insurance Corporation	..WI.....	..IA.....	Blue Cross Blue Shield of Wisconsin	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0942711		0001156039		Consorcio MultiSalud del Norte, Inc.	..PR.....	..NIA.....	Centros Medicina Familiar del Norte, LLC	Ownership.....	50.000	Elevance Health, Inc.	...NO.....	0107
.0671	Elevance Health, Inc.		66-0909478		0001156039		Consorcio MultiSalud del Oeste, Inc.	..PR.....	..NIA.....	Centros Medicos Unidos del Oeste, LLC	Ownership.....	77.000	Elevance Health, Inc.	...NO.....	0102
.0671	Elevance Health, Inc.		20-0334650		0001156039		Crossroads Acquisition Corp.	..DE.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		41-1905556		0001156039		DeCare Analytics, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		02-0574609		0001156039		DeCare Dental Health International, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		DeCare Dental Insurance Ireland, Ltd.	..IRL.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		73-1665525		0001156039		DeCare Dental Networks, LLC	..MN.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		01-0822645		0001156039		DeCare Dental, LLC	..MN.....	..NIA.....	Anthem Holding Corp.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		DeCare Operations Ireland, Limited	..IRL.....	..NIA.....	DeCare Dental, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		20-0660775		0001156039		Delivery Network, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		66-0948046		0001156039		Dental Services Organization, LLC	..PR.....	..NIA.....	Clinica Todo Salud, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-2544715		0001156039		Designated Agent Company, Inc.	..KY.....	..NIA.....	Anthem Health Plans of Kentucky, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		45-3666871		0001156039		Dogwood Pharmacy, LLC	..FL.....	..NIA.....	BioPlus Parent, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		27-2844373		0001156039		EasyScripts Cutler Bay, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-2974996		0001156039		EasyScripts Hialeah, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		30-0478573		0001156039		EasyScripts LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	..FL.....	..NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		45-2736438		0001156039		Elevance Health Information Technology Services, Inc.	..CA.....	..NIA.....	Blue Cross of California	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		35-2145715		0001156039	New York Stock Exchange (NYSE)	Elevance Health, Inc.	..IN.....	..UIP.....				Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		99-1735633		0001156039		ELV Holding Company 2, LLC	..IN.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		93-3287081		0001156039		ELV Holding Company, LLC	..IN.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	..WI.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		54-1230110		0001156039		FHC Health Systems, Inc.	..VA.....	..NIA.....	Beacon Health Vista Parent, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.	10119	41-2128275		0001156039		Freedom Health, Inc.	..FL.....	..IA.....	Wellpoint Corporation	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.				0001156039		Freedom SPV, Inc.	..DE.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	
.0671	Elevance Health, Inc.		95-2907752		0001156039		Golden West Health Plan, Inc.	..CA.....	..NIA.....	WellPoint California Services, Inc.	Ownership.....	100.000	Elevance Health, Inc.	...NO.....	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0671 ...	Elevance Health, Inc.				0001156039 ..		Government Healthcare Solutions LLC .....	..DE.....	..NIA.....	National Government Services, Inc.	Ownership.....	..49.000	Elevance Health, Inc. ....	....NO.....	..0112 ...
.0671 ...	Elevance Health, Inc.		84-4672692 ..		0001156039 ..		GR Health Solutions LLC .....	..PA.....	..NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	..50.000	Elevance Health, Inc. ....	....NO.....	..0106 ...
.0671 ...	Elevance Health, Inc. ....	..97217 ..	58-1473042 ..		0001156039 ..		Greater Georgia Life Insurance Company .....	..GA.....	..IA.....	Georgia, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..12812 ..	30-0326654 ..		0001156039 ..		Group Retiree Health Solutions, Inc. ....	..PA.....	..IA.....	GR Health Solutions LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0695527 ..		0001156039 ..		Grupo Advantage del Oeste, LLC .....	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0927403 ..		0001156039 ..		Grupo Advantage Metro, LLC .....	..PR.....	..NIA.....	PHM MultiSalud, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		46-4122139 ..		0001156039 ..		HaloCare Specialty Therapeutics, LLC .....	..LA.....	..NIA.....	Paragon Hemophilia Solutions, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		36-3897701 ..		0001156039 ..		Health Ventures Partner, L.L.C. ....	..IL.....	..NIA.....	Wellpoint National Services, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		20-8188236 ..		0001156039 ..		Healthcare Subrogation Group, LLC .....	..DE.....	..NIA.....	Carelon Insights, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..95169 ..	54-1356687 ..		0001156039 ..		HealthKeepers, Inc. ....	..VA.....	..IA.....	Anthem Southeast, Inc.	Ownership.....	..92.510	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..95169 ..	54-1356687 ..		0001156039 ..		HealthKeepers, Inc. ....	..VA.....	..IA.....	Wellpoint National Services, Inc.	Ownership.....	..7.490	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		43-1616135 ..		0001156039 ..		HealthLink Administrators, Inc. ....	..MO.....	..NIA.....	HealthLink, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		43-1364135 ..		0001156039 ..		HealthLink, Inc. ....	..IL.....	..NIA.....	RightCHOICE Managed Care, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..10122 ..	20-0982649 ..		0001156039 ..		HealthSun Health Plans, Inc. ....	..FL.....	..IA.....	Wellpoint Corporation	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		46-3434016 ..		0001156039 ..		HealthSun Physicians Network I, LLC .....	..FL.....	..NIA.....	HealthSun Physicians Network, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		46-5250294 ..		0001156039 ..		HealthSun Physicians Network, LLC .....	..FL.....	..NIA.....	Delivery Network, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..78972 ..	86-0257201 ..		0001156039 ..		Healthy Alliance Life Insurance Company ....	..MO.....	..IA.....	RightCHOICE Managed Care, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		81-3471305 ..		0001156039 ..		Highland Acquisition Holdings, LLC .....	..DE.....	..NIA.....	Highland Intermediate Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		81-3487249 ..		0001156039 ..		Highland Intermediate Holdings, LLC .....	..DE.....	..NIA.....	Highland Investor Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		81-3493196 ..		0001156039 ..		Highland Investor Holdings, LLC .....	..DE.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	..98.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		81-3493196 ..		0001156039 ..		Highland Investor Holdings, LLC .....	..DE.....	..NIA.....	Wellpoint Corporation	Ownership.....	..2.000	Elevance Health, Inc. ....	....NO.....	
							Rocky Mountain Hospital and Medical								
.0671 ...	Elevance Health, Inc. ....	..95473 ..	84-1017384 ..		0001156039 ..		HMO Colorado, Inc. ....	..CO.....	..IA.....	Service, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..95358 ..	37-1216698 ..		0001156039 ..		HMO Missouri, Inc. ....	..MO.....	..IA.....	RightCHOICE Managed Care, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		83-2158120 ..		0001156039 ..		IEC Group Holdings, Inc. ....	..ID.....	..NIA.....	ATH Holding Company, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		82-0497661 ..		0001156039 ..		IEC Group, Inc. d/b/a AmeriBen .....	..ID.....	..NIA.....	IEC Group Holdings, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		27-3554054 ..		0001156039 ..		Infusion Strategy, LLC .....	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0884762 ..		0001156039 ..		InHealth Management, LLC .....	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		90-0213778 ..		0001156039 ..		Innovative Infusions, LLC .....	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		87-4479408 ..		0001156039 ..		Innovative Pharmacy Services, LLC .....	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		20-1866944 ..		0001156039 ..		InSite Therapy Centers, LLC .....	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0959260 ..		0001156039 ..		IPA Holdings, LLC .....	..PR.....	..NIA.....	MSO Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		86-1125166 ..		0001156039 ..		IV Med, LLC .....	..TX.....	..NIA.....	Paragon Healthcare, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		81-3466504 ..		0001156039 ..		LDNR Pharmacy, Inc. ....	..CA.....	..NIA.....	Paragon Hemophilia Solutions, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		02-0581429 ..		0001156039 ..		Living Complete Technologies, Inc. ....	..MD.....	..NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0999240 ..		0001156039 ..		MAPR Capital, LLC .....	..PR.....	..NIA.....	MAPR Global, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0999355 ..		0001156039 ..		MAPR Global, LLC .....	..PR.....	..NIA.....	APR, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0999498 ..		0001156039 ..		MAPR Holdings, LLC .....	..PR.....	..NIA.....	MAPR Capital, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		04-3307857 ..		0001156039 ..		Massachusetts Behavioral Health Partnership ..	..MA.....	..NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	..50.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		04-3307857 ..		0001156039 ..		Massachusetts Behavioral Health Partnership ..	..MA.....	..NIA.....	OPTIONS Health Care, Inc.	Ownership.....	..50.000	Elevance Health, Inc. ....	....NO.....	
							Anthem Health Plans of New Hampshire, Inc.								
.0671 ...	Elevance Health, Inc. ....	..95527 ..	02-0494919 ..		0001156039 ..		Matthew Thornton Health Plan, Inc. ....	..NH.....	..IA.....		Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0823267 ..		0001156039 ..		Medical Dental Network Management, LLC .....	..PR.....	..NIA.....	MMM Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		05-0616063 ..		0001156039 ..		Medway Infusion Services, LLC .....	..TX.....	..NIA.....	PathWrite, Inc.	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..12913 ..	20-5862801 ..		0001156039 ..		Missouri Care, Incorporated .....	..MO.....	..IA.....	ATH Holding Company, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..11157 ..	66-0588600 ..		0001156039 ..		MMM Healthcare, LLC .....	..PR.....	..IA.....	MMM Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc.		66-0649625 ..		0001156039 ..		MMM Holdings, LLC .....	..PR.....	..NIA.....	MAPR Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	
.0671 ...	Elevance Health, Inc. ....	..12534 ..	66-0653763 ..		0001156039 ..		MMM Multi Health, LLC .....	..PR.....	..IA.....	MMM Holdings, LLC	Ownership.....	..100.000	Elevance Health, Inc. ....	....NO.....	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	66-1002779 ..	.....	0001156039 ..	.....	MMM Transportation, LLC .....	.. PR.....	.. NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-4684953 ..	.....	0001156039 ..	.....	Momentum Health Partners, LLC .....	.. NC.....	.. NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	50.000 ...	Elevance Health, Inc. ....	... NO.....	.. 0105 ...
. 0671 ...	Elevance Health, Inc. ....	.....	66-0645750 ..	.....	0001156039 ..	.....	MSO Holdings, LLC .....	.. PR.....	.. NIA.....	MAPR Capital, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0719637 ..	.....	0001156039 ..	.....	MSO of Puerto Rico, LLC .....	.. PR.....	.. NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	83-0892028 ..	.....	0001156039 ..	.....	Nash Holding Company, LLC .....	.. DE.....	.. NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	35-1840597 ..	.....	0001156039 ..	.....	National Government Services, Inc. ....	.. IN.....	.. NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	04-2919509 ..	.....	0001156039 ..	.....	New England Research Institute, Inc. ....	.. MA.....	.. NIA.....	Carelon Research, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-5476630 ..	.....	0001156039 ..	.....	NGS Federal, LLC .....	.. IN.....	.. NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	12259	20-1336412 ..	.....	0001156039 ..	.....	Optimum Healthcare, Inc. ....	.. FL.....	.. IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1826967 ..	.....	0001156039 ..	.....	OPTIONS Health Care, Inc. ....	.. DE.....	.. NIA.....	Carelon Behavioral Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-3280551 ..	.....	0001156039 ..	.....	Paragon Healthcare, Inc. ....	.. TX.....	.. NIA.....	PHI Parent LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-4608164 ..	.....	0001156039 ..	.....	Paragon Hemophilia Solutions, Inc. ....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-4608164 ..	.....	0001156039 ..	.....	Paragon Hemophilia Solutions, Inc. ....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	99-1734519 ..	.....	0001156039 ..	.....	Paragon Holding Company, LLC .....	.. IN.....	.. NIA.....	ELV Holding Company 2, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	06-1639157 ..	.....	0001156039 ..	.....	Paragon Infusion Care, Inc. ....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-5108451 ..	.....	0001156039 ..	.....	Paragon Nutrition Care LLC .....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1991772 ..	.....	0001156039 ..	.....	Pasteur Medical Bird Road, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-2749389 ..	.....	0001156039 ..	.....	Pasteur Medical Center, LLC .....	.. DE.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-1366915 ..	.....	0001156039 ..	.....	Pasteur Medical Cutler Bay, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0610128 ..	.....	0001156039 ..	.....	Pasteur Medical Group, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	37-1668303 ..	.....	0001156039 ..	.....	Pasteur Medical Hialeah Gardens, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-3464152 ..	.....	0001156039 ..	.....	Pasteur Medical Kendall, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-2810478 ..	.....	0001156039 ..	.....	Pasteur Medical Management, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	33-1217936 ..	.....	0001156039 ..	.....	Pasteur Medical Miami Gardens, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	27-2651017 ..	.....	0001156039 ..	.....	Pasteur Medical North Miami Beach, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	26-0813665 ..	.....	0001156039 ..	.....	Pasteur Medical Partners, LLC .....	.. FL.....	.. NIA.....	Highland Acquisition Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	75-2908511 ..	.....	0001156039 ..	.....	PathWrite, Inc. ....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	80-0962998 ..	.....	0001156039 ..	.....	Peritus Medical Group, LLC .....	.. TX.....	.. NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	85-1447140 ..	.....	0001156039 ..	.....	PHI Parent LLC .....	.. DE.....	.. NIA.....	Paragon Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0693134 ..	.....	0001156039 ..	.....	PHM Healthcare Solutions, Inc. ....	.. PR.....	.. NIA.....	Physician Group Practices, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0864220 ..	.....	0001156039 ..	.....	PHM IntraHospital Physician Group, LLC .....	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0811976 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Aguadilla LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0812014 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Arecibo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0925853 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Cabo Rojo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0764408 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Guayama LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0949111 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic Maunabo LLC ..	.. PR.....	.. NIA.....	PHM MultiDisciplinary Clinic, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0859950 ..	.....	0001156039 ..	.....	PHM Multidisciplinary Clinic, LLC .....	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0867882 ..	.....	0001156039 ..	.....	PHM MultiSalud, LLC .....	.. PR.....	.. NIA.....	Physician Group Practices, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0864171 ..	.....	0001156039 ..	.....	PHM Specialty Network, LLC .....	.. PR.....	.. NIA.....	PHM MultiSalud, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0960976 ..	.....	0001156039 ..	.....	Physician Group Practices, LLC .....	.. PR.....	.. NIA.....	IPA Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	12178	66-0592131 ..	.....	0001156039 ..	.....	PMC Medicare Choice, LLC .....	.. PR.....	.. IA.....	MMM Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-5139459 ..	.....	0001156039 ..	.....	Raina Rx LLC .....	.. NY.....	.. NIA.....	BioPlus Parent, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-0851593 ..	.....	0001156039 ..	.....	RightCHOICE Managed Care, Inc. ....	.. DE.....	.. NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-3667026 ..	.....	0001156039 ..	.....	River Medical Pharmacy, LLC .....	.. FL.....	.. NIA.....	BioPlus Parent, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	.....	.....	.....	.....	Rocky Mountain Hospital and Medical Service, Inc. ....	.. CO.....	.. IA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	11011	84-0747736 ..	.....	0001156039 ..	.....	Santa Barbara Specialty Pharmacy, LLC .....	.. CA.....	.. NIA.....	BioPlus Parent, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0473316 ..	.....	0001156039 ..	.....	SellCore, Inc. ....	.. DE.....	.. NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	13726	27-0945036 ..	.....	0001156039 ..	.....	Simply Healthcare Plans, Inc. ....	.. FL.....	.. IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0671 ...	Elevance Health, Inc. ....	.....	55-0712302 ..	.....	0001156039 ..	.....	Southeast Services, Inc. ....	.. VA.....	.....NIA.....	Anthem Southeast, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-4071004 ..	.....	0001156039 ..	.....	State Sponsored Services, Inc. ....	.. IN.....	.....NIA.....	Wellpoint Specialty Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-1142953 ..	.....	0001156039 ..	.....	Texas Medication Management Consultants, LLC	.. TX.....	.....NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-5443372 ..	.....	0001156039 ..	.....	The Elevance Health Companies of California, Inc.	.. CA.....	.....NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-1002717 ..	.....	0001156039 ..	.....	The Elevance Health Companies of Puerto Rico, LLC	.. PR.....	.....NIA.....	MMM Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	35-1835818 ..	.....	0001156039 ..	.....	The Elevance Health Companies, Inc. ....	.. IN.....	.....NIA.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	.....	.....	0001156039 ..	.....	TriadDD NY, LLC dba MyCompass	.. NY.....	.....NIA.....	Alliance Care Management, LLC	Ownership.....	25.000 ...	Elevance Health, Inc. ....	... NO.....	0109
. 0671 ...	Elevance Health, Inc. ....	.....	43-1967924 ..	.....	0001156039 ..	.....	TrustSolutions, LLC	.. WI.....	.....NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	11810	84-1620480 ..	.....	0001156039 ..	.....	UNICARE Health Plan of West Virginia, Inc. .	.. WV.....	.....IA.....	Wellpoint National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	66-0865037 ..	.....	0001156039 ..	.....	VITA CARE, LLC	.. PR.....	.....NIA.....	MSO Holdings, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0660563 ..	.....	0001156039 ..	.....	WellMax Health Medical Centers, LLC	.. FL.....	.....NIA.....	Delivery Network, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-0660644 ..	.....	0001156039 ..	.....	WellMax Health Physicians Network, LLC	.. FL.....	.....NIA.....	Delivery Network, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-4405193 ..	.....	0001156039 ..	.....	WellPoint Acquisition, LLC	.. IN.....	.....NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4640531 ..	.....	0001156039 ..	.....	WellPoint California Services, Inc. ....	.. DE.....	.....NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	54-1739323 ..	.....	0001156039 ..	.....	Wellpoint Corporation	.. DE.....	.....UDP.....	ATH Holding Company, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	82-1800037 ..	.....	0001156039 ..	.....	Wellpoint Delaware, Inc. ....	.. DE.....	.....NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4657170 ..	.....	0001156039 ..	.....	WellPoint Dental Services, Inc. ....	.. DE.....	.....NIA.....	Wellpoint Specialty Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	47-2546820 ..	.....	0001156039 ..	.....	Wellpoint Federal Corporation	.. IN.....	.....NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	81-2874917 ..	.....	0001156039 ..	.....	WellPoint Health Solutions, Inc. ....	.. DE.....	.....NIA.....	Federal Government Solutions, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	20-3620996 ..	.....	0001156039 ..	.....	WellPoint Holding Corp	.. DE.....	.....NIA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3899137 ..	.....	0001156039 ..	.....	Wellpoint Illinois Services, Inc. ....	.. IL.....	.....NIA.....	Wellpoint National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	14078	45-2485907 ..	.....	0001156039 ..	.....	Wellpoint Insurance Company	.. TX.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-4595641 ..	.....	0001156039 ..	.....	WellPoint Insurance Services, Inc. ....	.. HI.....	.....IA.....	Elevance Health, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	15807	47-3863197 ..	.....	0001156039 ..	.....	Wellpoint Iowa, Inc. ....	.. IA.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	45-4985009 ..	.....	0001156039 ..	.....	Wellpoint IPA of New York, LLC	.. NY.....	.....NIA.....	Carelon Health of Virginia, LLC	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	80314	52-0913817 ..	.....	0001156039 ..	.....	Wellpoint Life and Health Insurance Company	.. IN.....	.....IA.....	Wellpoint National Services, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	95832	51-0387398 ..	.....	0001156039 ..	.....	Wellpoint Maryland, Inc. ....	.. MD.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	95-4635507 ..	.....	0001156039 ..	.....	Wellpoint National Services, Inc. ....	.. DE.....	.....NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	95373	22-3375292 ..	.....	0001156039 ..	.....	Wellpoint New Jersey, Inc. ....	.. NJ.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	10767	13-4212818 ..	.....	0001156039 ..	.....	Wellpoint Ohio, Inc. ....	.. OH.....	.....RE.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3897080 ..	.....	0001156039 ..	.....	Wellpoint Partnership Plan, LLC	.. IL.....	.....NIA.....	Health Ventures Partner, L.L.C.	Ownership.....	75.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	36-3897080 ..	.....	0001156039 ..	.....	Wellpoint Partnership Plan, LLC	.. IL.....	.....NIA.....	Wellpoint Illinois Services, Inc.	Ownership.....	25.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	92-3489706 ..	.....	0001156039 ..	.....	Wellpoint South Carolina, Inc. ....	.. SC.....	.....NIA.....	Anthem Partnership Holding Company, LLC ...	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	77-0494551 ..	.....	0001156039 ..	.....	Wellpoint Specialty Services, Inc. ....	.. DE.....	.....NIA.....	Anthem Holding Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	12941	20-4776597 ..	.....	0001156039 ..	.....	Wellpoint Tennessee, Inc. ....	.. TN.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	95314	75-2603231 ..	.....	0001156039 ..	.....	Wellpoint Texas, Inc. ....	.. TX.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	14073	27-3510384 ..	.....	0001156039 ..	.....	Wellpoint Washington, Inc. ....	.. WA.....	.....IA.....	Wellpoint Corporation	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	84-1316462 ..	.....	0001156039 ..	.....	WestCare, Inc. ....	.. CO.....	.....NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc.	15929	47-5569628 ..	.....	0001156039 ..	.....	Wisconsin Collaborative Insurance Company ...	.. WI.....	.....IA.....	Crossroads Acquisition Corp.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....
. 0671 ...	Elevance Health, Inc. ....	.....	26-4814272 ..	.....	0001156039 ..	.....	XCEL Reimbursement Solutions, LLC	.. TX.....	.....NIA.....	Paragon Healthcare, Inc.	Ownership.....	100.000 ...	Elevance Health, Inc. ....	... NO.....	.....

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10. However, it does not file an NAIC statutory statement because it is regulated by the New York State Department of Health or the California Department of Managed Health Care.

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

Asterisk	Explanation
0101	CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC, a non-affiliate.
0102	Owned 77% by Centros Medicos Unidos del Oeste, LLC, 13% by Asociacion de Medicos del Oeste, Inc. (a non-affiliate) and 10% by Doctores Asociados del Noroeste, Inc. (a non-affiliate).
0103	Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (a non-affiliate).
0104	AMH Health, LLC is a joint venture 64% owned by Anthem Partnership Holding Company, LLC and 36% by MaineHealth, a non-affiliate.
0105	Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina, a non-affiliate.
0106	GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC, a non-affiliate.
0107	Owned 50% by Centro Medicina Familiar del Norte, LLC and 50% by ACO del Norte, LLC, a non-affiliated entity.
0108	Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, a non-affiliate.
0109	TriadDD NY , LLC dba MyCompass (NY) is owned 25% by Alliance Care Management, LLC and 75% by non-affiliates.
0110	Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross and Blue Shield of Kansas (a non-affiliate), and 5% owned by Blue Cross and Blue Shield of Kansas City, a non-affiliate.
0111	APC Passe, LLC is 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by the Arkansas Provider Coalition, LLC, which is not affiliated with Anthem, Inc.
0112	Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

AUGUST FILING

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

1.

Bar Code:

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



NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	16,944,717	1,319,151
2. Cost of bonds and stocks acquired	0	30,999,770
3. Accrual of discount	18,951	198,011
4. Unrealized valuation increase/(decrease)	0	
5. Total gain (loss) on disposals	0	43,630
6. Deduct consideration for bonds and stocks disposed of	0	15,043,581
7. Deduct amortization of premium	623,912	572,264
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	16,339,756	16,944,717
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	16,339,756	16,944,717

STATEMENT AS OF MARCH 31, 2024 OF THE Wellpoint Ohio, Inc.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	11,011,697	0	0	(573,693)	10,438,004	0	0	11,011,697
2. NAIC 2 (a)	5,933,020	0	0	(31,269)	5,901,751	0	0	5,933,020
3. NAIC 3 (a)	0	0	0	0	0	0	0	
4. NAIC 4 (a)	0	0	0	0	0	0	0	
5. NAIC 5 (a)	0	0	0	0	0	0	0	
6. NAIC 6 (a)	0	0	0	0	0	0	0	
7. Total Bonds	16,944,717	0	0	(604,962)	16,339,755	0	0	16,944,717
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	16,944,717	0	0	(604,962)	16,339,755	0	0	16,944,717

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

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

Schedule DA - Part 1 - Short-Term Investments
N O N E

Schedule DA - Verification - Short-Term Investments
N O N E

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

Schedule DB - Part B - Verification - Futures Contracts
N O N E

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

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

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

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	5	3
2. Cost of cash equivalents acquired	8,800	10,017,607
3. Accrual of discount	0	0
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	8,805	10,017,605
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	5
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	5

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date
(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page (Line 9 for Separate Accounts)
and not included on Schedules A, B, BA, D, DB and E)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date
0109999999	Total - U.S. Government Bonds			0	0	XXX
0309999999	Total - All Other Government Bonds			0	0	XXX
0509999999	Total - U.S. States, Territories and Possessions Bonds			0	0	XXX
0709999999	Total - U.S. Political Subdivisions Bonds			0	0	XXX
0909999999	Total - U.S. Special Revenues Bonds			0	0	XXX
000000-00-0	ING FINANCIAL MARKETS LLC RPEQ		1.B	43,952	43,952	04/10/2024
000000-00-0	ROYAL BANK CANADA TORONTO		1.B	87,904	87,904	04/08/2024
1019999999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations			131,856	131,856	XXX
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds			131,856	131,856	XXX
1309999999	Total - Hybrid Securities			0	0	XXX
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds			0	0	XXX
1909999999	Subtotal - Unaffiliated Bank Loans			0	0	XXX
2419999999	Total - Issuer Obligations			131,856	131,856	XXX
2429999999	Total - Residential Mortgage-Backed Securities			0	0	XXX
2439999999	Total - Commercial Mortgage-Backed Securities			0	0	XXX
2449999999	Total - Other Loan-Backed and Structured Securities			0	0	XXX
2459999999	Total - SVO Identified Funds			0	0	XXX
2469999999	Total - Affiliated Bank Loans			0	0	XXX
2479999999	Total - Unaffiliated Bank Loans			0	0	XXX
2489999999	Total - Unaffiliated Certificates of Deposit			0	0	XXX
2509999999	Total Bonds			131,856	131,856	XXX
4109999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Industrial and Miscellaneous (Unaffiliated)			0	0	XXX
4409999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Parent, Subsidiaries and Affiliates			0	0	XXX
4509999999	Total - Preferred Stocks (Schedule D, Part 2, Section 1 type)			0	0	XXX
5109999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Industrial and Miscellaneous (Unaffiliated)			0	0	XXX
5409999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Mutual Funds			0	0	XXX
5609999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Unit Investment Trusts			0	0	XXX
5809999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Closed-End Funds			0	0	XXX
5979999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Parent, Subsidiaries and Affiliates			0	0	XXX
5989999999	Total - Common Stocks (Schedule D, Part 2, Section 2 type)			0	0	XXX
5999999999	Total - Preferred and Common Stocks			0	0	XXX
000000-00-0	BOFA SECURITIES, INC		1.B	72,961	72,961	07/01/2024
000000-00-0	BOFA SECURITIES, INC		1.B	26,371	26,371	07/01/2024
000000-00-0	BOFA SECURITIES, INC		1.B	219,761	219,761	07/01/2024
000000-00-0	PERSHING LLC		1.B	70,323	70,323	08/01/2024
000000-00-0	PERSHING LLC		1.B	87,904	87,904	08/01/2024
000000-00-0	BANK OF MONTREAL, MONTREAL		1.B	35,171	35,162	05/09/2024
000000-00-0	AUSTRALIA AND NEW ZEALAND BK GRP LT		1.B	5,258	5,123	04/18/2024
000000-00-0	AUSTRALIA AND NEW ZEALAND BK GRP LT		1.B	5,275	5,274	04/18/2024
000000-00-0	ING (US) Funding LLC		1.B	14,065	14,065	11/20/2024
000000-00-0	ING (US) Funding LLC		1.B	35,190	35,162	06/13/2024
000000-00-0	ING FINANCIAL MARKETS LLC RPEQ		1.B	79,114	79,114	04/10/2024
000000-00-0	BANK OF NOVA SCOTIA TORONTO		1.B	17,581	17,584	01/08/2025
9509999999	Subtotal - Short-Term Invested Assets (Schedule DA type)			668,973	668,803	XXX
000000-00-0	ABN-Amro Bank N.V.			43,952	42,505	04/01/2024
000000-00-0	BANCO SANTANDER SA NY			40,436	40,436	04/01/2024
000000-00-0	BANCO SANTANDER SA NY			41,842	41,842	04/01/2024
000000-00-0	CANADIAN IMPERIAL BANK TOR			22,855	22,855	04/01/2024
000000-00-0	CREDIT AGRICOLE CIB, NY			26,371	26,371	04/01/2024
000000-00-0	CREDIT AGRICOLE CIB, NY			35,162	35,162	04/01/2024
000000-00-0	DNB NOR BANK ASA NEW YORK			17,581	17,581	04/01/2024
000000-00-0	DNB NOR BANK ASA NEW YORK			58,017	58,017	04/01/2024
000000-00-0	DZ BANK AG NEW YORK			17,581	17,581	04/01/2024
000000-00-0	FIRST ABU DHABI BANK USA NV			43,952	43,952	04/01/2024
000000-00-0	LANDESBANK HESSEN THUR NY			43,952	43,952	04/01/2024
000000-00-0	RABOBANK NEW YORK			26,371	26,371	04/01/2024
000000-00-0	ROYAL BANK OF CANADA			46,054	46,054	04/01/2024
000000-00-0	SKANDI NY			43,952	43,952	04/01/2024
000000-00-0	SVENSKA NY			29,887	29,887	04/01/2024
000000-00-0	LANDESBANK BADEN-WURTTMBERG LDN			8,790	8,790	04/02/2024
000000-00-0	BANK OF AMERICA NA			26,371	26,371	04/04/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			20,969	20,811	05/08/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			8,736	8,671	05/09/2024
000000-00-0	BNP PARIBAS, NY			19,789	19,792	06/17/2024
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			17,550	17,340	04/09/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			1,750	1,734	04/29/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			8,738	8,670	05/07/2024
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD, LDN			8,738	8,671	05/07/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			8,690	8,669	06/13/2024
000000-00-0	MUFG Bank Ltd, London Branch			22,866	22,855	06/20/2024
000000-00-0	MIZUHO BANK LIMITED LONDON			17,581	17,581	05/02/2024
000000-00-0	National Westminster Bank PLC			6,156	6,205	05/03/2024
000000-00-0	MIZUHO BANK LIMITED NEW YORK			26,381	26,372	07/03/2024
000000-00-0	BANK OF AMERICA NA			43,970	43,952	07/08/2024
000000-00-0	Mitsubishi UFJ Trust & Bank Co			21,097	21,097	07/11/2024
000000-00-0	BARCLAYS NEW YORK			21,099	21,097	08/07/2024
000000-00-0	ROYAL BANK OF CANADA NY			26,379	26,371	05/31/2024
000000-00-0	SUMITOMO BK NY			43,966	43,952	07/11/2024
000000-00-0	SUMITOMO BK NY			43,965	43,952	07/16/2024
000000-00-0	BARCLAYS NEW YORK			71,893	71,857	06/20/2024
000000-00-0	CIBC NY			26,379	26,371	06/06/2024
000000-00-0	CREDIT AGRICOLE CIB, NY			17,585	17,581	04/19/2024
000000-00-0	SUMITOMO BK NY			17,589	17,581	06/05/2024
000000-00-0	STANDARD CHARTERED NY			49,235	49,226	04/19/2024
000000-00-0	National Westminster Bank PLC			5,249	5,120	04/29/2024
000000-00-0	MUFG Bank Ltd, London Branch			26,082	25,634	06/10/2024
000000-00-0	CREDIT AGRICOLE CIB, NY			17,585	17,581	04/22/2024
000000-00-0	MUFG Bank Ltd, London Branch			26,371	26,371	09/23/2024
000000-00-0	BANK OF AMERICA NA			17,587	17,581	05/22/2024
000000-00-0	SUMITOMO MITSUI TRUST BANK LTD,NY			52,759	52,743	09/11/2024
000000-00-0	National Westminster Bank PLC			35,179	35,162	05/02/2024
000000-00-0	STANDARD CHARTERED NY			70,323	70,323	08/09/2024

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date
(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page (Line 9 for Separate Accounts)
and not included on Schedules A, B, BA, D, DB and E)

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date
000000-00-0	WELLS FARGO BANK SAN FRANCISCO N.A. ....	.....	.....	43,974	43,958	05/14/2024
000000-00-0	NORDEA BANK ABP, NEW YORK BRANCH .....	.....	.....	52,758	52,743	04/26/2024
000000-00-0	NORDEA BANK ABP, NEW YORK BRANCH .....	.....	.....	43,963	43,952	04/18/2024
000000-00-0	SVENSKA NY .....	.....	.....	52,756	52,743	04/19/2024
000000-00-0	ROYAL BANK OF CANADA NY .....	.....	.....	17,584	17,581	04/15/2024
000000-00-0	ROYAL BANK OF CANADA NY .....	.....	.....	35,184	35,162	05/23/2024
000000-00-0	WESTPAC BKG CORP, NEW YORK .....	.....	.....	35,228	35,162	10/11/2024
000000-00-0	BANK OF MONTREAL CHICAGO .....	.....	.....	8,790	8,790	03/12/2025
000000-00-0	BANK OF NOVA SCOTIA HOUSTON .....	.....	.....	17,581	17,581	03/19/2025
000000-00-0	ROYAL BANK OF CANADA NY .....	.....	.....	17,630	17,581	11/08/2024
000000-00-0	TORONTO DOMINION LONDON .....	.....	.....	8,790	8,790	08/14/2024
000000-00-0	BANK OF MONTREAL CHICAGO .....	.....	.....	44,021	43,952	08/01/2024
000000-00-0	BANK OF MONTREAL CHICAGO .....	.....	.....	35,217	35,162	08/07/2024
000000-00-0	BANK OF MONTREAL CHICAGO .....	.....	.....	26,425	26,371	11/08/2024
000000-00-0	BANK OF NOVA SCOTIA HOUSTON .....	.....	.....	52,741	52,743	11/06/2024
000000-00-0	BANK OF NOVA SCOTIA HOUSTON .....	.....	.....	35,161	35,162	02/06/2025
000000-00-0	CIBC NY .....	.....	.....	14,074	14,065	01/09/2025
000000-00-0	ROYAL BANK OF CANADA NY .....	.....	.....	44,039	43,952	09/20/2024
000000-00-0	SKANDI NY .....	.....	.....	17,582	17,581	02/06/2025
000000-00-0	SVENSKA NY .....	.....	.....	26,378	26,371	02/06/2025
000000-00-0	TORONTO DOMINION NY .....	.....	.....	70,323	70,323	01/08/2025
9609999999. Subtotal - Cash (Schedule E Part 1 type)				2,075,563	2,072,328	XXX
018616-74-8	ALLIANCE BERNSTEIN GOVT FD .....	.....	1.A	2,637	2,637	04/01/2024
09248U-70-0	TFDXX LEX BLACKROCK FED FUND .....	.....	1.A	7,601	7,601	04/01/2024
261908-10-7	DREYFUS TREASURY & AGENCY LEX .....	.....	1.A	20,518	20,518	04/01/2024
44330V-48-0	HSBC US GOVT FUND LEX .....	.....	1.A	9,592	9,592	04/01/2024
52470G-79-1	WESTERN ASST GOV FD .....	.....	1.A	13,712	13,712	04/01/2024
61747C-70-7	MS GOVT US .....	.....	1.A	16,914	16,914	04/01/2024
.....	NATWEST MARKETS SECURITIES INC .....	.....	1.F	26,371	26,371	04/01/2024
.....	NOMURA SECURITIES .....	.....	1.A	8,790	8,790	04/01/2024
.....	RBC CAPITAL MKS .....	.....	1.B	17,581	17,581	04/01/2024
.....	BOFA SECURITIES, INC .....	.....	1.B	40,381	40,381	04/01/2024
.....	ING FINANCIAL MARKETS LLC .....	.....	1.B	87,904	87,904	04/01/2024
.....	METROPOLITAN LIFE INSURANCE COMPANY .....	.....	1.B	21,976	21,976	04/01/2024
.....	METROPOLITAN LIFE INSURANCE COMPANY .....	.....	1.B	79,114	79,114	04/01/2024
.....	SOCIETE GENERALE NY BRANCH .....	.....	1.B	19,899	19,899	04/01/2024
.....	BANK OF AMERICA N.A. ....	.....	1.B	68,565	68,565	04/01/2024
.....	BOFA SECURITIES, INC .....	.....	1.B	8,790	8,790	04/01/2024
.....	TD PRIME SVCS .....	.....	1.A	52,743	52,743	04/01/2024
.....	UNITED OF OMAHA LIFE INSURANCE .....	.....	1.B	5,274	5,274	04/29/2024
.....	UNITED OF OMAHA LIFE INSURANCE .....	.....	1.B	5,274	5,274	04/29/2024
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	131,856	131,856	05/03/2024
.....	BOFA SECURITIES, INC .....	.....	1.B	123,066	123,066	05/03/2024
.....	BOFA SECURITIES, INC .....	.....	1.B	87,904	87,904	05/03/2024
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	43,952	43,952	05/03/2024
.....	ING FINANCIAL MARKETS LLC RPEQ .....	.....	1.B	43,952	43,952	05/03/2024
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	87,904	87,904	05/03/2024
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	87,904	87,904	05/03/2024
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	43,952	43,952	05/03/2024
.....	ROYAL BANK CANADA TORONTO .....	.....	1.B	96,695	96,695	05/03/2024
9709999999. Subtotal - Cash Equivalents (Schedule E Part 2 type)				1,260,825	1,260,825	XXX
9999999999 - Totals				4,137,217	4,133,813	XXX

General Interrogatories:

1. Total activity for the year
- Fair Value \$ 1,504,921
- Book/Adjusted Carrying Value \$ 1,503,770
2. Average balance for the year
- Fair Value \$ 3,609,615
- Book/Adjusted Carrying Value \$ 3,606,191
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
- NAIC 1 \$ 2,061,484
- NAIC 2 \$ 0
- NAIC 3 \$ 0
- NAIC 4 \$ 0
- NAIC 5 \$ 0
- NAIC 6 \$ 0

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

[illegible]

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

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

SCHEDULE E - PART 1 - CASH

E13

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

N O N E