



# HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2024  
OF THE CONDITION AND AFFAIRS OF THE  
**Humana Health Plan of Ohio, Inc.**

NAIC Group Code	0119 (Current)	0119 (Prior)	NAIC Company Code	95348	Employer's ID Number	31-1154200
Organized under the Laws of	Ohio		, State of Domicile or Port of Entry		OH	
Country of Domicile	United States of America					
Licensed as business type:	Health Maintenance Organization					
Is HMO Federally Qualified? Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]						
Incorporated/Organized	08/19/1985		Commenced Business	01/01/1986		
Statutory Home Office	4400 Easton Commons Way, Suite 125 (Street and Number)		Columbus, OH, US 43219 (City or Town, State, Country and Zip Code)			
Main Administrative Office	500 West Main Street (Street and Number)		Louisville, KY, US 40202 513-784-5320 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)			
Mail Address	P.O. Box 740036 (Street and Number or P.O. Box)		Louisville, KY, US 40201-7436 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	500 West Main Street (Street and Number)		Louisville, KY, US 40202 513-784-5320 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)			
Internet Website Address	www.humana.com					
Statutory Statement Contact	Amanda Nethery (Name)		502-580-1624 (Area Code) (Telephone Number)			
	DOIINQUIRIES@humana.com (E-mail Address)		502-580-2099 (FAX Number)			
<b>OFFICERS</b>						
President & CEO	Bruce Dale Broussard		Chief Financial Officer	Susan Marie Diamond		
VP, Associate General Counsel & Corporate Secretary	Joseph Matthew Ruschell		VP & Treasurer	Robert Martin Marcoux Jr.		
<b>OTHER</b>						
John Edward Barger III, SVP, Medicaid President	Courtney Danielle Durall, Assistant Corporate Secretary & Director, ESG Strategy		Douglas Allen Edwards, SVP, Enterprise Associate & Business Solutions			
Daniel Kevin Feld, Associate VP, Tax	John-Paul William Felter, SVP, Chief Accounting Officer & Controller		Jeremy Leon Gaskill, VP, Medicare Regional President			
Leann Moren Hutchinson, VP, Group Business Operations	John Stephen Littig, SVP, EG Medical		Sean Joseph O'Reilly, SVP, Chief Compliance Officer			
William Mark Preston, VP, Investments	George Renaudin II, President, Medicare & Medicaid		Frederick William Roth, VP, Medicare Supplement			
Leah Sonnenschein Schraudenbach, SVP, Chief Risk Officer	Gilbert Alan Stewart #, SVP, Medicare Divisional Leader		Ralph Martin Wilson, Vice President			
<b>DIRECTORS OR TRUSTEES</b>						
Bruce Dale Broussard	George Renaudin II		Joseph Matthew Ruschell			

State of Kentucky  
County of Jefferson SS:

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

Bruce Dale Broussard  
President & CEO

Joseph Matthew Ruschell  
VP, Associate General Counsel & Corporate Secretary

Robert Martin Marcoux, Jr.  
VP & Treasurer

Subscribed and sworn to before me this  
18th day of April, 2024

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

Julia Wentworth  
Notary Public  
January 10, 2025

## 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 .....	91,406,748	0	91,406,748	86,994,366
2. Stocks:				
2.1 Preferred stocks .....	0	0	0	0
2.2 Common stocks .....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens .....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances) .....	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances) .....	0	0	0	0
5. Cash (\$ 6,414,851 ), cash equivalents (\$ 115,447,857 ) and short-term investments (\$ 0 ) .....	121,862,708	0	121,862,708	125,098,726
6. Contract loans (including \$ 0 premium notes) .....	0	0	0	0
7. Derivatives .....	0	0	0	0
8. Other invested assets .....	0	0	0	0
9. Receivables for securities .....	0	0	0	0
10. Securities lending reinvested collateral assets .....	0	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	213,269,456	0	213,269,456	212,093,092
13. Title plants less \$ 0 charged off (for Title insurers only) .....	0	0	0	0
14. Investment income due and accrued .....	482,415	0	482,415	439,047
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	85,650,214	20,200	85,630,013	66,317,656
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 0 earned but unbilled premiums) .....	0	0	0	0
15.3 Accrued retrospective premiums (\$ 374,832 ) and contracts subject to redetermination (\$ 6,078,768 ) .....	6,453,599	0	6,453,599	3,326,830
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0	0
17. Amounts receivable relating to uninsured plans .....	240,324	10,349	229,975	324,669
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0	3,803,454
18.2 Net deferred tax asset .....	7,087,770	0	7,087,770	7,087,770
19. Guaranty funds receivable or on deposit .....	0	0	0	0
20. Electronic data processing equipment and software .....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ 0 ) .....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0	0
24. Health care (\$ 4,519,975 ) and other amounts receivable .....	4,942,098	420,943	4,521,155	7,632,755
25. Aggregate write-ins for other than invested assets .....	1,181,588	1,181,588	0	47,831
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	319,307,465	1,633,081	317,674,384	301,073,104
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0	0
28. Total (Lines 26 and 27)	319,307,465	1,633,081	317,674,384	301,073,104
<b>DETAILS OF WRITE-INS</b>				
1101. ....	0	0	0	0
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 Commissions .....	680,093	680,093	0	0
2502. Prepaid Expenses .....	501,495	501,495	0	0
2503. Federal Contingency Reserves .....	0	0	0	47,831
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)	1,181,588	1,181,588	0	47,831

## LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 0 reinsurance ceded) .....	106,510,759	6,777,706	113,288,465	107,740,919
2. Accrued medical incentive pool and bonus amounts .....	1,917,610	0	1,917,610	2,389,000
3. Unpaid claims adjustment expenses .....	711,876	0	711,876	714,178
4. Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act .....	26,307,421	0	26,307,421	26,321,114
5. Aggregate life policy reserves .....	0	0	0	0
6. Property/casualty unearned premium reserve .....	0	0	0	0
7. Aggregate health claim reserves .....	68,474	0	68,474	68,474
8. Premiums received in advance .....	300,356	0	300,356	462,682
9. General expenses due or accrued .....	12,310,125	0	12,310,125	14,783,352
10.1 Current federal and foreign income tax payable and interest thereon (including \$ 1,565 on realized gains (losses)) .....	900,341	0	900,341	0
10.2 Net deferred tax liability .....	0	0	0	0
11. Ceded reinsurance premiums payable .....	0	0	0	0
12. Amounts withheld or retained for the account of others .....	0	0	0	0
13. Remittances and items not allocated .....	20,339	0	20,339	21,569
14. Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current) .....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates .....	32,321,870	0	32,321,870	21,686,615
16. Derivatives .....	0	0	0	0
17. Payable for securities .....	17,493	0	17,493	0
18. Payable for securities lending .....	0	0	0	0
19. Funds held under reinsurance treaties (with \$ 0 authorized reinsurers, \$ 0 unauthorized reinsurers and \$ 0 certified reinsurers) .....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ 0 ) companies .....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....	0	0	0	0
22. Liability for amounts held under uninsured plans .....	4,571,388	0	4,571,388	3,094,491
23. Aggregate write-ins for other liabilities (including \$ 3,715 current) .....	1,964,733	0	1,964,733	1,556,383
24. Total liabilities (Lines 1 to 23) .....	187,922,785	6,777,706	194,700,491	178,838,778
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	0
28. Gross paid in and contributed surplus .....	XXX	XXX	195,223,747	195,223,747
29. Surplus notes .....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	(72,250,855)	(72,990,421)
32. Less treasury stock, at cost: 32.1 \$ 0 shares common (value included in Line 26 \$ 0 ) .....	XXX	XXX	0	0
32.2 \$ 0 shares preferred (value included in Line 27 \$ 0 ) .....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	122,973,893	122,234,326
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	317,674,384	301,073,104
<b>DETAILS OF WRITE-INS</b>				
2301. Premium Payable .....	1,940,866	0	1,940,866	1,533,241
2302. Unclaimed Property .....	23,867	0	23,867	23,141
2303. .....	0	0	0	0
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)	1,964,733	0	1,964,733	1,556,383
2501. .....	XXX	XXX	0	0
2502. .....	XXX	XXX	0	0
2503. .....	XXX	XXX	0	0
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	0	0
3002. .....	XXX	XXX	0	0
3003. .....	XXX	XXX	0	0
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.....	.....430,153	.....243,304	.....1,355,864
2. Net premium income ( including \$ 0 non-health premium income).....	....XXX.....	.....248,845,679	.....143,136,190	.....796,047,101
3. Change in unearned premium reserves and reserve for rate credits.....	....XXX.....	.....0	.....0	.....0
4. Fee-for-service (net of \$ 0 medical expenses).....	....XXX.....	.....0	.....0	.....0
5. Risk revenue .....	....XXX.....	.....0	.....0	.....0
6. Aggregate write-ins for other health care related revenues .....	....XXX.....	.....0	.....0	.....0
7. Aggregate write-ins for other non-health revenues .....	....XXX.....	.....0	.....0	.....0
8. Total revenues (Lines 2 to 7) .....	....XXX.....	.....248,845,679	.....143,136,190	.....796,047,101
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....	.....14,367,314	.....195,134,494	.....104,220,326	.....612,745,909
10. Other professional services .....	.....27,816	.....377,794	.....132,269	.....959,977
11. Outside referrals .....	.....0	.....0	.....0	.....0
12. Emergency room and out-of-area .....	.....712,376	.....9,675,367	.....3,059,143	.....27,547,317
13. Prescription drugs .....	.....388,888	.....5,281,808	.....8,373,676	.....30,139,714
14. Aggregate write-ins for other hospital and medical .....	.....0	.....0	.....0	.....0
15. Incentive pool, withhold adjustments and bonus amounts .....	.....0	.....401,715	.....(564,498)	.....(145,491)
16. Subtotal (Lines 9 to 15) .....	.....15,496,394	.....210,871,178	.....115,220,916	.....671,247,426
<b>Less:</b>				
17. Net reinsurance recoveries .....	.....0	.....0	.....0	.....0
18. Total hospital and medical (Lines 16 minus 17) .....	.....15,496,394	.....210,871,178	.....115,220,916	.....671,247,426
19. Non-health claims (net) .....	.....0	.....0	.....0	.....0
20. Claims adjustment expenses, including \$ 8,396,156 cost containment expenses .....	.....0	.....9,948,910	.....9,050,010	.....39,971,786
21. General administrative expenses .....	.....0	.....30,069,361	.....26,122,383	.....132,220,973
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only) .....	.....0	.....0	.....0	.....(10,364,870)
23. Total underwriting deductions (Lines 18 through 22).....	.....15,496,394	.....250,889,449	.....150,393,309	.....833,075,315
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	....XXX.....	.....(2,043,771)	.....(7,257,120)	.....(37,028,214)
25. Net investment income earned .....	.....0	.....2,671,760	.....938,088	.....6,881,889
26. Net realized capital gains (losses) less capital gains tax of \$ 1,565 .....	.....0	.....5,889	.....(62,251)	.....362,344
27. Net investment gains (losses) (Lines 25 plus 26) .....	.....0	.....2,677,649	.....875,838	.....7,244,233
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 0 ) (amount charged off \$ 0 )].....	.....0	.....0	.....0	.....0
29. Aggregate write-ins for other income or expenses .....	.....0	.....1	.....2	.....3
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.....	.....633,880	.....(6,381,281)	.....(29,783,978)
31. Federal and foreign income taxes incurred .....	....XXX.....	.....898,776	.....375,408	.....(7,126,683)
32. Net income (loss) (Lines 30 minus 31) .....	....XXX.....	.....(264,895)	.....(6,756,688)	.....(22,657,295)
<b>DETAILS OF WRITE-INS</b>				
0601. ....	....XXX.....	.....0	.....0	.....0
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.....	.....0	.....0	.....0
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. ....	.....0	.....0	.....0	.....0
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. Miscellaneous Income .....	.....0	.....1	.....2	.....3
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	.....1	.....2	.....3

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	122,234,326	50,932,550	50,932,550
34. Net income or (loss) from Line 32 .....	(264,895)	(6,756,688)	(22,657,295)
35. Change in valuation basis of aggregate policy and claim reserves .....	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss).....	0	0	0
38. Change in net deferred income tax .....	0	0	(775,089)
39. Change in nonadmitted assets .....	1,004,462	(1,013,258)	4,734,161
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.....	0	0	0
44. Capital Changes:			
44.1 Paid in .....	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in .....	0	0	90,000,000
45.2 Transferred to capital (Stock Dividend) .....	0	0	0
45.3 Transferred from capital .....	0	0	0
46. Dividends to stockholders .....	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0	0
48. Net change in capital & surplus (Lines 34 to 47) .....	739,566	(7,769,946)	71,301,776
49. Capital and surplus end of reporting period (Line 33 plus 48)	122,973,893	43,162,604	122,234,326
<b>DETAILS OF WRITE-INS</b>			
4701. .....	0	0	0
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

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	226,633,085	149,301,771	728,476,218
2. Net investment income .....	2,612,179	997,395	6,834,187
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	229,245,264	150,299,166	735,310,405
5. Benefit and loss related payments .....	202,787,946	73,226,163	588,721,977
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	40,846,027	27,202,651	157,920,891
8. Dividends paid to policyholders .....	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... 119,378 tax on capital gains (losses) .....	(3,803,454)	(679,762)	(3,897,329)
10. Total (Lines 5 through 9) .....	239,830,519	99,749,052	742,745,539
11. Net cash from operations (Line 4 minus Line 10) .....	(10,585,255)	50,550,114	(7,435,134)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	3,857,968	1,712,313	48,809,194
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 .....	11	0	(2)
12.7 Miscellaneous proceeds .....	17,493	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	3,875,473	1,712,313	48,809,193
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	8,246,694	1,749,443	92,030,786
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 .....	0	1,199,994	22,007
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	8,246,694	2,949,438	92,052,793
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) .....	(4,371,221)	(1,237,125)	(43,243,600)
<b>Cash from Financing and Miscellaneous Sources</b>			
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	90,000,000
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	0
16.6 Other cash provided (applied) .....	11,720,458	48,794,145	67,724,445
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	11,720,458	48,794,145	157,724,445
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(3,236,018)	98,107,134	107,045,711
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	125,098,726	18,053,015	18,053,015
19.2 End of period (Line 18 plus Line 19.1) .....	121,862,708	116,160,149	125,098,726

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
<b>Total Members at end of:</b>														
1. Prior Year .....	142,233	0	15,759	0	0	0	214	11,388	114,872	0	0	0	0	0
2. First Quarter .....	147,666	0	3,270	0	0	0	0	10,570	133,826	0	0	0	0	0
3. Second Quarter .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	430,153	0	10,981	0	0	0	(2)	31,460	387,714	0	0	0	0	0
<b>Total Member Ambulatory Encounters for Period:</b>														
7. Physician .....	528,301	0	10,437	0	0	0	170	67,564	450,130	0	0	0	0	0
8. Non-Physician .....	216,203	0	4,996	0	0	0	70	34,342	176,795	0	0	0	0	0
9. Total .....	744,504	0	15,433	0	0	0	240	101,906	626,925	0	0	0	0	0
10. Hospital Patient Days Incurred	72,166	0	998	0	0	0	24	10,322	60,822	0	0	0	0	0
11. Number of Inpatient Admissions	5,172	0	71	0	0	0	6	920	4,175	0	0	0	0	0
12. Health Premiums Written (a) .....	248,845,679	29,870	5,345,776	0	0	0	(46,509)	41,383,583	202,132,958	0	0	0	0	0
13. Life Premiums Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned .....	248,845,679	29,870	5,345,776	0	0	0	(46,509)	41,383,583	202,132,958	0	0	0	0	0
16. Property/Casualty Premiums Earned .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services .....	203,017,147	(1,013)	5,765,697	0	0	0	54,988	36,128,410	161,069,064	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services .....	210,871,178	(973)	2,245,247	0	0	0	824	38,827,776	169,798,305	0	0	0	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 41,383,583

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

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

### **Aging Analysis of Unpaid Claim**

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
<b>Claims Unpaid (Reported)</b>						
0299999 Aggregate accounts not individually listed-uncovered	1,019,699	36,215	2,361	0	26,162	1,084,437
0399999 Aggregate accounts not individually listed-covered	4,499,940	159,817	10,420	0	115,454	4,785,631
0499999 Subtotals	5,519,639	196,032	12,781	0	141,616	5,870,068
0599999 Unreported claims and other claim reserves						107,418,397
0699999 Total amounts withheld						0
0799999 Total claims unpaid						113,288,465
0899999 Accrued medical incentive pool and bonus amounts						1,917,610

## 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	6
	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 .....	(1,013)	0	0	0	(1,013)	(40)
2. Comprehensive (hospital and medical) group .....	2,260,972	3,504,725	1,141,885	1,685,133	3,402,857	9,696,942
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 .....	13,030	41,958	2,062	41,540	15,093	210,731
7. Title XVIII - Medicare .....	8,020,753	27,234,553	3,163,945	15,611,745	11,184,698	14,905,199
8. Title XIX - Medicaid .....	64,623,261	96,445,803	9,428,647	82,281,982	74,051,908	82,996,561
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) .....	74,917,003	127,227,040	13,736,539	99,620,400	88,653,543	107,809,394
14. Health care receivables (a) .....	9,178	4,567,025	0	0	9,178	7,354,077
15. Other non-health .....	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts .....	873,104	0	1,648,551	269,059	2,521,655	2,389,000
17. Totals (Lines 13 - 14 + 15 + 16) .....	75,780,930	122,660,015	15,385,090	99,889,459	91,166,020	102,844,316

(a) Excludes \$ 364,715 loans or advances to providers not yet expensed.

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

#### 1. Summary of Significant Accounting Policies and Going Concern

##### A. Accounting Practices

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

In February 2023, Humana announced the planned exit from the Employer Group Commercial Medical Products business, which includes all fully insured, self-funded and Federal Employee Health Benefit medical plans, as well as associated wellness and rewards programs, which was 15% of total premiums for the year ended December 31, 2023. No other Humana health plan offerings are materially affected. Following a strategic review, Humana determined the Employer Group Commercial Medical Products business was no longer positioned to sustainably meet the needs of commercial members over the long term or support Humana's long-term strategic plans. The exit from this line of business will be phased over the 18 to 24 months following the February 2023 announcement.

The Ohio Department of Insurance (the Department) recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SSAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations from the Codification currently exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SSAP and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	2024	2023
<b>Net Loss</b>					
1. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ (264,895)	\$ (22,657,295)
2. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-	-
3. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-	-
4. NAIC SSAP	xxx	xxx	xxx	\$ (264,895)	\$ (22,657,295)
<b>Surplus</b>					
5. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ 122,973,893	\$ 122,234,326
6. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-	-
7. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-	-
8. NAIC SSAP	xxx	xxx	xxx	\$ 122,973,893	\$ 122,234,326

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

##### C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.
- (2-4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value. Common stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

- (5) Not Applicable.
- (6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.
- (7) Not Applicable.
- (8) Not Applicable.
- (9) Not Applicable.
- (10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

- (12) The Company has not modified its capitalization policy from the prior period.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax basis of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.

- (13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.
- (14) Not Applicable.
- (15) Not Applicable.

#### D. Going Concern

Management of the Company has evaluated the Company's ability to continue as a going concern under SSAP No. 1, *Accounting Policies, Risks & Uncertainties, and Other Disclosures* (SSAP No. 1). Based on this evaluation, Management has determined that there is no substantial doubt about the Company's ability to continue as a going concern.

#### 2. Accounting Changes and Corrections of Errors

Not Applicable.

#### 3. Business Combinations and Goodwill

##### A. Statutory Purchase Method

Not Applicable.

**STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

D. Impairment Loss

Not Applicable.

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

Not Applicable.

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

(1) Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from industry market sources.

(2) Not Applicable.

(3) Not Applicable.

(4) The Company does not have any investments in an other-than-temporary impairment position at March 31, 2024.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at March 31, 2024:

(a) The aggregate amount of unrealized losses:

1. Less than Twelve Months	\$ (738,724)
2. Twelve Months or Longer	\$ (3,284,810)

(b) The aggregate related fair value of securities with unrealized losses:

1. Less than Twelve Months	\$ 39,385,711
2. Twelve Months or Longer	\$ 20,197,656

(5) Unrealized losses are primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) The Company has no repurchase agreements or securities lending transactions.

(2) The Company has not pledged any of its assets as collateral.

(3-7) Not Applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

**STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

**H. Repurchase Agreements Transactions Accounted for as a Sale**

Not Applicable.

**I. Reverse Repurchase Agreements Transactions Accounted for as a Sale**

Not Applicable.

**J. Real Estate**

Not Applicable.

**K. Low-Income Housing Tax Credits (LIHTC)**

Not Applicable.

**L. Restricted Assets**

**(1) Restricted Assets (Including Pledged)**

Restricted Asset Category	1	2	3	4	5	6	7
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Percentage Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Percentage Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	-%	-%
b. Collateral held under security lending agreements	-	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-	-
h. Letter stock or securities restricted to sale – excluding FHLB capital stock	-	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-	-
j. On deposit with states	1,115,913	1,117,091	(1,178)	-	1,115,913	0.35%	0.35%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-	-
<b>o. Total Restricted Assets</b>	<b>\$ 1,115,913</b>	<b>\$ 1,117,091</b>	<b>\$ (1,178)</b>	<b>-</b>	<b>\$ 1,115,913</b>	<b>0.35%</b>	<b>0.35%</b>

**(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)**

Not Applicable.

**(3) Detail of Other Restricted Assets Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)**

Not Applicable.

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

Not Applicable.

**M. Working Capital Finance Investments**

Not Applicable.

**N. Offsetting and Netting of Assets and Liabilities**

Not Applicable.

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

#### O. 5GI\* Securities

Not Applicable.

#### P. Short Sales

Not Applicable.

#### Q. Prepayment Penalty and Acceleration Fees

Not Applicable.

#### R. Share of Cash Pool by Asset Type

Not Applicable.

#### 6. Joint Ventures, Partnerships and Limited Liability Companies

- A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.
- B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

#### 7. Investment Income

- A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.

- B. The total amount excluded was \$0.

- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 482,415
2. Nonadmitted	\$ -
3. Admitted	\$ 482,415

- D. The aggregate deferred interest.

	Amount
Aggregate Deferred Interest	\$ -

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.

	Amount
Cumulative amounts of PIK interest included in the current principal balance	\$ -

#### 8. Derivative Instruments

Not Applicable.

#### 9. Income Taxes

The Inflation Reduction Act (Act) was enacted on August 16, 2022 and included a new corporate alternative minimum tax (CAMT). The Act and the CAMT went into effect for tax years beginning after 2022. The Company is an applicable corporation for 2024 as the average adjusted financial statement income for Humana Inc. and Subsidiaries for the applicable three-tax-year period exceeds the \$1 billion income-based threshold. However, the Company does not expect to incur a CAMT liability in 2024 as its regular tax liability is expected to exceed the tentative minimum tax. Further, no other taxable entities or taxable groups within the Company's structure are expected to exceed the average adjusted financial statement income threshold. The Company has not made an accounting policy election to disregard CAMT when evaluating the need for a valuation allowance for its non-CAMT DTAs.

No material change since year-end December 31, 2023.

#### 10. Information Concerning Parent, Subsidiaries and Affiliates

A.-B. The Company has several management contracts with Humana Inc. and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2023 and 2022 were \$88,573,316 and \$28,930,198, respectively. As a part of this agreement, Humana Inc. makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana Inc. not be able to fulfill its obligations.

The Company has various related party agreements with no material change since year-end December 31, 2023.

## **STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.**

### **NOTES TO THE FINANCIAL STATEMENTS**

No dividends or returns of capital were paid by the Company as of March 31, 2024.

C. (1) Detail of Material Related Party Transactions

Not Applicable.

(2) Detail of Material Related Party Transactions Involving Services

Not Applicable.

(3) Detail of Material Related Party Transactions Exchange of Assets and Liabilities

Not Applicable.

(4) Detail of Amounts Owed To/From a Related Party

Not Applicable.

D. At March 31, 2024, the Company reported \$32,321,870 due to Humana Inc. Amounts due to or from parent are generally settled within 90 days.

E. Not Applicable.

F. The Company has a parental guarantee with Humana Inc. in accordance with certain regulatory requirements.

G. All outstanding shares of the Company are owned by the Parent Company.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

M. All SCA Investments

Not Applicable.

N. Investment in Insurance SCA

Not Applicable.

O. SCA Loss Tracking

Not Applicable.

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

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

A.-D. Defined Benefit Plans

Not Applicable.

E. Defined Contribution Plans

Not Applicable.

F. Multiemployer Plans

Not Applicable.

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

#### G. Consolidated/Holding Company Plans

No material change since year-end December 31, 2023.

#### H. Postemployment 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

A. The Company has \$0 par value common stock with 1,000 shares authorized and 200 shares issued and 200 outstanding. All shares are common stock shares.

B. The Company has no preferred stock outstanding.

C.-E. No material change since year-end December 31, 2023.

F. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

G. Not Applicable.

H. Not Applicable.

I. Not Applicable.

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$0.

K. Not Applicable.

L. Not Applicable.

M. Not Applicable.

#### 14. Liabilities, Contingencies and Assessments

##### A. Contingent Commitments

Not Applicable.

##### B. Assessments

Not Applicable.

##### C. Gain Contingencies

Not Applicable.

##### D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

##### E. Joint and Several Liabilities

Not Applicable.

##### F. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of March 31, 2024.

#### 15. Leases

No material change since year-end December 31, 2023.

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

The Company has no investment in Financial Instruments with Off-Balance Sheet Risk or Concentrations of Credit Risk.

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

##### A. Transfers of Receivables Reported as Sales

Not Applicable.

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

#### B. Transfer and Servicing of Financial Assets

Not Applicable.

#### C. Wash Sales

Not Applicable.

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

##### A. ASO Plans

Not Applicable.

##### B. ASC Plans

Not Applicable.

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

- (1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of its Medicare or other similarly structured cost based reimbursement contracts.
- (2) As of March 31, 2024, the Company has recorded a receivable from CMS of \$221,833 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any receivables greater than 10% of the Company's accounts receivable from uninsured accident and health plans or \$10,000.
- (3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or other similarly structured cost based reimbursement contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.
- (4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

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

Not Applicable.

#### 20. Fair Value Measurements

##### A. (1) The Company did not have any financial assets carried at fair value at March 31, 2024.

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2023 and March 31, 2024.

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

Not Applicable.

##### (3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2023 and March 31, 2024.

(4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities 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 benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended March 31, 2024.

##### (5) Derivative Fair Values

Not Applicable.

##### B. Other Fair Value Disclosures

Not Applicable.

**STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.**

**NOTES TO THE FINANCIAL STATEMENTS**

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

Type of Financial	Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds and cash equivalents		\$ 202,110,951	\$ 206,854,605	\$ 115,447,857	\$ 86,663,094	\$ -	\$ -	\$ -

**D. Financial Instruments for which Not Practicable to Estimate Fair Values**

Not Applicable.

**21. Other Items**

**A. Extraordinary Items**

The emergence and spread of the novel coronavirus, or COVID-19, beginning in the first quarter of 2020 has impacted the Company's business. During periods of increased incidences of COVID-19, there was a reduction in non-COVID-19 hospital admissions and lower overall healthcare system consumption that decreased utilization. Likewise COVID-19 treatment and testing costs increased utilization. During 2022, the Company experienced lower overall utilization of the healthcare system than anticipated, as the reduction in COVID-19 utilization following the increased incidence associated with the Omicron variant outpaced the increase in non-COVID-19 utilization. The significant disruption in utilization during 2020 also impacted the Company's ability to implement clinical initiatives to manage health care costs and chronic conditions of its members, and appropriately document their risk profiles, and, as such, affecting 2021 revenue under the risk adjustment payment model for Medicare Advantage plans. Finally, changes in utilization patterns and actions taken in 2021 as a result of the COVID-19 pandemic, including the suspension of certain financial recovery programs for a period of time and shifting the timing of claim payments and provider capitation surplus payments, impacted claim reserve development and operating cash flows for 2021.

The COVID-19 National Emergency declared in 2020 was terminated on April 10, 2023 and the Public Health Emergency expired on May 11, 2023.

**B. Troubled Debt Restructuring: Debtors**

Not Applicable.

**C. Other Disclosures and Unusual Items**

Not Applicable.

**D. Business Interruption Insurance Recoveries**

Not Applicable.

**E. State Transferable and Non-transferable Tax Credits**

Not Applicable.

**F. Subprime Mortgage Related Risk Exposure**

(1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management's practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

(2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

(3) Direct exposure through other investments:

- a. Residential mortgage backed securities – No substantial exposure noted.
- b. Commercial mortgage backed securities – No substantial exposure noted.
- c. Collateralized debt obligations – No substantial exposure noted.
- d. Structured securities – No substantial exposure noted.
- e. Equity investment in SCAs – No substantial exposure noted.
- f. Other assets – No substantial exposure noted.
- g. Total – No substantial exposure noted.

(4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

The Company does not have sub-prime mortgage risk.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

## STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

### NOTES TO THE FINANCIAL STATEMENTS

#### G. Retained Assets

Not Applicable.

#### H. Insurance Linked Securities

Not Applicable.

#### 22. Events Subsequent

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through May 6, 2024 for the Statutory Statement issued on May 6, 2024.

#### 23. Reinsurance

##### A. Ceded Reinsurance Report

###### Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes (  ) No (  )

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes (  ) No (  )

###### Section 2 – Ceded Reinsurance Report – Part A

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

Yes (  ) No (  )

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

Yes (  ) No (  )

###### Section 3 – Ceded Reinsurance Report – Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

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

Yes (  ) No (  )

##### B. Uncollectible Reinsurance

Not Applicable.

##### C. Commutation of Ceded Reinsurance

Not Applicable.

##### D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

#### 24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.

The Company estimates accrued retrospective premium adjustments for its Commercial business based on experience to date, knowledge of the marketplace, and the terms of the risk corridors program with HHS.

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

**STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.****NOTES TO THE FINANCIAL STATEMENTS**

C. The amount of net premiums written by the Company at March 31, 2024 that are subject to retrospective rating features was \$248,845,679, or 100.00% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

Not Applicable.

E. Risk Sharing Provisions of the Affordable Care Act

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

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

a. Permanent ACA Risk Adjustment Program

Assets			
1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)		\$ 1,976,014	
Liabilities			
2. Risk adjustment user fees payable for ACA Risk Adjustment		\$ 3,622	
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)		\$ -	
Operations (Revenue & Expenses)			
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment		\$ -	
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)		\$ 300	

b. Transitional ACA Reinsurance Program

Assets			
1. Amounts recoverable for claims paid due to ACA Reinsurance		\$ -	
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)		\$ -	
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance		\$ -	
Liabilities			
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium		\$ -	
5. Ceded reinsurance premiums payable due to ACA Reinsurance		\$ -	
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance		\$ -	
Operations (Revenues & Expenses)			
7. Ceded reinsurance premiums due to ACA Reinsurance		\$ -	
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments		\$ -	
9. ACA Reinsurance contributions – not reported as ceded premiums		\$ -	

c. Temporary ACA Risk Corridors Program

Assets			
1. Accrued retrospective premium due to ACA Risk Corridors		\$ -	
Liabilities			
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors		\$ -	
Operations (Revenue & Expenses)			
3. Effect of ACA Risk Corridors on net premium income		\$ -	
4. Effect of ACA Risk Corridors on change in reserves for rate credits		\$ -	

# STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.

## NOTES TO THE FINANCIAL STATEMENTS

(3) Roll-forward of Prior Year ACA Risk-sharing Provisions for the Following Asset (Gross of Any Nonadmission) and Liability Balances, Along with the Reasons for Adjustments to Prior Year Balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year	Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year	Differences		Adjustments		Unsettled Balances as of the Reporting Date		
			Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
			1	2	3	4	5	6	7
a. Permanent ACA Risk Adjustment Program									
1. Premium adjustments receivable (including high risk pool payments)	1,976,014				1,976,014				1,976,014
2. Premium adjustments (payables) (including high risk pool premium)									
3. Subtotal ACA Permanent Risk Adjustment Program	1,976,014				1,976,014				1,976,014
b. Transitional ACA Reinsurance Program									
1. Amounts recoverable for claims paid									
2. Amounts recoverable for claims unpaid (contra liability)									
3. Amounts receivable relating to uninsured plans									
4. Liabilities for contributions payable due to ACA Reinsurance- not reported as ceded premium									
5. Ceded reinsurance premiums payable									
6. Liability for amounts held under uninsured plans									
7. Subtotal ACA Transitional Reinsurance Program									
c. Temporary ACA Risk Corridors Program									
1. Accrued retrospective premium									
2. Reserve for rate credits or policy experience rating refunds									
3. Subtotal ACA Risk Corridors Program									
d. Total for ACA Risk Sharing Provisions	1,976,014				1,976,014				1,976,014

(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

Benefits and loss adjustment expenses payable, net of health care receivables, as of December 31, 2023, were \$103,558,494. As of March 31, 2024, \$76,408,843 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$15,471,355 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$11,678,296 favorable prior-year development since December 31, 2023. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$11,677,323 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

26. Intercompany Pooling Arrangements

Not Applicable.

**STATEMENT AS OF March 31, 2024 OF Humana Health Plan of Ohio, Inc.****NOTES TO THE FINANCIAL STATEMENTS****27. Structured Settlements**

The Company has no structured settlements.

**28. Health Care Receivables****A. Pharmaceutical Rebate Receivables**

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
12/31/2024	\$ -	\$ -	\$ -	\$ -	\$ -
9/30/2024	-	-	-	-	-
6/30/2024	-	-	-	-	-
3/31/2024	3,862,096	3,862,096	-	-	-
12/31/2023	5,740,357	5,861,695	3,452,009	2,247,393	-
9/30/2023	6,194,108	6,342,846	3,709,219	2,552,665	4,164
6/30/2023	6,391,734	6,495,666	4,008,216	2,498,851	1,187
3/31/2023	6,170,306	6,158,838	3,778,566	2,427,845	(26,243)
12/31/2022	5,918,355	5,725,027	3,561,455	2,154,166	228
9/30/2022	5,830,371	5,925,768	5,700,019	225,749	-
6/30/2022	6,244,367	6,390,451	6,495,207	(104,756)	-
3/31/2022	5,817,837	5,624,004	5,517,944	106,060	-

**B. Risk Sharing Receivables**

Not Applicable.

**29. Participating Policies**

The Company has no participating policies.

**30. Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserves \$ 24,919,979
2. Date of the most recent evaluation of this liability December 31, 2023
3. Was anticipated investment income utilized in the calculation? Yes ( X ) No ( )

**31. Anticipated Salvage and Subrogation**

Not Applicable.

**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? ..... Yes [ X ] No [ ]  
If yes, complete Schedule Y, Parts 1 and 1A.

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.  
NA .....

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. ..... 0000049071

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 Name of Entity	2 NAIC Company Code	3 State of Domicile
Not Applicable. .....	.....	.....

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? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.  
.....

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. ..... 12/31/2020

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. ..... 12/31/2020

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). ..... 05/23/2022

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 [ X ] No [ ] N/A [ ]

6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ X ] No [ ] N/A [ ]

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ 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 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....	.....	.....	.....	.....	.....

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## **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? ..... Yes [  ] No [  ]

- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.

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

9.2 Has the code of ethics for senior managers been amended? ..... Yes [  ] No [  ]

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

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [  ] No [  ]

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

## FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]  
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....\$..... 0

## INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [ X ]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ ..... C

13. Amount of real estate and mortgages held in short-term investments: ..... \$ ..... C

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 Prior Year-End Book/Adjusted Carrying Value	2 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. ....	\$ ..... 0
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. ....	\$ ..... 0
16.3 Total payable for securities lending reported on the liability page. ....	\$ ..... 0

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of 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 .....	4 Metro Tech Center, 6th Floor, Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Charline Ottley .....

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
BLACKROCK FINANCIAL MANAGEMENT, INC .....	U.....
Humana Inc. .....	I.....

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 [ X ] No [ ]

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 [ X ] No [ ]

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	5 Investment Management Agreement (IMA) Filed
107105 .....	BLACKROCK FINANCIAL MANAGEMENT, INC .....	549300LVXYIVJKE13M84 .....	The SEC .....	DS.....

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:

- 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.
- Issuer or obligor is current on all contracted interest and principal payments.
- 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:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- 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.
- 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:

- The shares were purchased prior to January 1, 2019.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- 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.
- The fund only or predominantly holds bonds in its portfolio.
- 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.
- 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 .....	88.1 %
1.2 A&H cost containment percent .....	3.4 %
1.3 A&H expense percent excluding cost containment expenses .....	12.7 %

2.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

2.2 If yes, please provide the amount of custodial funds held as of the reporting date ..... \$..... 0

2.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

2.4 If yes, please provide the balance of the funds administered as of the reporting date ..... \$..... 0

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

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

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

# **NONE**

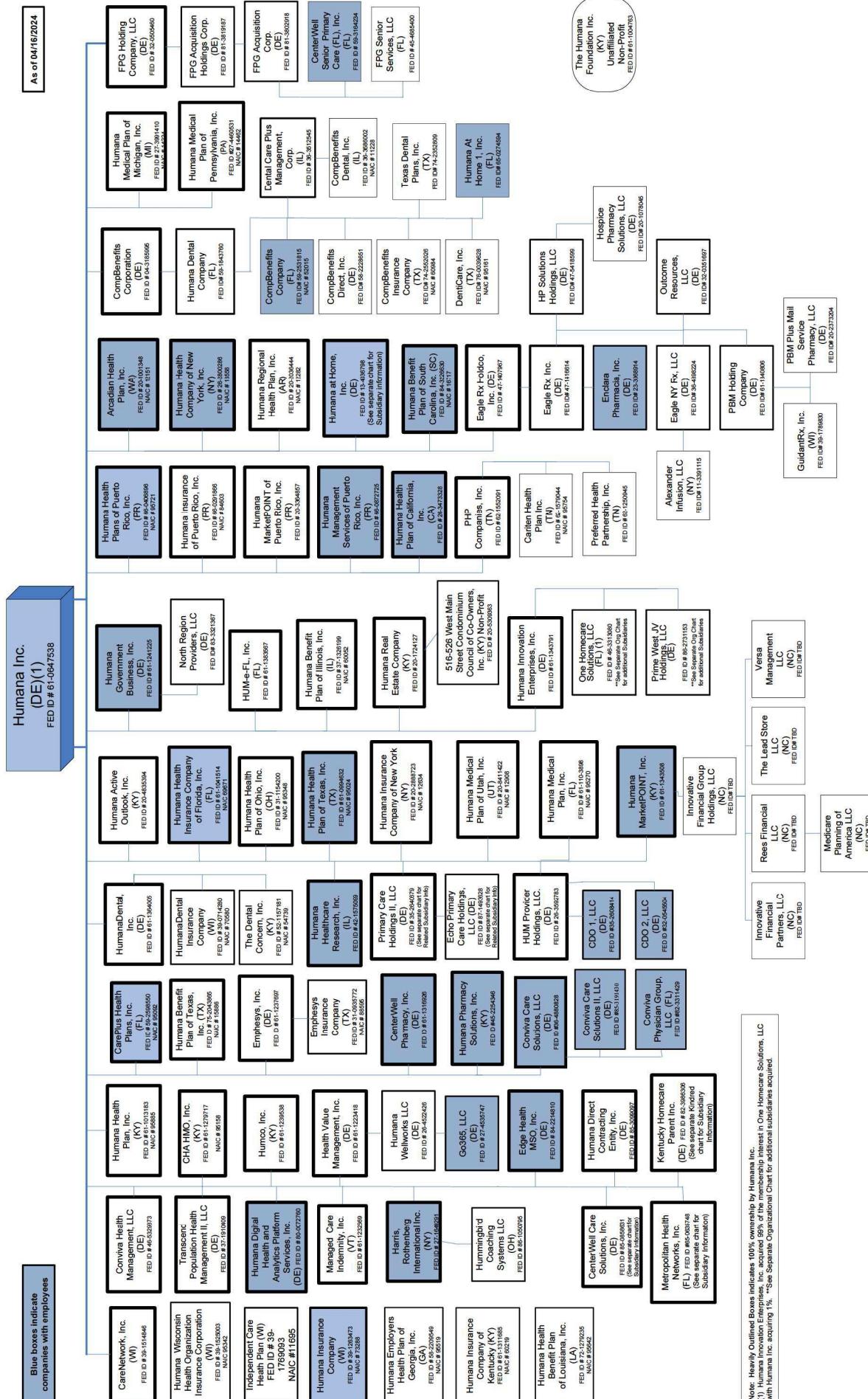
**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

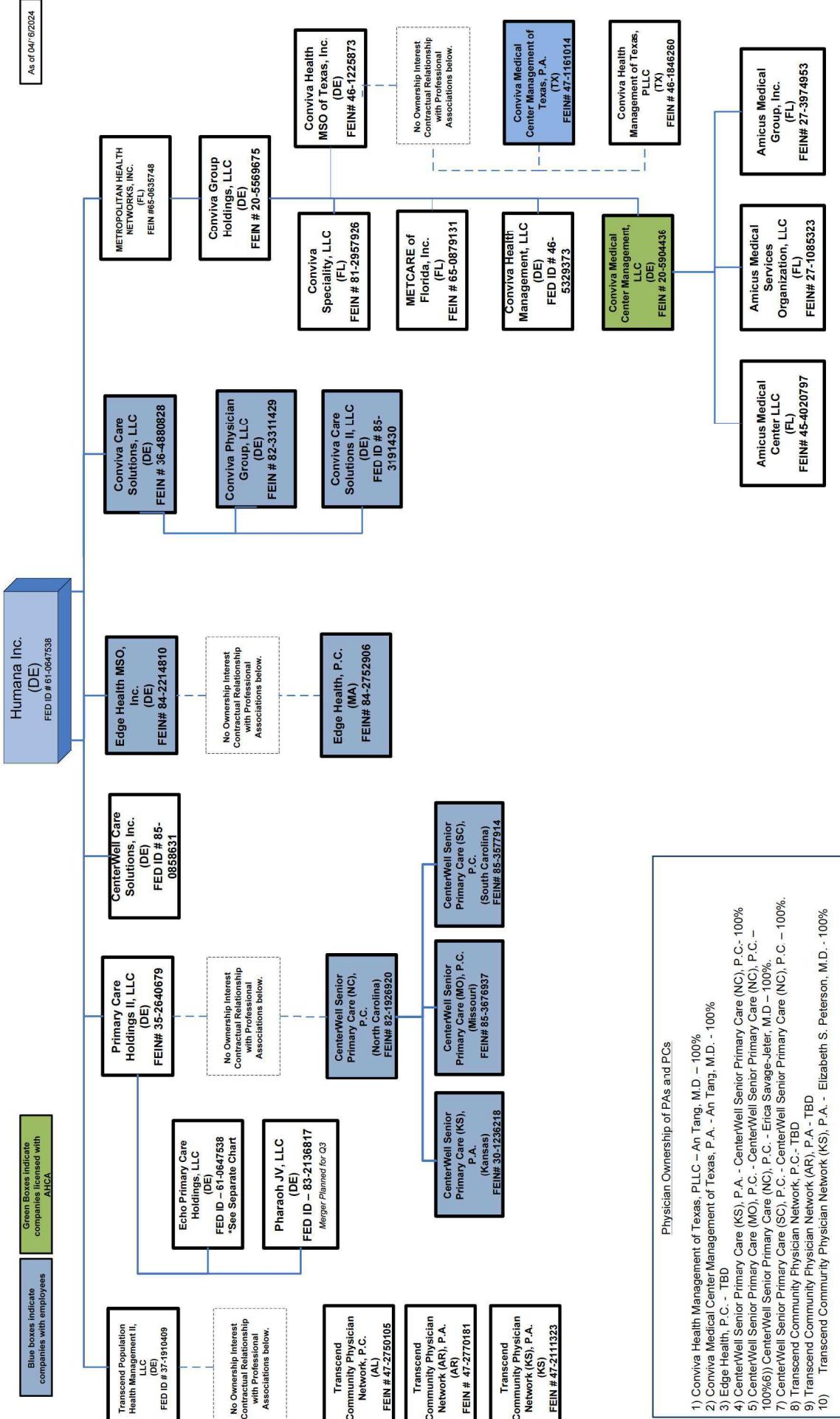
States, etc.	1 Active Status (a)	Direct Business Only								
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama .....	AL .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
2. Alaska .....	AK .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
3. Arizona .....	AZ .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
4. Arkansas .....	AR .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
5. California .....	CA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
6. Colorado .....	CO .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
7. Connecticut .....	CT .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
8. Delaware .....	DE .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
9. District of Columbia	DC .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
10. Florida .....	FL .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
11. Georgia .....	GA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
12. Hawaii .....	HI .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
13. Idaho .....	ID .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
14. Illinois .....	IL .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
15. Indiana .....	IN .....	L .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
16. Iowa .....	IA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
17. Kansas .....	KS .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
18. Kentucky .....	KY .....	L .....	41,392,567 .....	0 .....	0 .....	0 .....	0 .....	0 .....	41,392,567 .....	0 .....
19. Louisiana .....	LA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
20. Maine .....	ME .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
21. Maryland .....	MD .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
22. Massachusetts .....	MA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
23. Michigan .....	MI .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
24. Minnesota .....	MN .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
25. Mississippi .....	MS .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
26. Missouri .....	MO .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
27. Montana .....	MT .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
28. Nebraska .....	NE .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
29. Nevada .....	NV .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
30. New Hampshire .....	NH .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
31. New Jersey .....	NJ .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
32. New Mexico .....	NM .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
33. New York .....	NY .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
34. North Carolina .....	NC .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
35. North Dakota .....	ND .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
36. Ohio .....	OH .....	L .....	5,375,646 .....	(8,984) .....	202,132,958 .....	0 .....	(46,509) .....	0 .....	207,453,112 .....	0 .....
37. Oklahoma .....	OK .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
38. Oregon .....	OR .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
39. Pennsylvania .....	PA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
40. Rhode Island .....	RI .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
41. South Carolina .....	SC .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
42. South Dakota .....	SD .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
43. Tennessee .....	TN .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
44. Texas .....	TX .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
45. Utah .....	UT .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
46. Vermont .....	VT .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
47. Virginia .....	VA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
48. Washington .....	WA .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
49. West Virginia .....	WV .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
50. Wisconsin .....	WI .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
51. Wyoming .....	WY .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
52. American Samoa .....	AS .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
53. Guam .....	GU .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
54. Puerto Rico .....	PR .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
55. U.S. Virgin Islands .....	VI .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
56. Northern Mariana Islands .....	MP .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
57. Canada .....	CAN .....	N .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
58. Aggregate Other Aliens .....	OT .....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
59. Subtotal .....	XXX .....	5,375,646 .....	41,383,583 .....	202,132,958 .....	0 .....	(46,509) .....	0 .....	0 .....	248,845,679 .....	0 .....
60. Reporting Entity Contributions for Employee Benefit Plans .....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
61. Totals (Direct Business) .....	XXX .....	5,375,646 .....	41,383,583 .....	202,132,958 .....	0 .....	(46,509) .....	0 .....	0 .....	248,845,679 .....	0 .....
DETAILS OF WRITE-INS										
58001. ....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
58002. ....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
58003. ....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
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:

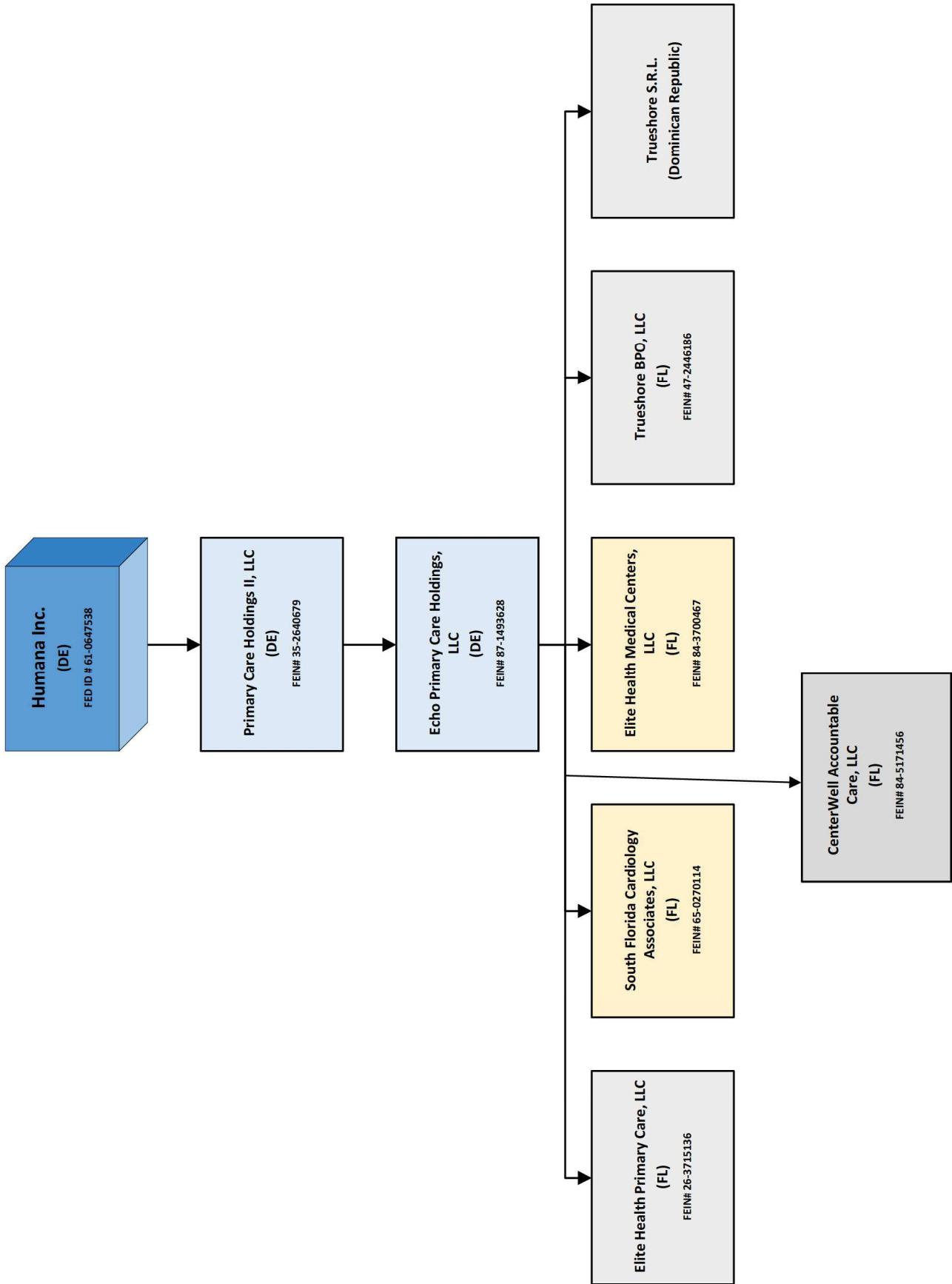
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG. .... 3 4. Q - Qualified - Qualified or accredited reinsurer. .... 0  
 2. R - Registered - Non-domiciled RRGs. .... 0 5. N - None of the above - Not allowed to write business in the state. .... 54  
 3. E - Eligible - Reporting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



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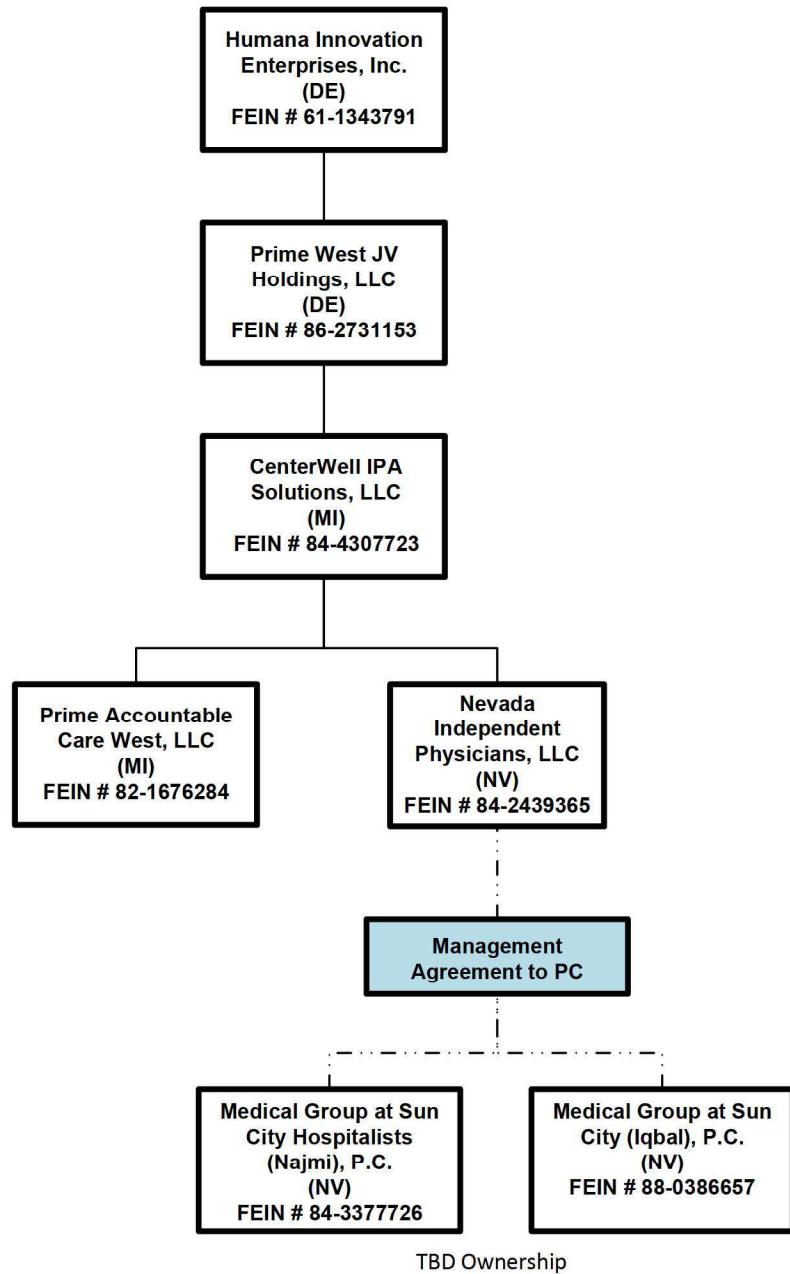


## Echo Primary Care Holdings Organization Chart

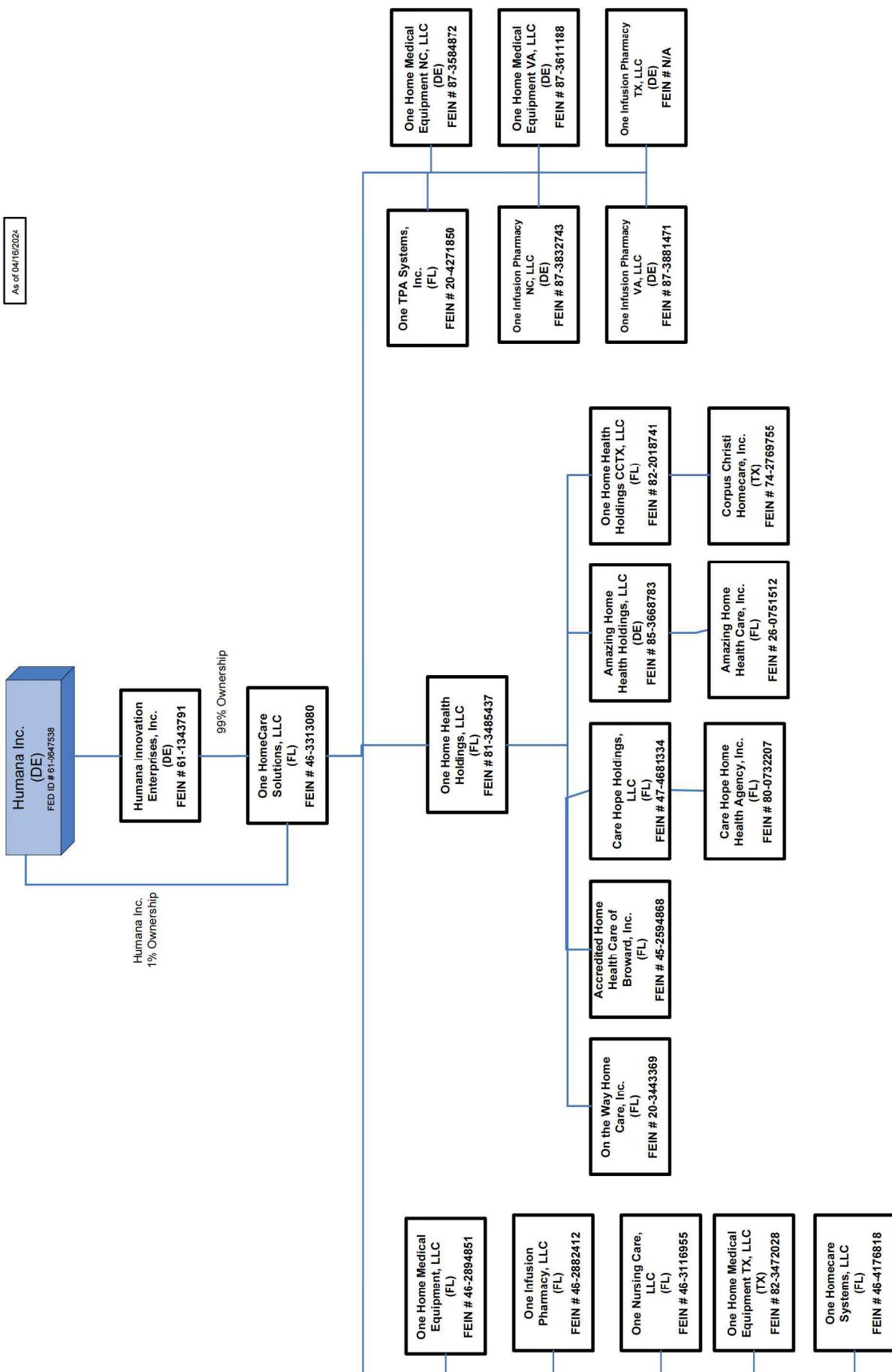


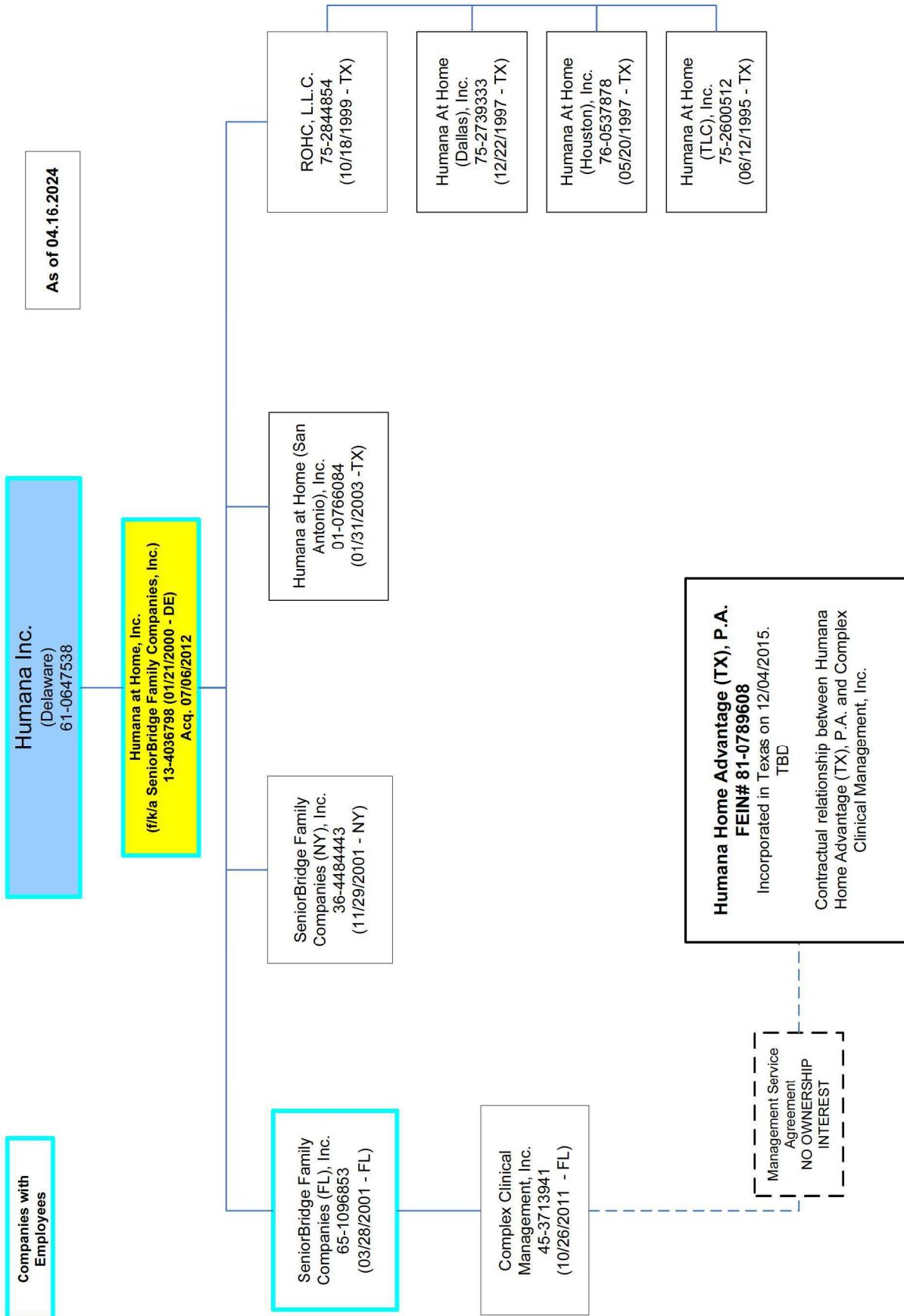
## Prime West Organizational Chart

As of 04/16/2024

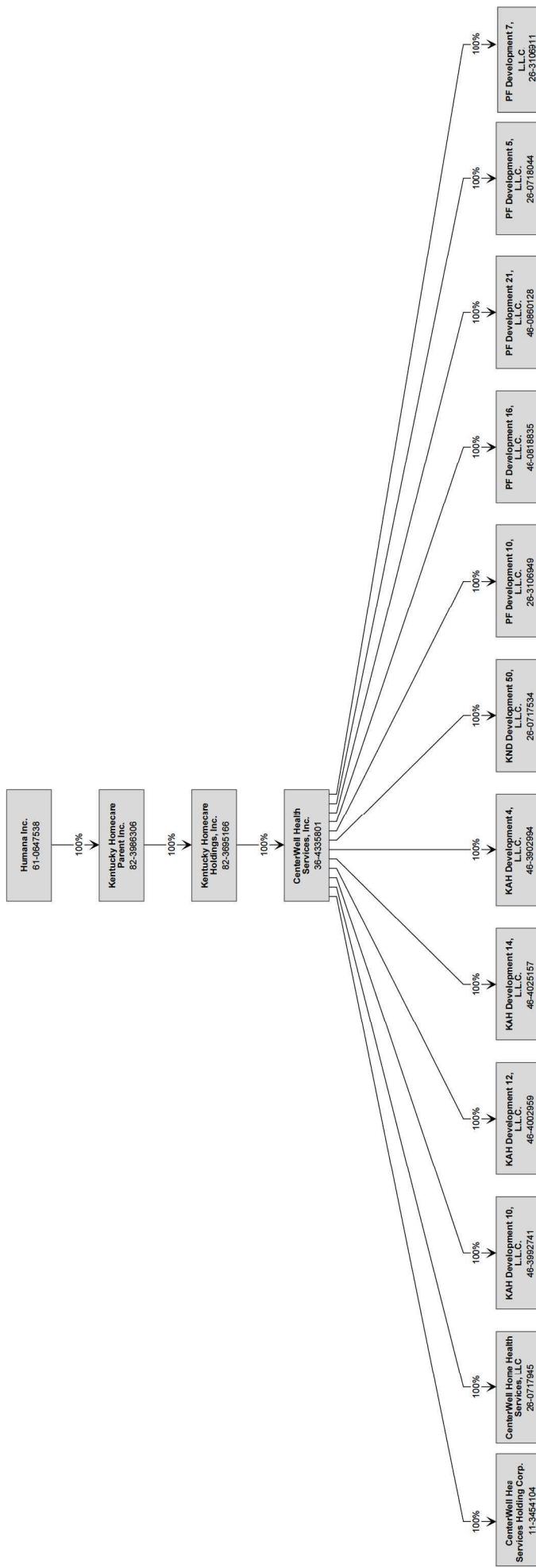


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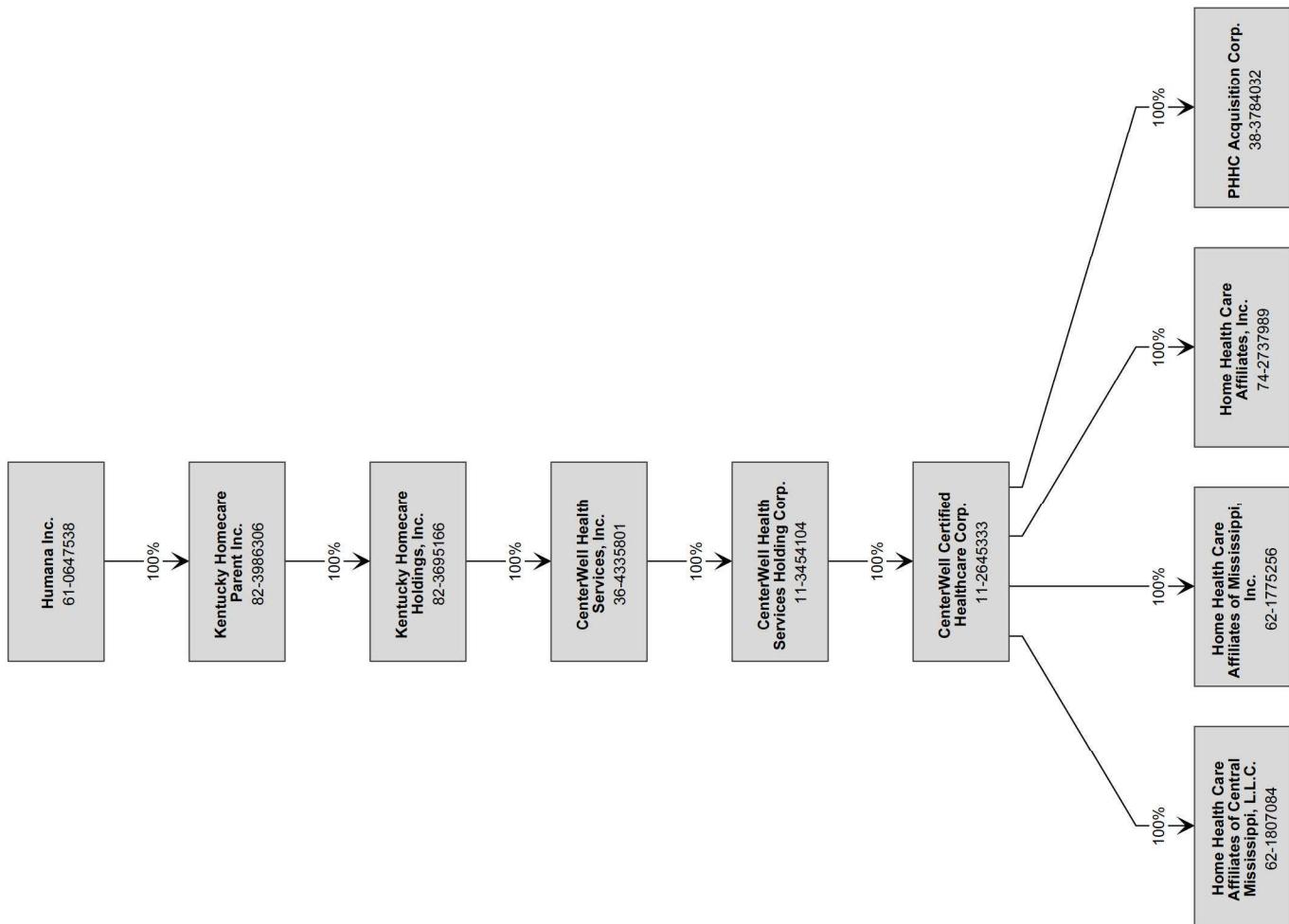




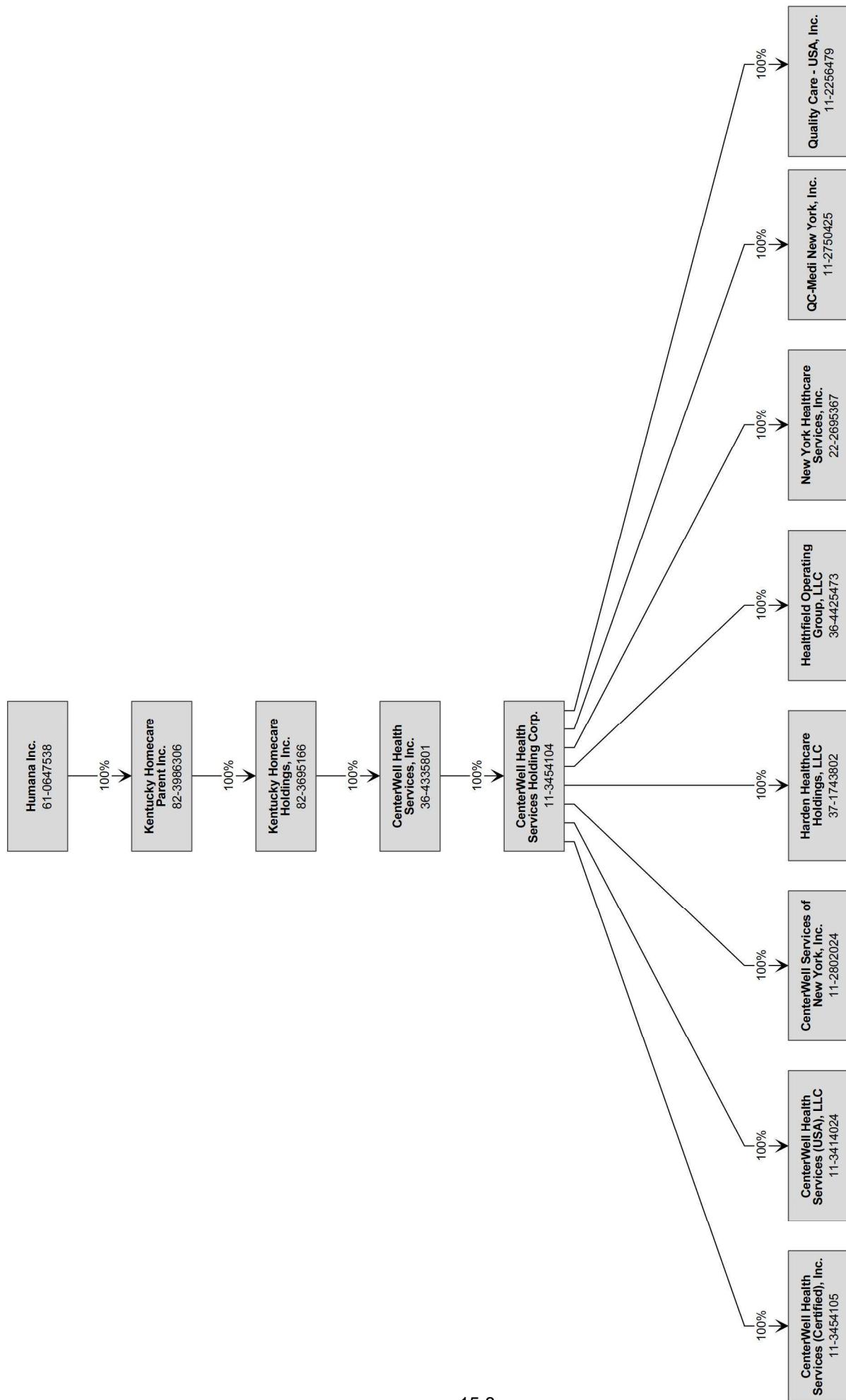
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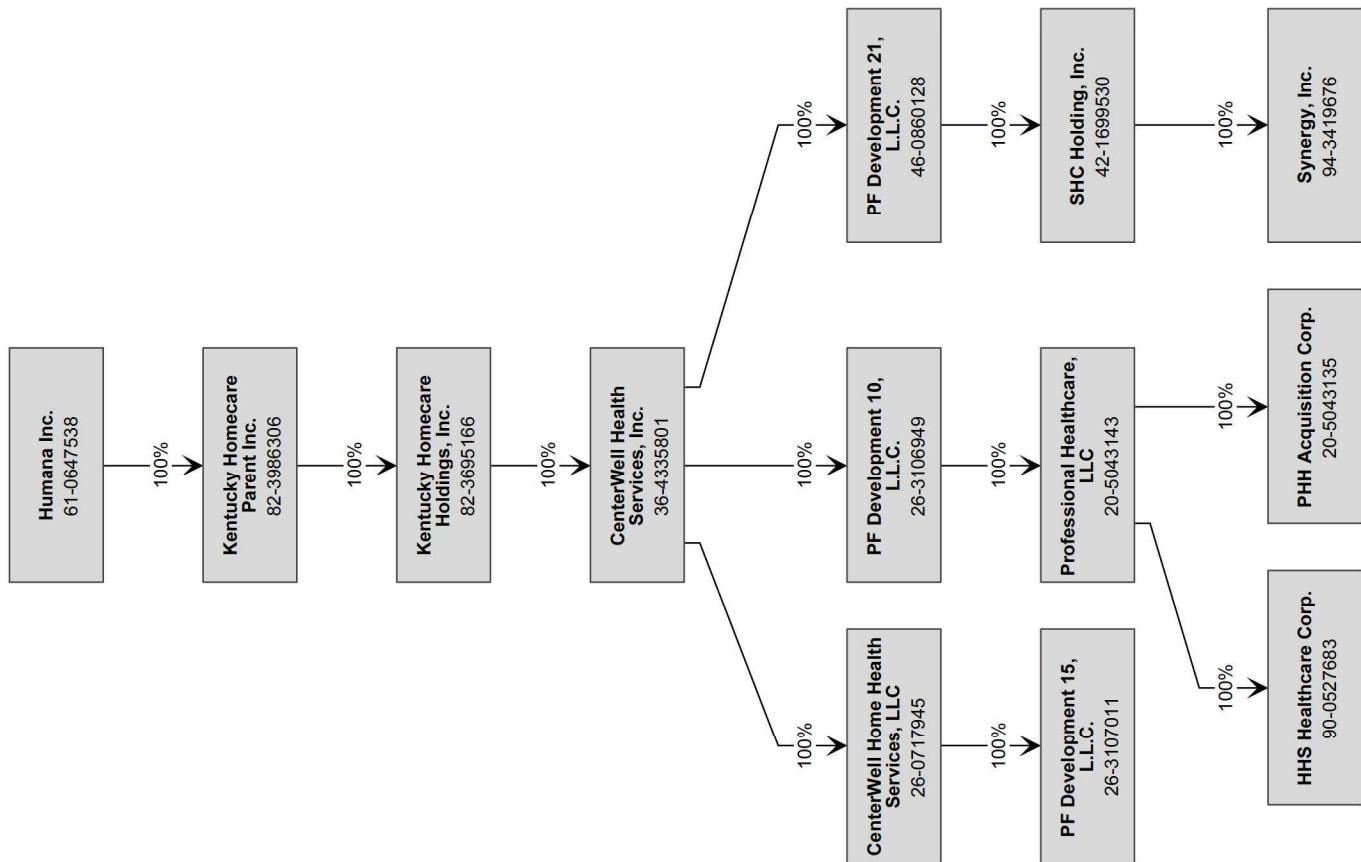


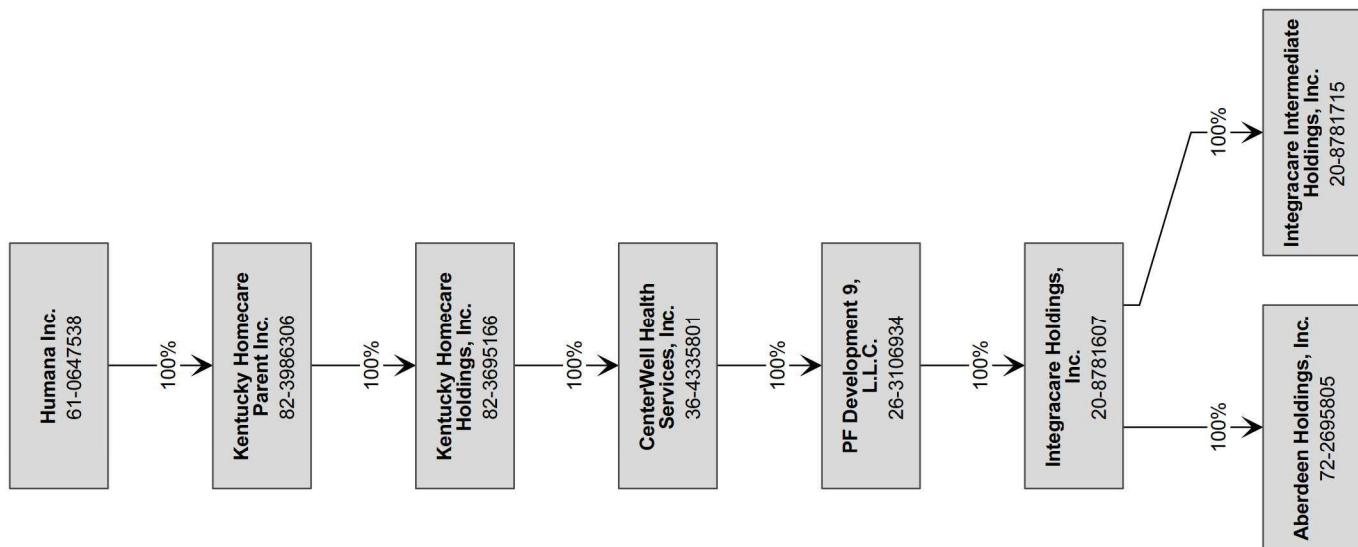
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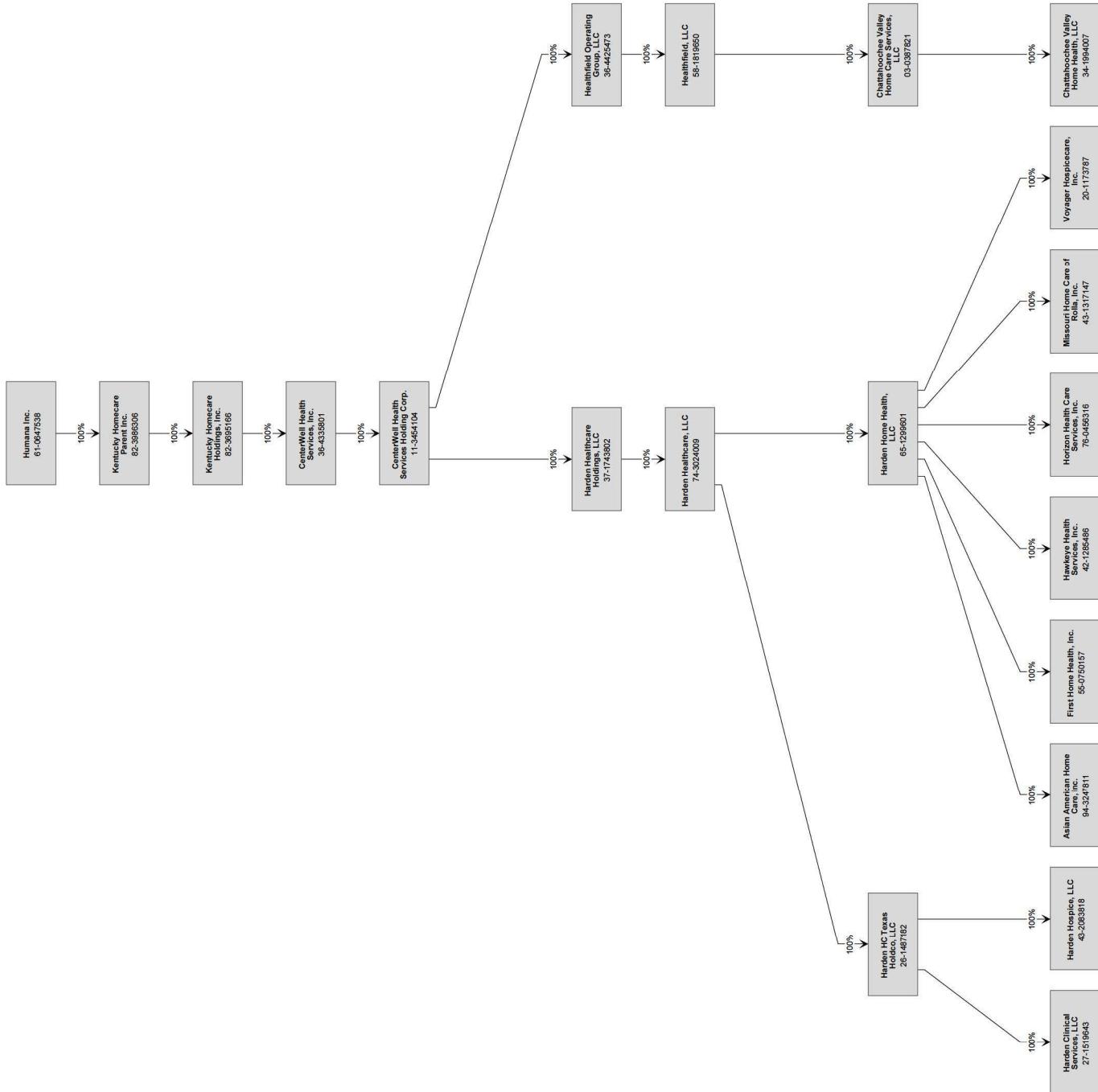
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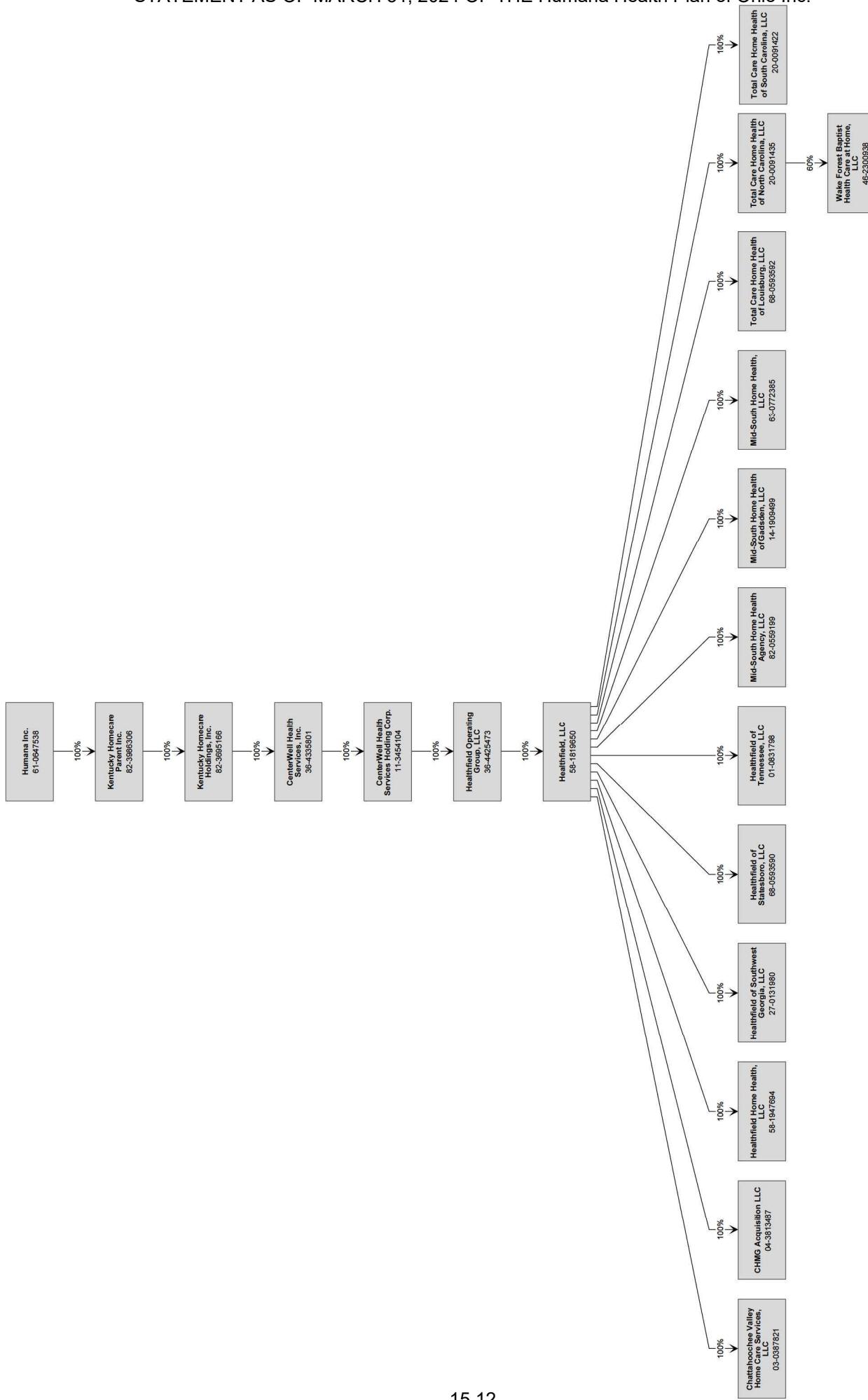


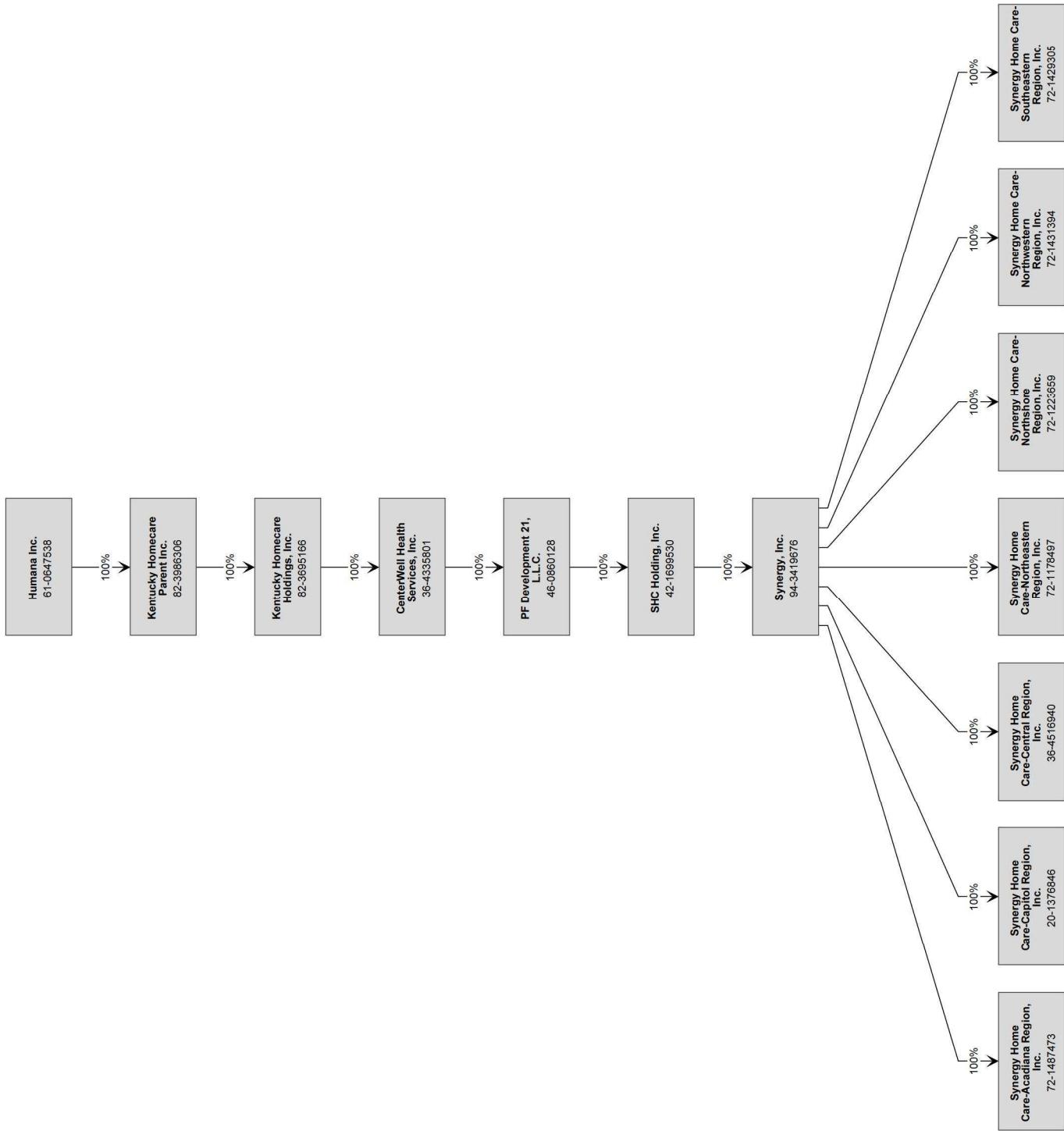


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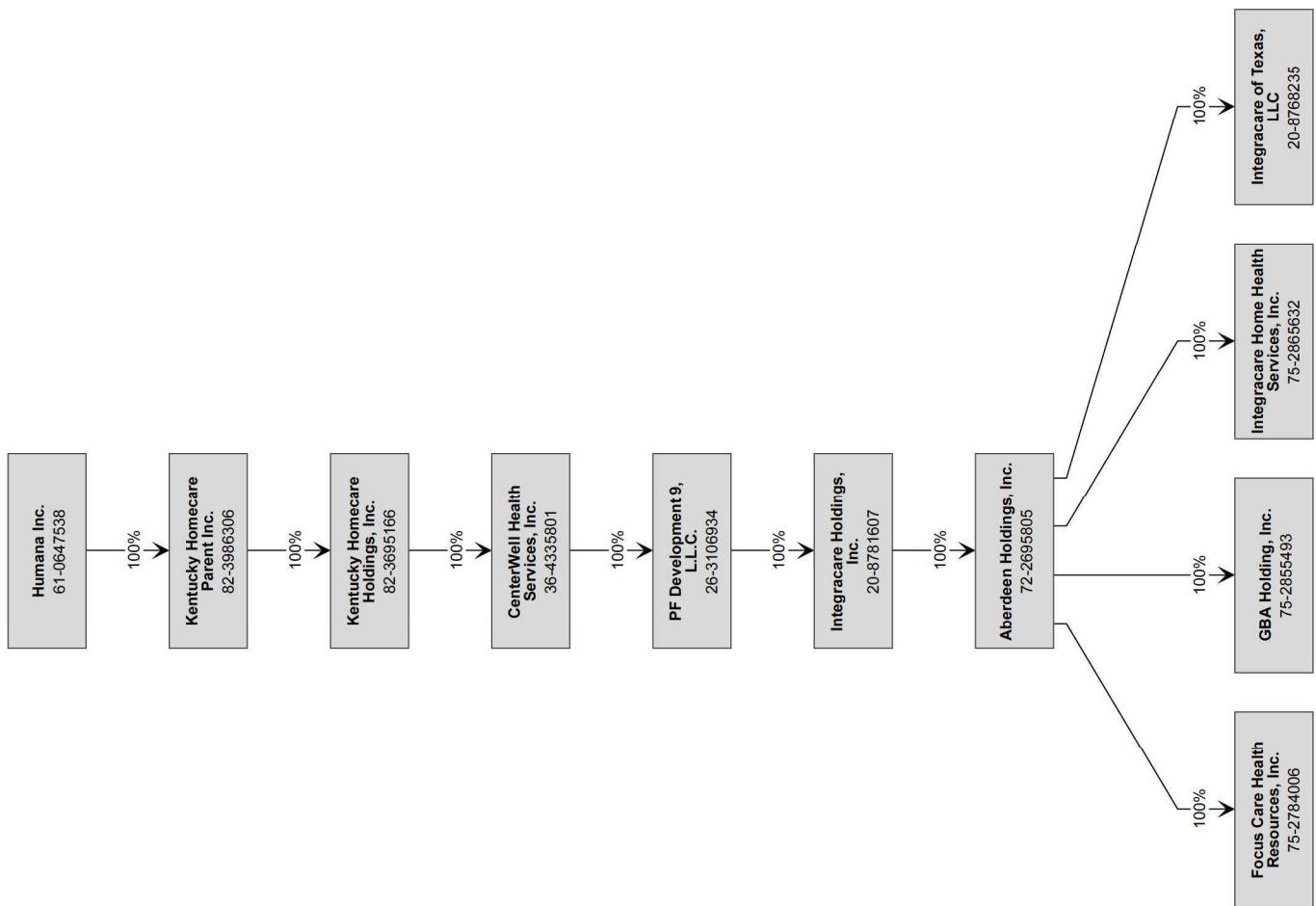


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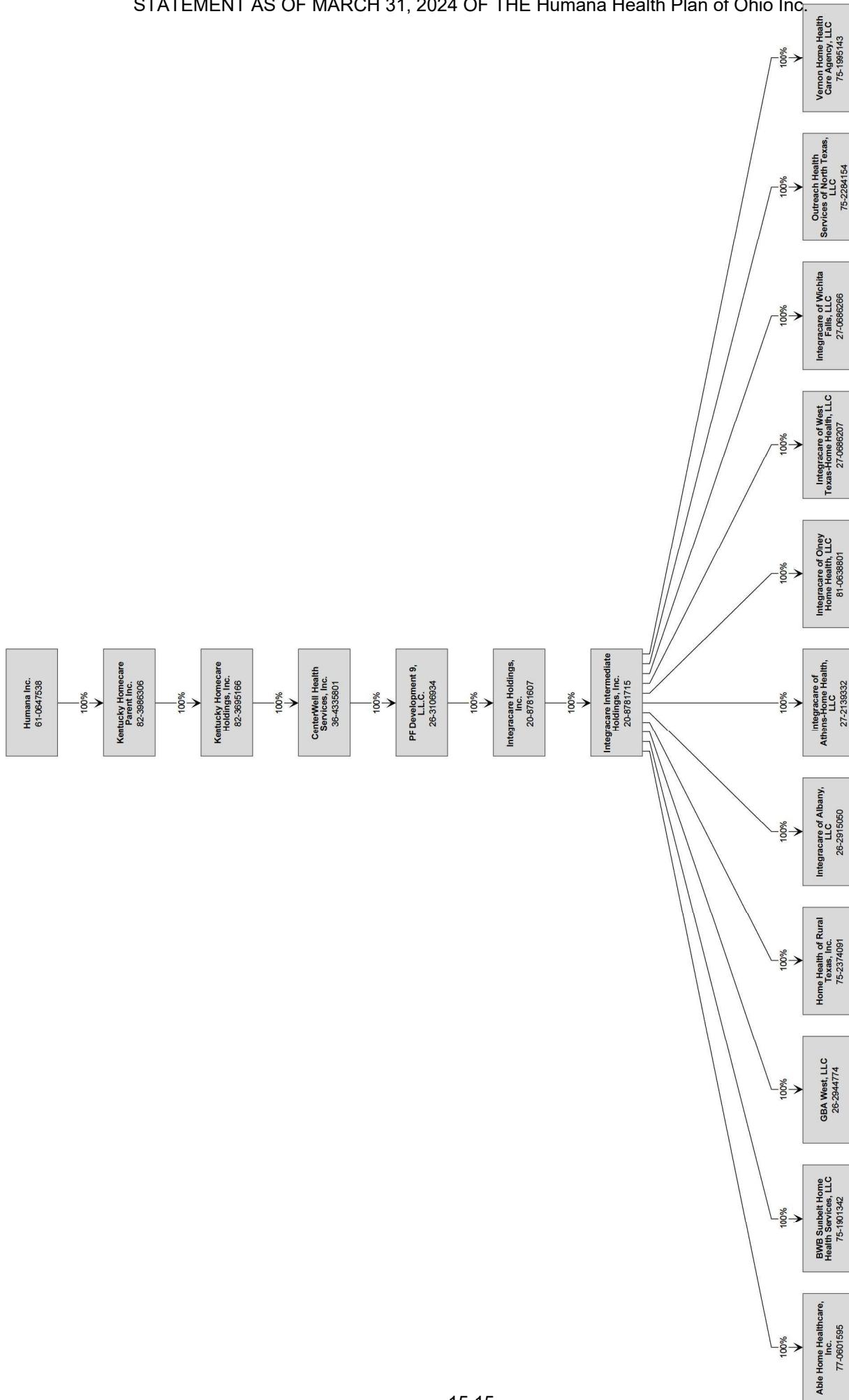




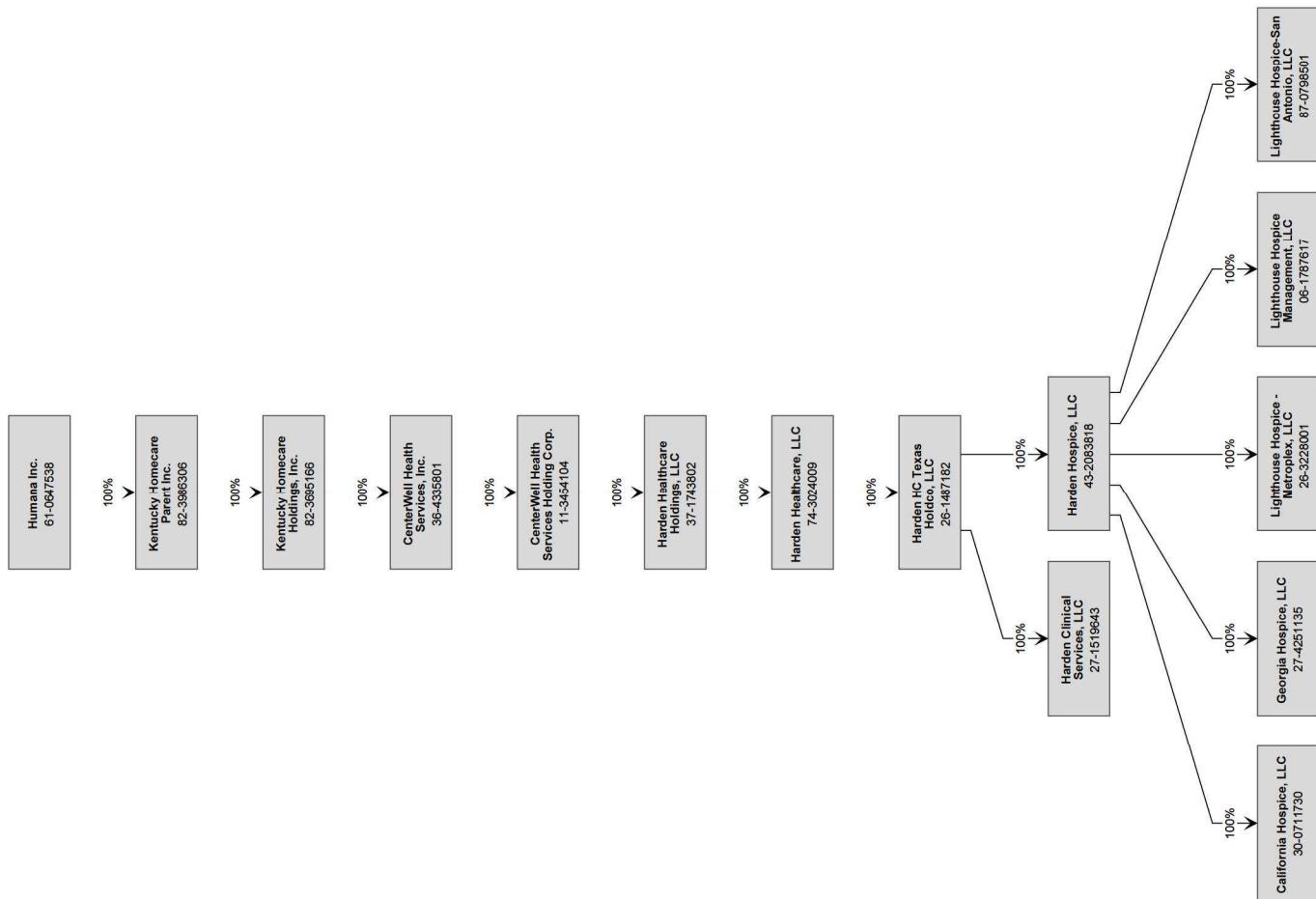
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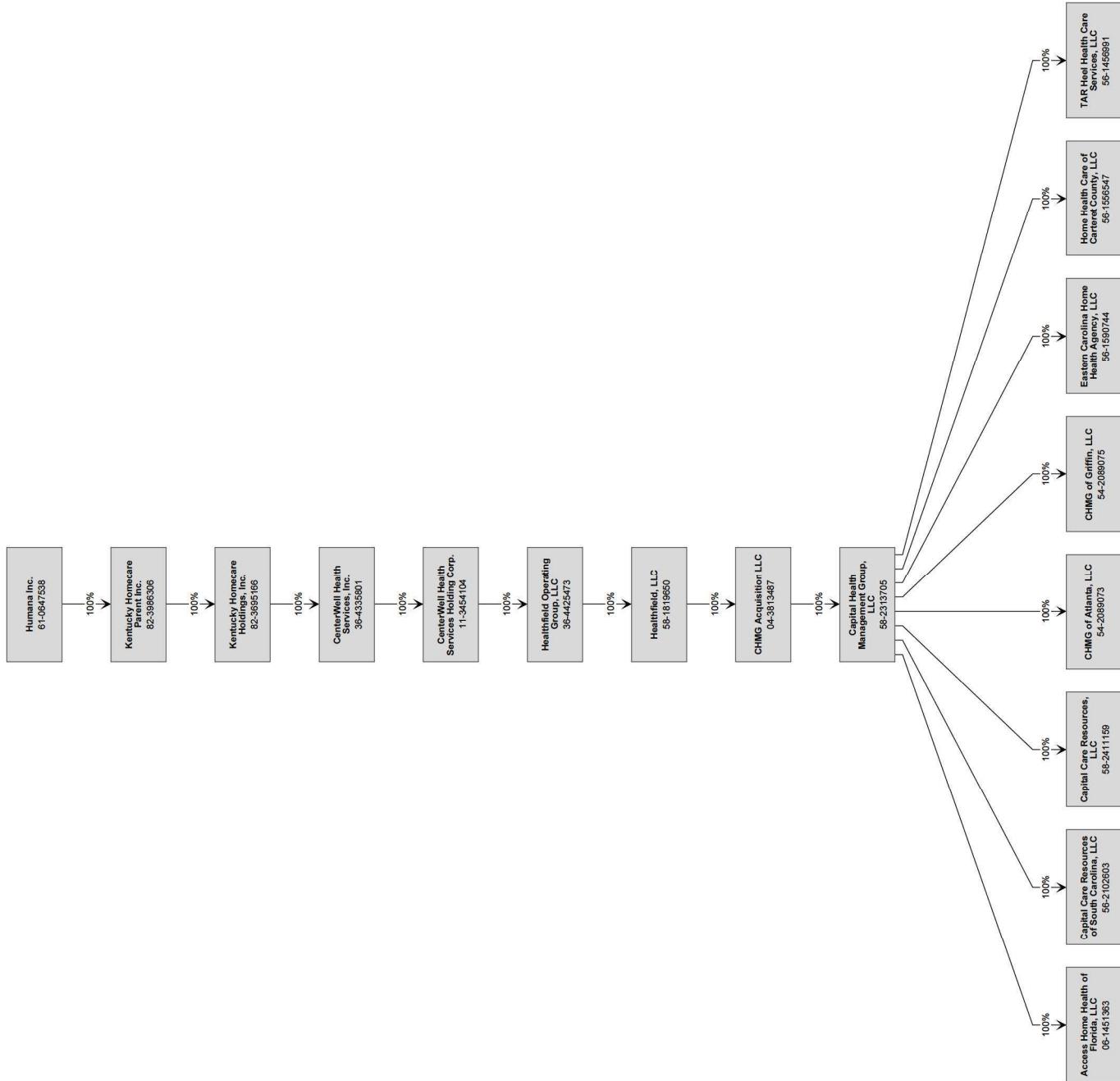
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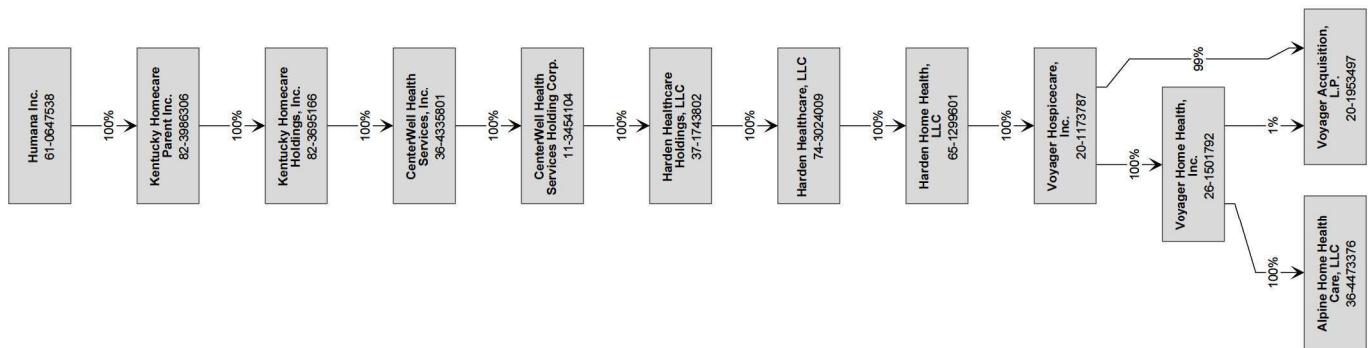
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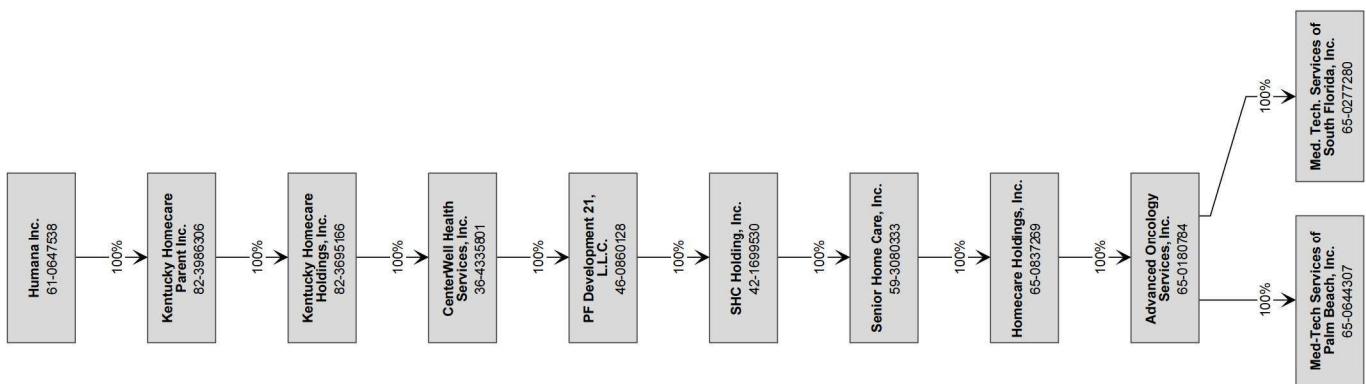
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STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.



STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.



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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc. ....	00000	20-5309363			516-526 West Main Street Condominium Council of Co-Owners, Inc. ....	KY.....NIA.....	Humana Real Estate Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	12151	20-1001348			Arcadian Health Plan, Inc. ....	WA.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	39-1514846			CareNetwork, Inc. ....	WI.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95092	59-2598550			CarePlus Health Plans, Inc. ....	FL.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95754	62-1579044			Cariten Health Plan Inc. ....	TN.....IA.....	PHP Companies, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	35-2608414			CDO 1, LLC ....	DE.....NIA.....	HJM Provider Holdings, LLC ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	32-0545504			CDO 2, LLC ....	DE.....NIA.....	HJM Provider Holdings, LLC ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95158	61-1279717			CHA HMO, Inc. ....	KY.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	52015	59-2531815			CompBenefits Company ....	FL.....IA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	04-3185995			CompBenefits Corporation ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	11228	36-3686002			CompBenefits Dental, Inc. ....	IL.....IA.....	Dental Care Plus Management, Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	58-2228851			CompBenefits Direct, Inc. ....	DE.....NIA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	60984	74-2552026			CompBenefits Insurance Company ....	TX.....IA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	45-3713941			Complex Clinical Management, Inc. ....	FL.....NIA.....	SeniorBridge Family Companies (FL), Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	42-1575099			Humana Healthcare Research, Inc. ....	IL.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	36-4880828			Conviva Care Solutions, LLC ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	15886	75-2043865			Humana Benefit Plan of Texas, Inc. ....	TX.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	36-3512545			Dental Care Plus Management, Corp. ....	IL.....NIA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95161	76-0039628			DentiCare, Inc. ....	TX.....IA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	88595	31-0935772			Emphesys Insurance Company ....	TX.....IA.....	Emphesys, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	61-1237697			Emphesys, Inc. ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	59-3164234			CenterWell Senior Primary Care (FL), Inc. ....	FL.....NIA.....	FPG Acquisition Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	81-3802918			FPG Acquisition Corp. ....	DE.....NIA.....	FPG Acquisition Holdings Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	81-3819187			FPG Acquisition Holdings Corp. ....	DE.....NIA.....	FPG Holding Company, LLC ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	32-0505460			FPG Holding Company, LLC ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	45-4685400			FPG Senior Services, LLC ....	FL.....NIA.....	FPG Acquisition Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	27-1649291			Harris, Rothenberg International Inc. ....	NY.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	61-1223418			Health Value Management, Inc. ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	26-3592783			HUM Provider Holdings, LLC ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	20-4835394			Humana Active Outlook, Inc. ....	KY.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	75-2739333			Humana At Home (Dallas), Inc. ....	TX.....NIA.....	ROHC, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	76-0537878			Humana At Home (Houston), Inc. ....	TX.....NIA.....	ROHC, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	65-0274594			Humana At Home 1, Inc. ....	FL.....NIA.....	Humana Dental Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	13-4036798			Humana At Home, Inc. ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	60052	37-1326199			Humana Benefit Plan of Illinois, Inc. ....	IL.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	59-1843760			Humana Dental Company ....	FL.....NIA.....	CompBenefits Corporation ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95519	58-2209549			Humana Employers Health Plan of Georgia, Inc. ....	GA.....IA.....	Humana Insurance Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	61-1241225			Humana Government Business, Inc. ....	DE.....NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95642	72-1279235			Humana Health Benefit Plan of Louisiana, Inc. ....	LA.....IA.....	Humana Insurance Company .....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	13558	26-2800286			Humana Health Company of New York, Inc. ....	NY.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	69671	61-1041514			Humana Health Insurance Company of Florida, Inc. ....	FL.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	00000	26-3473328			Humana Health Plan of California, Inc. ....	CA.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95348	31-1154200			Humana Health Plan of Ohio, Inc. ....	OH.....RE.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95024	61-0994632			Humana Health Plan of Texas, Inc. ....	TX.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		
.0119	Humana Inc. ....	95885	61-1013183			Humana Health Plan, Inc. ....	KY.....IA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	NO.....	0.....		

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc.	95721	66-0406896			Humana Health Plans of Puerto Rico, Inc.	..PR....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-0647538		00000049071	NYSE .....	Humana Inc.	..DE....	UDP.....	See Footnote 1 .....	Other.....	0.000 ...	See Footnote 1 .....	...NO....	2
.0119	Humana Inc.	00000	61-1343791			Humana Innovation Enterprises, Inc.	..DE....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	73288	39-1263473			Humana Insurance Company	..WI....	..IA....	CareNetwork, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	60219	61-1311685			Humana Insurance Company of Kentucky	..KY....	..IA....	Humana Insurance Company	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	12634	20-2888723			Humana Insurance Company of New York	..NY....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	84603	66-0291868			Humana Insurance of Puerto Rico, Inc.	..PR....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	20-3364857			Humana MarketPOINT of Puerto Rico, Inc.	..PR....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1343508			Humana MarketPOINT, Inc.	..KY....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	14224	27-3991410			Humana Medical Plan of Michigan, Inc.	..MI....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	14462	27-4660531			Humana Medical Plan of Pennsylvania, Inc.	..PA....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	12908	20-8411422			Humana Medical Plan of Utah, Inc.	..UT....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	95270	61-1103898			Humana Medical Plan, Inc.	..FL....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	45-2254346			Humana Pharmacy Solutions, Inc.	..KY....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1316926			CenterWell Pharmacy, Inc.	..DE....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	12282	20-2036444			Humana Regional Health Plan, Inc.	..AR....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	26-4522426			Humana WellWorks LLC	..DE....	..NIA....	Health Value Management, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	95342	39-1525003			Humana Wisconsin Health Organization									
.0119	Humana Inc.	70580	39-0714280			Insurance Corporation	..WI....	..IA....	CareNetwork, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1364005			HumanaDental Insurance Company	..WI....	..IA....	HumanaDental, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	27-4535747			HumanaDental, Inc.	..DE....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1239538			Go365, LLC	..DE....	..NIA....	HumanaWellworks LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1383567			Humco, Inc.	..KY....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1383567			HUM-eFL, Inc.	..FL....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	86-1050795			Hummingbird Coaching Systems LLC	..OH....	..NIA....	Harris, Rothenberg International Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	11695	39-1769093			Independent Care Health Plan	..WI....	..IA....	CareNetwork, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1232669			Managed Care Indemnity, Inc.	..VT....	..IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	20-5569675			Conviva Group Holdings, LLC	..DE....	..NIA....	Metropolitan Health Networks, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	20-5904436			Conviva Medical Center Management, LLC	..DE....	..NIA....	Conviva Group Holdings, LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	81-2957926			Conviva Speciality, LLC	..FL....	..NIA....	Conviva Group Holdings, LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	65-0879131			METCARE of Florida, Inc.	..FL....	..NIA....	Conviva Group Holdings, LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	65-0635728			Metropolitan Health Networks, Inc.	..FL....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	62-1552091			PHP Companies, Inc.	..TN....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	62-1250945			Preferred Health Partnership, Inc.	..TN....	..NIA....	PHP Companies, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	20-1724127			Humana Real Estate Company	..KY....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	46-1225873			Conviva Health MSO of Texas, Inc.	..DE....	..NIA....	Conviva Group Holdings, LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	75-2844854			ROHC, L.L.C.	..TX....	..NIA....	Humana at Home, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	65-1096853			SeniorBridge Family Companies (FL), Inc.	..FL....	..NIA....	Humana at Home, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	36-4484443			SeniorBridge Family Companies (NY), Inc.	..NY....	..NIA....	Humana at Home, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	01-0766084			Humana At Home (San Antonio), Inc.	..TX....	..NIA....	Humana at Home, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	74-2352809			Texas Dental Plans, Inc.	..TX....	..NIA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	54739	52-1157181			The Dental Concern, Inc.	..KY....	..IA....	HumanaDental, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	75-2600512			Humana At Home (TLC), Inc.	..TX....	..NIA....	ROHC, L.L.C.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	80-0072760			Humana Digital Health and Analytics Platform Services, Inc.	..DE....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	46-5329373			Conviva Health Management, LLC	..DE....	..NIA....	Conviva Group Holdings, LLC	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	66-0872725			Humana Management Services of Puerto Rico, Inc.	..PR....	..NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	83-3321367			North Region Providers, LLC	..DE....	..NIA....	Humana Government Business, Inc.	Ownership.....	100.00 ...	Humana Inc.	...NO....	0	

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	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)	*
.0119	Humana Inc. ....	00000	35-2640679			Primary Care Holdings II, LLC .....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	37-1910409			Transcend Population Health Management II, LLC .....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-2214810			Edge Health MSO, Inc. ....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-3226630			Humana Benefit Plan of South Carolina, Inc. ....	.SC....	.IA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	11-3391115			Alexander Infusion, LLC .....	.NY....	.NIA....	Eagle NY Rx, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	36-4898224			Eagle NY Rx, LLC .....	.DE....	.NIA....	Eagle Rx, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-1407967			Eagle Rx Holdco, Inc. ....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-1416614			Eagle Rx, Inc. ....	.DE....	.NIA....	Eagle Rx Holdco, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	23-3068914			Enclara Pharmacia, Inc. ....	.DE....	.NIA....	Eagle Rx, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	39-1789830			GuidantRx, Inc. ....	.WI....	.NIA....	PBM Holding Company .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	61-1340806			PBM Holding Co. ....	.DE....	.NIA....	Eagle Rx, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-2373204			PBM Plus Mail Service Pharmacy, LLC .....	.DE....	.NIA....	PBM Holding Company .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	85-3191430			Conviva Care Solutions II, LLC .....	.DE....	.NIA....	Conviva Care Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	85-3099097			Humana Direct Contracting Entity, Inc. ....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	85-0858631			CenterWell Care Solutions, Inc. ....	.DE....	.NIA....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	87-1493628			Echo Primary Care Holdings, LLC .....	.DE....	.NIA....	Primary Care Holdings II, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	45-2594868			Accredited Home Health of Broward, Inc. ....	.FL....	.NIA....	One Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	26-0751512			Amazing Home Health Care, Inc. ....	.FL....	.NIA....	Amazing Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	85-3668783			Amazing Home Health Holdings, LLC .....	.DE....	.NIA....	One Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-4681334			Care Hope Holdings, Inc. ....	.FL....	.NIA....	One Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	80-0732207			Care Hope Home Health Agency, Inc. ....	.FL....	.NIA....	Care Hope Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	74-2769755			Corpus Christi Home Care, Inc. ....	.TX....	.NIA....	One Home Health Holdings CCTX, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-3443369			On the Way Home Care, Inc. ....	.FL....	.NIA....	One Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	81-3485437			One Home Health Holdings, LLC .....	.FL....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	82-2018741			One Home Health Holdings CCTX, LLC .....	.TX....	.NIA....	One Home Health Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	46-2894851			One Home Medical Equipment, LLC .....	.FL....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	82-3472028			One Home Medical Equipment TX, LLC .....	.TX....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	46-3116955			One Nursing Care, LLC .....	.FL....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	46-3313080			One Homecare Solutions, LLC .....	.FL....	.NIA....	Humana Innovation Enterprises, Inc. - 99%	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	46-4176818			One Homecare Systems, LLC .....	.FL....	.NIA....	Humana Inc. - 1% .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	46-2882412			One Infusion Pharmacy, LLC .....	.FL....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-4271850			One TPA Systems, Inc. ....	.FL....	.NIA....	One Homecare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	83-2136817			Pharaoh JV, LLC .....	.DE....	.NIA....	One Primary Care Holdings II, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	72-2695805			Aberdeen Holdings, Inc. ....	.TX....	.NIA....	Integracare Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	77-0601595			Able Home Healthcare, Inc. ....	.TX....	.NIA....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	06-1451363			Access Home Health of Florida, LLC .....	.DE....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	65-0180784			Advanced Oncology Services, Inc. ....	.FL....	.NIA....	Homecare Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	36-4473376			Alpine Home Health Care, LLC .....	.CO....	.NIA....	Voyager Home Health, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	11-3306095			American Homecare Management Corp. ....	.DE....	.NIA....	Missouri Home Care of Rolla, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	94-3247811			Asian American Home Care, Inc. ....	.CA....	.NIA....	Harden Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	75-1901342			BWB Sunbelt Home Health Services, LLC .....	.TX....	.NIA....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	30-0711730			California Hospice, LLC .....	.TX....	.NIA....	Harden Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	56-2102603			Capital Care Resources of South Carolina, LLC .....	.GA....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	58-2411159			Capital Care Resources, LLC .....	.GA....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	58-2313705			Capital Health Management Group, LLC .....	.GA....	.NIA....	CHMG Acquisition LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tionship 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)	*
.0119	Humana Inc. ....	00000	03-0387821			Chattahoochee Valley Home Care Services, LLC		.GA....	.NIA....	Healthfield, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	34-1994007			Chattahoochee Valley Home Health, LLC .....		.GA....	.NIA....	Chattahoochee Valley Home Care Services, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	04-3813487			CHMG Acquisition LLC .....		.GA....	.NIA....	Healthfield, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	54-2089073			CHMG of Atlanta, LLC .....		.GA....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	54-2089075			CHMG of Griffin, LLC .....		.GA....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	56-1590744			Eastern Carolina Home Health Agency, LLC .....		.NC....	.NIA....	Capital Health Management Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	55-0750157			First Home Health, Inc. ....		.WV....	.NIA....	Harden Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	75-2784006			Focus Care Health Resources, Inc. ....		.TX....	.NIA....	Aberdeen Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	75-2855493			GBA Holding, Inc. ....		.TX....	.NIA....	Aberdeen Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	26-2944774			GBA West, LLC .....		.TX....	.NIA....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	11-2645333			CenterWell Certified Healthcare Corp. ....		.DE....	.NIA....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	11-3454105			CenterWell Health Services (Certified), Inc. ....									
.0119	Humana Inc. ....	00000	11-3414024					.DE....	.NIA....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	11-3454104					.DE....	.NIA....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	36-4335801					.DE....	.NIA....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	11-2802024					.DE....	.NIA....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	27-4251135					.NY....	.NIA....	CenterWell Services of New York, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	64-0730826					.TX....	.NIA....	Georgia Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	27-1519643					.MS....	.NIA....	Gilbert's Home Health Agency, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	26-1487182					.TX....	.NIA....	Harden Clinical Services, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	37-1743802					.TX....	.NIA....	Harden HC Texas Holdco, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	74-3024009					.DE....	.NIA....	Harden Healthcare, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	65-1299601					.DE....	.NIA....	Harden Healthcare Holdings, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	43-2083818					.DE....	.NIA....	Harden Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	42-1285486					.IA....	.NIA....	Harden Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	58-1947694					.IA....	.NIA....	Hawkeye Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	27-0131980					.GA....	.NIA....	Healthfield Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	68-0593590					.GA....	.NIA....	Healthfield of Southwest Georgia, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	01-0831798					.GA....	.NIA....	Healthfield of Statesboro, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	36-4425473					.GA....	.NIA....	Healthfield of Tennessee, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	58-1819650					.DE....	.NIA....	Healthfield Operating Group, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	90-0527683					.DE....	.NIA....	Healthfield, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	62-1807084					.DE....	.NIA....	HHS Healthcare Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	62-1775256					.DE....	.NIA....	Home Health Care Affiliates of Central Mississippi, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	74-2737989					.MS....	.NIA....	Home Health Care Affiliates of Mississippi, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	56-1556547					.MS....	.NIA....	Home Health Care Affiliates, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	75-2374091					.NC....	.NIA....	Home Health Care of Carteret County, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	87-0494759					.TX....	.NIA....	Home Health of Rural Texas, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	65-0837269					.UT....	.NIA....	Home Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	76-0456316					.FL....	.NIA....	Horizon Health Care Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	20-8781607					.TX....	.NIA....	Integracare Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	75-2865632					.DE....	.NIA....	Integracare Home Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	20-8781715					.TX....	.NIA....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	26-2915050					.DE....	.NIA....	Integracare of Albany, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc. ....	00000	27-2139332					.TX....	.NIA....	Integracare of Athens Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tionship 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)	*
.0119	Humana Inc. ....	00000	81-0638801			Integracare of Olney Home Health, LLC .....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	20-8768235			Integracare of Texas, LLC .....	.. TX.....	.. NIA.....	Aberdeen Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	27-0686207			Integracare of West Texas-Home Health, LLC .....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	27-0686266			Integracare of Wichita Falls, LLC .....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-3992741			KAH Development 10, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-4002959			KAH Development 12, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-4025157			KAH Development 14, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-3902994			KAH Development 4, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	82-3695166			Kentucky Homecare Holdings, Inc. ....	.. DE.....	.. NIA.....	Kentucky Homecare Parent Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	82-3986306			Kentucky Homecare Parent Inc. ....	.. DE.....	.. NIA.....	Humana Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-0717945			CenterWell Home Health Services, LLC .....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-0717534			KND Development 50, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-3228001			Lighthouse Hospice - Metroplex, LLC .....	.. TX.....	.. NIA.....	Harden Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	06-1787617			Lighthouse Hospice Management, LLC .....	.. TX.....	.. NIA.....	Harden Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	87-0798501			Lighthouse Hospice-San Antonio, LLC .....	.. TX.....	.. NIA.....	Harden Hospice, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	65-0277280			Med. Tech. Services of South Florida, Inc. ....	.. FL.....	.. NIA.....	Advanced Oncology Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	65-1033439			Med-Tech Services of Dade, Inc. ....	.. FL.....	.. NIA.....	Homecare Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	65-0644307			Med-Tech Services of Palm Beach, Inc. ....	.. FL.....	.. NIA.....	Advanced Oncology Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	82-0559199			Mid-South Home Health Agency, LLC .....	.. AL.....	.. NIA.....	Horizon Health Network LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	14-1909499			Mid-South Home Health of Gadsden, LLC .....	.. GA.....	.. NIA.....	Healthfield, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	63-0772385			Mid-South Home Health, LLC .....	.. DE.....	.. NIA.....	Healthfield, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	65-1285069			Missouri Home Care of Rolla, Inc. ....	.. MO.....	.. NIA.....	Harden Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	22-2695367			New York Healthcare Services, Inc. ....	.. NY.....	.. NIA.....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	55-0633030			Nursing Care-Home Health Agency, Inc. ....	.. WV.....	.. NIA.....	First Home Health, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	75-2284154			Outreach Health Services of North Texas, LLC .....	.. TX.....	.. NIA.....	Integracare Intermediate Holdings, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-3106949			PF Development 10, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-3107011			PF Development 15, L.L.C. ....	.. DE.....	.. NIA.....	Kindred Hospice Services, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-0818835			PF Development 16, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	46-0860128			PF Development 21, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-0718044			PF Development 5, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-3106911			PF Development 7, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	26-3106934			PF Development 9, L.L.C. ....	.. DE.....	.. NIA.....	CenterWell Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	75-2378887			PHI Acquisition Corp. ....	.. DE.....	.. NIA.....	Professional Healthcare, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	33-1178066			PHC Acquisition Corp. ....	.. DE.....	.. NIA.....	CenterWell Certified Healthcare Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	20-5143963			Professional Healthcare at Home, LLC .....	.. CA.....	.. NIA.....	99% owned by Professional Healthcare, LLC and 1% owned by PHI Acquisition Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	20-5043143			Professional Healthcare, LLC .....	.. DE.....	.. NIA.....	PF Development 10, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	11-2750425			QC-Medi New York, Inc. ....	.. NY.....	.. NIA.....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	11-2256479			Quality Care - USA, Inc. ....	.. NY.....	.. NIA.....	CenterWell Health Services Holding Corp. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	59-3080333			Senior Home Care, Inc. ....	.. FL.....	.. NIA.....	SHC Holding, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	42-1699530			SHC Holding, Inc. ....	.. DE.....	.. NIA.....	PF Development 21, L.L.C. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	87-0494757			Southern Nevada Home Health Care, Inc. ....	.. NV.....	.. NIA.....	Home Health Services, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	72-1487473			Synergy Home Care-Acadiana Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	20-1376846			Synergy Home Care-Capitol Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	36-4516940			Synergy Home Care-Central Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	72-1178497			Synergy Home Care-Northeastern Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	72-1223659			Synergy Home Care-Northshore Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	
.0119	Humana Inc. ....	00000	72-1431394			Synergy Home Care-Northwestern Region, Inc. ....	.. LA.....	.. NIA.....	Synergy, Inc. ....	Ownership.....	100.000 ...	Humana Inc. ....	... NO.....	0	

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc. ....	00000	72-1429305			Synergy Home Care-Southeastern Region, Inc.	..LA.... NIA....	Synergy, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	94-3419676			Synergy, Inc. ....	..LA.... NIA....	SHC Holding, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	56-1456991			TAR Heel Health Care Services, LLC .....	..NC.... NIA....	Capital Health Management Group, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	68-0593592			Total Care Home Health of Louisburg, LLC .....	..GA.... NIA....	Healthfield, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-0091435			Total Care Home Health of South Carolina, LLC	..GA.... NIA....	Healthfield, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-0091422				..GA.... NIA....	Healthfield, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	62-1669388			Van Winkle Home Health Care, Inc. ....	..MS.... NIA....	Home Health Care Affiliates, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	75-1995143			Vernon Home Health Care Agency, LLC .....	..TX.... NIA....	Integracare Intermediate Holdings, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-1953497			Voyager Acquisition, L.P. ....	..TX.... NIA....	1% by Voyager Home Health, Inc. and 99% by Voyager Hospicecare, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	26-1501792			Voyager Home Health, Inc. ....	..DE.... NIA....	Voyager Hospicecare, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-1173787			Voyager Hospicecare, Inc. ....	..DE.... NIA....	Harden Home Health, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
						60% owned by Total Care Home Health of North Carolina, LLC and 40% owned by Wake Forest Baptist Health Care at Home, LLC									
.0119	Humana Inc. ....	00000	46-2300938				..NC.... NIA....	Forest University Baptist Medical Center .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-3700467			Elite Health Medical Centers, LLC .....	..FL.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	26-3715136			Elite Health Primary Care, LLC .....	..FL.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	65-0270114			South Florida Cardiology Associates, LLC .....	..FL.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-2446186			Trueshore BPO, LLC .....	..FL.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-5171456			Trueshore S.R. I. ....	..DOM.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-3584872			CenterWell Accountable Care, LLC .....	..FL.... NIA....	Echo Primary Care Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	87-3611188			One Home Medical Equipment NC, LLC .....	..DE.... NIA....	One Homecare Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	87-3832743			One Home Medical Equipment VA, LLC .....	..DE.... NIA....	One Homecare Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	87-3881471			One Infusion Pharmacy NC, LLC .....	..DE.... NIA....	One Homecare Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	45-4020797			One Infusion Pharmacy VA, LLC .....	..DE.... NIA....	One Homecare Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	27-3974953			Amicus Medical Center LLC .....	..FL.... NIA....	Conviva Medical Center Management, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	27-1085323			Amicus Medical Group, Inc. ....	..FL.... NIA....	Conviva Medical Center Management, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-1078045			Amicus Medical Services Organization, LLC .....	..FL.... NIA....	Conviva Medical Center Management, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-5418599			Hospice Pharmacy Solutions, LLC .....	..DE.... NIA....	HP Solutions Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	32-0351697			HP Solutions Holdings, LLC .....	..DE.... NIA....	Eagle Rx, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	88-34658497			Outcome Resources, LLC .....	..DE.... NIA....	Eagle Rx, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	83-2232570?			Innovative Financial Group Holdings, LLC .....	..NC.... NIA....	Humana MarketPOINT, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-5189010?			Innovative Financial Partners, LLC .....	..NC.... NIA....	Innovative Financial Group Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	47-4085710?			Medicare Planning of America LLC .....	..NC.... NIA....	Innovative Financial Group Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-2258899?			Rees Financial LLC .....	..NC.... NIA....	Innovative Financial Group Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	82-4202700			The Lead Store LLC .....	..NC.... NIA....	Innovative Financial Group Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	86-2731153			Versa Management LLC .....	..NC.... NIA....	Innovative Financial Group Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-4307723			Prime West JV Holdings, LLC .....	..DE.... NIA....	Humana Innovation Enterprises, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	82-1676284			CenterWell IPA Solutions, LLC .....	..MI.... NIA....	Prime West JV Holdings, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	84-2439365			Prime Accountable Care West, LLC .....	..MI.... NIA....	CenterWell IPA Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	03-0523544			Nevada Independent Physicians, LLC .....	..NV.... NIA....	CenterWell IPA Solutions, LLC .....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	45-2401497			A and A Homecare, Inc. ....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	11-3836040			All About Home Care Management, LLC .....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-0110337			Altcare of Palm Beach County, LLC .....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-7287186			Altcare, LLC .....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
.0119	Humana Inc. ....	00000	20-1903568			Balanced Home Healthcare, Inc. ....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	
						Bridges Home Health, Inc. ....	..FL.... NIA....	Vitality Home Care, Inc. ....		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0	

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

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

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domesticiliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Required? (Yes/No)	16 *
.0119	Humana Inc. ....	00000	46-3433197			Medstar Home Health, LLC .....	..FL.....	..NIA.....	Trident Home Health, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	20-5123865			M-SAC, Inc. ....	..FL.....	..NIA.....	Vitality Home Care, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	45-2823888			Quality Living Home Health Care, LLC .....	..FL.....	..NIA.....	Vitality Home Care, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	35-2486995			Trident Home Health, LLC .....	..FL.....	..NIA.....	Vitality Home Care, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	81-4466479			Trilogy Home Health Care of SW FL, Inc .....	..DE.....	..NIA.....	Vitality Home Care, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	81-3442232			Trilogy Home Healthcare of NE FL, Inc .....	..DE.....	..NIA.....	Vitality Home Care, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	81-2022629			Vitality HHS Holdings, Inc .....	..DE.....	..NIA.....	CenterWell Health Services (USA), LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	81-2019673			Vitality Home Care, Inc .....	..DE.....	..NIA.....	Vitality HHS Holdings, Inc .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000				One Infusion Pharmacy (TX), LLC .....	..DE.....	..NIA.....	One HomeCare Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	
.0119	Humana Inc. ....	00000	82-3311429			Conviva Physician Group, LLC .....	..FL.....	..NIA.....	Conviva Care Solutions, LLC .....	Ownership.....	100.000 ...	Humana Inc. ....	...NO.....	0	

Asterisk	Explanation
0000001 .....	Humana Inc., a Delaware corporation and ultimate parent company in the holding company system, is a publicly traded company on the New York Stock Exchange and ownership fluctuates daily. ....

## 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.

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Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....

NO

**AUGUST FILING**

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

N/A

Explanation:

1. This type of business is not written.

Bar Code:

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



**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 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) .....		

**NONE****SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year to Date	2 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 paid 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) .....		

**NONE****SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 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) .....		

**NONE****SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	86,994,366	43,483,215
2. Cost of bonds and stocks acquired .....	8,246,694	92,030,786
3. Accrual of discount .....	83,065	46,687
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	7,444	468,007
6. Deduct consideration for bonds and stocks disposed of .....	3,857,968	48,809,194
7. Deduct amortization of premium .....	66,851	225,135
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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	91,406,748	86,994,366
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	91,406,748	86,994,366

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of 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
<b>BONDS</b>								
1. NAIC 1 (a) .....	204,511,252	628,428,640	673,341,843	1,740,173	161,338,222	0	0	204,511,252
2. NAIC 2 (a) .....	2,198,415	239,969,208	200,600,826	24,086	41,590,883	0	0	2,198,415
3. NAIC 3 (a) .....	0	0	0	0	0	0	0	0
4. NAIC 4 (a) .....	0	0	0	0	0	0	0	0
5. NAIC 5 (a) .....	0	0	0	0	0	0	0	0
6. NAIC 6 (a) .....	0	0	0	0	0	0	0	0
7. Total Bonds .....	206,709,667	868,397,849	873,942,669	1,764,259	202,929,105	0	0	206,709,667
<b>PREFERRED STOCK</b>								
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 .....	206,709,667	868,397,849	873,942,669	1,764,259	202,929,105	0	0	206,709,667

(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 \$ ..... 73,210,726 ; NAIC 2 \$ ..... 38,311,631 ; NAIC 3 \$ ..... 0 NAIC 4 \$ ..... 0 ; NAIC 5 \$ ..... 0 ; NAIC 6 \$ ..... 0

SI02

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 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	128,064,655	17,652,948
2. Cost of cash equivalents acquired .....	934,677,301	2,713,064,740
3. Accrual of discount .....	1,748,046	4,330,815
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	11	(2)
6. Deduct consideration received on disposals .....	949,042,156	2,606,983,847
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) .....	115,447,857	128,064,655
11. Deduct total nonadmitted amounts .....	0	0
<b>12. Statement value at end of current period (Line 10 minus Line 11)</b>	<b>115,447,857</b>	<b>128,064,655</b>

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**

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation, NAIC Designation Modifier and SVO Adminis- trative Symbol
91282C-JQ-5 .....	UNITED STATES TREASURY .....		....01/18/2024 .....	SCOTIA CAPITAL (USA) INC./NOVAAGENCY .....	978,203	1,000,000		1,957	1.A .....
91282C-JS-1 .....	UNITED STATES TREASURY .....		....01/09/2024 .....	GOLDMAN .....	498,966	500,000		584	1.A .....
91282C-JI-2 .....	UNITED STATES TREASURY .....		....02/01/2024 .....	Bank of America Securities .....	2,017,660	2,000,000		440	1.A .....
91282C-JX-0 .....	UNITED STATES TREASURY .....		....02/01/2024 .....	CITADEL SECURITIES LLC .....	1,009,963	1,000,000		220	1.A .....
<b>0109999999. Subtotal - Bonds - U.S. Governments</b>					4,504,791	4,500,000		3,201	<b>XXX</b>
3140XM-E7-7 .....	FN FSS557 - RMBS .....		....03/27/2024 .....	JP MORGAN SEC'S INC., - FIXED INCOME .....	407,738	449,724		1,181	1.A .....
31418E-KS-8 .....	FN MA4804 - RMBS .....		....03/27/2024 .....	MORGAN STANLEY CO .....	418,033	449,838		1,350	1.A .....
<b>0909999999. Subtotal - Bonds - U.S. Special Revenues</b>					825,771	899,562		2,530	<b>XXX</b>
02665W-EZ-0 .....	AMERICAN HONDA FINANCE CORP .....		....01/08/2024 .....	DEUTSCHE BANK SECURITIES, INC. .....	59,812	60,000		0	1.G FE .....
03027X-CH-1 .....	AMERICAN TOWER CORP .....		....03/04/2024 .....	CITIGROUP GLOBAL MARKETS INC. .....	119,142	120,000		0	2.C FE .....
03040W-BD-6 .....	AMERICAN WATER CAPITAL CORP .....		....02/20/2024 .....	US BANCORP INVESTMENTS INC. .....	129,585	130,000		0	2.A FE .....
04316J-AH-2 .....	ARTHUR J. GALLAGHER & CO. .....		....02/12/2024 .....	Bank of America Securities .....	89,750	90,000		0	2.B FE .....
110122-EJ-3 .....	BRISTOL-MYERS SQUIBB CO. .....		....02/14/2024 .....	CITIGROUP GLOBAL MARKETS INC. .....	19,849	20,000		0	1.F FE .....
172967-PF-2 .....	CITIGROUP INC .....		....02/06/2024 .....	CITIGROUP GLOBAL MARKETS INC. .....	60,000	60,000		0	1.G FE .....
26442U-AS-3 .....	DUKE ENERGY PROGRESS LLC .....		....03/15/2024 .....	MORGAN STANLEY CO .....	74,111	75,000		53	1.D FE .....
26884T-AZ-5 .....	ERAC USA FINANCE LLC .....		....02/05/2024 .....	Bank of America Securities .....	44,960	45,000		0	1.G FE .....
27743Z-AY-6 .....	EASTMAN CHEMICAL CO .....		....03/15/2024 .....	Various .....	144,643	145,000		204	2.B FE .....
30161N-BN-0 .....	EXELON CORP .....		....02/22/2024 .....	JP MORGAN SEC'S INC., - FIXED INCOME .....	74,876	75,000		0	2.B FE .....
37045X-EP-7 .....	GENERAL MOTORS FINANCIAL COMPANY INC .....		....03/15/2024 .....	CITIGROUP GLOBAL MARKETS INC. .....	81,464	80,000		1,383	2.B FE .....
373334-KW-0 .....	GEORGIA POWER CO .....		....02/20/2024 .....	JP MORGAN SEC'S INC., - FIXED INCOME .....	114,631	115,000		0	2.A FE .....
502431-AU-3 .....	L3HARRIS TECHNOLOGIES INC .....		....03/11/2024 .....	Bank of America Securities .....	209,727	210,000		0	2.B FE .....
571748-BW-1 .....	MARSH & MCLENNAN COMPANIES INC .....		....02/14/2024 .....	WELLS FARGO SECURITIES .....	219,663	220,000		0	1.G FE .....
595620-AZ-8 .....	MIDAMERICAN ENERGY CO .....		....01/22/2024 .....	MUFG SECURITIES AMERICAS INC. .....	24,894	25,000		0	1.F FE .....
61747Y-F6-5 .....	MORGAN STANLEY .....		....03/15/2024 .....	GOLDMAN .....	109,744	110,000		961	1.E FE .....
639057-AN-8 .....	NATWEST GROUP PLC .....	C.	....02/26/2024 .....	RBS SECURITIES INC. / EQUITIES .....	513,000	513,000		0	1.G FE .....
65473P-AQ-8 .....	NISOURCE INC .....		....03/11/2024 .....	JP MORGAN SEC'S INC., - FIXED INCOME .....	179,606	180,000		0	2.B FE .....
665772-CY-3 .....	NORTHERN STATES POWER CO .....		....02/22/2024 .....	MUFG SECURITIES AMERICAS INC. .....	54,787	55,000		0	1.E FE .....
756109-CG-7 .....	REALTY INCOME CORP .....		....01/08/2024 .....	WELLS FARGO SECURITIES .....	93,965	95,000		0	1.G FE .....
83192P-AD-0 .....	SMITH & NEPHEW PLC .....	C.	....03/13/2024 .....	JP MORGAN SEC'S INC., - FIXED INCOME .....	119,634	120,000		0	2.B FE .....
842400-HZ-9 .....	SOUTHERN CALIFORNIA EDISON CO .....		....03/15/2024 .....	Bank of America Securities .....	34,316	35,000		344	1.G FE .....
92343V-GW-8 .....	VERIZON COMMUNICATIONS INC .....		....02/20/2024 .....	MORGAN STANLEY CO .....	34,554	35,000		0	2.A FE .....
927804-GP-3 .....	VIRGINIA ELECTRIC AND POWER CO .....		....03/15/2024 .....	Various .....	222,584	225,000		394	1.F FE .....
976826-BS-5 .....	WISCONSIN POWER AND LIGHT CO .....		....03/04/2024 .....	BANK OF NYC/MIZUHO SEC .....	86,835	87,000		0	2.A FE .....
<b>1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)</b>					2,916,132	2,925,000		3,339	<b>XXX</b>
<b>2509999997. Total - Bonds - Part 3</b>					8,246,694	8,324,562		9,070	<b>XXX</b>
<b>2509999998. Total - Bonds - Part 5</b>					XXX	XXX		XXX	<b>XXX</b>
<b>2509999999. Total - Bonds</b>					8,246,694	8,324,562		9,070	<b>XXX</b>
<b>4509999997. Total - Preferred Stocks - Part 3</b>					0	XXX		0	<b>XXX</b>
<b>4509999998. Total - Preferred Stocks - Part 5</b>					XXX	XXX		XXX	<b>XXX</b>
<b>4509999999. Total - Preferred Stocks</b>					0	XXX		0	<b>XXX</b>
<b>5989999997. Total - Common Stocks - Part 3</b>					0	XXX		0	<b>XXX</b>
<b>5989999998. Total - Common Stocks - Part 5</b>					XXX	XXX		XXX	<b>XXX</b>
<b>5989999999. Total - Common Stocks</b>					0	XXX		0	<b>XXX</b>
<b>5999999999. Total - Preferred and Common Stocks</b>					0	XXX		0	<b>XXX</b>
<b>6009999999 - Totals</b>					8,246,694	XXX		9,070	<b>XXX</b>

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Ident- ification	2 Description	For- eign	Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consid- eration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Con- tractual Maturity Date	22 NAIC Design- ation, NAIC Design- ation Modifer and SVO Adminis- trative Symbol
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amor- tization)/ Accretion	13 Other Than Temporary Impairment Recogn- ized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Change in Book/ Adjusted Carrying Value							
..912828-4N-7	UNITED STATES TREASURY .....	.....	02/01/2024	BMOCM/BONDS .....	.....	480,956	500,000	478,516	478,653	0	399	0	399	0	479,051	0	1,905	1,905	3,120	05/15/2028	1.A .....
..91282C-JQ-5	UNITED STATES TREASURY .....	.....	02/01/2024	Bank of America Securities .....	.....	994,803	1,000,000	978,203	0	0	107	0	107	0	978,310	0	16,493	16,493	3,400	12/31/2030	1.A .....
..91282C-JS-1	UNITED STATES TREASURY .....	.....	02/01/2024	MORGAN STANLEY CO .....	.....	500,214	500,000	498,966	0	0	33	0	33	0	498,998	0	1,216	1,216	1,927	12/31/2025	1.A .....
0109999999. Subtotal - Bonds - U.S. Governments					1,975,973	2,000,000	1,955,684	478,653	0	538	0	538	0	1,956,360	0	19,613	19,613	8,446	XXX	XXX	
..3131XX-WS-6	FH ZM4257 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,259	2,259	2,405	2,487	0	(228)	0	(228)	0	2,259	0	0	0	14	09/01/2047	1.A .....
..3132DM-4N-2	FH SD0829 - RMBS .....	.....	03/01/2024	Paydown .....	.....	7,339	7,339	7,571	7,558	0	(219)	0	(219)	0	7,339	0	0	0	46	01/01/2052	1.A .....
..3132DN-5C-3	FH SD1743 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,653	2,653	2,519	2,518	0	134	0	134	0	2,653	0	0	0	19	01/01/2052	1.A .....
..3132DN-7K-3	FH SD1798 - RMBS .....	.....	03/01/2024	Paydown .....	.....	1,122	1,122	1,139	1,139	0	(16)	0	(16)	0	1,122	0	0	0	9	11/01/2052	1.A .....
..3132DN-7L-1	FH SD1799 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,513	2,513	2,548	2,546	0	(32)	0	(32)	0	2,513	0	0	0	25	11/01/2052	1.A .....
..3132DN-E2-5	FH SD1053 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,114	2,114	2,124	2,123	0	(9)	0	(9)	0	2,114	0	0	0	15	06/01/2052	1.A .....
..3132DN-G5-6	FH SD1120 - RMBS .....	.....	03/01/2024	Paydown .....	.....	5,622	5,622	5,716	5,714	0	(93)	0	(93)	0	5,622	0	0	0	39	06/01/2052	1.A .....
..3132DN-NS-8	FH SD1301 - RMBS .....	.....	03/01/2024	Paydown .....	.....	25,198	25,198	25,800	25,782	0	(584)	0	(584)	0	25,198	0	0	0	205	07/01/2052	1.A .....
..3132DN-OH-9	FH SD1356 - RMBS .....	.....	03/01/2024	Paydown .....	.....	35,426	35,426	36,195	36,177	0	(752)	0	(752)	0	35,426	0	0	0	322	07/01/2052	1.A .....
..3132DN-VJ-9	FH SD1517 - RMBS .....	.....	03/01/2024	Paydown .....	.....	619	619	620	620	0	(1)	0	(1)	0	619	0	0	0	5	09/01/2052	1.A .....
..3132DN-VR-1	FH SD1524 - RMBS .....	.....	03/01/2024	Paydown .....	.....	743	743	706	706	0	37	0	37	0	743	0	0	0	5	08/01/2052	1.A .....
..3132DN-V5-6	FH SD1632 - RMBS .....	.....	03/01/2024	Paydown .....	.....	4,809	4,809	4,820	4,818	0	(9)	0	(9)	0	4,809	0	0	0	44	09/01/2052	1.A .....
..3132DN-Y7-2	FH SD1634 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,525	2,525	2,539	2,538	0	(13)	0	(13)	0	2,525	0	0	0	32	09/01/2052	1.A .....
..3132DN-Y8-0	FH SD1635 - RMBS .....	.....	03/01/2024	Paydown .....	.....	482	482	489	488	0	(6)	0	(6)	0	482	0	0	0	4	09/01/2052	1.A .....
..3132DP-KY-3	FH SD2111 - RMBS .....	.....	03/01/2024	Paydown .....	.....	121	121	118	118	0	3	0	3	0	121	0	0	0	1	12/01/2052	1.A .....
..3132DQ-C6-1	FH SD2793 - RMBS .....	.....	03/01/2024	Paydown .....	.....	108	108	106	106	0	3	0	3	0	108	0	0	0	1	03/01/2053	1.A .....
..3132DQ-QV-1	FH SD3168 - RMBS .....	.....	03/01/2024	Paydown .....	.....	671	671	665	665	0	5	0	5	0	671	0	0	0	5	06/01/2053	1.A .....
..3132DS-B3-5	FH SD4558 - RMBS .....	.....	03/01/2024	Paydown .....	.....	8,130	8,130	7,696	7,695	0	435	0	435	0	8,130	0	0	0	58	10/01/2052	1.A .....
..3132DV-S2-4	FH SD8064 - RMBS .....	.....	03/01/2024	Paydown .....	.....	1,624	1,624	1,553	1,553	0	71	0	71	0	1,624	0	0	0	13	05/01/2050	1.A .....
..3132DV-LA-1	FH SD7521 - RMBS .....	.....	03/01/2024	Paydown .....	.....	4,132	4,132	4,423	4,444	0	(312)	0	(312)	0	4,132	0	0	0	17	07/01/2050	1.A .....
..3132DV-LC-7	FH SD7523 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,288	2,288	2,440	2,453	0	(165)	0	(165)	0	2,288	0	0	0	10	08/01/2050	1.A .....
..3132DV-LV-5	FH SD7540 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,735	2,735	2,884	2,883	0	(148)	0	(148)	0	2,735	0	0	0	11	05/01/2051	1.A .....
..3132E0-E5-7	FH SD3756 - RMBS .....	.....	03/01/2024	Paydown .....	.....	84,490	84,490	82,012	82,013	0	2,477	0	2,477	0	84,490	0	0	0	409	09/01/2053	1.A .....
..3132E0-E6-5	FH SD3757 - RMBS .....	.....	03/01/2024	Paydown .....	.....	1,316	1,316	1,281	1,281	0	34	0	34	0	1,316	0	0	0	10	08/01/2053	1.A .....
..3132E0-ZJ-4	FH SD4345 - RMBS .....	.....	03/01/2024	Paydown .....	.....	250,614	250,614	242,939	242,934	0	7,680	0	7,680	0	250,614	0	0	0	1,282	10/01/2053	1.A .....
..31334Y-P5-0	FH QA2244 - RMBS .....	.....	03/01/2024	Paydown .....	.....	286	286	303	310	0	(24)	0	(24)	0	286	0	0	0	1	07/01/2046	1.A .....
..3133AS-KA-0	FH QC7489 - RMBS .....	.....	03/01/2024	Paydown .....	.....	3,729	3,729	3,791	3,786	0	(57)	0	(57)	0	3,729	0	0	0	11	09/01/2051	1.A .....
..3133BG-C6-3	FH QE6393 - RMBS .....	.....	03/01/2024	Paydown .....	.....	12,987	12,987	13,064	13,065	0	(78)	0	(78)	0	12,987	0	0	0	76	07/01/2052	1.A .....
..3133BJ-NS-7	FH QE8501 - RMBS .....	.....	03/01/2024	Paydown .....	.....	28,502	28,502	28,672	28,667	0	(165)	0	(165)	0	28,502	0	0	0	168	08/01/2052	1.A .....
..3133BM-06-5	FH QF0477 - RMBS .....	.....	03/01/2024	Paydown .....	.....	21,323	21,323	21,526	21,525	0	(202)	0	(202)	0	21,323	0	0	0	155	09/01/2052	1.A .....
..3133BQ-5W-2	FH QF3561 - RMBS .....	.....	03/01/2024	Paydown .....	.....	2,755	2,755	2,804	2,805	0	(50)	0	(50)	0	2,755	0	0	0	20	11/01/2052	1.A .....
..3133KK-3X-5	FH RA4414 - RMBS .....	.....	03/01/2024	Paydown .....	.....	9,928	9,928	10,551	10,579	0	(652)	0	(652)	0	9,928	0	0	0	37	01/01/2051	1.A .....
..3133KM-RT-4	FH RA5698 - RMBS .....	.....	03/01/2024	Paydown .....	.....	820	820	834	833	0	(13)	0	(13)	0	820	0	0	0	2	09/01/2051	1.A .....
..3133KN-KX-0	FH RA6610 - RMBS .....	.....	03/01/2024	Paydown .....	.....	10,252	10,252	10,491	10,484	0	(231)	0	(231)	0	10,252	0	0	0	53	01/01/2052	1.A .....
..3133KP-YM-4	FEDERAL HOME LOAN MORTGAGE CORPORATION - .....	.....	03/01/2024	Paydown .....	.....	1,368	1,368	1,332	1,333	0	35	0	35	0	1,368	0	0	0	12	09/01/2052	1.A .....
..3133KU-VZ-6	FH RA8732 - RMBS .....	.....	03/01/2024	Paydown .....	.....	1,892	1,892	1,884	1,884	0	9	0	9	0	1,892	0	0	0	16	03/01/2053	1.A .....
..3137BP-DW-6	FHR 4583 UP - CMO/RMBS .....	.....	03/01/2024	Paydown .....	.....	9,528	9,528	9,973	9,985	0	(458)	0	(458)	0	9,528	0	0	0	47	07/15/2045	1.A .....
..3137BS-ZE-6	FHR 4631 GP - CMO/RMBS .....	.....	03/01/2024	Paydown																	

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Ident- ification	2 Description	For- eign	Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consid- eration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Con- tractual Maturity Date	22 NAIC Design- ation, NAIC Design- ation Modifer and SVO Adminis- trative Symbol	
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amor- tization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recogn- ized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value								
..3140KV-F5-4	FN B09187 - RMBS		03/01/2024	Paydown		1,105	1,105	1,146	0	(42)	0	(42)	0	0	1,105	0	0	0	5	01/01/2051	1.A ..	
..3140KV-GN-4	FN B09204 - RMBS		03/01/2024	Paydown		1,398	1,398	1,450	0	(51)	0	(51)	0	0	1,398	0	0	0	5	01/01/2051	1.A ..	
..3140KV-SP-2	FN BR0525 - RMBS		03/01/2024	Paydown		893	893	930	0	(36)	0	(36)	0	0	893	0	0	0	2	12/01/2050	1.A ..	
..3140LO-C8-8	FN BR1894 - RMBS		03/01/2024	Paydown		1,699	1,699	1,764	0	(61)	0	(61)	0	0	1,699	0	0	0	5	01/01/2051	1.A ..	
..3140LO-D4-6	FN BR1922 - RMBS		03/01/2024	Paydown		749	749	778	0	(29)	0	(29)	0	0	749	0	0	0	3	01/01/2051	1.A ..	
..3140LO-DR-5	FN BR1911 - RMBS		03/01/2024	Paydown		1,279	1,279	1,327	0	(46)	0	(46)	0	0	1,279	0	0	0	4	01/01/2051	1.A ..	
..3140MR-2N-6	FN BWI0780 - RMBS		03/01/2024	Paydown		1,519	1,519	1,538	0	(18)	0	(18)	0	0	1,519	0	0	0	11	08/01/2052	1.A ..	
..3140MY-AD-4	FN BWI6303 - RMBS		03/01/2024	Paydown		32,520	32,520	32,853	0	(333)	0	(333)	0	0	32,520	0	0	0	321	08/01/2052	1.A ..	
..3140N3-A5-8	FN BWI9927 - RMBS		03/01/2024	Paydown		6,142	6,142	6,221	0	(79)	0	(79)	0	0	6,142	0	0	0	32	10/01/2052	1.A ..	
..3140Q9-4Z-3	FN CA2639 - RMBS		03/01/2024	Paydown		351	351	345	0	6	0	6	0	0	351	0	0	0	3	11/01/2048	1.A ..	
..3140Q9-MM-2	FN CA2163 - RMBS		03/01/2024	Paydown		6,379	6,379	6,340	0	39	0	39	0	0	6,379	0	0	0	54	08/01/2048	1.A ..	
..3140QE-AP-7	FN CA6313 - RMBS		03/01/2024	Paydown		2,737	2,737	2,923	0	(242)	0	(242)	0	0	2,737	0	0	0	12	07/01/2050	1.A ..	
..3140QE-DX-7	FN CA6417 - RMBS		03/01/2024	Paydown		4,231	4,231	4,599	0	(368)	0	(368)	0	0	4,231	0	0	0	22	07/01/2050	1.A ..	
..3140QE-KY-7	FN CA6610 - RMBS		03/01/2024	Paydown		3,651	3,651	3,903	0	(329)	0	(329)	0	0	3,651	0	0	0	14	08/01/2050	1.A ..	
..3140QE-YJ-5	FN CA7012 - RMBS		03/01/2024	Paydown		6,056	6,056	6,211	0	(155)	0	(155)	0	0	6,056	0	0	0	19	09/01/2050	1.A ..	
..3140QF-4E-6	FN CA8020 - RMBS		03/01/2024	Paydown		2,184	2,184	2,318	0	(135)	0	(135)	0	0	2,184	0	0	0	9	12/01/2050	1.A ..	
..3140QG-3C-9	FN CA8894 - RMBS		03/01/2024	Paydown		5,549	5,549	5,925	0	(369)	0	(369)	0	0	5,549	0	0	0	21	02/01/2051	1.A ..	
..3140QG-U4-7	FN CA8702 - RMBS		03/01/2024	Paydown		12,507	12,507	13,361	0	(719)	0	(719)	0	0	12,507	0	0	0	53	01/01/2036	1.A ..	
..3140QG-ZQ-3	FN CA8850 - RMBS		03/01/2024	Paydown		4,587	4,587	4,755	0	(160)	0	(160)	0	0	4,587	0	0	0	12	02/01/2051	1.A ..	
..3140QL-MY-9	FN CB1274 - RMBS		03/01/2024	Paydown		2,946	2,946	3,079	0	(127)	0	(127)	0	0	2,946	0	0	0	13	08/01/2051	1.A ..	
..3140QM-ST-7	FN CB2657 - RMBS		03/01/2024	Paydown		1,383	1,383	1,411	0	(26)	0	(26)	0	0	1,383	0	0	0	7	01/01/2052	1.A ..	
..3140QM-VP-6	FN CB2421 - RMBS		03/01/2024	Paydown		3,431	3,431	3,619	0	(176)	0	(176)	0	0	3,431	0	0	0	17	12/01/2051	1.A ..	
..3140QP-BA-4	FN CB3632 - RMBS		03/01/2024	Paydown		26,274	26,274	27,115	0	(832)	0	(832)	0	0	26,274	0	0	0	215	05/01/2052	1.A ..	
..3140QP-BG-1	FN CB3638 - RMBS		03/01/2024	Paydown		2,531	2,531	2,572	0	(41)	0	(41)	0	0	2,531	0	0	0	20	05/01/2052	1.A ..	
..3140QP-ZB-6	FN CB4337 - RMBS		03/01/2024	Paydown		2,005	2,005	2,042	0	(36)	0	(36)	0	0	2,005	0	0	0	19	08/01/2052	1.A ..	
..3140QP-ZE-0	FN CB4340 - RMBS		03/01/2024	Paydown		3,130	3,130	3,143	0	(11)	0	(11)	0	0	3,130	0	0	0	24	08/01/2052	1.A ..	
..3140QQ-F6-7	FN CB4688 - RMBS		03/01/2024	Paydown		34,479	34,479	35,491	0	(1,005)	0	(1,005)	0	0	34,479	0	0	0	310	09/01/2052	1.A ..	
..3140QQ-GA-7	FN CB4692 - RMBS		03/01/2024	Paydown		10,479	10,479	10,724	0	(240)	0	(240)	0	0	10,479	0	0	0	90	09/01/2052	1.A ..	
..3140QQ-UM-5	FN CB5087 - RMBS		03/01/2024	Paydown		593	593	606	0	(12)	0	(12)	0	0	593	0	0	0	7	11/01/2052	1.A ..	
..3140X8-3F-2	FN FM5297 - RMBS		03/01/2024	Paydown		867	867	948	0	(81)	0	(81)	0	0	867	0	0	0	4	11/01/2050	1.A ..	
..3140X8-G6-8	FN FM4720 - RMBS		03/01/2024	Paydown		5,241	5,241	5,600	0	(456)	0	(456)	0	0	5,241	0	0	0	28	10/01/2050	1.A ..	
..3140X8-UU-9	FN FM5094 - RMBS		03/01/2024	Paydown		8,219	8,219	8,786	0	(942)	0	(942)	0	0	8,219	0	0	0	46	06/01/2049	1.A ..	
..3140X8-WR-4	FN FM5155 - RMBS		03/01/2024	Paydown		983	983	1,020	0	(36)	0	(36)	0	0	983	0	0	0	4	12/01/2050	1.A ..	
..3140X8-Y6-8	FN FM5232 - RMBS		03/01/2024	Paydown		1,390	1,390	1,486	0	(122)	0	(122)	0	0	1,390	0	0	0	6	06/01/2050	1.A ..	
..3140X8-Y7-6	FN FM5233 - RMBS		03/01/2024	Paydown		508	508	541	0	(36)	0	(36)	0	0	508	0	0	0	3	11/01/2050	1.A ..	
..3140X8-YK-7	FN FM5213 - RMBS		03/01/2024	Paydown		3,921	3,921	4,082	0	(156)	0	(156)	0	0	3,921	0	0	0	13	12/01/2050	1.A ..	
..3140X9-JB-2	FN FM5657 - RMBS		03/01/2024	Paydown		833	833	888	0	(71)	0	(71)	0	0	833	0	0	0	6	12/01/2050	1.A ..	
..3140X9-UU-2	FN FM5984 - RMBS		03/01/2024	Paydown		7,939	7,939	8,202	0	(255)	0	(255)	0	0	7,939	0	0	0	27	02/01/2051	1.A ..	
..3140X9-ID-3	FN FM6043 - RMBS		03/01/2024	Paydown		7,051	7,051	7,744	0	(693)	0	(693)	0	0	7,051	0	0	0	42	06/01/2049	1.A ..	
..3140XB-0D-5	FN FM7651 - RMBS		03/01/2024	Paydown		9,253	9,253	9,488	0	(261)	0	(261)	0	0	9,253	0	0	0	73	09/01/2049	1.A ..	
..3140XB-X7-0	FN FM7901 - RMBS		03/01/2024	Paydown		2,748	2,748	2,876	0	(119)	0	(119)	0	0	2,748	0	0	0	0	11	07/01/2051	1.A ..
..3140XC-4Z-8	FN FM8939 - RMBS		03/01/2024	Paydown		4,089	4,089	4,127	0	(37)	0	(37)	0	0	4,089	0	0	0	15	10/01/2051	1.A ..	
..3140XC-YX-0	FN FM8825 - RMBS		03/01/2024	Paydown		1,072	1,072	1,090	0	(17)	0	(17)	0	0	1,072	0	0	0	3	09/01/2051	1.A ..	
..3140XD-2J-4	FN FM9776 - RMBS		03/01/2024	Paydown		7,126	7,126	7,318	0	(191)	0	(191)	0	0	7,126	0	0					

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## **SCHEDULE D - PART 4**

#### Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22			
										11	12	13	14	15										
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol			
..3140XF-HY-0	FN FS0246 - RMBS		03/01/2024	Paydown		655	655	683	682	0	(27)	0	(27)	0	655	0	0	0	0	0	04/01/2025	1.A		
..3140XF-LL-3	FN FS0330 - RMBS		03/01/2024	Paydown		8,560	8,560	8,850	8,835	0	(275)	0	(275)	0	8,560	0	0	0	0	0	01/01/2025	1.A		
..3140XG-7F-0	FN FS1793 - RMBS		03/01/2024	Paydown		11,338	11,338	11,397	11,395	0	(58)	0	(58)	0	11,338	0	0	0	0	0	05/01/2025	1.A		
..3140XG-CH-0	FN FS0971 - RMBS		03/01/2024	Paydown		3,050	3,050	3,067	3,067	0	(17)	0	(17)	0	3,050	0	0	0	0	0	01/01/2025	1.A		
..3140XG-VJ-5	FN FS1516 - RMBS		03/01/2024	Paydown		20,992	20,992	20,975	20,974	0	(18)	0	(18)	0	20,992	0	0	0	0	0	05/01/2025	1.A		
..3140XG-HM-7	FN FS1551 - RMBS		03/01/2024	Paydown		811	811	817	816	0	(6)	0	(6)	0	811	0	0	0	0	0	03/01/2050	1.A		
..3140XG-ZA-0	FN FS1636 - RMBS		03/01/2024	Paydown		17,861	17,861	17,903	17,897	0	(36)	0	(36)	0	17,861	0	0	0	0	0	135	04/01/2025	1.A	
..3140XH-3U-9	FN FS2610 - RMBS		03/01/2024	Paydown		1,666	1,666	1,692	1,691	0	(25)	0	(25)	0	1,666	0	0	0	0	0	08/01/2025	1.A		
..3140XH-6Y-8	FN FS2686 - RMBS		03/01/2024	Paydown		1,983	1,983	1,997	1,998	0	(15)	0	(15)	0	1,983	0	0	0	0	0	18	08/01/2025	1.A	
..3140XH-JL-2	FN FS2066 - RMBS		03/01/2024	Paydown		44,302	44,302	41,983	41,979	0	2,323	0	2,323	0	44,302	0	0	0	0	0	273	06/01/2025	1.A	
..3140XH-NC-7	FN FS2186 - RMBS		03/01/2024	Paydown		3,408	3,408	3,272	3,272	0	136	0	136	0	3,408	0	0	0	0	0	22	06/01/2025	1.A	
..3140XJ-LC-5	FN FS3022 - RMBS		03/01/2024	Paydown		268	268	261	261	0	7	0	7	0	268	0	0	0	0	0	2	10/01/2025	1.A	
..3140XJ-QG-1	FN FS3154 - RMBS		03/01/2024	Paydown		1,173	1,173	1,159	1,159	0	14	0	14	0	1,173	0	0	0	0	0	12	07/01/2025	1.A	
..3140XJ-IWK-5	FN FS3349 - RMBS		03/01/2024	Paydown		1,994	1,994	1,951	1,952	0	42	0	42	0	1,994	0	0	0	0	0	14	09/01/2025	1.A	
..3140XL-5L-8	FN FS5350 - RMBS		03/01/2024	Paydown		372,326	372,326	356,502	356,437	0	15,889	0	15,889	0	372,326	0	0	0	0	0	2,460	10/01/2025	1.A	
..3140XM-J6-4	FN FS5684 - RMBS		03/01/2024	Paydown		785	785	747	747	0	39	0	39	0	785	0	0	0	0	0	5	04/01/2053	1.A	
..3140XN-BU-7	FN FS6350 - RMBS		03/01/2024	Paydown		78,817	78,817	76,404	76,402	0	2,415	0	2,415	0	78,817	0	0	0	0	0	658	10/01/2053	1.A	
..31418C-MG-6	FN MA3058 - RMBS		03/01/2024	Paydown		4,198	4,198	4,538	4,794	0	(596)	0	(596)	0	4,198	0	0	0	0	0	29	07/01/2047	1.A	
..31418D-HL-9	FN MA3834 - RMBS		03/01/2024	Paydown		1,097	1,097	1,146	1,181	0	(84)	0	(84)	0	1,097	0	0	0	0	0	5	11/01/2049	1.A	
..35563P-LH-0	SCRT 2019-3 MA - CMO/RMBS		03/01/2024	Paydown		1,523	1,523	1,592	1,569	0	(46)	0	(46)	0	1,523	0	0	0	0	0	9	10/25/2058	1.A	
..35563P-ML-0	SCRT 2019-4 MA - CMO/RMBS		03/01/2024	Paydown		1,187	1,187	1,213	1,204	0	(17)	0	(17)	0	1,187	0	0	0	0	0	6	02/25/2059	1.A	
<b>0909999999. Subtotal - Bonds - U.S. Special Revenues</b>										1,432,586	1,432,586	1,416,886	1,417,903	0	14,683	0	14,683	0	0	0	0	9,120	XXX	XXX
..056054-AA-7	BX 2019-XL A - CMBS		02/15/2024	Paydown		64,510	64,510	64,510	64,510	0	0	0	0	0	64,510	0	0	0	0	0	709	10/15/2036	1.A FE	
..056081-AA-2	BX 2021-SOAR A - CMBS		02/15/2024	Paydown		7,534	7,534	7,534	7,534	0	0	0	0	0	7,534	0	0	0	0	0	80	06/15/2038	1.A FE	
..05610H-AA-1	BX 22LP2 A - CMBS		02/15/2024	Paydown		1,047	1,047	1,043	1,049	0	(2)	0	(2)	0	1,047	0	0	0	0	0	11	02/16/2027	1.A FE	
..05946X-BV-4	BAFC 2003-1 A1 - CMO/RMBS		03/01/2024	Paydown		6	6	6	6	0	0	0	0	0	6	0	0	0	0	0	0	05/20/2033	1.D FE	
..302987-AE-2	FRESB 2020-SB70 A1H - CMBS		03/01/2024	Paydown		826	826	830	877	0	(51)	0	(51)	0	826	0	0	0	0	0	5	10/25/2039	2.C FE	
..33852J-AE-8	FSMT 217 A5 - CMO/RMBS		03/01/2024	Paydown		994	994	1,014	1,012	0	(18)	0	(18)	0	994	0	0	0	0	0	4	08/25/2051	1.A FE	
..36262W-AJ-5	GSIMBS 21PJ8 A8 - CMO/RMBS		03/01/2024	Paydown		1,627	1,627	1,665	1,661	0	(33)	0	(33)	0	1,627	0	0	0	0	0	7	01/25/2052	1.A FE	
..36270X-AD-6	GSIMBS 2023-PJ4 A3 - RMBS		01/01/2024	Adjustment		(8,012)	0	0	0	0	0	0	0	0	(8,046)	0	0	0	0	0	0	01/26/2054	1.A FE	
..38137H-BU-1	GLD11 XI AR2 - CDO	C.	01/18/2024	Paydown		69,458	69,458	68,243	71,215	0	(1,757)	0	(1,757)	0	69,458	0	0	0	0	0	1,194	01/21/2031	1.A FE	
..46592W-AF-3	JPMMT 2112 A4 - CMO/RMBS		03/01/2024	Paydown		6,426	6,426	6,534	6,521	0	(94)	0	(94)	0	6,426	0	0	0	0	0	26	02/25/2052	1.A FE	
..46653X-AE-0	JPMMT 2021-INV5 A2A - CMO/RMBS		03/01/2024	Paydown		2,503	2,503	2,532	2,530	0	(26)	0	(26)	0	2,503	0	0	0	0	0	10	12/26/2051	1.A FE	
..46654J-AH-4	JPMMT 221 A4 - CMO/RMBS		03/01/2024	Paydown		1,105	1,105	1,095	1,097	0	8	0	8	0	1,105	0	0	0	0	0	5	07/25/2052	1.A FE	
..46655L-AE-4	JPMMT 22LT2 A3 - RMBS		03/25/2024	Paydown		9,689	9,689	8,358	8,403	0	1,286	0	1,286	0	9,689	0	0	0	0	0	59	09/25/2052	1.A FE	
..61772C-AH-4	MSRM 213 A4 - CMO/RMBS		03/01/2024	Paydown		1,015	1,015	1,036	1,033	0	(18)	0	(18)	0	1,015	0	0	0	0	0	5	06/25/2051	1.A FE	
..63942C-AA-6	NAVSL 2021-D A - ABS		03/15/2024	Paydown		4,775	4,775	4,775	4,775	0	0	0	0	0	4,775	0	0	0	0	0	45	04/15/2060	1.A FE	
..63942E-AA-6	NAVSL 2021-E A - ABS		03/15/2024	Paydown		3,182	3,182	3,181	3,181	0	1	0	1	0	3,182	0	0	0	0	0	5	12/16/2069	1.A FE	
..64034Q-AA-6	NSLT 2021-B AFL - ABS		03/20/2024	Paydown		3,752	3,752	3,752	3,752	0	0	0	0	0	3,752	0	0	0	0	0	40	04/20/2062	1.A FE	
..64034Q-AB-4	NSLT 2021-B AFX - ABS		03/20/2024	Paydown		3,752	3,752	3,752	3,752	0	1	0	1	0	3,752	0	0	0	0	0	9	04/20/2062	1.A FE	
..64035D-AA-4	NSLT 21A A1 - ABS		03/20/2024	Paydown		5,362	5,362	5,362	5,659	0	(298)	0	(298)	0	5,362	0	0	0	0	0	58	04/20/2062	1.A FE	
..64035D-AD-8	NSLT 21A AP2 - ABS		03/20/2024	Paydown		3,424	3,424	3,420	3,420	0	4	0	4	0	3,424	0	0	0	0	0	8	04/20/2062	1.A FE	
..64133C-AA-7	NEUB 35 A1 - CDO	C.	03/01/2024	Paydown		250,000	250,000	249,875	262,592	0	(12,592)	0	(12,592)	0	250,000	0	0	0	0	0	6,487	01/19/2033	1.A FE	
..74936R-AE-4	ROKT 212 A5 - CMO/RMBS		03/01/2024	Paydown		1,406	1,406	1,431	1,431	0	(25)	0	(25)	0	1,406	0	0	0	0	0	6	06/26/2051	1.A FE	
..74938G-AB-2	ROKT 224 A2 - CMO/RMBS		03/01/2024	Paydown		10,388	10,388	8,870	8,897	0	1,491	0	1,491	0	10,388	0	0	0	0	0	55	06/25/2052	1.A FE	
..74938H-AB-7	ROKT 222 A2 - RMBS		01/01/2024	Paydown		(3,631)	0	0	0	0	0	0	0	0	493	0	0	(4,124)	0	0	(5)	03/25/2052	1.A FE	

E05.2

## STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

**SCHEDULE D - PART 4**

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1 CUSIP Ident- ification	2 Description	3 For- eign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consid- eration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain or Loss on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Con- tractual Maturity Date	22 NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- stra- tive Symbol	
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amor- tization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recogn- ized	14 Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value								
..78449F-AC-5	SMB 2016-A A2B - ABS .....	.....	03/15/2024	Paydown .....	8,271	8,271	8,300	8,491	0	(220)	0	(220)	0	0	8,271	0	0	0	0	102	05/15/2031	1.A FE .....
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					449,410	461,053	457,116	473,397	0	(11,818)	0	(11,818)	0	0	461,579	0	(12,170)	(12,170)	8,923	XXX	XXX	
2509999997. Total - Bonds - Part 4					3,857,968	3,893,639	3,829,687	2,369,953	0	3,403	0	3,403	0	0	3,850,525	0	7,444	7,444	26,489	XXX	XXX	
2509999998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999999. Total - Bonds					3,857,968	3,893,639	3,829,687	2,369,953	0	3,403	0	3,403	0	0	3,850,525	0	7,444	7,444	26,489	XXX	XXX	
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					3,857,968	XXX	3,829,687	2,369,953	0	3,403	0	3,403	0	0	3,850,525	0	7,444	7,444	26,489	XXX	XXX	

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 - Reinvested Collateral Assets Owned  
**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned  
**N O N E**

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

**SCHEDULE E - PART 1 - CASH**

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
PNC BANK .....	Louisville, KY .....	0.000	0	0	198,825	374,404	299,202	XXX.
JP MORGAN CHASE .....	New York, NY .....	0.000	0	0	18,923	222,368	7,606,798	XXX.
US BANK .....	St. Louis, MO .....	0.000	0	0	(4,072,125)	(4,071,922)	(3,033,643)	XXX.
JP MORGAN CHASE-Humana Health Plan of Ohio, Inc. ....	New York, NY .....	0.000	0	0	0	3,438	0	XXX.
JP Morgan Time Deposit .....	New York, NY .....	5.150	368	0	4,253,974	2,575,878	1,542,494	XXX.
0199998. Deposits in ... 0	depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	XXX
0199999. Totals - Open Depositories		XXX	XXX	368	0	399,597	(895,835)	6,414,851
0299998. Deposits in ... 0	depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	XXX
0299999. Totals - Suspended Depositories		XXX	XXX	0	0	0	0	XXX
0399999. Total Cash on Deposit		XXX	XXX	368	0	399,597	(895,835)	6,414,851
0499999. Cash in Company's Office		XXX	XXX	XXX	XXX	0	0	XXX
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
0599999. Total - Cash		XXX	XXX	368	0	399,597	(895,835)	6,414,851

STATEMENT AS OF MARCH 31, 2024 OF THE Humana Health Plan of Ohio Inc.

## SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
.....	UNITED STATES TREASURY .....	.....	02/21/2024	0.000	.04/04/2024	5,997,360	0	34,323
.....	UNITED STATES TREASURY .....	.....	02/06/2024	0.000	.04/02/2024	2,999,561	0	24,136
.....	UNITED STATES TREASURY .....	.....	02/16/2024	0.000	.04/16/2024	10,476,983	0	69,051
0019999999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						19,473,904	0	127,510
0109999999. Total - U.S. Government Bonds						19,473,904	0	127,510
0309999999. Total - All Other Government Bonds						0	0	0
0509999999. Total - U.S. States, Territories and Possessions Bonds						0	0	0
0709999999. Total - U.S. Political Subdivisions Bonds						0	0	0
0909999999. Total - U.S. Special Revenues Bonds						0	0	0
.....	Barclays Bank UK PLC .....	.....	03/25/2024	0.000	.04/08/2024	2,996,891	0	3,109
.....	Bristol-Myers Squibb Company .....	.....	03/27/2024	0.000	.04/05/2024	14,991,133	0	11,083
.....	Canadian Pacific Railway Company .....	.....	03/15/2024	0.000	.04/08/2024	8,990,375	0	23,375
.....	John Deere Financial Inc. .....	.....	02/16/2024	0.000	.04/08/2024	4,994,847	0	33,125
.....	Dominion Energy, Inc. .....	.....	03/15/2024	0.000	.05/09/2024	8,946,895	0	23,758
.....	Emerson Electric Co. .....	.....	02/16/2024	0.000	.04/08/2024	4,994,838	0	33,188
.....	Emerson Electric Co. .....	.....	02/22/2024	0.000	.04/10/2024	4,993,363	0	28,763
.....	Intercontinental Exchange, Inc. .....	.....	03/15/2024	0.000	.04/04/2024	8,995,943	0	22,993
.....	Eli Lilly and Company .....	.....	03/06/2024	0.000	.04/11/2024	998,528	0	3,828
.....	Mars, Incorporated .....	.....	02/14/2024	0.000	.04/16/2024	1,796,003	0	12,526
.....	Novartis Finance Corporation .....	.....	03/28/2024	0.000	.04/18/2024	6,982,514	0	4,114
.....	Thomson Reuters Corporation .....	.....	03/21/2024	0.000	.04/17/2024	6,384,441	0	11,062
.....	Verizon Communications Inc. .....	.....	03/22/2024	0.000	.04/09/2024	4,993,978	0	7,528
.....	Walmart Inc. .....	.....	03/28/2024	0.000	.04/08/2024	10,988,707	0	6,453
1019999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						92,048,453	0	224,903
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						92,048,453	0	224,903
1309999999. Total - Hybrid Securities						0	0	0
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds						0	0	0
1909999999. Subtotal - Unaffiliated Bank Loans						0	0	0
2419999999. Total - Issuer Obligations						111,522,357	0	352,413
2429999999. Total - Residential Mortgage-Backed Securities						0	0	0
2439999999. Total - Commercial Mortgage-Backed Securities						0	0	0
2449999999. Total - Other Loan-Backed and Structured Securities						0	0	0
2459999999. Total - SVO Identified Funds						0	0	0
2469999999. Total - Affiliated Bank Loans						0	0	0
2479999999. Total - Unaffiliated Bank Loans						0	0	0
2509999999. Total Bonds						111,522,357	0	352,413
31846V-80-7 .....	FIRST AMER:TRS OBG Y .....	SD.....	04/04/2023	4.920	.....	11	0	0
48122-23-9 .....	JPMORGAN:US TRS+MM CAP .....	.....	03/28/2024	5.130	.....	3,925,489	17,493	0
8209999999. Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO						3,925,500	17,493	0
.....	.....	.....	.....	.....	.....	.....	.....	.....
8609999999 - Total Cash Equivalents						115,447,857	17,493	352,413