



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 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	c/o CT Corporation System, 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 (City or Town, State, Country and Zip Code)		
				513-784-5320 (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 (City or Town, State, Country and Zip Code)		
				513-784-5320 (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)		

OFFICERS

President	George Renaudin II	Chief Financial Officer	Susan Marie Diamond
VP, Associate General Counsel & Corporate Secretary	Joseph Matthew Ruschell	VP & Treasurer	Robert Martin Marcoux Jr.

OTHER

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, VP, Medicare Regional President	Sean Joseph O'Reilly, SVP, Chief Compliance Officer
William Mark Preston, VP, Investments	Frederick William Roth, VP, Medicare Supplement	Leah Sonnenschein Schraudenbach, SVP, Chief Risk Officer
Gilbert Alan Stewart #, SVP, Medicare Divisional Leader		

DIRECTORS OR TRUSTEES

Sean Joseph O'Reilly #	George Renaudin II	Joseph Matthew Ruschell
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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.

George Renaudin II #
President

Joseph Matthew Ruschell
VP, Associate General Counsel & Corporate
Secretary

Robert Martin Marcoux, Jr.
VP & Treasurer

Subscribed and sworn to before me this
9th day of August, 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	92,329,099	0	92,329,099	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 (\$ (1,760,373)), cash equivalents (\$ 108,225,832) and short-term investments (\$ 0)	106,465,459	0	106,465,459	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	29,471	0	29,471	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	198,824,029	0	198,824,029	212,093,092
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	457,371	0	457,371	439,047
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	111,290,968	111,192	111,179,776	66,317,656
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 641,383) and contracts subject to redetermination (\$ 2,812,576)	3,453,958	0	3,453,958	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	299,134	10,971	288,162	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 (\$ 3,542,336) and other amounts receivable	3,907,721	274,353	3,633,368	7,632,755
25. Aggregate write-ins for other than invested assets	927,161	927,161	0	47,831
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	326,248,112	1,323,677	324,924,435	301,073,104
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	326,248,112	1,323,677	324,924,435	301,073,104
DETAILS OF WRITE-INS				
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	592,830	592,830	0	0
2502. Prepaid Expenses	334,330	334,330	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)	927,161	927,161	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)	106,971,305	6,510,073	113,481,378	107,740,919
2. Accrued medical incentive pool and bonus amounts	559,117	0	559,117	2,389,000
3. Unpaid claims adjustment expenses	869,752	0	869,752	714,178
4. Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act	26,364,633	0	26,364,633	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	365,639	0	365,639	462,682
9. General expenses due or accrued	10,609,412	0	10,609,412	14,783,352
10.1 Current federal and foreign income tax payable and interest thereon (including \$ 1,565 on realized gains (losses))	104,020	0	104,020	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	36,083	0	36,083	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	42,267,702	0	42,267,702	21,686,615
16. Derivatives	0	0	0	0
17. Payable for securities	0	0	0	0
18. Payable for securities lending	29,471	0	29,471	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	3,802,976	0	3,802,976	3,094,491
23. Aggregate write-ins for other liabilities (including \$ 3,368 current)	1,588,432	0	1,588,432	1,556,383
24. Total liabilities (Lines 1 to 23)	193,637,017	6,510,073	200,147,090	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	(70,447,402)	(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	124,777,345	122,234,326
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	324,924,435	301,073,104
DETAILS OF WRITE-INS				
2301. Premium Payable	1,564,238	0	1,564,238	1,533,241
2302. Unclaimed Property	24,195	0	24,195	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)	1,588,432	0	1,588,432	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.....	912,278	578,846	1,355,864
2. Net premium income (including \$ 0 non-health premium income).....	....XXX.....	533,092,001	348,837,842	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.....	533,092,001	348,837,842	796,047,101
Hospital and Medical:				
9. Hospital/medical benefits	31,435,680	418,398,367	258,867,452	612,745,909
10. Other professional services	84,466	1,124,216	267,104	959,977
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	1,603,931	21,347,783	10,078,544	27,547,317
13. Prescription drugs	719,189	9,572,163	16,583,061	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	837,491	(478,165)	(145,491)
16. Subtotal (Lines 9 to 15)	33,843,266	451,280,019	285,317,997	671,247,426
Less:				
17. Net reinsurance recoveries	0	0	0	0
18. Total hospital and medical (Lines 16 minus 17)	33,843,266	451,280,019	285,317,997	671,247,426
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including \$ 17,686,706 cost containment expenses	0	21,016,704	19,601,159	39,971,786
21. General administrative expenses	0	63,757,933	59,791,693	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).....	33,843,266	536,054,656	364,710,849	833,075,315
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	....XXX.....	(2,962,655)	(15,873,007)	(37,028,214)
25. Net investment income earned	0	5,188,713	2,803,840	6,881,889
26. Net realized capital gains (losses) less capital gains tax of \$ 3,131	0	4,324	(50,719)	362,344
27. Net investment gains (losses) (Lines 25 plus 26)	0	5,193,037	2,753,121	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.....	2,230,383	(13,119,884)	(29,783,978)
31. Federal and foreign income taxes incurred .....	....XXX.....	1,001,230	(967,971)	(7,126,683)
32. Net income (loss) (Lines 30 minus 31) .....	....XXX.....	1,229,153	(12,151,914)	(22,657,295)
DETAILS OF WRITE-INS				
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
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	122,234,326	50,932,550	50,932,550
34. Net income or (loss) from Line 32	1,229,153	(12,151,914)	(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	1,313,866	(4,892,393)	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)	2,543,019	(17,044,307)	71,301,776
49. Capital and surplus end of reporting period (Line 33 plus 48)	124,777,345	33,888,243	122,234,326
DETAILS OF WRITE-INS			
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 JUNE 30, 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
Cash from Operations			
1. Premiums collected net of reinsurance	487,984,159	343,119,358	728,476,218
2. Net investment income	5,133,669	2,857,504	6,834,187
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	493,117,828	345,976,862	735,310,405
5. Benefit and loss related payments	443,238,138	227,264,005	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	87,957,049	69,111,739	157,920,891
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 120,943 tax on capital gains (losses)	(2,903,113)	(320,902)	(3,897,329)
10. Total (Lines 5 through 9)	528,292,074	296,054,841	742,745,539
11. Net cash from operations (Line 4 minus Line 10)	(35,174,246)	49,922,021	(7,435,134)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	6,242,121	3,645,912	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	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,242,132	3,645,912	48,809,193
13. Cost of investments acquired (long-term only):			
13.1 Bonds	11,532,689	10,617,999	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	29,471	22,007	22,007
13.7 Total investments acquired (Lines 13.1 to 13.6)	11,562,161	10,640,006	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)	(5,320,029)	(6,994,094)	(43,243,600)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	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)	21,861,009	65,307,596	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)	21,861,009	65,307,596	157,724,445
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(18,633,266)	108,235,523	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)	106,465,459	126,288,537	125,098,726

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

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STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

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											
Total Members at end of:														
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	164,493	0	2,299	0	0	0	0	10,708	151,486	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	912,278	0	18,935	0	0	0	(6)	63,446	829,903	0	0	0	0	0
Total Member Ambulatory Encounters for Period:														
7. Physician	1,158,341	0	16,209	0	0	0	0	139,015	1,003,117	0	0	0	0	0
8. Non-Physician	491,414	0	7,589	0	0	0	0	71,344	412,481	0	0	0	0	0
9. Total	1,649,755	0	23,798	0	0	0	0	210,359	1,415,598	0	0	0	0	0
10. Hospital Patient Days Incurred	169,127	0	1,518	0	0	0	0	22,173	145,436	0	0	0	0	0
11. Number of Inpatient Admissions	10,910	0	96	0	0	0	0	1,886	8,928	0	0	0	0	0
12. Health Premiums Written (a)	533,092,001	28,552	9,125,929	0	0	0	(146,943)	82,263,723	441,820,740	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	533,092,001	28,552	9,125,929	0	0	0	(146,943)	82,263,723	441,820,740	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	443,637,479	(5,307)	8,121,158	0	0	0	(83,738)	73,808,013	361,797,353	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	451,280,019	(5,267)	4,455,378	0	0	0	(164,740)	72,527,218	374,467,431	0	0	0	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 82,263,723

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC

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

Aging Analysis of Unpaid Claims

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0299999 Aggregate accounts not individually listed-uncovered	1,000,298	25,402	44	175	15,692	1,041,615
0399999 Aggregate accounts not individually listed-covered	7,159,468	181,809	318	1,255	112,316	7,455,162
0499999 Subtotals	8,159,766	207,211	363	1,430	128,009	8,496,777
0599999 Unreported claims and other claim reserves						104,984,602
0699999 Total amounts withheld						
0799999 Total claims unpaid						113,481,374
0899999 Accrued medical incentive pool and bonus amounts						559,111

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

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 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	(5,307)	0	0	0	(5,307)	(40)
2. Comprehensive (hospital and medical) group	1,606,644	6,514,514	644,292	1,796,012	2,250,936	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	(83,738)	0	743	14,917	(82,995)	210,731
7. Title XVIII - Medicare	8,581,362	62,559,273	2,284,668	13,128,123	10,866,030	14,905,199
8. Title XIX - Medicaid	78,772,470	283,024,887	(6,314,632)	101,995,729	72,457,838	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)	88,871,432	352,098,674	(3,384,929)	116,934,782	85,486,503	107,809,394
14. Health care receivables (a)	460,463	3,161,651	0	0	460,463	7,354,077
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	2,667,373	0	36,084	523,033	2,703,457	2,389,000
17. Totals (Lines 13 - 14 + 15 + 16)	91,078,342	348,937,023	(3,348,845)	117,457,815	87,729,497	102,844,316

(a) Excludes \$ 194,575 loans or advances to providers not yet expensed.

STATEMENT AS OF June 30, 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
Net Income/(Loss)					
1. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ 1,229,153	\$ (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	\$ 1,229,153	\$ (22,657,295)
Surplus					
5. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ 124,777,345	\$ 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	\$ 124,777,345	\$ 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 June 30, 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 utilized 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 June 30, 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 June 30, 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 June 30, 2024:

(a) The aggregate amount of unrealized losses:

1. Less than Twelve Months	\$ (935,922)
2. Twelve Months or Longer	\$ (3,547,400)

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

1. Less than Twelve Months	\$ 34,918,190
2. Twelve Months or Longer	\$ 24,912,126

(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 participates in securities lending transactions. The fair value of securities on loan at June 30, 2024 was \$28,835. The fair value of securities on loan at December 31, 2023 was \$0. The Company maintains effective control over the loaned securities and requires collateral initially equal to at least 102% of the market value of the loaned securities. Collateral received consists of cash and fixed-income securities. Non-cash collateral is not recorded in the statements of assets, liabilities, capital and surplus, as the Company does not have the right to sell, pledge, or otherwise reinvest the non-cash collateral. The Company did not have OTTIs on invested collateral at June 30, 2024 and December 31, 2023.

(2) The Company has not pledged any of its assets as collateral that are not reclassified and separately reported in the statement of assets, liabilities, capital and surplus.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(3) Collateral Received

a. The aggregate amounts of contractually obligated open collateral positions and the corresponding liabilities that represented the Company's obligations to return the collateral at June 30, 2024 and December 31, 2023 were as follows:

	June 30, 2024	December 31, 2023
(1) Securities Lending		
a. Open	\$ 29,471	\$ -
b. 30 days or less	-	-
c. 31 to 60 days	-	-
d. 61 to 90 days	-	-
e. Greater than 90 days	-	-
f. Sub-total (Sum of a+b+c+d+e)	<u>29,471</u>	<u>-</u>
g. Securities received	-	-
h. Total collateral received (f+g)	<u>\$ 29,471</u>	<u>\$ -</u>

b. The fair value of the collateral and the portion of the collateral that was sold or repledged was \$29,471 and \$0, at June 30, 2024 and December 31, 2023 respectively.

c. Cash collateral is invested in fixed income, short-term and cash equivalent securities and the offsetting collateral liability is included in payable for securities lending in the statements of assets, liabilities, capital and surplus. Non-cash collateral consists of fixed income debt securities.

(4) The Company did not have any securities lending transactions administered by an affiliated agent which were "one-line" at June 30, 2024 and December 31, 2023.

(5) Collateral Reinvested

a. The aggregate amounts of reinvested cash collateral and securities available to repledge by maturity term at June 30, 2024 and December 31, 2023 were as follows:

	June 30, 2024	December 31, 2023		
	<u>Amortized Cost</u>	<u>Fair Value</u>	<u>Amortized Cost</u>	<u>Fair Value</u>
(1) Securities Lending				
a. Open	\$ 27,996	\$ 27,996	\$ -	\$ -
b. 30 days or less	-	-	-	-
c. 31 to 60 days	590	590	-	-
d. 61 to 90 days	-	-	-	-
e. 91 to 120 days	-	-	-	-
f. 121 to 180 days	885	885	-	-
g. 181 to 365 days	-	-	-	-
h. 1 to 2 years	-	-	-	-
i. 2 to 3 years	-	-	-	-
j. Greater than 3 years	-	-	-	-
k. Sub-total (Sum of a through i)	<u>29,471</u>	<u>29,471</u>	<u>-</u>	<u>-</u>
l. Securities reinvested	-	-	-	-
m. Total collateral reinvested (k+l)	<u>\$ 29,471</u>	<u>\$ 29,471</u>	<u>\$ -</u>	<u>\$ -</u>

b. The Company did not have maturity dates of the collateral to be returned that did not match the invested assets at June 30, 2024 and December 31, 2023.

(6) The Company accepts non-cash collateral through its participation in securities lending transactions with its lending agent. Non-cash collateral generally consists of U.S. government securities which are not recorded in the statements of assets, liabilities, capital and surplus as the Company does not have the right to sell, pledge or otherwise reinvest these securities unless the counterparty defaults. The aggregate fair value of non-cash collateral accepted was \$0 and \$0, at June 30, 2024 and December 31, 2023 respectively.

(7) The Company had no cash or non-cash collateral for securities lending transactions that extended beyond one year at June 30, 2024 and December 31, 2023 respectively.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

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.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

K. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted from Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	3 Increase/ (Decrease) (1 minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Percentage Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 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	29,471	-	29,471	-	29,471	0.01%	0.01%
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	1,114,743	1,117,091	(2,348)	-	1,114,743	0.34%	0.34%
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	-	-	-	-	-	-	-
o. Total Restricted Assets	\$ 1,144,214	\$ 1,117,091	\$ 27,123	-	\$ 1,144,214	0.35%	0.35%

(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.

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.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

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	\$ 457,371
2. Nonadmitted	\$ -
3. Admitted	\$ 457,371

- 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.

No dividends or returns of capital were paid by the Company as of June 30, 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.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

D. At June 30, 2024, the Company reported \$42,267,702 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.

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.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

- 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 June 30, 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.
- B. Transfer and Servicing of Financial Assets
 - Refer to Note 5E – *Dollar Repurchase Agreements and/or Securities Lending Transactions*.
- 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.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

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 June 30, 2024, the Company has recorded a receivable from CMS of \$276,857 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 June 30, 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 June 30, 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 June 30, 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 June 30, 2024.

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Securities lending collateral assets: Fair values of securities lending collateral are based on quoted market prices, where available. These fair values are obtained primarily from a third party pricing service, which generally uses Level 1 or Level 2 inputs for the determination of fair value to facilitate fair value measurements and disclosures.

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	\$ 195,196,341	\$ 200,554,931	\$ 108,225,832	\$ 86,970,509	\$ -	\$ -	\$ -
Securities lending collateral assets	29,471	29,471	29,471	-	-	-	-
Total	\$ 195,225,812	\$ 200,584,402	\$ 108,255,303	\$ 86,970,509	\$ -	\$ -	\$ -

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

Not Applicable.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

21. Other Items

A. Extraordinary Items

Not Applicable.

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.

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 August 9, 2024 for the Statutory Statement issued on August 9, 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 (X)

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(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 (X)

Section 2 – Ceded Reinsurance Report – Part A

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

Yes () No (X)

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

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

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

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.

C. The amount of net premiums written by the Company at June 30, 2024 that are subject to retrospective rating features was \$533,092,001, 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 ()

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(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	\$	3,812
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	\$	(23)
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$	490
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 June 30, 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				(23)		23		(23)	A.
b. Transitional ACA Reinsurance Program	1,976,014				(23)	1,976,014		23	
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			(23)	1,976,014		23		(23)
									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 June 30, 2024, \$91,818,448 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$(3,374,772) as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$15,114,819 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 \$15,177,633 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

STATEMENT AS OF June 30, 2024 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

26. Intercompany Pooling Arrangements

Not Applicable.

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	3,018,038	3,018,038	-	-	-
3/31/2024	3,837,880	3,699,062	3,418,582	164,517	-
12/31/2023	6,001,739	6,167,297	3,822,835	2,350,218	(634)
9/30/2023	6,300,606	6,395,318	3,748,518	2,549,112	113,211
6/30/2023	6,391,734	6,486,260	4,009,409	2,499,005	(584)
3/31/2023	6,170,306	6,155,915	3,780,249	2,427,845	(28,087)
12/31/2022	5,918,355	5,726,639	3,561,455	2,155,778	9,406
9/30/2022	5,830,371	5,930,257	5,700,019	230,238	-
6/30/2022	6,244,367	6,389,375	6,495,207	(105,832)	-
3/31/2022	5,817,837	5,622,833	5,517,944	104,889	-

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.

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.
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 JUNE 30, 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).
Ethics Every Day was amended in June 2024 to update content based on operational changes, clarify content where necessary and perform general document maintenance.

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: \$ 0
13. Amount of real estate and mortgages held in short-term investments: \$ 0
14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No [X]
14.2 If yes, please complete the following:

	1 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.	\$ 29,471
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 29,471
16.3 Total payable for securities lending reported on the liability page.	\$ 29,471

STATEMENT AS OF JUNE 30, 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 [] 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 []

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 [] 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 [] 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 [] 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 []

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 []

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 []

GENERAL INTERROGATORIES**PART 2 - HEALTH**

1. Operating Percentages:

1.1 A&H loss percent	88.0 %
1.2 A&H cost containment percent	3.3 %
1.3 A&H expense percent excluding cost containment expenses	12.6 %
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 JUNE 30, 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

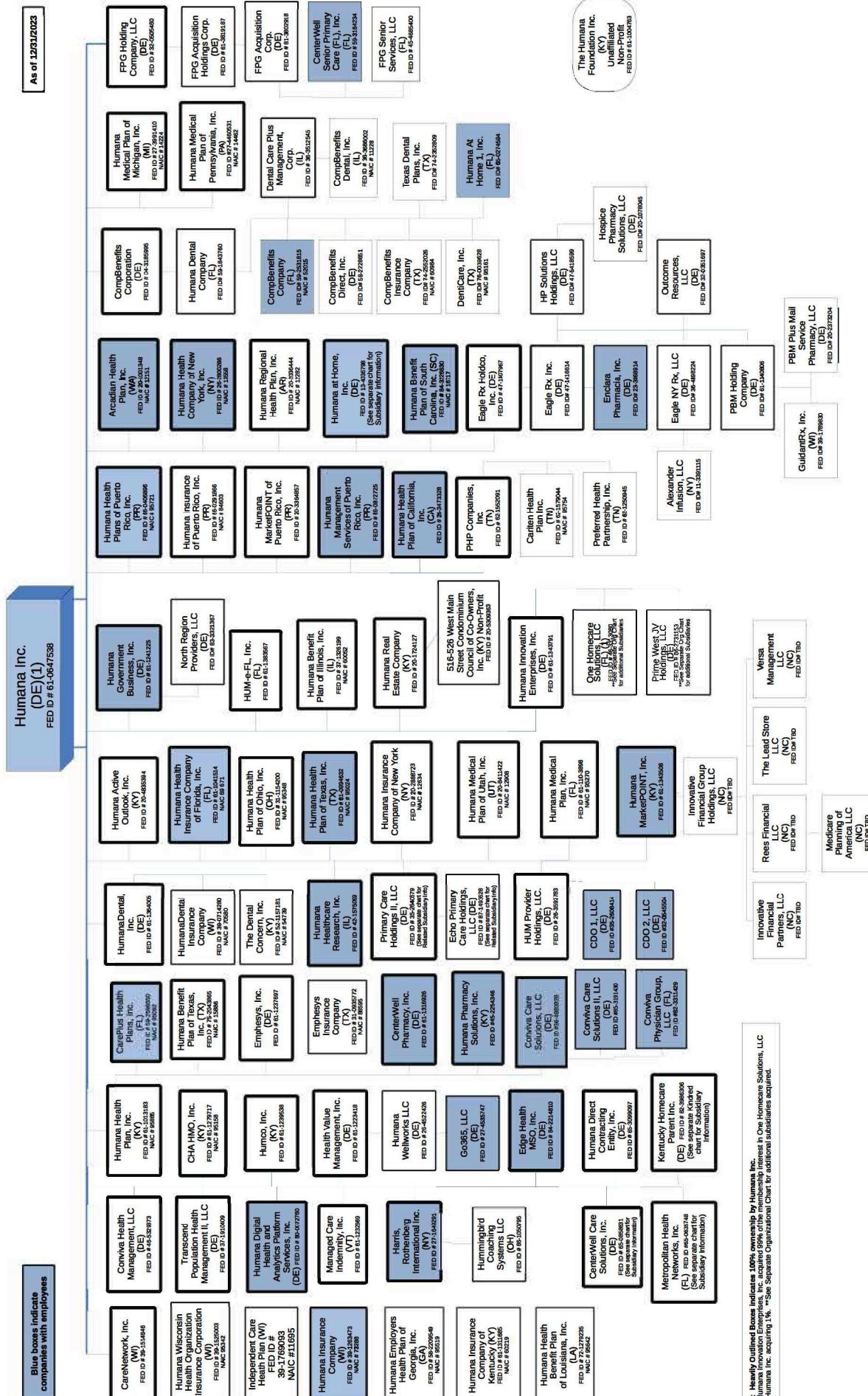
Current Year to Date - Allocated by States and Territories

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	82,272,706	0	0	0	0	0	82,272,706	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	9,154,481	(8,984)	441,820,740	0	(146,943)	0	450,819,294	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	XXX	9,154,481	82,263,723	441,820,740	0	(146,943)	0	533,092,001	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	XXX	0	0	0	0	0	0	0	0
61. Totals (Direct Business)	XXX	XXX	9,154,481	82,263,723	441,820,740	0	(146,943)	0	533,092,001	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

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

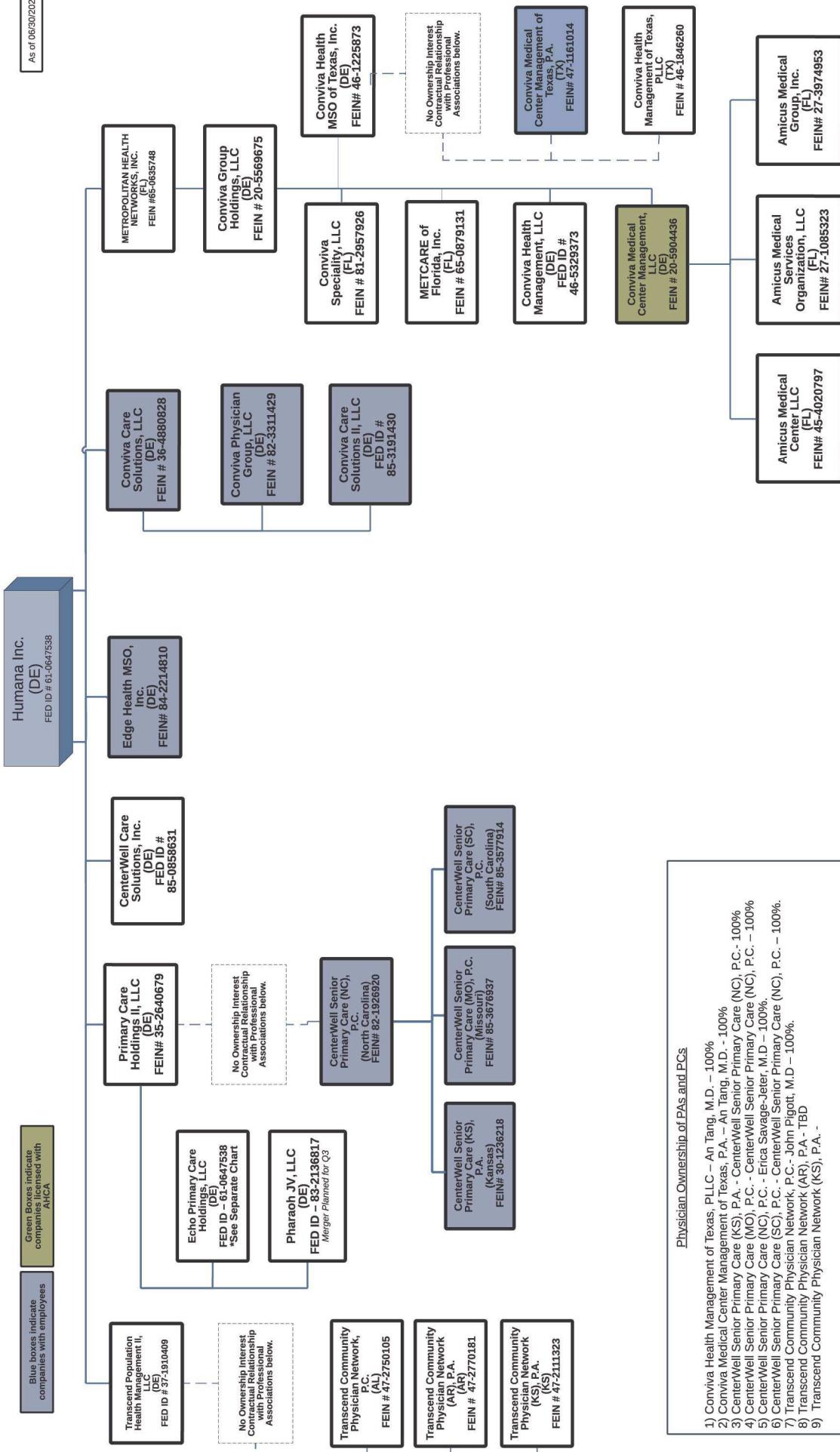


Blue boxes indicate
changes with employees

Note: Heavily Outlined Boxes Indicates 100% ownership by **Humana Inc.**
(1) Humana Innovation Enterprises, Inc. acquired 99% of the membership interest in One Homecare Solutions, LLC with Humana Inc. acquiring 1%. *See Separate Organizational Chart for additional subsidiaries acquired.

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

As of 06/30/2022

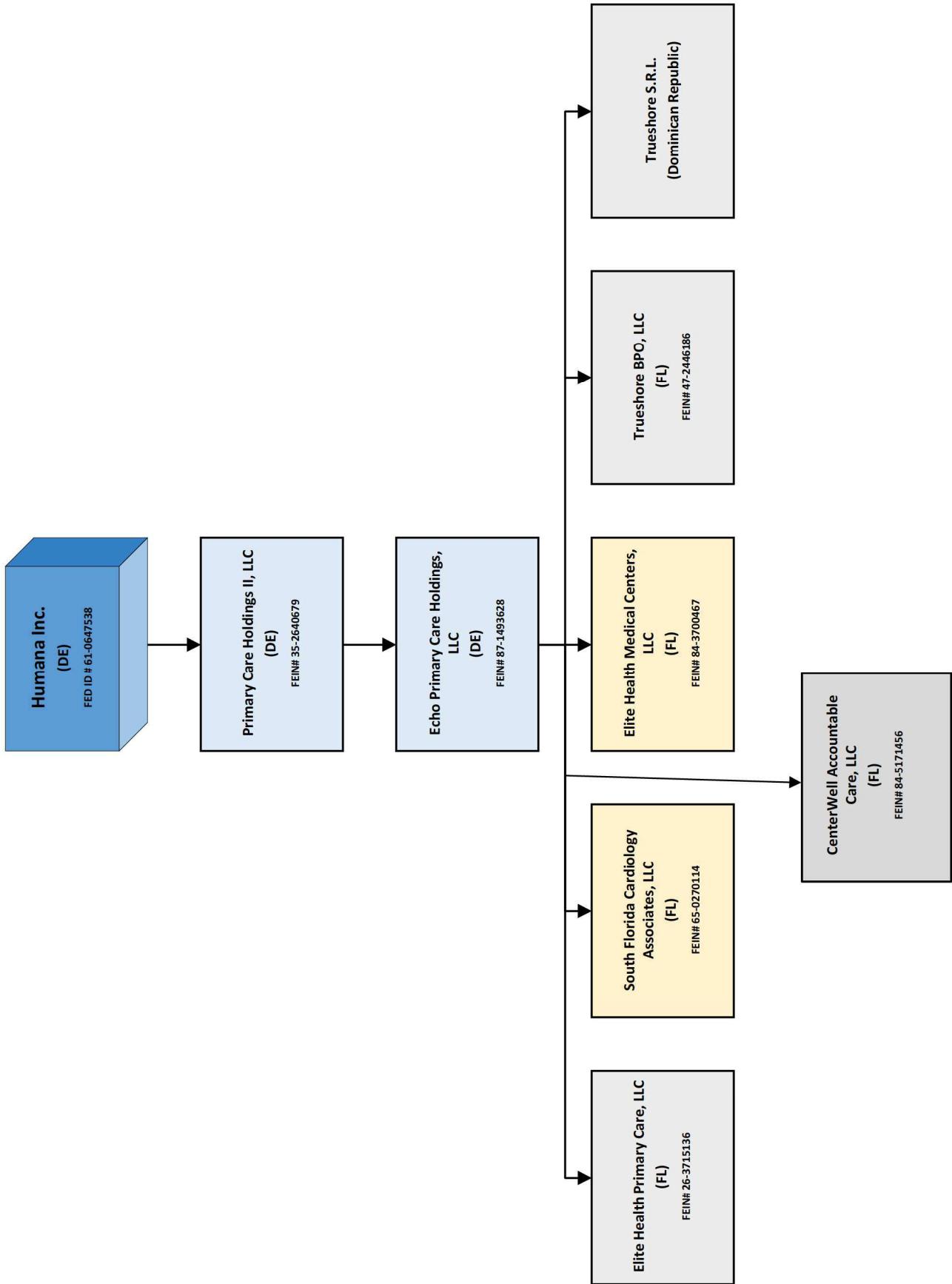


Blue boxes indicate companies with employees

boxes indicate
licensed with
HCA

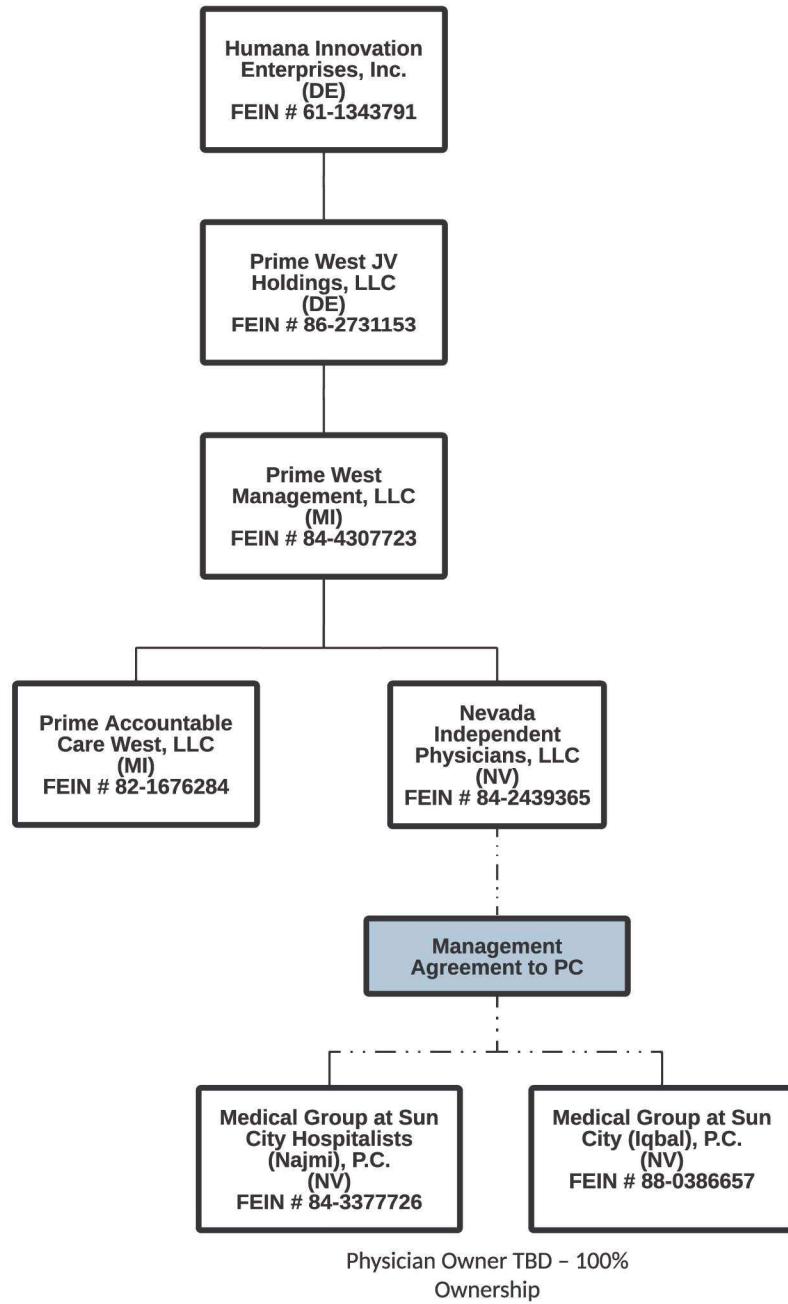
Physician Ownership of PAs and PCs

- 1) Conviva Health Management of Texas, PLLC – An Tang, M.D. – 100%
- 2) Conviva Medical Center Management of Texas P.A. – An Tang, M.D. – 100%
- 3) CenterWell Senior Primary Care (KS), PA. – CenterWell Senior Primary Care (NC), PC – 100%
- 4) CenterWell Senior Primary Care (MO), PC – CenterWell Senior Primary Care (NC), PC – 100%
- 5) CenterWell Senior Primary Care (NC), PC – John Savage-Jeter, M.D. – 100%
- 6) CenterWell Senior Primary Care (SC), PC – CenterWell Senior Primary Care (NC), PC – 100%
- 7) Transcend Community Physician Network, PC – John Pigott, M.D. – 100%
- 8) Transcend Community Physician Network (AR), PA – TBD
- 9) Transcend Community Physician Network (KS), PA –

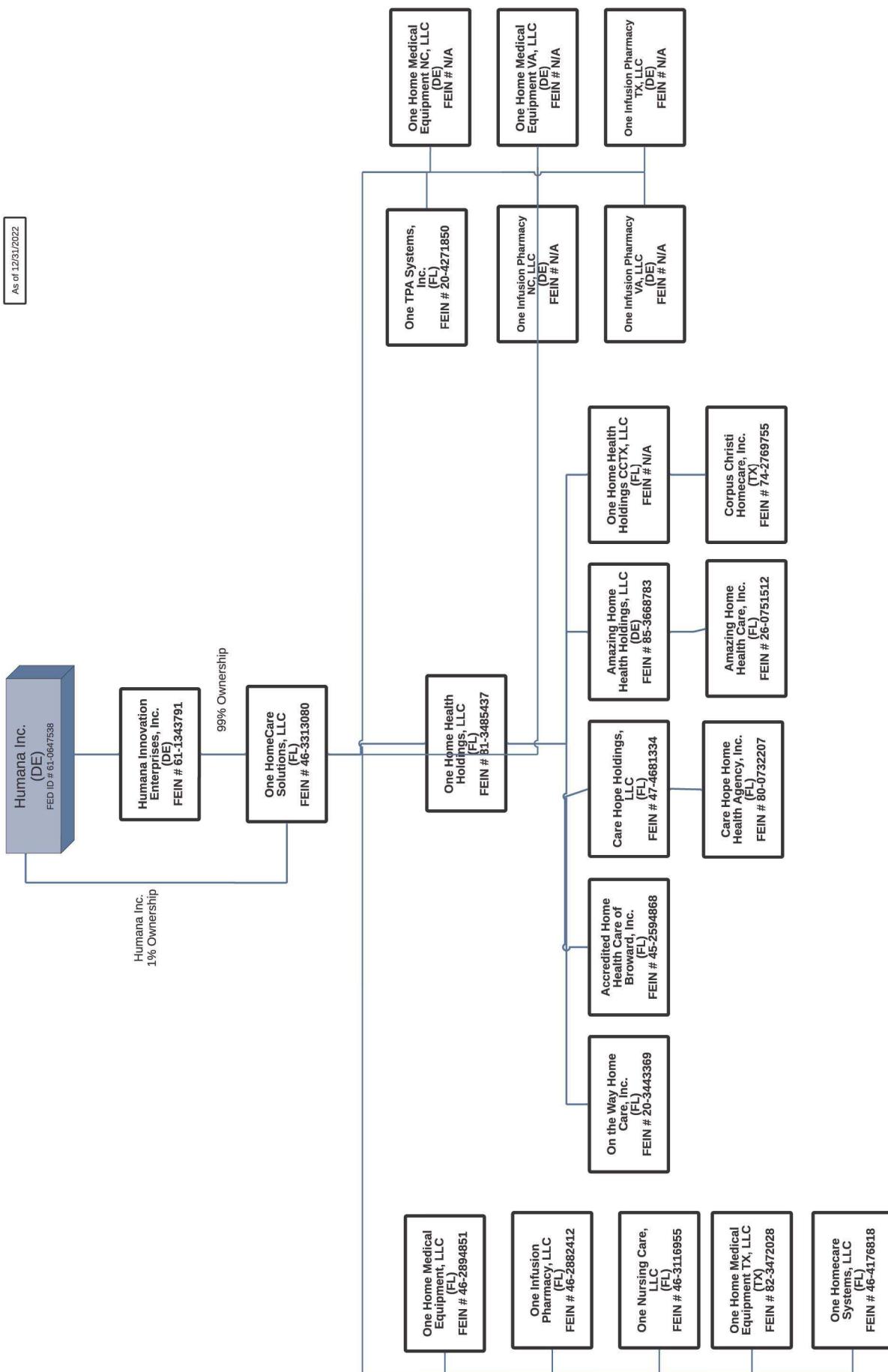
Echo Primary Care Holdings Organization Chart

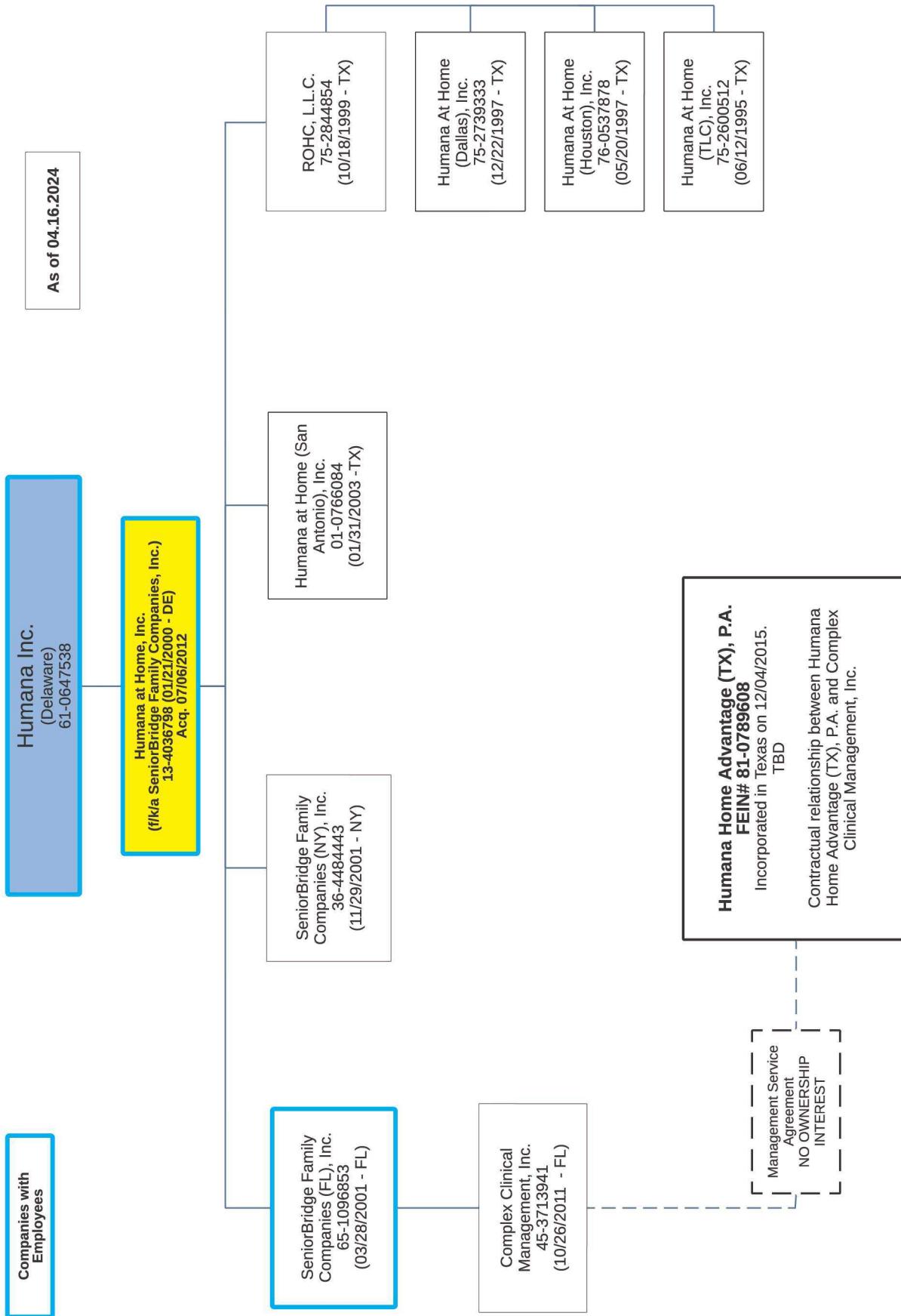
Prime West Organizational Chart

As of 06/30/2022

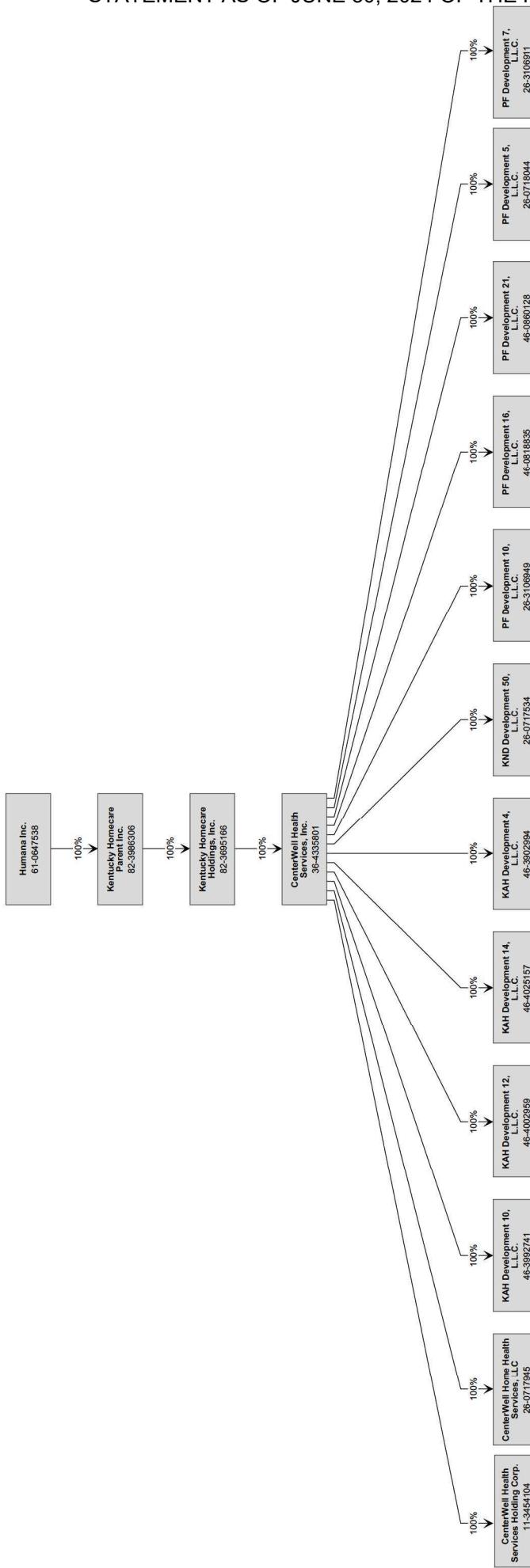


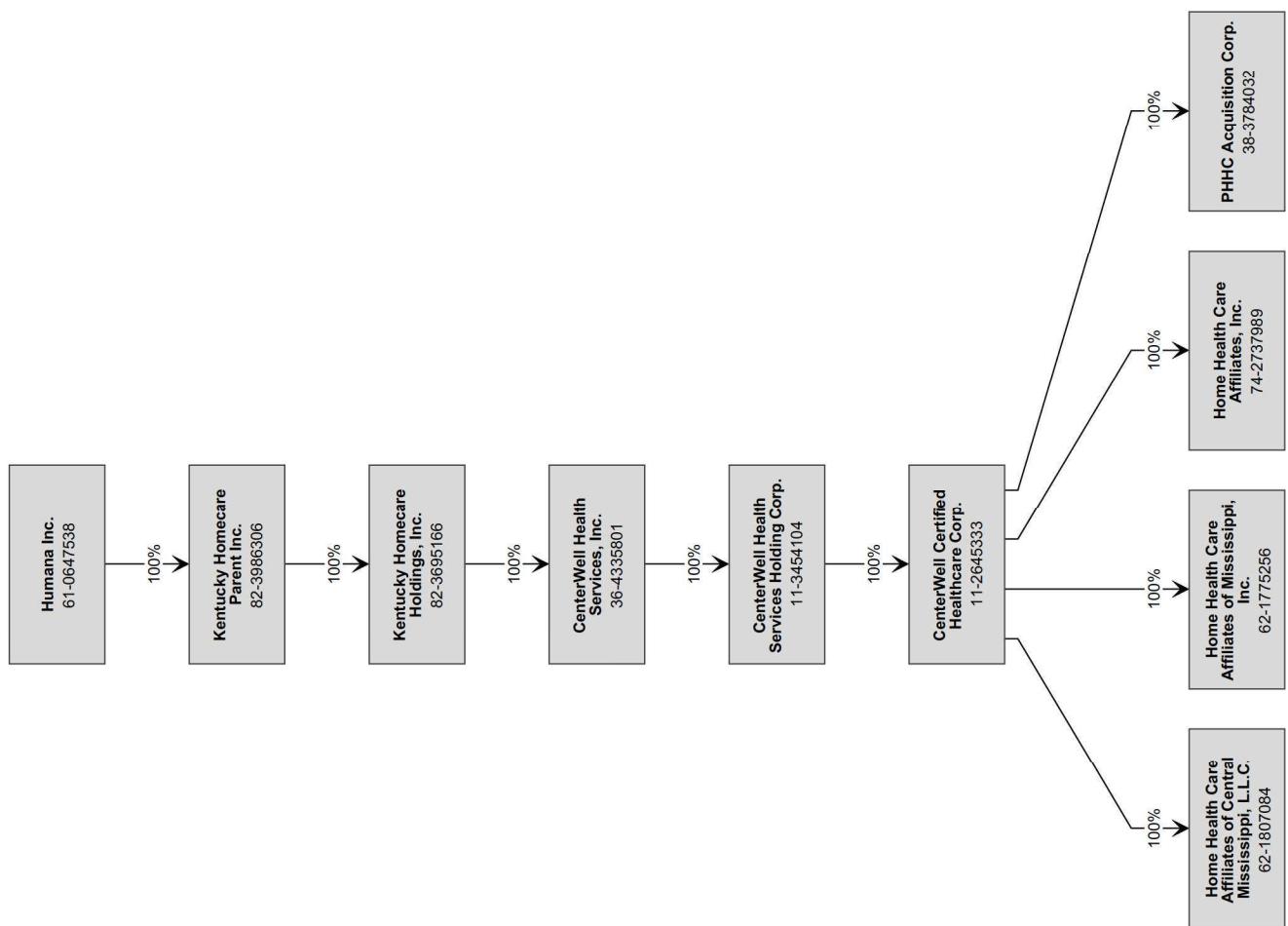
STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

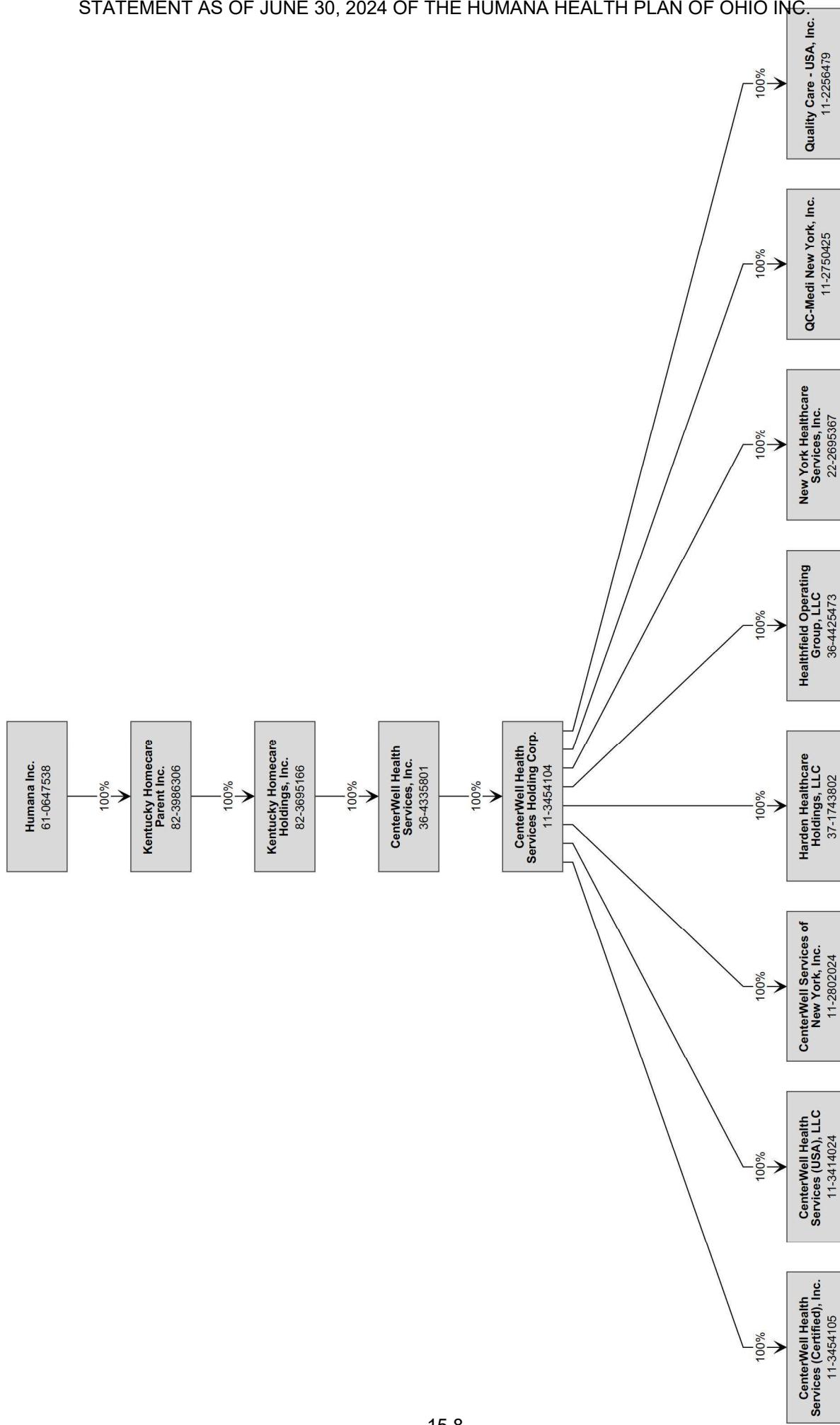


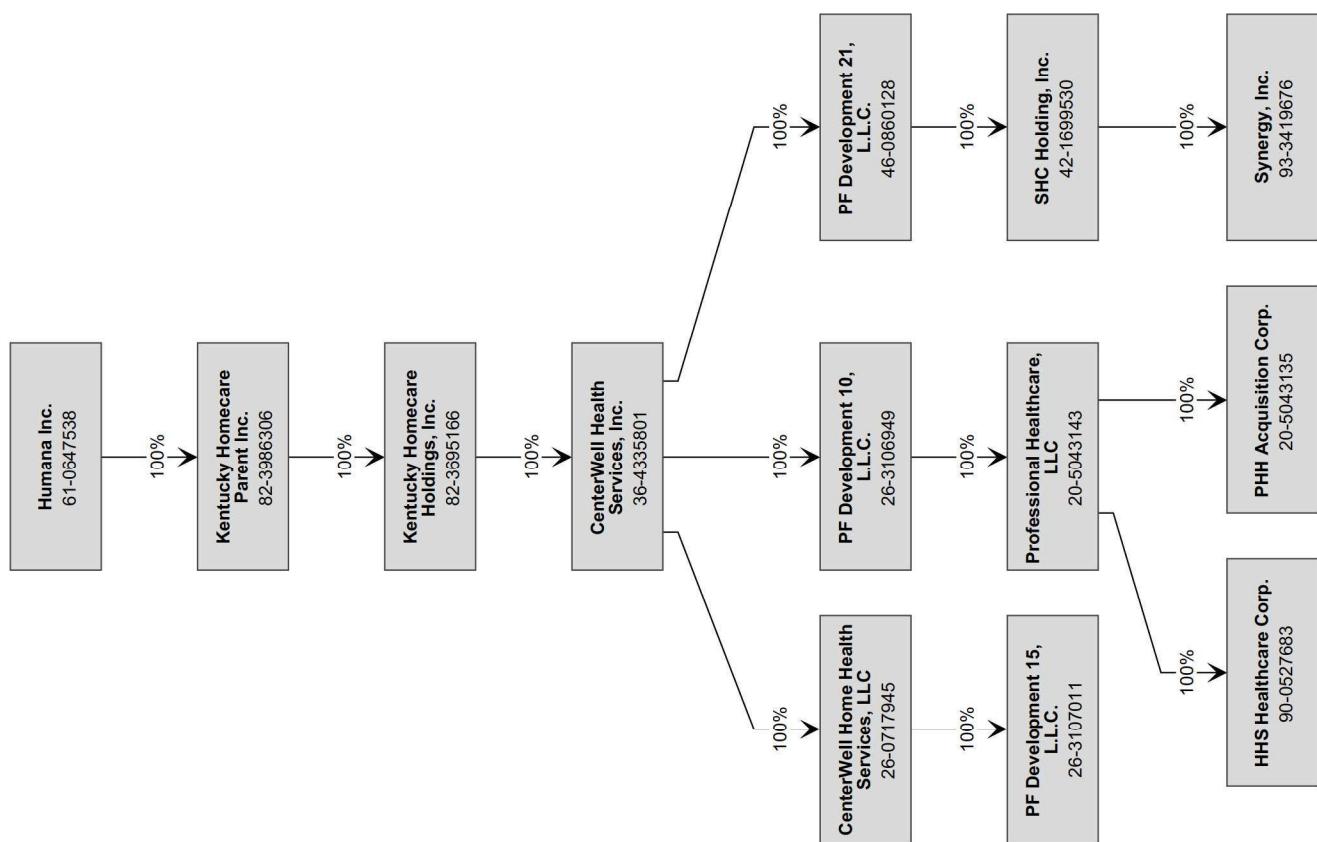


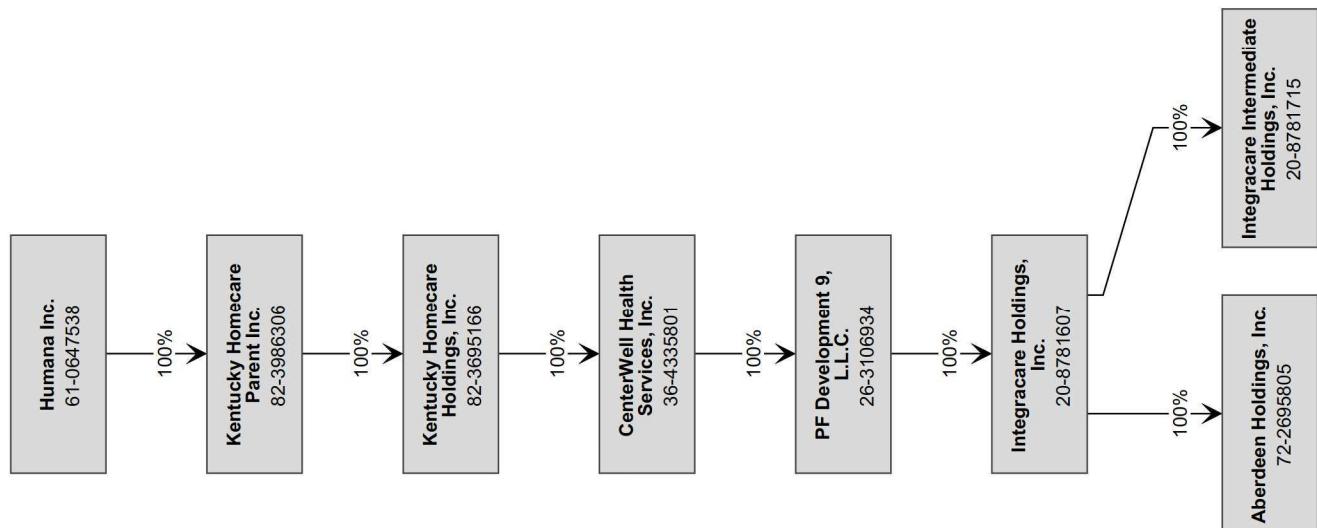
STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

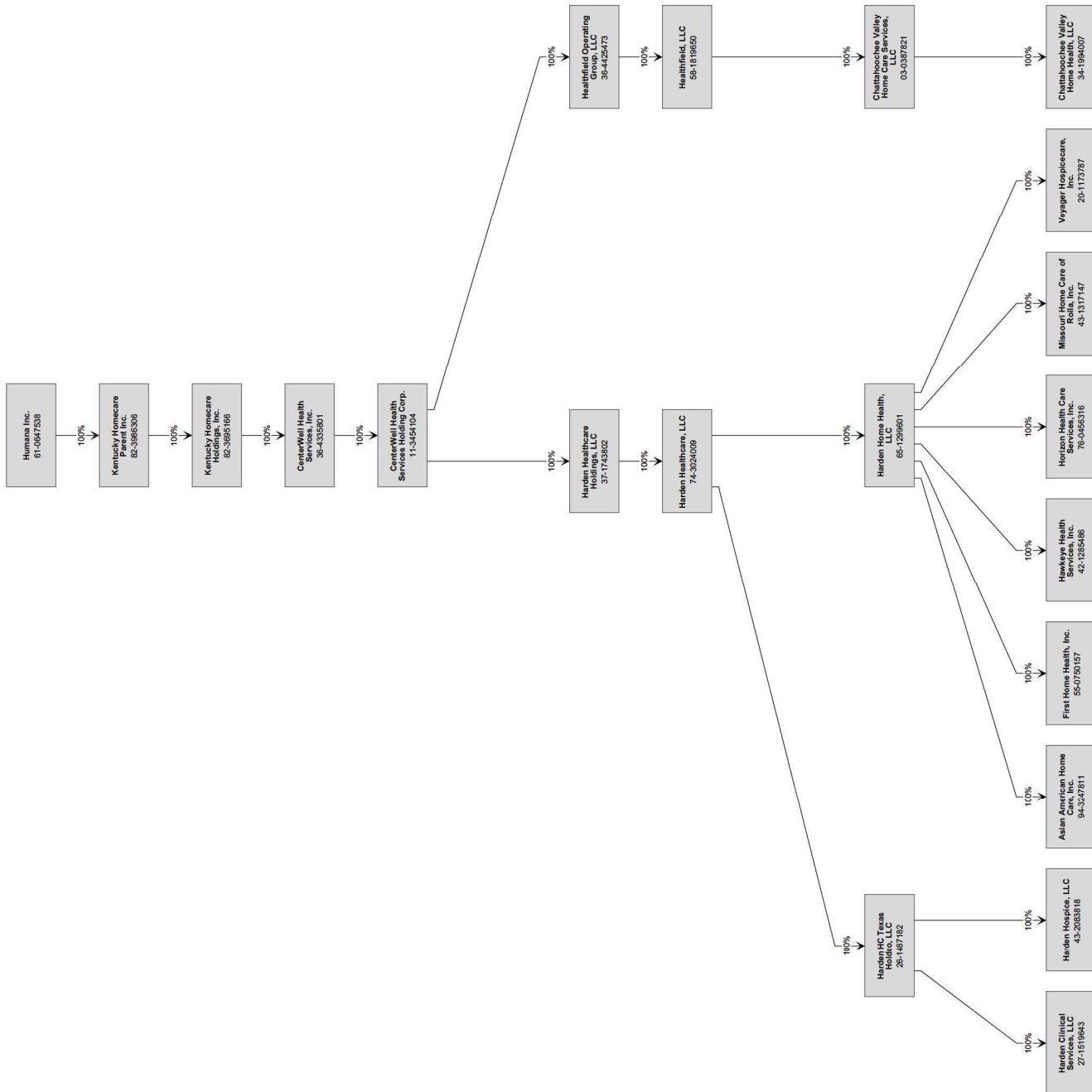




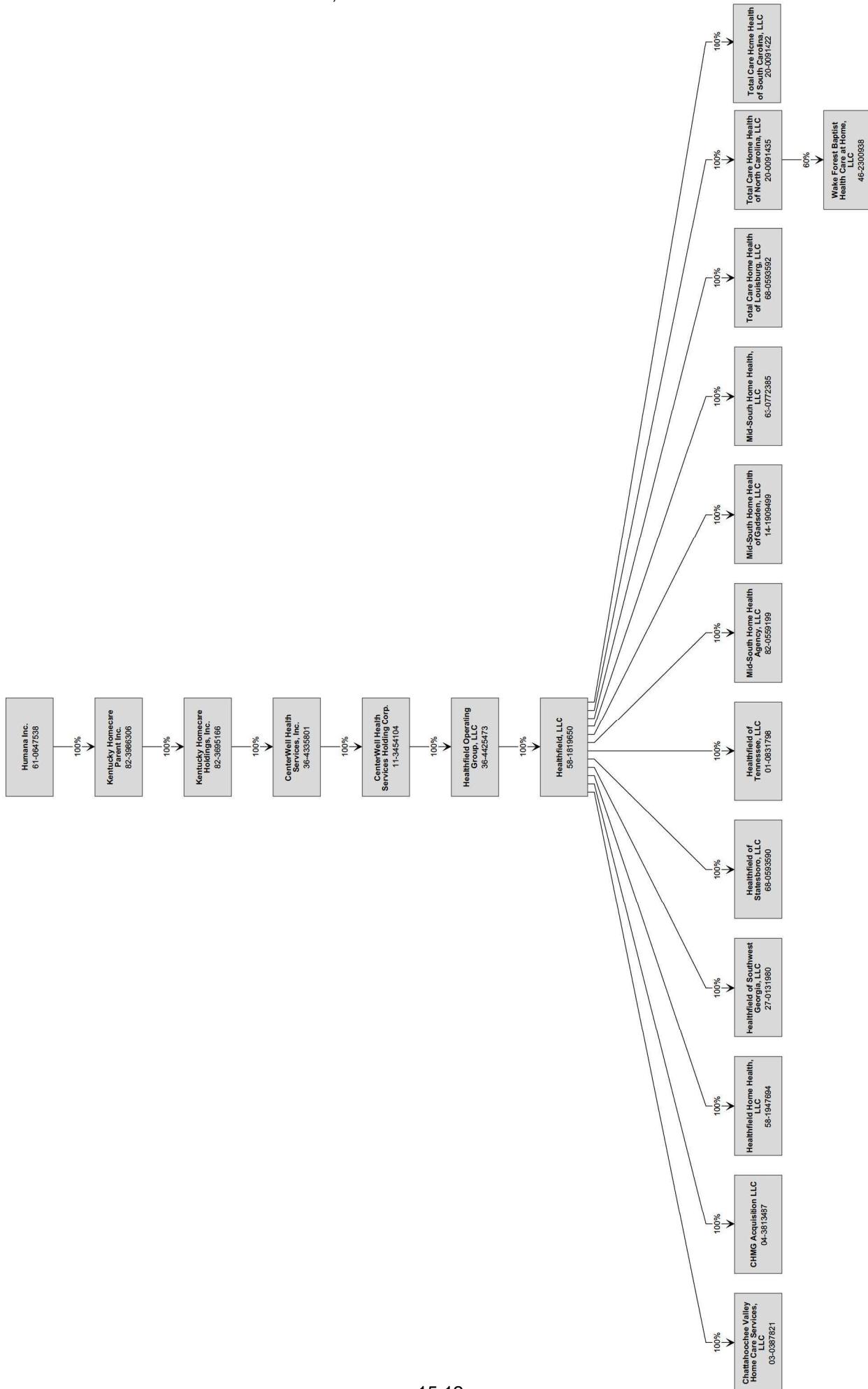


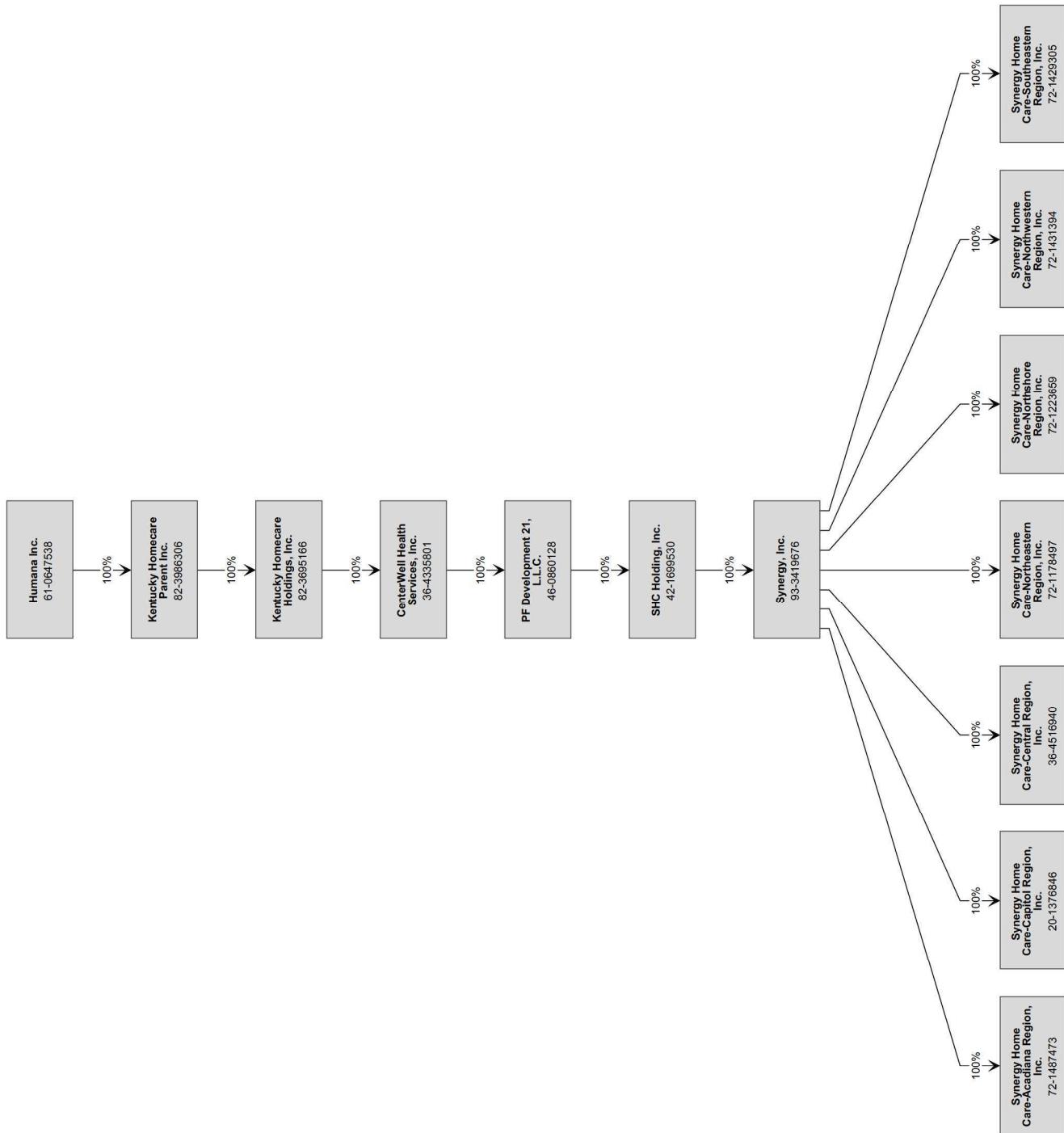




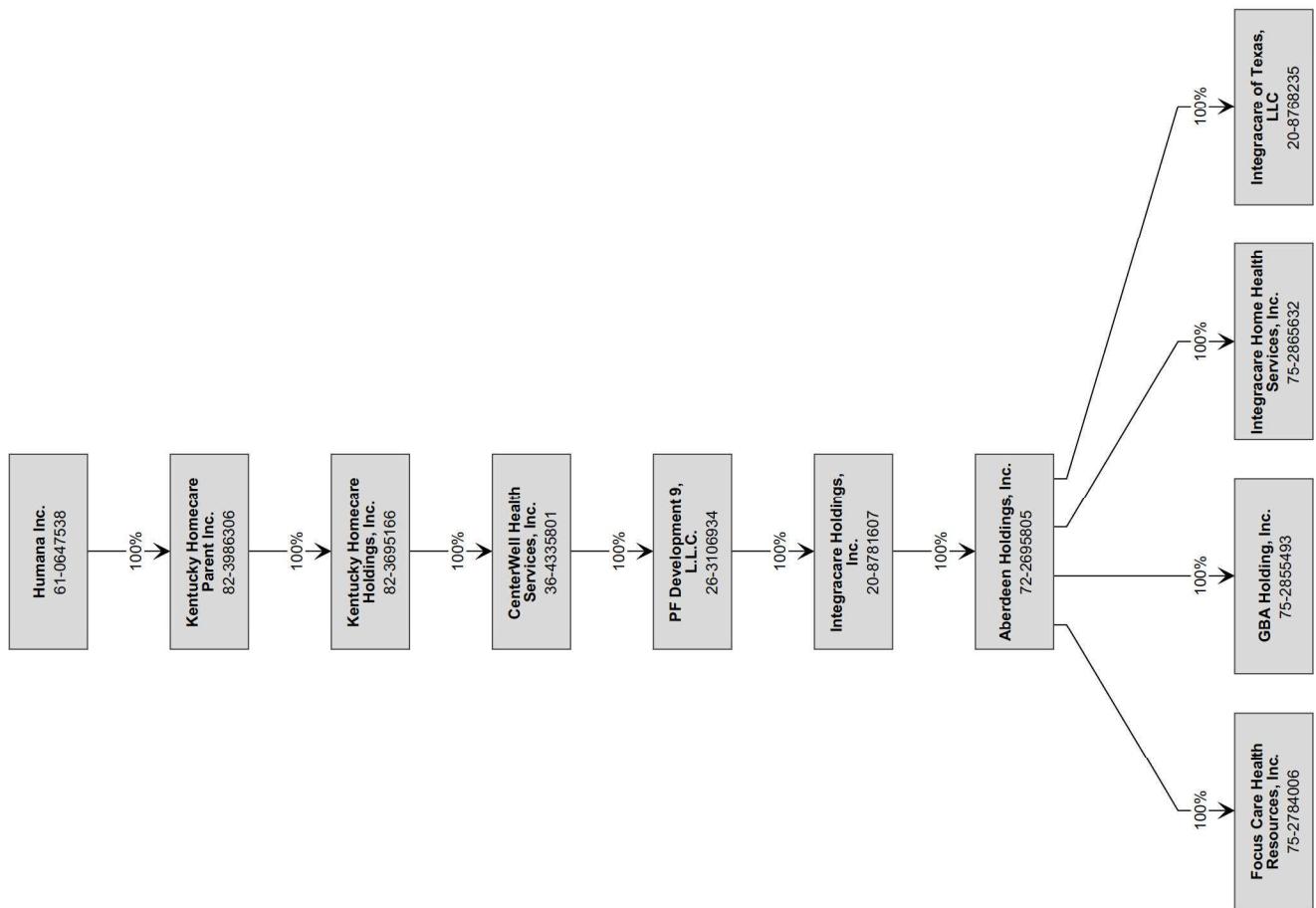


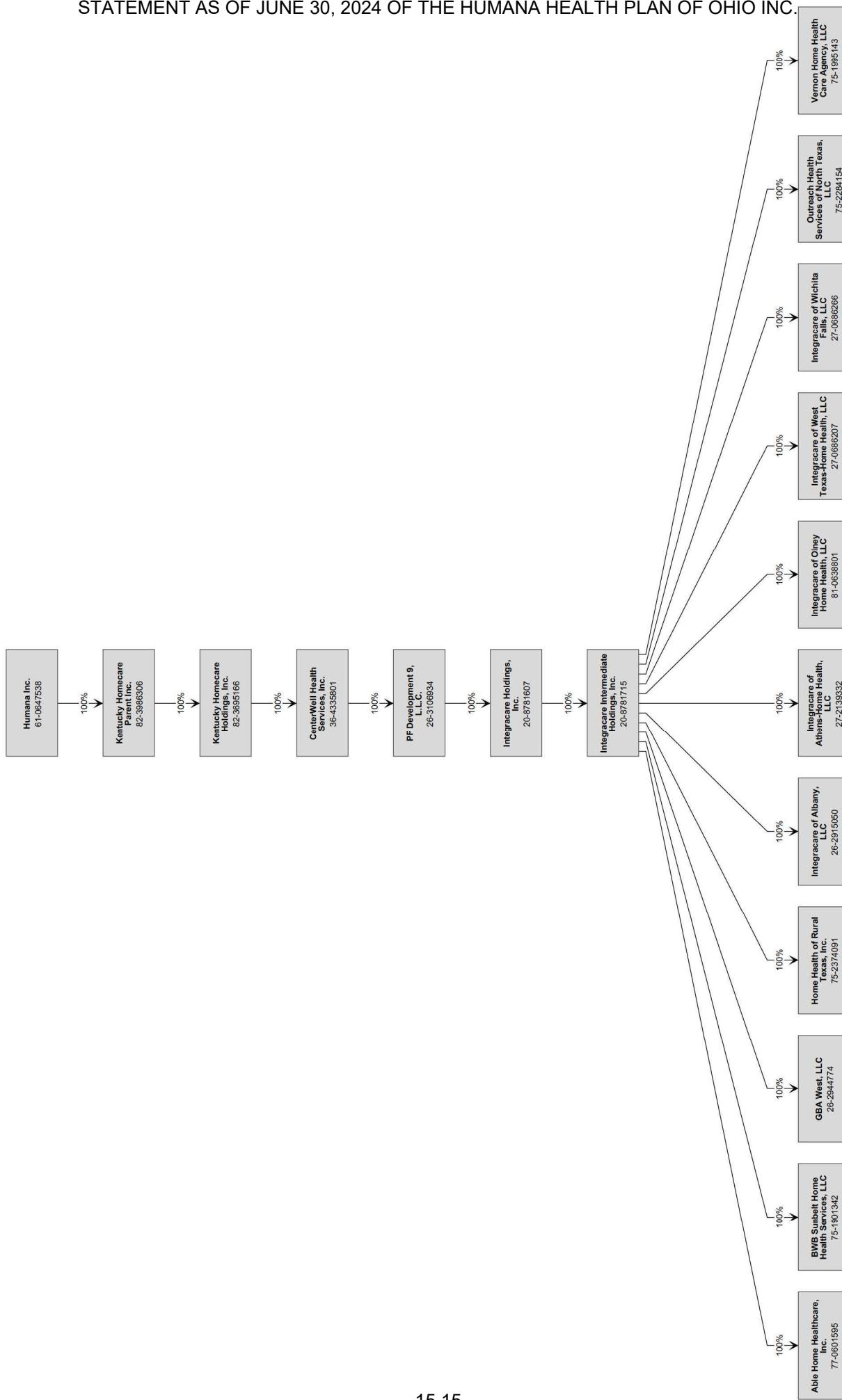
STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

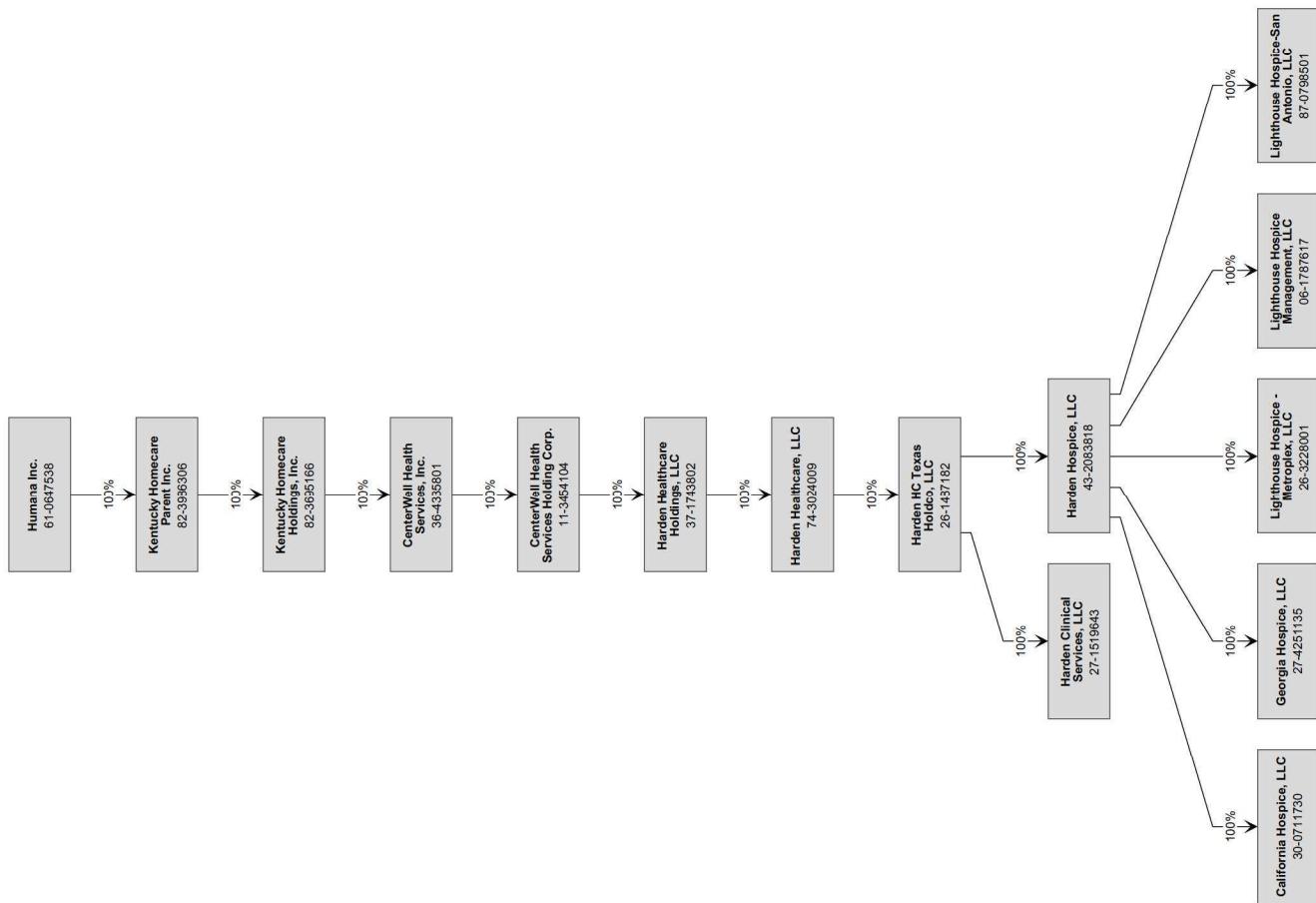


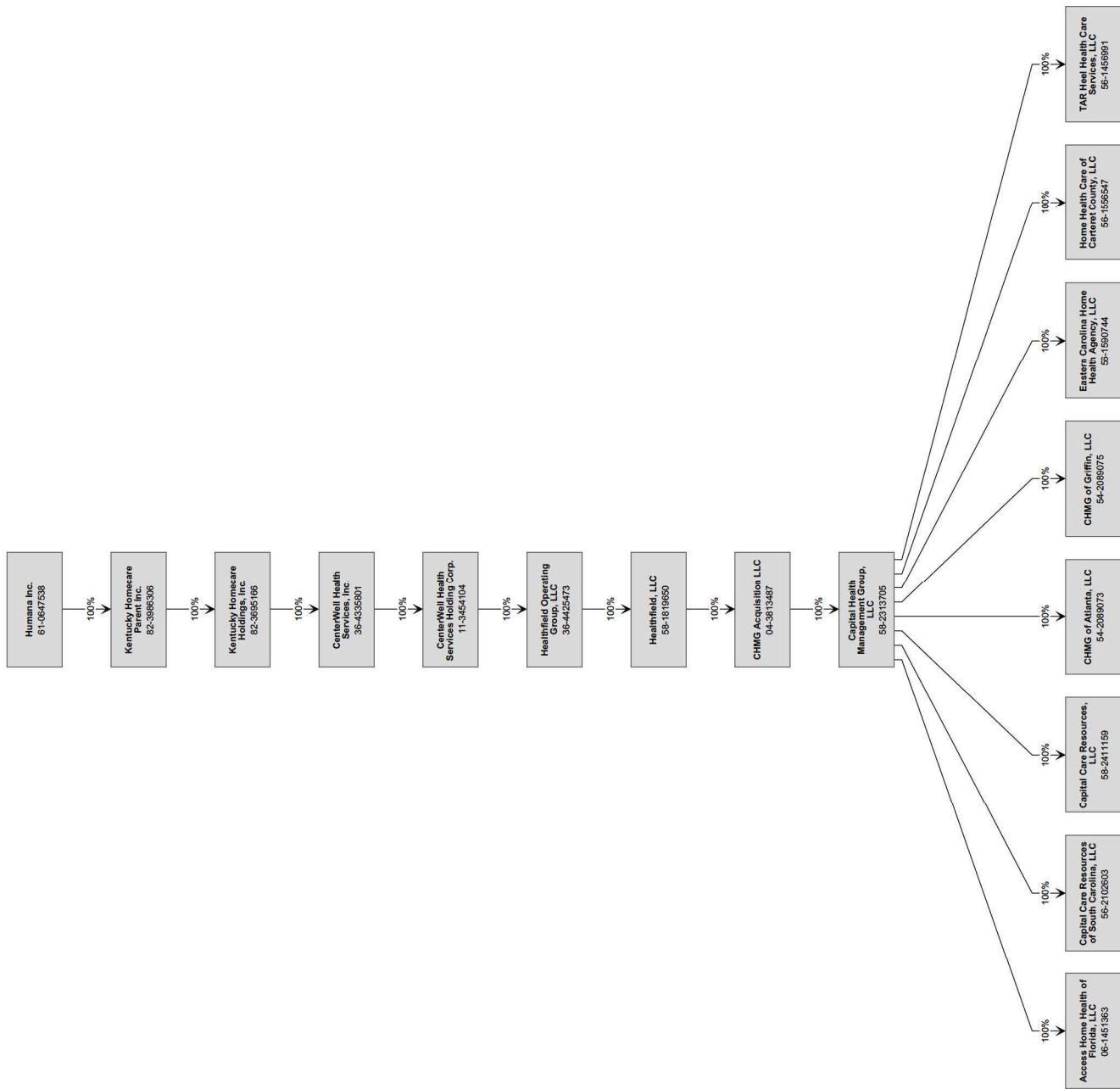


STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

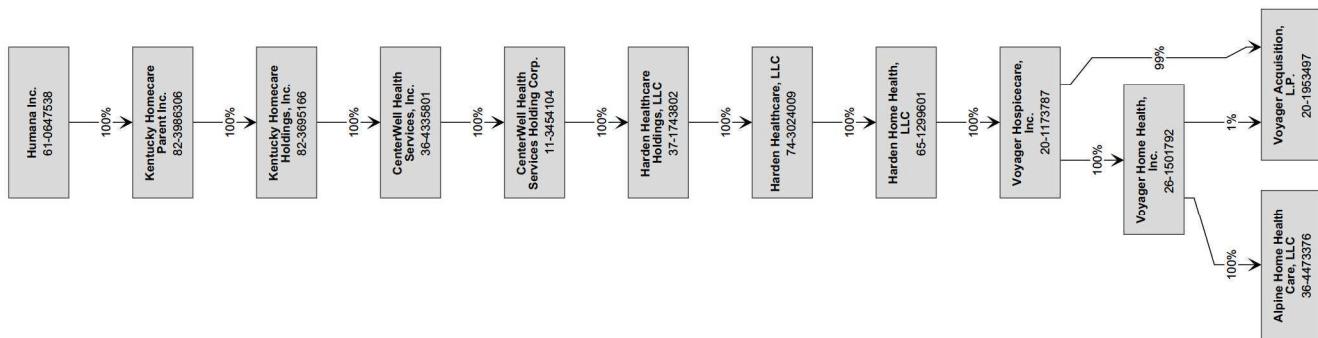




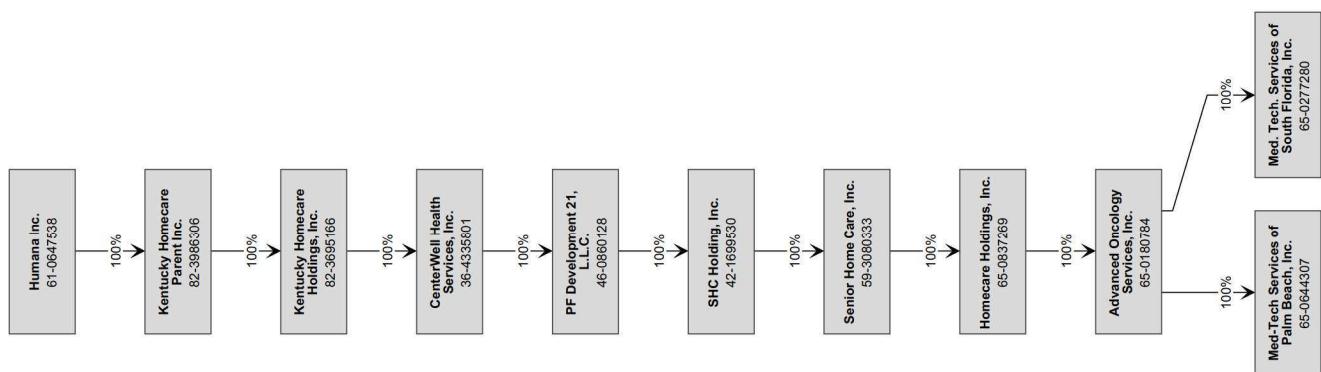




STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.



STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.



STATEMENT AS OF JUNE 30, 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 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			CDD 1, LLC	DE.....NIA.....	HJM Provider Holdings, LLC	Ownership.....	100.000 ...	Humana Inc.	NO.....	0.....		
.0119	Humana Inc.	00000	32-0545504			CDD 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 JUNE 30, 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.....	100.000	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.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	73288	39-1263473			Humana Insurance Company	..WI....	..IA....	CareNetwork, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	60219	61-1311685			Humana Insurance Company of Kentucky	..KY....	..IA....	Humana Insurance Company	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	12634	20-2888723			Humana Insurance Company of New York	..NY....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	84603	66-0291868			Humana Insurance of Puerto Rico, Inc.	..PR....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	20-3364857			Humana MarketPOINT of Puerto Rico, Inc.	..PR....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	61-1343508			Humana MarketPOINT, Inc.	..KY....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	14224	27-3991410			Humana Medical Plan of Michigan, Inc.	..MI....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	14462	27-4660531			Humana Medical Plan of Pennsylvania, Inc.	..PA....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	12908	20-8411422			Humana Medical Plan of Utah, Inc.	..UT....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	95270	61-1103898			Humana Medical Plan, Inc.	..FL....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	45-2254346			Humana Pharmacy Solutions, Inc.	..KY....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	61-1316926			CenterWell Pharmacy, Inc.	..DE....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	12282	20-2036444			Humana Regional Health Plan, Inc.	..AR....	..IA....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	26-4522426			Humana WellWorks LLC	..DE....		NIA.....	Health Value Management, Inc.	Ownership.....	100.000	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.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1364005			HumanaDental Insurance Company	..WI....	..IA....	HumanaDental, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	27-4535747			HumanaDental, Inc.	..DE....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	61-1239538			Go365, LLC	..DE....		NIA.....	HumanaWellworks LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	61-1383567			Humco, Inc.	..KY....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	61-1383567			HUM-eFL, Inc.	..FL....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	86-1050795			Hummingbird Coaching Systems LLC	..OH....		NIA.....	Harris, Rothenberg International Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	11695	39-1769093			Independent Care Health Plan	..WI....	..IA....	CareNetwork, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	61-1232669			Managed Care Indemnity, Inc.	..VT....		IA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	20-5569675			Conviva Group Holdings, LLC	..DE....		NIA.....	Metropolitan Health Networks, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	20-5904436			Conviva Medical Center Management, LLC	..DE....		NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	81-2957926			Conviva Speciality, LLC	..FL....		NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	65-0879131			METCARE of Florida, Inc.	..FL....		NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	65-0635728			Metropolitan Health Networks, Inc.	..FL....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	62-1552091			PHP Companies, Inc.	..TN....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	62-1250945			Preferred Health Partnership, Inc.	..TN....		NIA.....	PHP Companies, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	20-1724127			Humana Real Estate Company	..KY....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	46-1225873			Conviva Health MSO of Texas, Inc.	..DE....		NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	75-2844854			ROHC, L.L.C.	..TX....		NIA.....	Humana at Home, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	65-1096853			SeniorBridge Family Companies (FL), Inc.	..FL....		NIA.....	Humana at Home, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	36-4484443			SeniorBridge Family Companies (NY), Inc.	..NY....		NIA.....	Humana at Home, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	01-0766084			Humana At Home (San Antonio), Inc.	..TX....		NIA.....	Humana at Home, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	74-2352809			Texas Dental Plans, Inc.	..TX....		NIA.....	Humana Dental Company	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	54739	52-1157181			The Dental Concern, Inc.	..KY....	..IA....	HumanaDental, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0	
.0119	Humana Inc.	00000	75-2600512			Humana At Home (TLC), Inc.	..TX....		NIA.....	ROHC, L.L.C.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	80-0072760			Humana Digital Health and Analytics Platform Services, Inc.	..DE....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	46-5329373			Conviva Health Management, LLC	..DE....		NIA.....	Conviva Group Holdings, LLC	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	66-0872725			Humana Management Services of Puerto Rico, Inc.	..PR....		NIA.....	Humana Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0
.0119	Humana Inc.	00000	83-3321367			North Region Providers, LLC	..DE....		NIA.....	Humana Government Business, Inc.	Ownership.....	100.000	Humana Inc.	...NO....	0

STATEMENT AS OF JUNE 30, 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 JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

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

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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					.TX....	.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					.TX....	.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 ...	Professional Healthcare, LLC .....	...NO....	0
.0119	Humana Inc.	00000	62-1775256					.MS....	.NIA....	Home Health Care Affiliates of Central Mississippi, L.L.C.	Ownership.....	100.000 ...	CenterWell Certified Healthcare Corp. ....	...NO....	0
.0119	Humana Inc.	00000	74-2737989					.MS....	.NIA....	Home Health Care Affiliates of Mississippi, Inc.	Ownership.....	100.000 ...	CenterWell Certified Healthcare Corp. ....	...NO....	0
.0119	Humana Inc.	00000	56-1556547					.MS....	.NIA....	Home Health Care Affiliates, Inc.	Ownership.....	100.000 ...	CenterWell Certified Healthcare Corp. ....	...NO....	0
.0119	Humana Inc.	00000	75-2374091					.NC....	.NIA....	Home Health Care of Carteret County, LLC	Ownership.....	100.000 ...	CenterWell Certified Healthcare Corp. ....	...NO....	0
.0119	Humana Inc.	00000	87-0494759					.TX....	.NIA....	Home Health of Rural Texas, Inc.	Ownership.....	100.000 ...	CenterWell Certified Healthcare Corp. ....	...NO....	0
.0119	Humana Inc.	00000	65-0837269					.UT....	.NIA....	Home Health Services, Inc.	Ownership.....	100.000 ...	Integracare Intermediate Holdings, Inc. ....	...NO....	0
.0119	Humana Inc.	00000	76-0456316					.FL....	.NIA....	Horizon Health Care Services, Inc.	Ownership.....	100.000 ...	Integracare Operating Group, LLC .....	...NO....	0
.0119	Humana Inc.	00000	20-8781607					.TX....	.NIA....	Integracare Holdings, Inc.	Ownership.....	100.000 ...	Integracare Holdings, Inc. ....	...NO....	0
.0119	Humana Inc.	00000	75-2865632					.DE....	.NIA....	Integracare Home Health Services, Inc.	Ownership.....	100.000 ...	Integracare Home Health Services, Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-8781715					.TX....	.NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Integracare Intermediate Holdings, Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-2915050					.TX....	.NIA....	Integracare of Albany, LLC	Ownership.....	100.000 ...	Integracare of Albany, LLC .....	...NO....	0
.0119	Humana Inc.	00000	27-2139332					.TX....	.NIA....	Integracare of Athens Home Health, LLC	Ownership.....	100.000 ...	Integracare of Athens Home Health, LLC .....	...NO....	0

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

SCHEDULE Y
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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.....	and 1% owned by Professional Healthcare, LLC	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

STATEMENT AS OF JUNE 30, 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 Per-centage	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
.0119	Humana Inc.	00000	46-2300938			Wake Forest Baptist Health Care at Home, LLC	..NC.... NIA....	60% owned by Total Care Home Health of North Carolina, LLC and 40% owned by Wake 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....	Forest University Baptist Medical Center		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	84-5171456			Trueshore S.R. I. ....	..DOM.... NIA....	Echo Primary Care Holdings, LLC		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	87-3584872			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....	Amicus Medical Center 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			Altercare of Palm Beach County, LLC .....	..FL.... NIA....	Vitality Home Care, Inc.		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-7287186			Altercare, 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
.0119	Humana Inc.	00000				Bridges Home Health, Inc. ....	..FL.... NIA....	Vitality Home Care, Inc.		Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0

STATEMENT AS OF JUNE 30, 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 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 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.

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.

YES

Explanation:

1. This type of business is not written.

Bar Code:

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



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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	11,532,689	92,030,786
3. Accrual of discount	170,972	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	6,242,121	48,809,194
7. Deduct amortization of premium	134,251	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)	92,329,099	86,994,366
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	92,329,099	86,994,366

STATEMENT AS OF JUNE 30, 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
BONDS								
1. NAIC 1 (a)	161,338,222	647,022,671	642,288,970	933,765	161,338,222	167,005,688	0	204,511,252
2. NAIC 2 (a)	41,590,883	417,261,421	427,852,182	624,110	41,590,883	31,624,232	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	202,929,105	1,064,284,092	1,070,141,152	1,557,875	202,929,105	198,629,920	0	206,709,667
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	202,929,105	1,064,284,092	1,070,141,152	1,557,875	202,929,105	198,629,920	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 \$77,837,368 ; NAIC 2 \$28,463,453 ; 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	2,159,014,364	2,713,064,740
3. Accrual of discount	3,285,413	4,330,815
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	11	(2)
6. Deduct consideration received on disposals	2,182,138,611	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)	108,225,832	128,064,655
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	108,225,832	128,064,655

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 JUNE 30, 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-KU-4	UNITED STATES TREASURY .....		....06/07/2024	CITADEL SECURITIES LLC		217,470	....215,000		272
0109999999. Subtotal - Bonds - U.S. Governments						217,470	215,000		1.A
3132DII-GF-4	FH SD8298 - RMBS .....		....04/10/2024	GOLDMAN	234,197		....249,977		344
3132DII-GH-0	FH SD8300 - RMBS .....		....05/29/2024	GOLDMAN	441,056		....450,452		1,996
3133KR-M3-5	FH RA9378 - RMBS .....		....05/29/2024	GOLDMAN	177,797		....181,454		804
3140A0-AR-0	FN DA0015 - RMBS .....		....05/29/2024	BARCLAY INVESTMENTS, INC.	142,693		....145,756		646
31400S-3Y-5	FN CB7114 - RMBS .....		....05/29/2024	CITIGROUP GLOBAL MARKETS INC.	517,147		....528,038		2,340
31418E-HK-9	FN MA4733 - RMBS .....		....04/01/2024	GOLDMAN	1,291,556		....1,362,895		341
0909999999. Subtotal - Bonds - U.S. Special Revenues						2,804,447	2,918,573		6,469
202795-JZ-4	COMMONWEALTH EDISON CO .....		....05/06/2024	US BANCORP INVESTMENTS INC.	99,642		....100,000		0
341081-GU-5	FLORIDA POWER & LIGHT CO .....		....05/28/2024	CITIGROUP GLOBAL MARKETS INC.	164,437		....165,000		1.D FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						264,079	265,000		0
2509999997. Total - Bonds - Part 3						3,285,996	3,398,573		6,741
2509999998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
2509999999. Total - Bonds						3,285,996	3,398,573		6,741
4509999997. Total - Preferred Stocks - Part 3						0	XXX		XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks						0	XXX		XXX
5989999997. Total - Common Stocks - Part 3						0	XXX		0
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks						0	XXX		0
5999999999. Total - Preferred and Common Stocks						0	XXX		0
6009999999 - Totals						3,285,996	XXX		6,741

STATEMENT AS OF JUNE 30, 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	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	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				
..181059-UM-6	CLARK QNTY NEV SCH DIST			06/15/2024	Maturity @ 100.00			510,000	510,000	631,421	517,356	0	(7,356)	0	(7,356)	0	510,000	0	0	0	12,750	06/15/2024	1.E FE	
07099999999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions								510,000	510,000	631,421	517,356	0	(7,356)	0	(7,356)	0	510,000	0	0	0	12,750	XXX	XXX	
..3131XX-WS-6	FH ZM4257 - RMBS			06/01/2024	Paydown			2,276	2,276	2,423	2,506	0	(230)	0	(230)	0	2,276	0	0	0	0	34	09/01/2047	1.A
..3132DM-4N-2	FH SD0829 - RMBS			06/01/2024	Paydown			24,044	24,044	24,802	24,761	0	(717)	0	(717)	0	24,044	0	0	0	0	301	01/01/2052	1.A
..3132DN-5C-3	FH SD1743 - RMBS			06/01/2024	Paydown			3,902	3,902	3,705	3,705	0	198	0	198	0	3,902	0	0	0	0	61	10/01/2052	1.A
..3132DN-7K-3	FH SD1798 - RMBS			06/01/2024	Paydown			758	758	769	768	0	(11)	0	(11)	0	758	0	0	0	0	17	11/01/2052	1.A
..3132DN-7L-1	FH SD1799 - RMBS			06/01/2024	Paydown			1,503	1,503	1,523	1,522	0	(19)	0	(19)	0	1,503	0	0	0	0	37	11/01/2052	1.A
..3132DN-E2-5	FH SD1053 - RMBS			06/01/2024	Paydown			1,945	1,945	1,954	1,954	0	(8)	0	(8)	0	1,945	0	0	0	0	27	06/01/2052	1.A
..3132DN-G5-6	FH SD1120 - RMBS			06/01/2024	Paydown			3,348	3,348	3,404	3,403	0	(55)	0	(55)	0	3,348	0	0	0	0	66	06/01/2052	1.A
..3132DN-NS-8	FH SD1301 - RMBS			06/01/2024	Paydown			28,222	28,222	28,896	28,876	0	(654)	0	(654)	0	28,222	0	0	0	0	550	07/01/2052	1.A
..3132DN-QH-9	FH SD1356 - RMBS			06/01/2024	Paydown			33,120	33,120	33,840	33,823	0	(703)	0	(703)	0	33,120	0	0	0	0	720	07/01/2052	1.A
..3132DN-VJ-9	FH SD1517 - RMBS			06/01/2024	Paydown			802	802	803	803	0	(11)	0	(11)	0	802	0	0	0	0	15	09/01/2052	1.A
..3132DN-VR-1	FH SD1524 - RMBS			06/01/2024	Paydown			1,328	1,328	1,261	1,261	0	(67)	0	(67)	0	1,328	0	0	0	0	20	08/01/2052	1.A
..3132DN-Y5-6	FH SD1632 - RMBS			06/01/2024	Paydown			2,725	2,725	2,731	2,730	0	(5)	0	(5)	0	2,725	0	0	0	0	62	09/01/2052	1.A
..3132DN-Y7-2	FH SD1634 - RMBS			06/01/2024	Paydown			1,148	1,148	1,154	1,154	0	(6)	0	(6)	0	1,148	0	0	0	0	30	09/01/2052	1.A
..3132DN-Y8-0	FH SD1635 - RMBS			06/01/2024	Paydown			2,848	2,848	2,886	2,884	0	(35)	0	(35)	0	2,848	0	0	0	0	60	09/01/2052	1.A
..3132DP-KY-3	FH SD2111 - RMBS			06/01/2024	Paydown			635	635	618	619	0	(17)	0	(17)	0	635	0	0	0	0	12	12/01/2052	1.A
..3132DQ-C6-1	FH SD2793 - RMBS			06/01/2024	Paydown			613	613	598	598	0	(15)	0	(15)	0	613	0	0	0	0	10	03/01/2053	1.A
..3132DQ-QV-1	FH SD3168 - RMBS			06/01/2024	Paydown			859	859	852	852	0	(7)	0	(7)	0	859	0	0	0	0	19	06/01/2053	1.A
..3132DS-B3-5	FH SD4558 - RMBS			06/01/2024	Paydown			11,099	11,099	10,506	10,505	0	594	0	594	0	11,099	0	0	0	0	184	10/01/2052	1.A
..3132DV-PZ-4	FH SD8064 - RMBS			06/01/2024	Paydown			2,093	2,093	2,003	2,002	0	(91)	0	(91)	0	2,093	0	0	0	0	32	05/01/2050	1.A
..3132DV-LA-1	FH SD7521 - RMBS			06/01/2024	Paydown			6,068	6,068	6,495	6,526	0	(458)	0	(458)	0	6,068	0	0	0	0	64	07/01/2050	1.A
..3132DV-LC-7	FH SD7523 - RMBS			06/01/2024	Paydown			2,910	2,910	3,104	3,120	0	(210)	0	(210)	0	2,910	0	0	0	0	31	08/01/2050	1.A
..3132DV-LV-5	FH SD7540 - RMBS			06/01/2024	Paydown			3,559	3,559	3,753	3,751	0	(192)	0	(192)	0	3,559	0	0	0	0	37	05/01/2051	1.A
..3132DW-GF-4	FH SD8298 - RMBS			06/01/2024	Paydown			3,166	3,166	2,966	2,966	0	200	0	200	0	3,166	0	0	0	0	19	02/01/2053	1.A
..3132DW-GH-0	FH SD8300 - RMBS			06/01/2024	Paydown			3,588	3,588	3,514	3,514	0	(75)	0	(75)	0	3,588	0	0	0	0	16	02/01/2053	1.A
..3132EO-E5-7	FH SD3756 - RMBS			06/01/2024	Paydown			31,872	31,872	30,937	30,938	0	934	0	934	0	31,872	0	0	0	0	567	09/01/2053	1.A
..3132EO-E6-5	FH SD3757 - RMBS			06/01/2024	Paydown			6,152	6,152	5,991	5,991	0	161	0	161	0	6,152	0	0	0	0	111	08/01/2053	1.A
..3132EO-ZJ-4	FH SD4345 - RMBS			06/01/2024	Paydown			31,762	31,762	30,789	30,789	0	973	0	973	0	31,762	0	0	0	0	595	10/01/2053	1.A
..3133AY-P5-0	FH Q42244 - RMBS			06/01/2024	Paydown			319	319	338	346	0	(27)	0	(27)	0	319	0	0	0	0	4	07/01/2046	1.A
..3133AS-KA-0	FH QC7489 - RMBS			06/01/2024	Paydown			1,087	1,087	1,105	1,103	0	(17)	0	(17)	0	1,087	0	0	0	0	9	09/01/2051	1.A
..3133BG-C6-3	FH QE6393 - RMBS			06/01/2024	Paydown			11,648	11,648	11,717	11,717	0	(70)	0	(70)	0	11,648	0	0	0	0	207	07/01/2052	1.A
..3133BJ-NS-7	FH QE8501 - RMBS			06/01/2024	Paydown			45,466	45,466	45,729	45,729	0	(263)	0	(263)	0	45,466	0	0	0	0	985	08/01/2052	1.A
..3133BM-06-5	FH QF0477 - RMBS			06/01/2024	Paydown			45,932	45,932	46,369	46,366	0	(435)	0	(435)	0	45,932	0	0	0	0	905	09/01/2052	1.A
..3133BQ-5W-2	FH QF3561 - RMBS			06/01/2024	Paydown			7,767	7,767	7,906	7,909	0	(142)	0	(142)	0	7,767	0	0	0	0	189	11/01/2052	1.A
..3133KK-3X-5	FH RA4414 - RMBS			06/01/2024	Paydown			10,280	10,280	10,952	10,954	0	(675)	0	(675)	0	10,280	0	0	0	0	104	01/01/2051	1.A
..3133KM-RT-4	FH RA5898 - RMBS			06/01/2024	Paydown			2,137	2,137	2,171	2,171	0	(34)	0	(34)	0	2,137	0	0	0	0	18	09/01/2051	1.A
..3133KN-KX-0	FH RA6610 - RMBS			06/01/2024	Paydown			20,924	20,924	21,412	21,396	0	(472)	0	(472)	0	20,924	0	0	0	0	253	01/01/2052	1.A
..3133KP-YM-4	FH RA7916 - RMBS			06/01/2024	Paydown			1,436	1,436	1,398	1,399	0	(37)	0	(37)	0	1,436	0	0	0	0	23	09/01/2052	1.A
..3133KQ-VZ-6	FH RA8732 - RMBS			06/01/2024	Paydown			2,454	2,454	2,443	2,443	0	(11)	0	(11)	0	2,454	0	0	0	0	52	03/01/2053	1.A
..3133KR-M3-5	FH RA9378 - RMBS			06/01/2024	Paydown			256	256	251	251	0	(5)	0	(5)	0	256	0	0	0	0	1	07/01/2053	1.A
..3137BP-DW-6	FHR 4583 UP - CMO/RMBS			06/01/2024	Paydown			10,134	10,134	10,608	10,621	0	(487)	0	(487)	0	10,134	0	0	0	0	127	07/15/2045	1.A
..3137BS-ZE-6	FHR 4631 GP - CMO/RMBS			06/01/2024	Paydown			3,639	3,639	3,897	3,891	0	(252)	0	(252)	0	3,639	0	0	0	0	54	03/15/2046	1.A
..3140AO-AR-0	FN DA0015 - RMBS			06/01/2024	Paydown			227	227	223	0	0	(5)	0	(5)	0	227	0	0	0	0	1	09/01/2053	1.A
..3140HD-7A-6	FN BK0888 - RMBS			06/01/2024	Paydown			1,973	1,973	2,131	2,335	0	(362)	0	(362)	0	1,973	0	0	0	0	36	07/01/2048	1.A
..3140JB-UJ-9	FN BM1497 - RMBS			06/01/2024	Paydown			113	113	120	123	0	(9)	0	(9)	0	113	0	0	0	0	1	03/01/2047	1.A

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STATEMENT AS OF JUNE 30, 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 (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-EU-0	FN B09146 - RMBS		06/01/2024	Paydown		421	421	436	436	0	(16)	0	(16)	0	0	0	0	0	0	0	0	4	12/01/2050	1.A ..
..3140KV-F5-4	FN B09187 - RMBS		06/01/2024	Paydown		563	563	584	585	0	(21)	0	(21)	0	0	0	0	0	0	0	0	5	01/01/2051	1.A ..
..3140KV-GN-4	FN B09204 - RMBS		06/01/2024	Paydown		2,183	2,183	2,265	2,264	0	(80)	0	(80)	0	0	0	0	0	0	0	0	16	01/01/2051	1.A ..
..3140KX-SP-2	FN BR0525 - RMBS		06/01/2024	Paydown		913	913	951	950	0	(37)	0	(37)	0	0	0	0	0	0	0	0	9	01/01/2050	1.A ..
..3140LO-C8-8	FN BR1894 - RMBS		06/01/2024	Paydown		701	701	728	726	0	(25)	0	(25)	0	0	0	0	0	0	0	0	6	01/01/2051	1.A ..
..3140LO-D4-6	FN BR1922 - RMBS		06/01/2024	Paydown		830	830	862	863	0	(33)	0	(33)	0	0	0	0	0	0	0	0	7	01/01/2051	1.A ..
..3140LO-DR-5	FN BR1911 - RMBS		06/01/2024	Paydown		1,322	1,322	1,371	1,370	0	(47)	0	(47)	0	0	0	0	0	0	0	0	12	01/01/2051	1.A ..
..3140MR-2N-6	FN BW0780 - RMBS		06/01/2024	Paydown		1,465	1,465	1,482	1,483	0	(17)	0	(17)	0	0	0	0	0	0	0	0	27	08/01/2052	1.A ..
..3140MV-AD-4	FN BW6303 - RMBS		06/01/2024	Paydown		33,016	33,016	33,331	33,354	0	(338)	0	(338)	0	0	0	0	0	0	0	0	687	08/01/2052	1.A ..
..3140N3-A5-8	FN BW9927 - RMBS		06/01/2024	Paydown		2,284	2,284	2,315	2,314	0	(30)	0	(30)	0	0	0	0	0	0	0	0	59	10/01/2052	1.A ..
..3140O9-4Z-3	FN CA2639 - RMBS		06/01/2024	Paydown		445	445	437	437	0	7	0	7	0	0	0	0	0	0	0	0	9	11/01/2048	1.A ..
..3140Q9-MM-2	FN CA2163 - RMBS		06/01/2024	Paydown		17,557	17,557	17,450	17,450	0	107	0	107	0	0	0	0	0	0	0	0	306	08/01/2048	1.A ..
..3140QE-AP-7	FN CA6313 - RMBS		06/01/2024	Paydown		6,873	6,873	7,339	7,480	0	(608)	0	(608)	0	0	0	0	0	0	0	0	79	07/01/2050	1.A ..
..3140QE-DX-7	FN CA6417 - RMBS		06/01/2024	Paydown		5,531	5,531	5,913	6,012	0	(481)	0	(481)	0	0	0	0	0	0	0	0	71	07/01/2050	1.A ..
..3140QE-KY-7	FN CA6610 - RMBS		06/01/2024	Paydown		4,567	4,567	4,883	4,979	0	(411)	0	(411)	0	0	0	0	0	0	0	0	55	08/01/2050	1.A ..
..3140QE-VJ-5	FN CA7012 - RMBS		06/01/2024	Paydown		5,498	5,498	5,639	5,639	0	(141)	0	(141)	0	0	0	0	0	0	0	0	45	09/01/2050	1.A ..
..3140QF-4E-6	FN CA8020 - RMBS		06/01/2024	Paydown		2,679	2,679	2,844	2,845	0	(166)	0	(166)	0	0	0	0	0	0	0	0	28	12/01/2050	1.A ..
..3140QG-3C-9	FN CA8894 - RMBS		06/01/2024	Paydown		8,773	8,773	9,368	9,355	0	(583)	0	(583)	0	0	0	0	0	0	0	0	93	02/01/2051	1.A ..
..3140QG-U4-7	FN CA8702 - RMBS		06/01/2024	Paydown		11,001	11,001	11,752	11,634	0	(633)	0	(633)	0	0	0	0	0	0	0	0	119	01/01/2036	1.A ..
..3140QG-ZQ-3	FN CA8850 - RMBS		06/01/2024	Paydown		6,158	6,158	6,383	6,373	0	(214)	0	(214)	0	0	0	0	0	0	0	0	53	02/01/2051	1.A ..
..3140QL-MY-9	FN CB1274 - RMBS		06/01/2024	Paydown		4,269	4,269	4,461	4,453	0	(184)	0	(184)	0	0	0	0	0	0	0	0	45	08/01/2051	1.A ..
..3140QM-ST-7	FN CB2657 - RMBS		06/01/2024	Paydown		1,745	1,745	1,780	1,778	0	(33)	0	(33)	0	0	0	0	0	0	0	0	22	01/01/2052	1.A ..
..3140QM-VP-6	FN CB2421 - RMBS		06/01/2024	Paydown		3,998	3,998	4,217	4,204	0	(206)	0	(206)	0	0	0	0	0	0	0	0	47	12/01/2051	1.A ..
..3140QP-BA-4	FN CB3632 - RMBS		06/01/2024	Paydown		19,436	19,436	20,058	20,051	0	(615)	0	(615)	0	0	0	0	0	0	0	0	367	05/01/2052	1.A ..
..3140QP-BG-1	FN CB3638 - RMBS		06/01/2024	Paydown		2,104	2,104	2,138	2,138	0	(34)	0	(34)	0	0	0	0	0	0	0	0	42	05/01/2052	1.A ..
..3140QP-ZB-6	FN CB4337 - RMBS		06/01/2024	Paydown		2,266	2,266	2,308	2,306	0	(40)	0	(40)	0	0	0	0	0	0	0	0	43	08/01/2052	1.A ..
..3140QP-ZE-0	FN CB4340 - RMBS		06/01/2024	Paydown		3,028	3,028	3,041	3,039	0	(11)	0	(11)	0	0	0	0	0	0	0	0	59	08/01/2052	1.A ..
..3140QQ-F6-7	FN CB4688 - RMBS		06/01/2024	Paydown		31,935	31,935	32,873	32,865	0	(931)	0	(931)	0	0	0	0	0	0	0	0	710	09/01/2052	1.A ..
..3140QQ-GA-7	FN CB4692 - RMBS		06/01/2024	Paydown		8,823	8,823	9,030	9,025	0	(202)	0	(202)	0	0	0	0	0	0	0	0	207	09/01/2052	1.A ..
..3140QQ-UM-5	FN CB5087 - RMBS		06/01/2024	Paydown		1,215	1,215	1,240	1,239	0	(24)	0	(24)	0	0	0	0	0	0	0	0	28	11/01/2052	1.A ..
..3140QS-3Y-5	FN CB7114 - RMBS		06/01/2024	Paydown		2,390	2,390	2,341	0	0	(49)	0	(49)	0	0	0	0	0	0	0	0	11	09/01/2053	1.A ..
..3140X8-3F-2	FN FM5297 - RMBS		06/01/2024	Paydown		967	967	1,034	1,058	0	(91)	0	(91)	0	0	0	0	0	0	0	0	12	11/01/2050	1.A ..
..3140X8-G6-8	FN FM4720 - RMBS		06/01/2024	Paydown		5,886	5,886	6,289	6,399	0	(512)	0	(512)	0	0	0	0	0	0	0	0	73	10/01/2050	1.A ..
..3140X8-UU-9	FN FM5094 - RMBS		06/01/2024	Paydown		9,095	9,095	9,722	10,138	0	(1,043)	0	(1,043)	0	0	0	0	0	0	0	0	135	06/01/2049	1.A ..
..3140X8-IR-4	FN FM5155 - RMBS		06/01/2024	Paydown		822	822	855	853	0	(30)	0	(30)	0	0	0	0	0	0	0	0	7	12/01/2050	1.A ..
..3140X8-Y6-8	FN FM5232 - RMBS		06/01/2024	Paydown		848	848	906	922	0	(75)	0	(75)	0	0	0	0	0	0	0	0	11	06/01/2050	1.A ..
..3140X8-V7-6	FN FM5233 - RMBS		06/01/2024	Paydown		2,655	2,655	2,829	2,844	0	(190)	0	(190)	0	0	0	0	0	0	0	0	30	11/01/2050	1.A ..
..3140X8-YK-7	FN FM5213 - RMBS		06/01/2024	Paydown		2,296	2,296	2,390	2,387	0	(91)	0	(91)	0	0	0	0	0	0	0	0	19	12/01/2050	1.A ..
..3140X9-JB-2	FN FM5657 - RMBS		06/01/2024	Paydown		232	232	247	252	0	(20)	0	(20)	0	0	0	0	0	0	0	0	3	12/01/2050	1.A ..
..3140X9-UU-2	FN FM5984 - RMBS		06/01/2024	Paydown		11,100	11,100	11,468	11,457	0	(357)	0	(357)	0	0	0	0	0	0	0	0	93	02/01/2051	1.A ..

STATEMENT AS OF JUNE 30, 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	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	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-H3-8	FN FS0249 - RMBS		..06/01/2024	Paydown		22,360	22,360	23,254	23,187	0	(827)	0	(827)	0	22,360	0	0	0	0	0	310	01/01/2052	1.A		
..3140XF-H5-3	FN FS0251 - RMBS		..06/01/2024	Paydown		14,107	14,107	14,623	14,591	0	(484)	0	(484)	0	14,107	0	0	0	0	0	169	01/01/2052	1.A		
..3140XF-HY-0	FN FS0246 - RMBS		..06/01/2024	Paydown		521	521	544	543	0	(21)	0	(21)	0	521	0	0	0	0	0	7	01/01/2052	1.A		
..3140XF-LL-3	FN FS0330 - RMBS		..06/01/2024	Paydown		11,520	11,520	11,910	11,889	0	(370)	0	(370)	0	11,520	0	0	0	0	0	143	01/01/2052	1.A		
..3140XG-7F-0	FN FS1793 - RMBS		..06/01/2024	Paydown		6,404	6,404	6,438	6,437	0	(33)	0	(33)	0	6,404	0	0	0	0	0	91	05/01/2052	1.A		
..3140XG-CH-0	FN FS0971 - RMBS		..06/01/2024	Paydown		3,761	3,761	3,782	3,782	0	(21)	0	(21)	0	3,761	0	0	0	0	0	55	01/01/2052	1.A		
..3140XG-VJ-5	FN FS1516 - RMBS		..06/01/2024	Paydown		21,343	21,343	21,327	21,326	0	18	0	18	0	21,343	0	0	0	0	0	386	05/01/2052	1.A		
..3140XG-IM-7	FN FS1551 - RMBS		..06/01/2024	Paydown		1,905	1,905	1,920	1,919	0	(14)	0	(14)	0	1,905	0	0	0	0	0	32	03/01/2050	1.A		
..3140XG-ZA-0	FN FS1636 - RMBS		..06/01/2024	Paydown		13,954	13,954	13,987	13,982	0	(28)	0	(28)	0	13,954	0	0	0	0	0	256	04/01/2052	1.A		
..3140XH-3U-9	FN FS2610 - RMBS		..06/01/2024	Paydown		735	735	746	746	0	(11)	0	(11)	0	735	0	0	0	0	0	14	08/01/2052	1.A		
..3140XH-6Y-8	FN FS2686 - RMBS		..06/01/2024	Paydown		2,131	2,131	2,147	2,148	0	(16)	0	(16)	0	2,131	0	0	0	0	0	39	08/01/2052	1.A		
..3140XH-JL-2	FN FS2066 - RMBS		..06/01/2024	Paydown		47,547	47,547	45,058	45,053	0	2,493	0	2,493	0	47,547	0	0	0	0	0	745	06/01/2052	1.A		
..3140XH-NC-7	FN FS2186 - RMBS		..06/01/2024	Paydown		5,262	5,262	5,052	5,051	0	210	0	210	0	5,262	0	0	0	0	0	90	06/01/2052	1.A		
..3140XJ-LC-5	FN FS3022 - RMBS		..06/01/2024	Paydown		1,315	1,315	1,278	1,279	0	36	0	36	0	1,315	0	0	0	0	0	19	10/01/2052	1.A		
..3140XJ-QG-1	FN FS3154 - RMBS		..06/01/2024	Paydown		2,964	2,964	2,928	2,928	0	35	0	35	0	2,964	0	0	0	0	0	60	07/01/2052	1.A		
..3140XJ-WK-5	FN FS3349 - RMBS		..06/01/2024	Paydown		2,760	2,760	2,701	2,702	0	58	0	58	0	2,760	0	0	0	0	0	51	09/01/2052	1.A		
..3140XL-5L-8	FN FS5350 - RMBS		..06/01/2024	Paydown		461,482	461,482	441,869	441,788	0	19,694	0	19,694	0	461,482	0	0	0	0	0	7,333	10/01/2052	1.A		
..3140XM-E7-7	FN FS5557 - RMBS		..06/01/2024	Paydown		9,900	9,900	8,976	8,976	0	924	0	924	0	9,900	0	0	0	0	0	63	09/01/2052	1.A		
..3140XM-J6-4	FN FS5684 - RMBS		..06/01/2024	Paydown		885	885	842	842	0	43	0	43	0	885	0	0	0	0	0	15	04/01/2053	1.A		
..3140XN-BU-7	FN FS6350 - RMBS		..06/01/2024	Paydown		174,905	174,905	169,549	169,545	0	5,360	0	5,360	0	174,905	0	0	0	0	0	3,646	10/01/2053	1.A		
..31418C-MG-6	FN MA3058 - RMBS		..06/01/2024	Paydown		4,122	4,122	4,456	4,708	0	(585)	0	(585)	0	4,122	0	0	0	0	0	69	07/01/2047	1.A		
..31418D-HL-9	FN MA3834 - RMBS		..06/01/2024	Paydown		1,250	1,250	1,306	1,346	0	(96)	0	(96)	0	1,250	0	0	0	0	0	16	11/01/2049	1.A		
..31418E-HK-9	FN MA4733 - RMBS		..06/01/2024	Paydown		17,512	17,512	16,595	16,595	0	917	0	917	0	17,512	0	0	0	0	0	103	09/01/2052	1.A		
..31418E-KS-8	FN MA44804 - RMBS		..06/01/2024	Paydown		6,449	6,449	5,993	5,993	0	456	0	456	0	6,449	0	0	0	0	0	47	11/01/2052	1.A		
..35563P-LH-0	SCRT 2019-3 MA - CMO/RMBS		..06/01/2024	Paydown		1,960	1,960	2,049	2,020	0	(60)	0	(60)	0	1,960	0	0	0	0	0	28	10/25/2058	1.A		
..35563P-ML-0	SCRT 2019-4 MA - CMO/RMBS		..06/01/2024	Paydown		1,491	1,491	1,523	1,512	0	(22)	0	(22)	0	1,491	0	0	0	0	0	19	02/25/2059	1.A		
0909999999 Subtotal - Bonds - U.S. Special Revenues										1,489,718	1,489,718	1,474,035	1,434,504	0	14,356	0	14,356	0	1,489,718	0	0	0	24,795	XXX	XXX
..05608W-AA-2	BX 2021-SOAR A - CMBS		..05/15/2024	Paydown		991	991	991	991	0	0	0	0	0	991	0	0	0	0	0	26	06/15/2028	1.A FE		
..05610H-AA-1	BX 22LP2 A - CMBS		..05/15/2024	Paydown		3,014	3,014	3,020	3,020	0	(6)	0	(6)	0	3,014	0	0	0	0	0	72	02/15/2039	1.A FE		
..05946X-BV-4	BAFC 2003-1 A1 - CMO/RMBS		..06/01/2024	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	FRES 2020-SB70 A1H - CMBS		..06/01/2024	Paydown		182	182	183	193	0	(11)	0	(11)	0	182	0	0	0	0	0	2	10/25/2039	2.C FE		
..33852J-AE-8	FSMT 217 A5 - CMO/RMBS		..06/01/2024	Paydown		2,260	2,260	2,307	2,301	0	(41)	0	(41)	0	2,260	0	0	0	0	0	25	08/25/2051	1.A FE		
..36262J-AJ-5	GSIMBS 21PJB A8 - CMO/RMBS		..06/01/2024	Paydown		2,450	2,450	2,507	2,500	0	(50)	0	(50)	0	2,450	0	0	0	0	0	25	01/25/2052	1.A FE		
..38137H-BU-1	GLD11 XI AR2 - CDO		C...	..05/13/2024	Various	159,155	159,155	156,370	163,181	0	(4,026)	0	(4,026)	0	159,155	0	0	0	0	0	5,883	01/21/2031	1.A FE		
..46590M-AQ-3	JPMC 2016-JP2 A3 - CMBS		..06/01/2024	Paydown		17,033	17,033	17,923	17,518	0	(485)	0	(485)	0	17,033	0	0	0	0	0	218	08/17/2049	1.A FE		
..46592W-AF-3	JPMMT 2112 A4 - CMO/RMBS		..06/01/2024	Paydown		5,237	5,237	5,324	5,314	0	(77)	0	(77)	0	5,237	0	0	0	0	0	54	02/25/2052	1.A FE		
..46653X-AE-0	JPMMT 2021-INW5 A2A - CMO/RMBS		..06/01/2024	Paydown		3,035	3,035	3,070	3,067	0	(32)	0	(32)	0	3,035	0	0	0	0	0	31	12/26/2051	1.A FE		
..46654W-AH-4	JPMMT 221 A4 - CMO/RMBS		..06/01/2024	Paydown		2,069	2,069	2,050	2,054	0	15	0	15	0	2,069	0	0	0	0	0	22	07/25/2052	1.A FE		
..46655L-AE-4	JPMMT 22LT2 A3 - RMBS		..06/01/2024	Paydown		11,790	11,790	10,171	10,226	0	1,565	0	1,565	0	11,790	0	0	0	0	0	182	09/25/2052	1.A FE		
..61772C-AH-4	MSRM 2021-3 A4 - CMO/RMBS		..06/01/2024	Paydown		2,128	2,128	2,172	2,166	0	(38)	0	(38)	0	2,128	0	0	0	0	0	21	06/26/2051	1.A FE		
..63942C-AA-0	NAVL 2021-D A - ABS		..06/17/2024	Paydown		3,177	3,177	3,177	3,177	0	0	0	0	0	3,177	0	0	0	0	0	84	04/15/2060	1.A FE		
..63942E-AA-6	NAVL 2021-E A - ABS		..06/15/2024	Paydown		3,129	3,129	3,128	3,128	0	1	0	1	0	3,129	0	0	0	0	0	13	12/16/2069	1.A FE		
..64034Q-AA-6	NSLT 2021-B AFL - ABS		..06/20/2024	Paydown		3,747	3,747	3,747	3,747	0	0	0	0	0	3,747	0	0	0	0	0	99	04/20/2062	1.A FE		
..64034O-AB-4	NSLT 2021-A1 ABS		..06/20/2024	Paydown		5,307	5,307	5,307	5,602	0	(295)	0	(295)	0	5,307	0	0	0	0	0	22	04/20/2062	1.A FE		
..64035D-AA-4	NSLT 21A1 ABS		..06/20/2024	Paydown		5,307	5,307	5,307	5,602	0	(295)	0	(295)	0	5,307	0	0	0	0	0	141	04/20/2062	1.A FE		
..64035D-AD-8	NSLT 21A1 AP2 - ABS		..06/20/2024	Paydown		3,389	3,389	3,385	3,385	0	4	0	4	0	3,389	0	0	0	0	0	19	04/20/2062	1.A FE		

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STATEMENT AS OF JUNE 30, 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 Desig- nation, NAIC Desig- nation Modifier and SVO Admi- nistrative 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									
..74936R-AE-4	RCKT 212 A5 - CMO/RMBS	.....	06/01/2024	Paydown	.....	1,086	1,086	1,109	1,105	0	(19)	0	(19)	0	0	0	0	0	0	0	11	06/26/2051	1.A FE
..74938G-AB-2	RCKT 224 A2 - CMO/RMBS	.....	06/01/2024	Paydown	.....	11,955	11,955	10,209	10,239	0	1,716	0	1,716	0	0	0	0	0	0	0	171	06/25/2052	1.A FE
..78449F-AC-5	SMB 2016-A A2B - ABS	.....	06/17/2024	Paydown	.....	7,054	7,054	7,078	7,242	0	(188)	0	(188)	0	0	0	0	0	0	0	204	05/15/2031	1.A FE
..92939F-AU-3	WFRRS 2014-C21 A5 - CMBS	.....	06/01/2024	Paydown	.....	132,492	132,492	142,749	134,135	0	(1,643)	0	(1,643)	0	0	0	0	0	0	0	2,368	08/16/2047	1.A FE
1109999999.	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				384,434	384,434	389,706	388,045	0	(3,610)	0	(3,610)	0	0	0	0	0	0	0	0	9,691	XXX	XXX
2509999997.	Total - Bonds - Part 4				2,384,152	2,384,152	2,495,162	2,339,905	0	3,390	0	3,390	0	0	0	0	0	0	0	0	47,235	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	XXX
2509999999.	Total - Bonds				2,384,152	2,384,152	2,495,162	2,339,905	0	3,390	0	3,390	0	0	0	0	0	0	0	0	47,235	XXX	XXX
4509999997.	Total - Preferred Stocks - Part 4				0	XXX	0	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	XXX
4509999999.	Total - Preferred Stocks				0	XXX	0	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	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	XXX
5989999999.	Total - Common Stocks				0	XXX	0	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	0	XXX	XXX
6009999999.	Totals				2,384,152	XXX	2,495,162	2,339,905	0	3,390	0	3,390	0	0	2,384,152	0	0	0	0	47,235	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
SECURITIES LENDING COLLATERAL ASSETS

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

1 CUSIP Identification	2 Description	3 Code	4 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	5 Fair Value	6 Book/Adjusted Carrying Value	7 Maturity Date
0109999999. Total - U.S. Government Bonds				0	0	XXX
0309999999. Total - All Other Government Bonds				0	0	XXX
0509999999. Total - U.S. States, Territories and Possessions Bonds				0	0	XXX
0709999999. Total - U.S. Political Subdivisions Bonds				0	0	XXX
0909999999. Total - U.S. Special Revenues Bonds				0	0	XXX
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds				0	0	XXX
1309999999. Total - Hybrid Securities				0	0	XXX
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds				0	0	XXX
1909999999. Subtotal - Unaffiliated Bank Loans				0	0	XXX
2419999999. Total - Issuer Obligations				0	0	XXX
2429999999. Total - Residential Mortgage-Backed Securities				0	0	XXX
2439999999. Total - Commercial Mortgage-Backed Securities				0	0	XXX
2449999999. Total - Other Loan-Backed and Structured Securities				0	0	XXX
2459999999. Total - SVO Identified Funds				0	0	XXX
2469999999. Total - Affiliated Bank Loans				0	0	XXX
2479999999. Total - Unaffiliated Bank Loans				0	0	XXX
2489999999. Total - Unaffiliated Certificates of Deposit				0	0	XXX
2509999999. Total Bonds				0	0	XXX
4109999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Industrial and Miscellaneous (Unaffiliated)				0	0	XXX
4409999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Parent, Subsidiaries and Affiliates				0	0	XXX
4509999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type)				0	0	XXX
5109999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Industrial and Miscellaneous (Unaffiliated)				0	0	XXX
5409999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Mutual Funds				0	0	XXX
5609999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Unit Investment Trusts				0	0	XXX
5809999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Closed-End Funds				0	0	XXX
5979999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Parent, Subsidiaries and Affiliates				0	0	XXX
5989999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type)				0	0	XXX
5999999999. Total - Preferred and Common Stocks				0	0	XXX
..... TD PRIME SERVICES LLC			1.E	4,721	4,721	..... 07/01/2024
..... HSBC SECURITIES USA INC			1.E	4,131	4,131	..... 07/01/2024
..... BOFA SECURITIES, INC			1.E	4,131	4,131	..... 07/01/2024
..... OF SECURED LLC			1.E	3,418	3,418	..... 07/01/2024
..... BOFA SECURITIES, INC			1.C	2,951	2,951	..... 07/01/2024
..... MIZUHO SECURITIES USA INC			1.E	2,154	2,154	..... 07/01/2024
20271E-J6-7	COMMONWEALTH BANK AUS, NEW YORK		1.D	590	590	..... 12/20/2024
..... DZ BANK AG NEW YORK			1.C	590	590	..... 07/01/2024
..... LHT N.Y.			1.C	590	590	..... 07/01/2024
..... ROYAL BANK OF CANADA			1.C	590	590	..... 07/01/2024
..... SANTANDER US CAPITAL MARKETS LLC			1.C	590	590	..... 07/01/2024
..... NORDEA BANK ABP, NEW YORK BRANCH			1.E	590	590	..... 07/01/2024
..... DNB NOR BANK ASA NEW YORK			1.E	590	590	..... 07/01/2024
..... SVENSKA NY			1.E	590	590	..... 07/01/2024
..... CANADIAN IMPERIAL BANK TOR			1.E	590	590	..... 07/01/2024
..... RABOBANK NEW YORK			1.C	590	590	..... 07/01/2024
..... SKANDI NY			1.C	590	590	..... 07/01/2024
..... ABN Amro Bank N.V. .....			.....	590	590	..... 07/01/2024
69034C-PU-6	OCBC NEW YORK			590	590	..... 09/13/2024
05253M-VY-7	AUSTRALIA AND NEW ZEALAND BK GRP LT			295	295	..... 12/17/2024
9709999999. Subtotal - Cash Equivalents (Schedule E Part 2 type)				29,471	29,471	XXX
9999999999 - Totals				29,471	29,471	XXX

General Interrogatories:

1. Total activity for the year Fair Value \$ 29,471 Book/Adjusted Carrying Value \$ 29,471
2. Average balance for the year Fair Value \$ 4,912 Book/Adjusted Carrying Value \$ 4,912
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
 NAIC 1 \$ 20,742 NAIC 2 \$ 0 NAIC 3 \$ 0 NAIC 4 \$ 0 NAIC 5 \$ 0 NAIC 6 \$ 0

STATEMENT AS OF JUNE 30, 2024 OF THE HUMANA HEALTH PLAN OF OHIO INC.

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

99999999999 - Totals General Interrogatories

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General Interrogatories.

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

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

Fair Value \$ Book/Adjusted Carrying Value \$

STATEMENT AS OF JUNE 30, 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	356,507	197,771	376,031	XXX.
JP MORGAN CHASE	New York, NY	0.000	0	0	8,624	237,203	1,899	XXX.
US BANK	St. Louis, MO	0.000	0	0	(3,876,376)	(3,878,361)	(3,685,549)	XXX.
JP MORGAN CHASE-Humana Health Plan of Ohio, Inc.	New York, NY	0.000	0	0	0	0	0	XXX.
JP Morgan Time Deposit	New York, NY	5.150	56	0	863,918	502,143	1,547,246	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	56	0	(2,647,327)	(2,941,244)	(1,760,373) XXX
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	56	0	(2,647,327)	(2,941,244)	(1,760,373) XXX
0499999. Cash in Company's Office		XXX	XXX	XXX	XXX	0	0	0 XXX
.....
.....
.....
.....
.....
0599999. Total - Cash		XXX	XXX	56	0	(2,647,327)	(2,941,244)	(1,760,373) XXX

STATEMENT AS OF JUNE 30, 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 .....	.....	06/28/2024	0.000	.07/23/2024	12,958,383	0	5,675
0019999999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						12,958,383	0	5,675
0109999999. Total - U.S. Government Bonds						12,958,383	0	5,675
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
.....	FEDERAL HOME LOAN BANKS .....	.....	06/27/2024	0.000	.07/05/2024	9,994,178	0	5,822
.....	FEDERAL HOME LOAN BANKS .....	.....	06/17/2024	0.000	.07/16/2024	4,989,041	0	10,207
0819999999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations						14,983,219	0	16,029
0909999999. Total - U.S. Special Revenues Bonds						14,983,219	0	16,029
.....	Apple Inc. .....	.....	06/26/2024	0.000	.07/22/2024	9,969,142	0	7,347
.....	Bell Canada, Inc. .....	.....	06/17/2024	0.000	.07/16/2024	5,986,250	0	12,833
.....	Chevron Corporation .....	.....	06/27/2024	0.000	.07/09/2024	14,982,267	0	8,867
.....	DCAT, LLC .....	.....	06/24/2024	0.000	.07/10/2024	14,979,825	0	15,692
.....	Duke Energy Corporation .....	.....	06/27/2024	0.000	.07/12/2024	3,522,093	0	2,148
.....	Hyundai Capital America .....	.....	06/27/2024	0.000	.07/17/2024	8,978,200	0	5,450
.....	Mercedes-Benz Finance North America LLC .....	.....	06/28/2024	0.000	.07/30/2024	7,965,716	0	3,547
.....	ST Engineering North America, Inc. .....	.....	06/27/2024	0.000	.07/05/2024	1,998,818	0	1,182
.....	VULCAN MATERIALS COMPANY .....	.....	06/25/2024	0.000	.07/17/2024	8,977,960	0	8,265
.....	Waste Management, Inc. .....	.....	06/25/2024	0.000	.07/08/2024	998,950	0	.900
1019999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						78,359,219	0	66,231
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						78,359,219	0	66,231
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						106,300,821	0	87,935
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						106,300,821	0	87,935
31607A-88-5	FIDELITY IMM:TRS INSTL .....	.....	06/27/2024	5.220	.....	1,925,000	0	0
31846V-80-7	FIRST AMER:TRS OBG Y	SD..	04/04/2023	4.890	.....	11	0	0
4812C2-23-9	JPMORGAN:US TRS+MM CAP .....	.....	06/18/2024	5.170	.....	0	.56,295	0
8209999999. Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO						1,925,011	56,295	0
.....
.....
8609999999 - Total Cash Equivalents						108,225,832	56,295	87,935