



QUARTERLY STATEMENT

AS OF MARCH 31, 2025
OF THE CONDITION AND AFFAIRS OF THE

Health Resources of Ohio, Inc.

NAIC Group Code	01212 (Current Period)	01212 (Prior Period)	NAIC Company Code	17613	Employer's ID Number	93-4022317
Organized under the Laws of		Ohio	State of Domicile or Port of Entry		Ohio	
Country of Domicile		United States				
Licensed as business type:	Life, Accident & Health []	Property/Casualty []	Hospital, Medical & Dental Service or Indemnity []			
	Dental Service Corporation [X]	Vision Service Corporation []	Health Maintenance Organization []			
	Other []	Is HMO Federally Qualified? Yes [] No []				
Incorporated/Organized	10/16/2023	Commenced Business	05/01/2024			
Statutory Home Office	100 Madison Avenue (Street and Number)			Toledo, OH, US 43604 (City or Town, State, Country and Zip Code)		
Main Administrative Office	100 Madison Avenue (Street and Number)	Toledo, OH, US 43604-1516 (City or Town, State, Country and Zip Code)		800-727-1444 (Area Code) (Telephone Number)		
Mail Address	MSC-S29777 100 Madison Avenue (Street and Number or P.O. Box)			Toledo, OH, US 43604-1516 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	100 Madison Avenue (Street and Number)	Toledo, OH, US 43604-1516 (City or Town, State, Country and Zip Code)		800-727-1444 (Area Code) (Telephone Number)		
Internet Web Site Address	www.insuringsmiles.com					
Statutory Statement Contact	Cynthia M. Watson (Name)	(Area Code) (Telephone Number) (Extension)				
	cwatson@insuringsmiles.com (E-Mail Address)	812-424-2096 (FAX Number)				

OFFICERS

OFFICERS

Name	Title	Name	Title
Joshua Nace	President	Stephen M Sadowski	Secretary
Terrence Metzger	Treasurer	Mark Waggoner	Chairman

OTHER OFFICERS

OTHER OFFICERS

State of Ohio

ss

County of Lucas

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.

Joshua Nace
President

Stephen M Sadowski
Secretary

Terrence Metzger
Treasurer

a. Is this an original filing? Yes [X] No []

Yes [X] No []

Subscribed and sworn to before me this
30th day of April, 2025

b. If no:

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

LORA L KITZ
Notary Public, State of Ohio
My Commission Expires:
March 31, 2030

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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	101,510		101,510	101,510
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 2,987,479), cash equivalents (\$ 0)	2,987,479		2,987,479	2,774,797
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	1,852
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	3,088,989	0	3,088,989	2,878,159
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued .....	.1,998		1,998	1,530
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	.5,458		.5,458	.1,247
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	.47,121		.47,121	.39,515
18.2 Net deferred tax asset .....	.1,107	.1,107	0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	1,619
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other-than-invested assets	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	3,144,673	1,107	3,143,566	2,922,070
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	3,144,673	1,107	3,143,566	2,922,070
DETAILS OF WRITE-INS				
1101.			0	0
1102.			0	0
1103.			0	0
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.			0	0
2502.			0	0
2503.			0	0
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)	0	0	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	315,252		315,252	202,894
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	15,227		15,227	9,800
4. Aggregate health policy reserves including the liability of \$ for medical loss ratio rebate per the Public Health Service Act			0	0
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	3,805		3,805	9,716
9. General expenses due or accrued	131,509		131,509	84,709
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	209,575		209,575	98,833
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including \$ current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)	675,368	0	675,368	405,952
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		0
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	2,670,042	2,670,042
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(201,844)	(153,924)
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		0
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	2,468,198	2,516,118
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	3,143,566	2,922,070
DETAILS OF WRITE-INS				
2301.	XXX	XXX	0	0
2302.	XXX	XXX	0	0
2303.	XXX	XXX	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)	0	0	0	0
2501.	XXX	XXX		0
2502.	XXX	XXX		0
2503.	XXX	XXX		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
3002.	XXX	XXX		0
3003.	XXX	XXX		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 AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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.....	149,393	0	226,862
2. Net premium income (including \$.....non-health premium income)	XXX.....	2,696,422	0	5,837,356
3. Change in unearned premium reserves and reserve for rate credits	XXX.....		0	0
4. Fee-for-service (net of \$.....medical expenses)	XXX.....		0	0
5. Risk revenue	XXX.....		0	0
6. Aggregate write-ins for other health care related revenues	XXX.....	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX.....	0	0	0
8. Total revenues (Lines 2 to 7).....	XXX.....	2,696,422	0	5,837,356
Hospital and Medical:				
9. Hospital/medical benefits.....		2,488,328	0	5,474,766
10. Other professional services.....			0	0
11. Outside referrals.....			0	0
12. Emergency room and out-of-area.....			0	0
13. Prescription drugs.....			0	0
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....			0	0
16. Subtotal (Lines 9 to 15).....	0	2,488,328	0	5,474,766
Less:				
17. Net reinsurance recoveries.....			0	0
18. Total hospital and medical (Lines 16 minus 17).....	0	2,488,328	0	5,474,766
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$.....cost containment expenses.....		47,320	0	116,250
21. General administrative expenses.....		229,875	0	488,118
22. Increase in reserves for life and accident and health contracts (including \$.....increase in reserves for life only).....			0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	2,765,523	0	6,079,134
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(69,101)	0	(241,778)
25. Net investment income earned.....		13,575	2,040	48,339
26. Net realized capital gains (losses) less capital gains tax of \$.....			0	0
27. Net investment gains (losses) (Lines 25 plus 26).....	0	13,575	2,040	48,339
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....) (amount charged off \$.....)].....			0	0
29. Aggregate write-ins for other income or expenses.....	0	0	0	0
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.....	(55,526)	2,040	(193,439)
31. Federal and foreign income taxes incurred.....	XXX.....	(7,606)	0	(39,515)
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	(47,920)	2,040	(153,924)
DETAILS OF WRITE-INS				
0601.....	XXX.....		0	0
0602.....	XXX.....		0	0
0603.....	XXX.....		0	0
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
0702.....	XXX.....		0	0
0703.....	XXX.....		0	0
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
1402.....			0	0
1403.....			0	0
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.....			0	0
2902.....			0	0
2903.....			0	0
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	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year	2,516,118	0	0
34. Net income or (loss) from Line 32	(47,920)	2,040	(153,924)
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	1,107
39. Change in nonadmitted assets	0	0	(1,107)
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	2,853,362	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	2,670,042
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 and surplus (Lines 34 to 47)	(47,920)	2,855,402	2,516,118
49. Capital and surplus end of reporting period (Line 33 plus 48)	2,468,198	2,855,402	2,516,118
DETAILS OF WRITE-INS			
4701.	0	0	0
4702.	0	0	0
4703.	0	0	0
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources 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	2,686,300	0	5,830,336
2. Net investment income	13,107	188	46,809
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	2,699,407	188	5,877,145
5. Benefit and loss related payments	2,375,970	0	5,439,703
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	224,968	0	509,859
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0	0
10. Total (Lines 5 through 9)	2,600,938	0	5,949,562
11. Net cash from operations (Line 4 minus Line 10)	98,469	188	(72,417)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:	0	0	0
12.1 Bonds	0	0	0
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	1,852	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,852	0	0
13. Cost of investments acquired (long-term only):	0	0	0
13.1 Bonds	0	0	101,510
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	1,852
13.7 Total investments acquired (Lines 13.1 to 13.6)	0	0	103,362
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,852	0	(103,362)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):	0	0	0
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	2,853,362	2,853,362
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)	112,361	0	97,214
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	112,361	2,853,362	2,950,576
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)	212,682	2,853,550	2,774,797
19. Cash, cash equivalents and short-term investments:	0	0	0
19.1 Beginning of year	2,774,797	0	0
19.2 End of period (Line 18 plus Line 19.1)	2,987,479	2,853,550	2,774,797

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

20.0001.	0	0	183,320
---------------	---	---	---------

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non- Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year	27,874	0	0	0	0	27,874	0	0	0	0	0	0	0	0
2. First Quarter	49,791	0	0	0	0	21,210	28,581	0	0	0	0	0	0	0
3. Second Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	0													
6. Current Year Member Months	0													
Total Member Ambulatory Encounters for Period:														
7. Physician	0													
8. Non-Physician	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (a)	2,696,422				329,509	2,366,913								
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned	2,696,423				329,509	2,366,914								
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services	2,375,971				275,655	2,100,316								
18. Amount Incurred for Provision of Health Care Services	2,488,328				387,938	2,100,390								

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

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)						
0199999 Individually listed claims unpaid.....	0	.0	0	.0	0	0
0299999 Aggregate accounts not individually listed-uncovered.....						
0399999 Aggregate accounts not individually listed-covered	212,525	62,253	20,600	13,092	6,782	315,252
0499999 Subtotals	212,525	62,253	20,600	13,092	6,782	315,252
0599999 Unreported claims and other claim reserves	XXX	XXX	XXX	XXX	XXX	
0699999 Total amounts withheld	XXX	XXX	XXX	XXX	XXX	
0799999 Total claims unpaid	XXX	XXX	XXX	XXX	XXX	315,252
0899999 Accrued medical incentive pool and bonus amounts	XXX	XXX	XXX	XXX	XXX	0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources 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
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual					0	0
2. Comprehensive (hospital and medical) group					0	0
3. Medicare Supplement					0	0
4. Vision only		275,655		112,283	0	0
5. Dental only	182,546	1,917,769		202,969	182,546	202,894
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare					0	0
8. Title XIX - Medicaid					0	0
9. Credit A&H					0	0
10. Disability income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12).....	182,546	2,193,424	0	315,252	182,546	202,894
14. Health care receivables (a)					0	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	182,546	2,193,424	0	315,252	182,546	202,894
17. Totals (Lines 13-14+15+16)	182,546	2,193,424	0	315,252	182,546	202,894

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>	<u>2025</u>	<u>2024</u>
NET INCOME					
(1) Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$(47,920)	\$(153,924)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$(47,920)	\$(153,924)
SURPLUS					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$2,468,198	\$2,516,118
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$2,468,198	\$2,516,118

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

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the consolidated financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates. Significant estimates in the financial statements primarily include investment valuation and estimates of unpaid claims and claims adjustment expense reserves. It is at least reasonably possible that these estimates will be materially revised in the near term.

C. Accounting Policy

- (1) Cash consists of cash on deposit, savings accounts, and certificates of deposit with maturity dates within one year from the acquisition date. Cash equivalents are short-term, highly liquid investments with original maturities of three months or less that are both readily convertible to known amounts of cash and so near their maturity that they present insignificant risk of changes in value because of changes in interest rates.
- (2) Bonds are valued in accordance with the valuation prescribed by the NAIC. Generally, bonds are stated at amortized cost unless rated at three or below by the NAIC, in which case bonds are stated at the lower of amortized cost or fair value.
- (3) Unaffiliated common stocks are reported at fair value, as determined by quoted market prices, and the related net unrealized capital gains (losses) are reported in unassigned surplus net of federal income taxes.
- (4) Not Applicable
- (5) Not Applicable
- (6) Not Applicable
- (7) Not Applicable
- (8) Not Applicable
- (9) Not Applicable
- (10) Not Applicable
- (11) Accrued dental and vision claims and related expenses include amounts billed and not paid and an estimate of costs incurred for unbilled services, as computed by management based on its historical experience. It is at least reasonably possible this estimate will change in the near term, and the effect of the change will have a material effect on the statutory financial statements.
- (12) Not Applicable
- (13) Not Applicable

D. Going Concern

- Not Applicable
- (1) Not Applicable
 - a. Not Applicable
 - b. Not Applicable
 - c. Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable

2. Accounting Changes and Corrections of Errors

Not Applicable

3. Business Combinations and Goodwill

Not Applicable

A. Statutory Purchase Method

- Not Applicable
- B. Statutory Merger

- Not Applicable
- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable
- (5) Not Applicable

C. Assumption Reinsurance

- Not Applicable
- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable

D. Impairment Loss

- Not Applicable
- (1) Not Applicable
- (2) Not Applicable

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

- Not Applicable

4. Discontinued Operations

Not Applicable

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
a. Not Applicable
b. Not Applicable

B. Change in Plan of Sale of Discontinued Operation
Not Applicable

C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal
Not Applicable

D. Equity Interest Retained in the Discontinued Operation After Disposal
Not Applicable

5. Investments
Not Applicable

A. Mortgage Loans, including Mezzanine Real Estate Loans
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable
(6) Not Applicable
(7) Not Applicable
(8) Not Applicable
(9) Not Applicable

B. Debt Restructuring
Not Applicable
(1)-(3) Not Applicable
(4) Not Applicable

C. Reverse Mortgages
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3)-(4) Not Applicable

D. Asset-Backed Securities
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable

E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not Applicable
(1)-(2) Not Applicable
(3) Not Applicable
c. Not Applicable
(4) Not Applicable
(5) Not Applicable
b. Not Applicable
(6) Not Applicable
(7) Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable
(6) Not Applicable
(7) Not Applicable
(8) Not Applicable
(9) Not Applicable
(10) Not Applicable
(11) Not Applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable
(6) Not Applicable
(7) Not Applicable
(8) Not Applicable
(9) Not Applicable
(10) Not Applicable

H. Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable
(6) Not Applicable
(7) Not Applicable
(8) Not Applicable
(9) Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not Applicable
(1) Not Applicable
(2) Not Applicable
(3) Not Applicable
(4) Not Applicable
(5) Not Applicable
(6) Not Applicable
(7) Not Applicable
(8) Not Applicable

J. Real Estate

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

Not Applicable

(1) Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

(2) Not Applicable

a. Not Applicable

b. Not Applicable

(3) Not Applicable

(4) Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

d. Not Applicable

e. Not Applicable

(5) Not Applicable

a. Not Applicable

b. Not Applicable

K. Investments in Tax Credit Structures (tax credit investments)

Not Applicable

(1) Not Applicable

a. Not Applicable

b. Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

(7) Not Applicable

a. Not Applicable

b. Not Applicable

(8) Not Applicable

a. Not Applicable

b. Not Applicable

(9) Not Applicable

L. Restricted Assets

Not Applicable

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	1	2	3	4	5	6	7
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0.0 %	0.0 %
b. Collateral held under security lending agreements		0	0		0	0.0	0.0
c. Subject to repurchase agreements		0	0		0	0.0	0.0
d. Subject to reverse repurchase agreements		0	0		0	0.0	0.0
e. Subject to dollar reverse repurchase agreements		0	0		0	0.0	0.0
f. Subject to dollar reverse repurchase agreements		0	0		0	0.0	0.0
g. Placed under option contracts		0	0		0	0.0	0.0
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock		0	0		0	0.0	0.0
i. FHLB capital stock		0	0		0	0.0	0.0
j. On deposit with states	101,510	101,510	0		101,510	3.2	3.2
k. On deposit with other regulatory bodies		0	0		0	0.0	0.0
l. Pledged as collateral to FHLB (including assets backing funding agreements)		0	0		0	0.0	0.0
m. Pledged as collateral not captured in other categories	0	0	0		0	0.0	0.0
n. Other restricted assets	0	0	0		0	0.0	0.0
o. Total Restricted Assets (Sum of a through n)	\$ 101,510	\$ 101,510	\$ 0	\$ 0	\$ 101,510	3.2 %	3.2 %

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

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

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(4)i. Not Applicable

M. Working Capital Finance Investments

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

N. Offsetting and Netting of Assets and Liabilities

Not Applicable

(1) Not Applicable

(2) Not Applicable

O. 5GI Securities

Not Applicable

P. Short Sales

Not Applicable

(1) Not Applicable

(2) Not Applicable

Q. Prepayment Penalty and Acceleration Fees

Not Applicable

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

Not Applicable

S. Aggregate Collateral Loans by Qualifying Investment Collateral

Not Applicable

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

Not Applicable

A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of its Admitted Assets

Not Applicable

B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies in the year of the Impairment Write-Down

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

Not Applicable

7. Investment Income

Not Applicable

A. Due and Accrued Income that was Excluded from Surplus on the following basis

Not Applicable

B. Total Amount Excluded

Not Applicable

C. Gross, nonadmitted and admitted amounts for interest income due and accrued.

Not Applicable

D. Aggregate deferred interest.

Not Applicable

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

Not Applicable

8. Derivative Instruments

Not Applicable

A. Derivatives under SSAP No. 86 – Derivatives

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

(7) Not Applicable

a. Not Applicable

b. Not Applicable

(8) a. Not Applicable

b. Not Applicable

(9) Not Applicable

B. Derivatives under SSAP No. 108 – Derivatives Hedging Variable Annuity Guarantees

Not Applicable

(1) Not Applicable

(2) a. Not Applicable

b. Not Applicable

(3) Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

d. Not Applicable

(4) Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

d. Not Applicable

9. Income Taxes

A. The components of the net deferred tax asset/(liability) at March 31 are as follows:

1.

3/31/2025		
(1)	(2)	(3) (Col 1+2) Total
Ordinary	Capital	
(a) Gross Deferred Tax Assets	\$ 1,107	\$ 1,107
(b) Statutory Valuation Allowance Adjustments	\$ 0	\$ 0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 1,107	\$ 0
(d) Deferred Tax Assets Nonadmitted	\$ 1,107	\$ 1,107
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d)	\$ 0	\$ 0
(f) Deferred Tax Liabilities	\$ 0	\$ 0
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 0	\$ 0

12/31/2024		
(4)	(5)	(6) (Col 4+5) Total
Ordinary	Capital	
(a) Gross Deferred Tax Assets	\$ 1,107	\$ 0
(b) Statutory Valuation Allowance Adjustments	\$ 0	\$ 0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 1,107	\$ 0
(d) Deferred Tax Assets Nonadmitted	\$ 1,107	\$ 1,107
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d)	\$ 0	\$ 0
(f) Deferred Tax Liabilities	\$ 0	\$ 0
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 0	\$ 0

Change		
(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
(a) Gross Deferred Tax Assets	\$ 0	\$ 0
(b) Statutory Valuation Allowance Adjustments	\$ 0	\$ 0
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 0	\$ 0
(d) Deferred Tax Assets Nonadmitted	\$ 0	\$ 0
(e) Subtotal Net Admitted Deferred Tax Asset (1c -1d)	\$ 0	\$ 0
(f) Deferred Tax Liabilities	\$ 0	\$ 0
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 0	\$ 0

2.

3/31/2025		
(1)	(2)	(3) (Col 1+2) Total
Ordinary	Capital	

Admission Calculation Components SSAP No. 101

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 0	\$ 0	\$ 0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	\$ 0	\$ 0	\$ 0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	\$ 0
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	\$ 0	\$ 0	\$ 0
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 0	\$ 0	\$ 0

12/31/2024		
(4)	(5)	(6) (Col 4+5) Total
Ordinary	Capital	

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 0	\$ 0	\$ 0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following			

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

2. the Balance Sheet Date	\$ 0	\$ 0	\$ 0
(c) Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	<u>XXX</u>	<u>XXX</u>	\$ 0
Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities ..	\$ 0	\$ 0	\$ 0
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$ 0	\$ 0	\$ 0

Total (2(a) + 2(b) + 2(c)) \$ 0 \$ 0 \$ 0

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

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 0	\$ 0	\$ 0
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 0	\$ 0	\$ 0
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	\$ 0	\$ 0	\$ 0
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	<u>XXX</u>	<u>XXX</u>	\$ 0
Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities ..	\$ 0	\$ 0	\$ 0
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101.	\$ 0	\$ 0	\$ 0
Total (2(a) + 2(b) + 2(c))	\$ 0	\$ 0	\$ 0

3.

	2025	2024
(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount	808.825	808.825
(b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above	\$ 2,516,118.000	\$ 2,516,118.000

4. Impact of Tax-Planning Strategies

	3/31/2025	12/31/2024	Change
	(1)	(2)	(3)
	Ordinary	Capital	Ordinary

(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage	1,107	0	1,107	0	0	0
1. Adjusted Gross DTAs Amount From Note 9A1(c)	1,107	0	1,107	0	0	0
2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	0.0	0.0	0.0	0.0	0.0	0.0
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	0	0	0	0	0	0
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	0.0	0.0	0.0	0.0	0.0	0.0

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes No

B. Deferred Tax Liabilities Not Recognized

Not Applicable

- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable

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

	(1)	(2)	(3)
	3/31/2025	12/31/2024	(Col 1-2) Change

1. Current Income Tax

(a) Federal	\$ (47,121)	\$ (39,515)	\$ (7,606)
(b) Foreign	\$ 0	\$ 0	\$ 0
(c) Subtotal (1a+1b)	\$ (47,121)	\$ (39,515)	\$ (7,606)
(d) Federal income tax on net capital gains	\$ 0	\$ 0	\$ 0
(e) Utilization of capital loss carry-forwards	\$ 0	\$ 0	\$ 0
(f) Other	\$ 0	\$ 0	\$ 0
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ (47,121)	\$ (39,515)	\$ (7,606)

2. Deferred Tax Assets:

(a) Ordinary						
(1) Discounting of unpaid losses	\$ 699	\$ 699	\$ 0	\$ 0	\$ 0	\$ 0
(2) Unearned premium reserve	\$ 408	\$ 408	\$ 0	\$ 0	\$ 0	\$ 0
(3) Policyholder reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(4) Investments	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(5) Deferred acquisition costs	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(6) Policyholder dividends accrual	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(7) Fixed assets	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(8) Compensation and benefits accrual	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(9) Pension accrual	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(10) Receivables – nonadmitted	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(11) Net operating loss carry-forward	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(12) Tax credit carry-forward	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(13) Other	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(99) Subtotal (sum of 2a1 through 2a13)	\$ 1,107	\$ 1,107	\$ 0	\$ 0	\$ 0	\$ 0
(b) Statutory valuation allowance adjustment	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(c) Nonadmitted	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(e) Capital:						
(1) Investments	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(2) Net capital loss carry-forward	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(3) Real estate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(4) Other	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(f) Statutory valuation allowance adjustment	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(g) Nonadmitted	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(i) Admitted deferred tax assets (2d + 2h)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

3. Deferred Tax Liabilities:

(a) Ordinary						
(1) Investments	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(2) Fixed assets	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(3) Deferred and uncollected premium	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(4) Policyholder reserves	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(5) Other	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(b) Capital:						
(1) Investments	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(2) Real estate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(3) Other	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(99) Subtotal (3b1+3b2+3b3)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0

4. Net deferred tax assets/liabilities (2i - 3c)

D. Among the more significant book to tax adjustments were the following:

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

Reconciliation of federal income tax rate to actual effective rate:				Operating Loss and Tax Credit Carryforwards
The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The significant items causing this difference are as follows:				(B)
Description	(A) Amount	Statutory Rate 21.00% Tax Effect	(B)/ x Effective Tax Rate	
Income Before Taxes	(193,439)	(40,622)	21.00%	
Tax-Exempt Interest (net of proration)	0	0	0.00%	
Dividends Received Deduction (net of proration)	0	0	0.00%	
Meals & Entertainment	0	0	0.00%	
Club Dues	0	0	0.00%	
Lobbying Expenses	0	0	0.00%	
Nondeductible Dividends	0	0	0.00%	
Penalties	0	0	0.00%	
ACA Insurer Fee	0	0	0.00%	
Nonadmit Change	-	0	0.00%	
Commuter Benefits	-	0	0.00%	
Merger Impact	-	0	0.00%	
Deferred Write Offs	-	0	0.00%	
Prior Year True Up	-	0	0.00%	
Total	(193,439)	(40,622)	21.00%	
 Federal income taxed incurred [expense/(benefit)]		(39,515)	20.43%	
Tax on capital gains/(losses)		0	0.00%	
Change in net deferred income tax [charge/(benefit)]		(1,107)	0.57%	
Total statutory income taxes		(40,622)	21.00%	

⁽¹⁾ At December 31, 2024, the Company had net operating loss carryforwards expiring through the year 2024 of \$0.

At December 31, 2024, the Company had net operating loss carryforwards expiring through the year 2029 of \$0.

(2) (3) The following is income tax expense for 2022, 2023, and 2024 that is available for recoupment in the Not Applicable

Year	Ordinary	Capital	Total
2022	0	0	0
2023	0	0	0
2024	0	0	0
Total	-	0	-

F. Consolidated Federal Income Tax Return

⁽¹⁾ The Company is party to a tax-sharing agreement with the parent company, ProMedica Insurance Corporation (PIC), and affiliated entities as follows: Paramount Benefits Agency (PBA); Health Resources of Ohio, Inc. (HRO), and Health Resources, Inc. (HRI). Tax returns are completed on a consolidated basis. However, allocation is based upon separate return calculations with current credit for net losses. The method of allocation between the companies is subject to a written agreement approved by the Board of Directors. Intercompany tax balances are settled through the holding company, PIC.

⁽²⁾ The Company is party to a tax-sharing agreement with its parent company and affiliates. Tax returns are completed on a consolidated basis. Allocation is based on separate return calculations with current credit for net losses.

G. Federal or Foreign Income Tax Loss Contingencies

The Company has no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within 12 months of the reporting date.

The Company is primarily subject to U.S. federal and various U.S. state and local tax authorities. As of March 31, 2025, there are no U.S. federal or state returns under examination.

H. Repatriation Transition Tax (RTT)

I. Alternative Minimum Tax Credit

	Amount
(1) Gross AMT Credit Recognized as:	
a. Current year recoverable	\$
b. Deferred tax asset (DTA)	\$
(2) Beginning Balance of AMT Credit Carryforward	\$
(3) Amounts Recovered	\$
(4) Adjustments	\$
(5) Ending Balance of AMT Credit Carryforward (5=2-3-4) □	\$
(6) Reduction for Sequestration	\$
(7) Nonadmitted by Reporting Entity	\$
(8) Reporting Entity Ending Balance (8=5-6-7)	\$

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

A. Nature of the Relationship Involved

A cost sharing agreement between ProMedica Health System and ProMedica Insurance Corporation and Subsidiaries, including the Company, is currently in effect. ProMedica allocates corporate overhead to its ProMedica entities. The agreement was effective May 1, 2024.

An administrative services agreement is in effect between the Company and Health Resources, Inc. Health Resources, Inc. agrees to provide certain administrative services in connection with the insurance plans issued or administered by the Company. The agreement is effective May 1, 2024.

B. Detail of Transactions

The amount paid by the Company to HRI in 2024 and 2025 results from the administrative services agreement between Health Resources, Inc. and the Company and consist of the net of premiums collected, administration fees and claims reimbursements.

C. Transactions with related party who are not reported on Schedule Y

Not Applicable

(1) Not Applicable

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

- (2) Not Applicable
- (3) Not Applicable
 - a. Not Applicable
 - b. Not Applicable
 - c. Not Applicable
- (4) Not Applicable

D. Amounts Due From or To Related Parties

Amounts due to and from affiliates will be resolved the following month through an intercompany funds transfer process.

Receivable (Payable)

	2025	2024
Health Resources, Inc.	(\$208,062)	(\$97,214)
ProMedica Health System	(\$1,513)	\$0

E. Material Management or Service Contracts and Cost-Sharing Arrangements

A cost sharing agreement between ProMedica Shared Services, LLC and ProMedica Insurance Corporation and Subsidiaries, including the Company, is currently in effect. ProMedica Shared Services provides certain services at cost to ProMedica Insurance Corporation and Subsidiaries. The Company was allocated \$0 through Q1 2025 for shared expenses.

An administrative services agreement is in effect between the Company and Health Resources, Inc. Health Resources, Inc. agrees to perform certain administrative services including claims administration for the Company. The Company paid Health Resources, Inc. \$2,693,497 in administration fees, claims and broker commissions through Q1 2025.

F. Guarantees or Undertakings

Not Applicable

G. Nature of the Control Relationship

Not Applicable

H. Amount Deducted for Investment in Upstream Intermediate Entity or Ultimate Parent Owned

Not Applicable

I. Investments in SCA that Exceed 10% of Admitted Assets

Not Applicable

J. Investments in Impaired SCAs

Not Applicable

K. Investment in Foreign Insurance Subsidiary

Not Applicable

L. Investment in Downstream Noninsurance Holding Company

Not Applicable

M. All SCA Investments

Not Applicable

(1) Not Applicable

(2) Not Applicable

N. Investment in Insurance SCAs

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

O. SCA or SSAP No. 48 Entity Loss Tracking

Not Applicable

11.

Debt

Not Applicable

A. All Other Debt

Not Applicable

B. FHLB (Federal Home Loan Bank) Agreements

Not Applicable

(1) Not Applicable

(2) FHLB Capital Stock

Not Applicable

a. Not Applicable

b. Not Applicable

(3) Collateral Pledged to FHLB

Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

(4) Borrowing from FHLB

Not Applicable

a. Not Applicable

b. Not Applicable

c. Not Applicable

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

Not Applicable

A. Defined Benefit Plan

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

(7) Not Applicable

(8) Not Applicable

(9) Not Applicable

(10) Not Applicable

(11) Not Applicable

(12) Not Applicable

(13) Not Applicable

(14) Not Applicable

(15) Not Applicable

(16) Not Applicable

(17) Not Applicable

B. Investment Policies and Strategies

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

- Not Applicable
- C. Fair Value of Plan Assets
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
- D. Basis Used to Determine Expected Long-Term Rate-of-Return
 - Not Applicable
- E. Defined Contribution Plans
 - Not Applicable
- F. Multiemployer Plans
 - Not Applicable
- G. Consolidated/Holding Company Plans
 - Not Applicable
- H. Postemployment Benefits and Compensated Absences
 - Not Applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
 - (3) Not Applicable

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

- A. Number of Shares of Each Class of Capital Stock, Authorized, Issued and Outstanding and the Par or Stated Value of Each Class
 - There are 1,000 shares of common stock authorized, issued and outstanding.
- B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues
 - Not Applicable
- C. Dividend Restrictions
 - Not Applicable
- D. Dates and Amounts of Dividends Paid
 - Not Applicable
- E. Profits that may be Paid as Ordinary Dividends to Stockholders
 - Not Applicable
- F. Restrictions on Unassigned Funds (Surplus)
 - Not Applicable
- G. Mutual Reciprocal Amounts of Advances to Surplus not Repaid
 - Not Applicable
- H. Amount of Stock Held for Special Purposes
 - Not Applicable
- I. Reasons for Changes in Balance of Special Surplus Funds from Prior Period
 - Not Applicable
- J. Changes in Unassigned Funds
 - Not Applicable
- K. Surplus Notes
 - Not Applicable
- L. The Impact of any Restatement Due to Prior Quasi-Reorganizations
 - Not Applicable
- M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization
 - Not Applicable

14. Liabilities, Contingencies and Assessments

- Not Applicable
- A. Contingent Commitments
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
 - (3) Not Applicable
- B. Assessments
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
 - (3) Not Applicable
 - b. Not Applicable
 - c. 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
 - Not Applicable

15. Leases

- Not Applicable
- A. Lessee Operating Lease
 - Not Applicable
 - (1) Not Applicable
 - a. Not Applicable
 - b. Not Applicable
 - c. Not Applicable
 - d. Not Applicable
 - e. Not Applicable
 - (2) a. Not Applicable
 - b. Not Applicable
 - (3) Not Applicable
 - a. Not Applicable
 - b. Not Applicable
- B. Lessor Leases
 - Not Applicable
 - (1) Not Applicable
 - a. Not Applicable

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

- b. Not Applicable
- c. Not Applicable
- d. Not Applicable

(2) Not Applicable

- a. Not Applicable
- b. Not Applicable
- c. Not Applicable

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

Not Applicable

- (1) Not Applicable
- (2) Not Applicable
- (3) Not Applicable
- (4) Not Applicable

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

Not Applicable

- A. Transfers of Receivables Reported as Sales
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
- B. Transfer and Servicing of Financial Assets
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
 - a. Not Applicable
 - b. Not Applicable
 - c. Not Applicable
 - (3) Not Applicable
 - (4) Not Applicable
 - a. Not Applicable
 - 1. Not Applicable
 - (a) Not Applicable
 - (b) Not Applicable
 - 2. Not Applicable
 - b. Not Applicable
 - 1. Not Applicable
 - (a) Not Applicable
 - (b) Not Applicable
 - (c) Not Applicable
 - (d) Not Applicable
 - 2. Not Applicable
 - 3. Not Applicable
 - 4. Not Applicable
 - 5. Not Applicable
- (5) Not Applicable
- (6) Not Applicable
- (7) Not Applicable

- C. Wash Sales
- Not Applicable
- (1) Not Applicable
- (2) Not Applicable

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

Not Applicable

- A. ASO Plans
 - Not Applicable
- B. ASC Plans
 - Not Applicable
- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract:
 - Not Applicable
 - (1) Not Applicable
 - (2) Not Applicable
 - (3) Not Applicable
 - (4) Not Applicable

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

Not Applicable

20. Fair Value Measurements

- A. Assets and Liabilities Measured at Fair Value
 - (3)
 - (4)
 - (5)
- B. Other Fair Value Disclosures
 - Fair value is the price that would be received to sell an asset or paid to transfer liability in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value: Level 1: Quoted prices in active markets for identical assets or liabilities Level 2: Observable inputs other than Level 1 prices, such as quoted prices for similar assets or liabilities; quoted prices in markets that are not active; or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets or liabilities Level 3: Un-observable inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities. Following is a description of the valuation methodologies used for assets and liabilities measured at fair value on a recurring basis and recognized in the accompanying statements of admitted assets, liabilities, and capital and surplus, as well as the general classification of such assets and liabilities pursuant to the valuation hierarchy. Available-for-Sale Securities and Money Market Mutual Funds Where quoted market prices are available in an active market, securities are classified within Level 1 of the valuation hierarchy. Level 1 securities include money market funds. If quoted market prices are not available, then fair values are estimated by using quoted prices of securities which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatile, prepayments, defaults, cumulative loss projections and cash flows. Such securities are classified in Level 2 of the valuation hierarchy. Level 2 securities include U.S. Government and federal agency securities.
- C. Fair Value of Financial Instruments
 - Not Applicable
- D. Not Practicable to Estimate Fair Value
 - Not Applicable
- E. Investments Measured using the NAV as Practical Expedient
 - Not Applicable

21. Other Items

Not Applicable

- A. Unusual or Infrequent Items
 - Not Applicable

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

Not Applicable

B. Troubled Debt Restructuring: Debtors

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

C. Other Disclosures

Not Applicable

D. Business Interruption Insurance Recoveries

Not Applicable

E. State and Federal Tax Credits

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

F. Subprime-Mortgage-Related Risk Exposure

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

G. Retained Assets

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

H. Insurance-Linked Securities (ILS) Contracts

Not Applicable

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

Not Applicable

22. Events Subsequent

Not Applicable

23. Reinsurance

Not Applicable

A. Ceded Reinsurance Report

Not Applicable

Section 1 - General Interrogatories

Not Applicable

(1) Not Applicable

(2) Not Applicable

Section 2 - Ceded Reinsurance Report - Part A

Not Applicable

(1) Not Applicable

a. Not Applicable

b. Not Applicable

(2) Not Applicable

Section 3 - Ceded Reinsurance Report - Part B

Not Applicable

(1) Not Applicable

(2) Not Applicable

B. Uncollectible Reinsurance

Not Applicable

C. Commutation of Reinsurance Reflected in Income and Expenses

Not Applicable

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable

(1) Not Applicable

b. Not Applicable

(2) Not Applicable

b. Not Applicable

E. Reinsurance Credit

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

(4) Not Applicable

(5) Not Applicable

(6) Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

Not Applicable

A. Method Used to Estimate Accrued Retrospective Premium Adjustments

Not Applicable

B. Accrued Retrospective Premiums Recorded Through Written Premium or as an Adjustment to Earned Premium

Not Applicable

C. Amount of Net Premiums Written Subject to Retrospective Rating Features

Not Applicable

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

Not Applicable

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

Not Applicable

(1) Not Applicable

(2) Not Applicable

(3) Not Applicable

25. Changes in Incurred Claims and Claim Adjustment Expenses

Not Applicable

A. Reasons for changes in the Provision for Incurred Loss and Loss Adjustment Expenses

Not Applicable

B. Information about Significant Changes in Methodologies and Assumptions

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

26. Not Applicable

Intercompany Pooling Arrangements

Not Applicable

- A. Lead Entity and Affiliated Entities Participating in the Intercompany Pool

Not Applicable

- B. Lines and Types of Business Subject to the Pooling Agreement

Not Applicable

- C. Cessions to Non-Affiliated Reinsurance Business Subject to the Pooling Agreement

Not Applicable

- D. Identification of all Pool Members that are Parties to the Reinsurance Agreements with Non-Affiliated Reinsurers

Not Applicable

- E. Discrepancies Between Entries Regarding Pooled Business

Not Applicable

- F. Intercompany Sharing of the Provision for Reinsurance

Not Applicable

- G. Amounts due to/from the Lead Entity and Affiliated Entities Participating in the Intercompany Pool

Not Applicable

27. **Structured Settlements**

Health Entities should not complete this Note.

28. **Health Care Receivables**

Not Applicable

- A. Pharmaceutical Rebate Receivables

Not Applicable

- B. Risk Sharing Receivables

Not Applicable

29. **Participating Policies**

Not Applicable

30. **Premium Deficiency Reserves**

Not Applicable

31. **Anticipated Salvage and Subrogation**

Not Applicable

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources 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.

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

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.....

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 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

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] NA []

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.

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.

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).

6.4 By what department or departments?

The Company began business in 2024, thus has not yet undergone an examination.

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] NA [X]

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

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

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 [X] No []

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

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

(c) Compliance with applicable governmental laws, rules and regulations;

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

(e) Accountability for adherence to the code.

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 [X]

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

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

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

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

GENERAL INTERROGATORIES

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 [] NA []
If no, attach a description with this statement.

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

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 0
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 0
16.3 Total payable for securities lending reported on the liability page	\$ 0

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [X] No []

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

1 Name of Custodian(s)	2 Custodian Address
Fifth Third Securities.....	5050 Kingsley Drive, Cincinnati, OH 45263.....

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes [] No [X]

17.4 If yes, give full and complete 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. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

1 Name of Firm or Individual	2 Affiliation
Fifth Third Securities.....	U.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity's invested assets?

Yes [] No [X]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

Yes [] No [X]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []

18.2 If no, list exceptions:

.....

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?

Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

- a. The security was either:
 - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

GENERAL INTERROGATORIES

which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").

- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?....

Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?.....

Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent.....	92.3 %
1.2 A&H cost containment percent.....	0.0 %
1.3 A&H expense percent excluding cost containment expenses.....	10.0 %

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

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

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

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

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

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

NONE

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only									10 Deposit-Type Contracts
		2 Accident & Health Premiums	3 Medicare Title XVII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8		
1. Alabama	AL	N								0	
2. Alaska	AK	N								0	
3. Arizona	AZ	N								0	
4. Arkansas	AR	N								0	
5. California	CA	N								0	
6. Colorado	CO	N								0	
7. Connecticut	CT	N								0	
8. Delaware	DE	N								0	
9. Dist. Columbia	DC	N								0	
10. Florida	FL	N								0	
11. Georgia	GA	N								0	
12. Hawaii	HI	N								0	
13. Idaho	ID	N								0	
14. Illinois	IL	N								0	
15. Indiana	IN	N								0	
16. Iowa	IA	N								0	
17. Kansas	KS	N								0	
18. Kentucky	KY	N								0	
19. Louisiana	LA	N								0	
20. Maine	ME	N								0	
21. Maryland	MD	N								0	
22. Massachusetts	MA	N								0	
23. Michigan	MI	N								0	
24. Minnesota	MN	N								0	
25. Mississippi	MS	N								0	
26. Missouri	MO	N								0	
27. Montana	MT	N								0	
28. Nebraska	NE	N								0	
29. Nevada	NV	N								0	
30. New Hampshire	NH	N								0	
31. New Jersey	NJ	N								0	
32. New Mexico	NM	N								0	
33. New York	NY	N								0	
34. North Carolina	NC	N								0	
35. North Dakota	ND	N								0	
36. Ohio	OH	L	2,696,422							2,696,422	
37. Oklahoma	OK	N								0	
38. Oregon	OR	N								0	
39. Pennsylvania	PA	N								0	
40. Rhode Island	RI	N								0	
41. South Carolina	SC	N								0	
42. South Dakota	SD	N								0	
43. Tennessee	TN	N								0	
44. Texas	TX	N								0	
45. Utah	UT	N								0	
46. Vermont	VT	N								0	
47. Virginia	VA	N								0	
48. Washington	WA	N								0	
49. West Virginia	WV	N								0	
50. Wisconsin	WI	N								0	
51. Wyoming	WY	N								0	
52. American Samoa	AS	N								0	
53. Guam	GU	N								0	
54. Puerto Rico	PR	N								0	
55. U.S. Virgin Islands	VI	N								0	
56. Northern Mariana Islands	MP	N								0	
57. Canada	CAN	N								0	
58. Aggregate other alien	QT	XXX	0	0	0	0	0	0	0	0	
59. Subtotal		XXX	2,696,422	0	0	0	0	0	2,696,422	0	
60. Reporting entity contributions for Employee Benefit Plans		XXX								0	
61. Total (Direct Business)		XXX	2,696,422	0	0	0	0	0	2,696,422	0	
DETAILS OF WRITE-INS											
58001		XXX									
58002		XXX									
58003		XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0	0	
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		XXX	0	0	0	0	0	0	0	0	

(a) Active Status Counts

1. L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG 1 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 56
 3. E – Eligible – Reporting entities eligible or approved to write surplus lines in the state 0

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

PART 1 - ORGANIZATIONAL CHART

ORGANIZATION CHART

The Reporting Entity is ultimately controlled by ProMedica Health System, Inc., (“ProMedica”), a nonprofit holding company exempt from federal taxation under Section 501(c)(3) and 509(a)(3) of the Internal Revenue Code. Where the term “ultimate controlling person/entity” is used this is an insurance industry standard and required term which does not indicate operational or day-to-day control of the parent.

The following coding system is used to show the interrelationships among the various members of the insurance holding company system:

- A circle means that ProMedica is the sole member/parent of the entity.
- ◆ Each entity marked with a diamond is a subsidiary of the entity listed directly above and denoted with a circle.
- Each entity marked with a square is a subsidiary of the entity listed directly above and marked with a diamond.
- Each entity marked with a small square is a subsidiary of the entity listed directly above and marked with a larger square
- Each entity marked with an open circle is a subsidiary of the entity listed directly above and marked with a small square.
- Each entity marked with an arrow is a member of the insurance holding company system.

5

The following list depicts the identities and interrelationships of affiliated persons within the insurance holding company system:

- 1 ProMedica Foundation, an Ohio nonprofit corporation, of which Defiance Foundation, Fostoria Community Hospital Foundation, ProMedicaHickman Hospital Foundation, , Memorial Hospital Foundation, Monroe Regional Hospital Foundation, are divisions.
 - Dissolved 12/31/2024.
 - HCR ManorCare Foundation, Inc.
 - Heartland Hospice Memorial Fund, Inc.
 - The Hug Fund
- 2 ProMedica Health Network, Inc., an Ohio for profit corporation, with ProMedica Health System, Inc. as the sole shareholder.
- 3 ProMedica Innovations, LLC, an Ohio limited liability company with ProMedica Health System as its sole member.

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

PART 1 - ORGANIZATIONAL CHART

- ProMedica Natural Wellness, LLC (the inactive LLC, Nexttech Ohio, LLC, changed its name to ProMedica Natural Wellness, LLC).
- ProMedica Longevity and Wellness International, LLC
- ProMedica Longevity and Wellness US, LLC
- Dissolved 9/16/2024 ProMedica Resourceful, LLC, an Ohio limited liability company (formed 1/14/2021)

4 Fostoria Hospital Association, an Ohio nonprofit corporation.

5 Toledo Innovation Center Leverage Lender LLC

6 PHS Toledo Innovation Center Holdings, LLC

- 1 Toledo Innovation Center Manager, LLC an Ohio limited liability company in which, PHS Toledo Innovation Center Holding, LLC holds 23% interest
 - Toledo Innovation Center Landlord, LLC, an Ohio limited liability company in which, Toledo Innovation Center Manager, LLC holds 99% interest and Toledo Innovation Center master Tenant, LLC holds the remaining 1%.
 - Toledo Innovation Center Master Tenant, LLC, an Ohio limited liability company in which, Toledo Innovation Center Manager holds 1% interest.

7 ProMedica Continuum Services f/k/a ProMedica Physicians and Continuum Services f/k/a ProMedica Physician Corporation f/k/a ProMedica Physicians Enterprises, an Ohio nonprofit corporation.

- 1 ProMedica Continuing Care Services Corporation f/k/a Crestview of Ohio, Inc., an Ohio nonprofit corporation.
- 2 ProMedica Courier Services, Inc., an Ohio nonprofit corporation.
- 3 The Surgical Institute of Monroe Ambulatory Surgery Center, LLC, a Michigan limited liability company which ProMedica Continuum Service f/k/a ProMedica Physicians & Continuum Services holds 54% ownership interest and various physicians holding the remaining 46% interest.
- 4 ProMedica Pharmacy Group, LLC

8 ProMedica Physician Group, Inc., an Ohio non-profit corporation.

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

PART 1 - ORGANIZATIONAL CHART

- 1 ProMedica Central Corporation of Michigan, a Michigan nonprofit corporation and a wholly-owned subsidiary of ProMedica Physician Group, Inc.
- 2 ProMedica Central Physicians a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- 3 ProMedica North Physicians Corporation, a Michigan nonprofit stock corporation and a wholly-owned subsidiary of ProMedica Physician Group, Inc.
- 4 ProMedica Northwest Ohio Cardiology Consultants a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- 5 ProMedica Monroe Cardiology, a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- 6 ProMedica Physician Management Services, LLC, an Ohio limited liability company with ProMedica Physician Group, Inc., as its sole member.
- 7 ProMedica Surgical Services, LLC, an Ohio limited liability company with ProMedica Physician Group, Inc., as its sole member.
- 8 ProMedica Monroe Physicians a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- 9 ProMedica Multi Specialty Physicians, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as the sole member (converted 1/1/2021)
- 10 ProMedica Genito-Urinary Surgeons a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- 11 ProMedica Physicians at Home, Inc., a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- 12 ProMedica at Home, Inc., a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- 13 Memorial Professional Services, a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- 14 ProMedica Primary Care Providers, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as its sole member.
- 15 ProMedica Children's Specialists, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as its sole member
- 9 ProMedica Indemnity Corporation, a Vermont corporation.

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

PART 1 - ORGANIZATIONAL CHART

10 ProMedica Insurance Corporation f/k/a ProMedica Health Ventures Corporation f/k/a Vanguard Health Ventures, Inc., an Ohio nonprofit corporation.

- ◆ Paramount Benefits Agency, Inc., an Ohio for-profit corporation and a wholly owned subsidiary of ProMedica Insurance Corporation.
- ◆ NAIC 96687-Health Resources, Inc., an Indiana for-profit corporation with ProMedica Insurance Corporation as its sole member.

◆ Paramount Care of Florida, Inc., a Florida nonprofit Corporation with ProMedica Insurance Corporation as its sole member.

◆ Paramount Care of New Jersey, Inc., a New Jersey for-profit Corporation with ProMedica Insurance Corporation as its sole member.

◆ Dissolved December 23, 2024

◆ Paramount Care of Kentucky, Inc., a Kentucky for-profit Corporation with ProMedica Insurance Corporation as its sole member.

◆ Health Resources of Ohio, Inc. (formerly known as Paramount Health Care, Inc.), an Ohio for-profit Corporation with ProMedica Insurance Corporation as its sole member.

11 Bay Park Community Hospital, an Ohio nonprofit corporation.

12 (sold) As of December 1, 2024, ProMedica is no longer the Member

13 Defiance Hospital, Inc., an Ohio nonprofit corporation.

1 Kaitlyn's Cottage, Inc., an Ohio nonprofit corporation with Defiance Hospital, Inc., as its sole member.

14 Emma L. Bixby Medical Center, a Michigan nonprofit corporation ProMedica Health System, Inc. as its sole member.

- ◆ Herrick Memorial Development Corporation, a Michigan for-profit corporation and a wholly owned subsidiary of Emma L. Bixby Medical Center.
- Herrick Memorial Office Plaza Condominium Association, a Michigan nonprofit corporation in which Herrick Memorial Development Corporation holds 71.8% ownership interest with various physicians having the remaining 28.2% interest.

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

PART 1 - ORGANIZATIONAL CHART

- ◆ Wolf Creek Associates, LLC, a Michigan limited liability company with Emma L. Bixby Medical Center as its sole member.

15 The Toledo Hospital, an Ohio nonprofit corporation, of which ProMedica Flower Hospital, ProMedica Russell J. Ebeid Children's Hospital f/k/a ProMedica Toledo Children's Hospital f/k/a ProMedica Children's Medical Center of Northwest Ohio and ProMedica Wildwood Orthopaedic and Spine Hospital are divisions.

- ◆ PHS Investments, LLC, an Ohio for-profit limited company with The Toledo Hospital as its sole member.
- ◆ Reynolds Road Surgical Center,Ltd, an Ohio limited liability company in which The Toledo Hospital holds 63% ownership interest, with various physicians holding a remaining 37% interest.
- ◆ Northwest Ohio Dedicated Breast MRI, LLC, an Ohio limited liability company in which The Toledo Hospital holds 100% ownership interest (as of 1/1/2024).
- ◆ Arrowhead Behavioral Health, LLC, a Delaware limited liability company in which The Toledo Hospital holds 30% ownership interest and Toledo Holding Company, LLC, holding a remaining 70% interest.
- ◆ West Central Surgical Center, LLC, an Ohio limited liability company of which The Toledo Hospital holds 50% ownership interest and various physicians holding the remaining 50% interest.
- ◆ ProMedica Hickman Cancer Center Pharmacy, LLC, an Ohio limited liability company with The Toledo Hospital as its sole member.

- ◆ ProMedica Intuitive Management of Ohio, LLC, a Delaware limited liability company where The Toledo Hospital holds 51% ownership interest.
- ◆ TH Levis MOB I, LLC, an Ohio limited liability company with The Toledo Hospital as its sole member.
- ◆ Vision Associates MOB, LLC, an Ohio limited liability company where The Toledo Hospital holds 12.5% interest as of January 1, 2024

16 PHS Ventures, LLC f/k/a/ PHS Ventures, Inc., f/k/a BVPH Ventures, Inc., a Delaware LLC with ProMedica Health System, Inc., as its sole member.

17 Memorial Hospital, an Ohio nonprofit corporation.

- 1 Fremont Hospital/Physician Organization d/b/a Cooperative Care, an Ohio for-profit corporation of which Memorial Hospital holds 50% ownership interest and various other physicians hold the remaining 50% interest.

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

PART 1 - ORGANIZATIONAL CHART

■ Dissolved December 20, 2024

- 2 East-West Holding, Ltd., and Ohio limited liability company of which Memorial Hospital holds 50% ownership interest with The Bellevue Hospital, an Ohio nonprofit corporation holding the remaining 50% interest.
- 18 Mercy Memorial Hospital Corporation, a Michigan nonprofit corporation d/b/a ProMedica Monroe Regional Hospital.
 - 1 Monroe Health Ventures, Inc., a Michigan for-profit corporation.
 - 2 Mercy Memorial Surgical Co-Management Company, LLC, a Michigan limited liability company of which Monroe Regional Hospital holds a 50% ownership interest and various other physicians hold the remaining 50% interest.
- 19 300 Madison Building, LLC, an Ohio limited liability company.
- 20 ProMedica Active Mobility, LLC, an Ohio limited liability company.
- 21 ProMedica International, LLC, an Ohio limited liability company.
- 22 ProMedica Manager Member, LLC, an Ohio limited liability company.
- 23 1611 Monroe Investors, LLC, an Ohio limited liability company.
- 24 Marina District Development, LLC, an Ohio limited liability company.
- 25 IST Theatre, LLC, an Ohio limited liability company in which ProMedica Health System holds 100% ownership interest.
- 26 Ball Park Properties, LLC, an Ohio limited liability company in which ProMedica Health System holds 100% ownership interest.
- 27 Kapios, LLC, an Ohio limited liability company in which ProMedica Health System, Inc. holds 100% ownership interest.
- 28 Toledo Riverfront Hotel, LLC, an Ohio limited liability company in which ProMedica Health System, Inc. holds 100% ownership interest.
- 29 Fort Industry JV Partner, LLC, an Ohio limited liability company which ProMedica Health System holds 100% interest

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

PART 1 - ORGANIZATIONAL CHART

1 Fort Industry Manager, LLC an Ohio limited liability company in which Fort Industry JV Partner, LLC holds 30% ownership interest.

30 ProMedica Shared Services, LLC, an Ohio LLC

31 HCR ManorCare, Inc. an Ohio nonprofit corporation

- ◆ Well PM Properties, LLC, a limited liability company where HCR ManorCare, Inc. holds 15% ownership interest as of 12/22/22.
- ◆ No longer exists as of 2022
- ◆ HCR Healthcare, LLC
 - Ancillary Services Management, LLC
 - I think this can be deleted because it is also listed below (see highlight) HCR Canterbury Village, LLC
 - **HCR Home Health Care and Hospice, LLC**
 - HCR Manor Care Services of Florida III, LLC
 - HCR Manor Care Services of Florida, LLC
 - ProMedica Hospice of Marion County, FL, LLC
 - ProMedica Hospice of Palm Beach County, FL, LLC
 - Heartland Home Health Care Services, LLC
 - The Pharmacy Counter, LLC
 - Heartland Hospice Services, LLC
 - Erie West Hospice and Palliative Care, Ltd., an Ohio limited liability company.

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

PART 1 - ORGANIZATIONAL CHART

- HCR II Healthcare, LLC
 - HCR III Healthcare, LLC (See [list of HCR III Healthcare, LLC OpCos](#))
 - HCR IV Healthcare, LLC (see [list of HCR IV Healthcare, LLC OpCos](#))
- HCR Manor Care Services, LLC
 - Heartland Care, LLC (which holds 2.3% interest in Ohio Employee health Partnership , LTD)
- Health Care and Retirement Corporation of America, LLC
- ProMedica Employment Services, LLC
- ProMedica Employment Services II, LLC
- Heartland Rehabilitation Services, LLC
 - HCR ManorCare Medical Services of Florida, LLC
 - ProMedica Senior Care Medical Services I, LLC (formed 2/8/2021)
 - Heartland Home Care, LLC
 - Heartland Rehabilitation Services of Michigan, LLC
- Heartland Services, LLC
 - Heartland Healthcare Services, LLC- Joint Venture where Heartland Services, LLC has 50% interest (its disregarded entities: Heartland Pharmacy of Illinois, LLC, Heartland Pharmacy of Pennsylvania, LLC, and Sun Pharmacy, LLC)
- Industrial Wastes, LLC
- Manor Care Aviation, LLC

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

PART 1 - ORGANIZATIONAL CHART

- Manor Care of Delaware County, LLC (which holds 50% interest in Mercy/Manor Partnership)
- Manor Care Supply, LLC
- ManorCare Health Services of Toledo OH, LLC
 - ProMedica of Sylvania OH, LLC (NOTE: this was f/k/a Arden Courts of Germantown MD, LLC and previously fell under ManorCare Health Services, LLC)
 - ProMedica of Adrian MI, LLC (Note: this was f/k/a Arden Courts of Centerville VA, LLC and previously fell under ManorCare Health Services, LLC)
 - Monroe Community Health Services, a Michigan nonprofit corporation
 - Lenawee Long Term Care, a Michigan nonprofit corporation.
 - HCRMC- ProMedica, LLC, dba Heartland at ProMedica Flower Hospital, a Delaware limited liability company in which ManorCare Health Services of Toledo OH, LLC holds 100% interest
- ManorCare Health Services, LLC
 - Heartland of Toledo OH, LLC
 - In Home Health, LLC
 - Visiting Nurse Hospice and Health Care, an Ohio nonprofit corporation
 - Manor Care of Lacey WA, Association
 - Manor Care of Salmon Creek WA, Association
 - Winter Park Nursing Center, LLC
 - Manor Care of Winter Park FL, LLC- Winter Park Nursing Center, LLC has 50% interest

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

PART 1 - ORGANIZATIONAL CHART

- Portfolio One, LLC
- Forum Purchasing, LLC, a limited liability company in which HCR Healthcare, LLC holds 27.3% ownership interest.

Other Affiliated Entities

- Lima Memorial Joint Operating Company, an Ohio nonprofit corporation, in which Lima Memorial Hospital, an Ohio nonprofit corporation and PHS Ventures, LLC, each hold 50% ownership interest.
- Monroe Community Ambulance, a Michigan nonprofit corporation in which ProMedica Continuing Care Services Corporation holds 25% ownership interest, Monroe Regional Hospital holds 25% interest, and various other corporations hold the remaining 50% interest.
- Healthonomy, an OH limited liability company, in which ProMedica Health System, Inc. holds 33.3% interest.
- Senior & Rehab Care at MetroHealth, LLC an Ohio limited liability company in which ProMedica holds 51% ownership interest
- ProMedica Senior Care of Georgia, LLC, an Ohio limited liability company in which ProMedica hold 90% ownership interest.

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

PART 1 - ORGANIZATIONAL CHART

Entity Name	State Formed	Date Formed	EIN	State Qual.	Member
Arden Courts of Avon CT, LLC	DE	07/24/07	26-0625113	CT	HCR III Healthcare, LLC
Arden Courts of Farmington CT, LLC	DE	07/24/07	26-0625092	CT	HCR III Healthcare, LLC
Manor Care-Pike Creek of Wilmington DE, LLC	DE	07/24/07	26-0623346	N/A---	HCR III Healthcare, LLC
Arden Courts of Wilmington DE, LLC	DE	07/24/07	26-0625127	N/A---	HCR III Healthcare, LLC
Manor Care of Wilmington DE, LLC	DE	07/24/07	26-0623367	N/A---	HCR III Healthcare, LLC
Heartland of Boca Raton FL, LLC	DE	07/24/07	26-0623949	FL	HCR III Healthcare, LLC
Manor Care of Boca Raton FL, LLC	DE	07/24/07	26-0624217	FL	HCR III Healthcare, LLC
Heartland of Boynton Beach FL, LLC	DE	07/24/07	26-0623523	FL	HCR III Healthcare, LLC
Manor Care of Boynton Beach FL, LLC	DE	07/24/07	26-0624241	FL	HCR III Healthcare, LLC
Arden Courts of Delray Beach FL, LLC	DE	07/24/07	26-0625237	FL	HCR III Healthcare, LLC
Manor Care of Delray Beach FL, LLC	DE	07/24/07	26-0624068	FL	HCR III Healthcare, LLC
Manor Care of Dunedin FL, LLC	DE	07/24/07	26-0624190	FL	HCR III Healthcare, LLC
Arden Courts of Ft. Myers FL, LLC	DE	07/24/07	26-0625314	FL	HCR III Healthcare, LLC
Heartland of Fort Myers FL, LLC	DE	07/24/07	26-0623726	FL	HCR III Healthcare, LLC
Manor Care of Ft. Myers FL, LLC	DE	07/24/07	26-0624272	FL	HCR III Healthcare, LLC
Heartland-South Jacksonville of Jacksonville FL, LLC	DE	07/24/07	26-0623559	FL	HCR III Healthcare, LLC
Heartland of Jacksonville FL, LLC	DE	07/24/07	26-0623590	FL	HCR III Healthcare, LLC
Kensington Manor-Sarasota FL, LLC	DE	07/24/07	26-0623931	FL	HCR III Healthcare, LLC
Arden Courts of Largo FL, LLC	DE	07/24/07	26-0625141	FL	HCR III Healthcare, LLC
Arden Courts-Lely Palms of Naples FL, LLC	DE	07/24/07	26-0625279	FL	HCR III Healthcare, LLC
Manor Care-Lely Palms of Naples FL (SH), LLC	DE	07/24/07	26-0625295	FL	HCR III Healthcare, LLC
Manor Care of Naples FL, LLC	DE	07/24/07	26-0624049	FL	HCR III Healthcare, LLC
Heartland of Orange Park FL, LLC	DE	07/24/07	26-0623613	FL	HCR III Healthcare, LLC
Arden Courts of Palm Harbor FL, LLC	DE	07/24/07	26-0625222	FL	HCR III Healthcare, LLC
Manor Care of Palm Harbor FL, LLC	DE	07/24/07	26-0624018	FL	HCR III Healthcare, LLC
Heartland-Prosperity Oaks of Palm Beach Gardens FL, LLC	DE	07/24/07	26-0623909	FL	HCR III Healthcare, LLC
Arden Courts of Sarasota FL, LLC	DE	07/24/07	26-0625246	FL	HCR III Healthcare, LLC
Heartland of Sarasota FL, LLC	DE	07/24/07	26-0623968	FL	HCR III Healthcare, LLC
Manor Care Nursing Center of Sarasota FL, LLC	DE	07/24/07	26-0624159	FL	HCR III Healthcare, LLC
Arden Courts of Seminole FL, LLC	DE	07/24/07	26-0625266	FL	HCR III Healthcare, LLC
Arden Courts of Tampa FL, LLC	DE	07/24/07	26-0625330	FL	HCR III Healthcare, LLC
Manor Care of Venice FL, LLC	DE	07/24/07	26-0624092	FL	HCR III Healthcare, LLC
Arden Courts of W. Palm Beach FL, LLC	DE	07/24/07	26-0625258	FL	HCR III Healthcare, LLC
Manor Care of W. Palm Beach FL, LLC	DE	07/24/07	26-0624142	FL	HCR III Healthcare, LLC
Arden Courts of Winter Springs FL, LLC	DE	07/24/07	26-0625340	FL	HCR III Healthcare, LLC
Heartland of Zephyrhills FL, LLC	DE	07/24/07	26-0623476	FL	HCR III Healthcare, LLC
Manor Care Rehabilitation Center of Decatur GA, LLC	DE	07/24/07	26-0624293	GA	HCR III Healthcare, LLC
Manor Care of Marietta GA, LLC	DE	07/24/07	26-0624336	GA	HCR III Healthcare, LLC
Manor Care of Cedar Rapids IA, LLC	DE	07/24/07	26-0624378	IA	HCR III Healthcare, LLC
Manor Care of Davenport IA, LLC	DE	07/24/07	26-0624394	IA	HCR III Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

PART 1 - ORGANIZATIONAL CHART

Entity Name con't	State Formed	Date Formed	EIN	State Qual.	Member
Manor Care of Waterloo IA, LLC	DE	07/24/07	26-0624363	IA	HCR III Healthcare, LLC
Manor Care of West Des Moines IA, LLC	DE	07/24/07	26-0624438	IA	HCR III Healthcare, LLC
Heartland of Adelphi MD, LLC	DE	07/24/07	26-0620015	MD	HCR III Healthcare, LLC
Manor Care of Bethesda MD, LLC	DE	07/24/07	26-0620122	MD	HCR III Healthcare, LLC
Manor Care of Chevy Chase MD, LLC	DE	07/24/07	26-0620158	MD	HCR III Healthcare, LLC
Heartland of Hyattsville MD, LLC	DE	07/24/07	26-0619980	MD	HCR III Healthcare, LLC
Arden Courts of Kensington MD, LLC	DE	07/24/07	26-0622568	MD	HCR III Healthcare, LLC
Manor Care-Largo MD, LLC	DE	07/24/07	26-0620266	MD	HCR III Healthcare, LLC
Arden Courts of Pikesville MD, LLC	DE	07/24/07	26-0622121	MD	HCR III Healthcare, LLC
Springhouse of Pikesville MD, LLC	DE	07/24/07	26-0620079	MD	HCR III Healthcare, LLC
Arden Courts of Potomac MD, LLC	DE	07/24/07	26-0622198	MD	HCR III Healthcare, LLC
Manor Care of Potomac MD, LLC	DE	07/24/07	26-0620187	MD	HCR III Healthcare, LLC
Manor Care-Rossville MD, LLC	DE	07/24/07	26-0620310	MD	HCR III Healthcare, LLC
Manor Care-Roland Park MD, LLC	DE	07/24/07	26-0620341	MD	HCR III Healthcare, LLC
Manor Care-Ruxton MD, LLC	DE	07/24/07	26-0620431	MD	HCR III Healthcare, LLC
Arden Courts of Silver Spring MD, LLC	DE	07/24/07	26-0622164	MD	HCR III Healthcare, LLC
Manor Care of Silver Spring MD, LLC	DE	07/24/07	26-0620058	MD	HCR III Healthcare, LLC
Arden Courts of Towson MD, LLC	DE	07/24/07	26-0622661	MD	HCR III Healthcare, LLC
Manor Care of Towson, LLC	DE	07/24/07	26-0620456	MD	HCR III Healthcare, LLC
Manor Care of Wheaton MD, LLC	DE	07/24/07	26-0620376	MD	HCR III Healthcare, LLC
Arden Courts of Cherry Hill NJ, LLC	DE	07/24/07	26-0623009	NJ	HCR III Healthcare, LLC
Manor Care of Mountainside NJ, LLC	DE	07/24/07	26-0612791	NJ	HCR III Healthcare, LLC
Manor Care of Voorhees NJ, LLC	DE	07/24/07	26-0612955	NJ	HCR III Healthcare, LLC
Arden Courts of Wayne NJ, LLC	DE	07/24/07	26-0622912	NJ	HCR III Healthcare, LLC
Manor Care-West Deptford of Paulsboro NJ, LLC	DE	07/24/07	26-0612993	NJ	HCR III Healthcare, LLC
Arden Courts of W. Orange NJ, LLC	DE	07/24/07	26-0622938	NJ	HCR III Healthcare, LLC
Arden Courts of Whippany NJ, LLC	DE	07/24/07	26-0623155	NJ	HCR III Healthcare, LLC
Arden Courts of Allentown PA, LLC	DE	07/24/07	26-0623965	PA	HCR III Healthcare, LLC
Manor Care of Allentown PA, LLC	DE	07/24/07	26-0610673	PA	HCR III Healthcare, LLC
Manor Care of Bethel Park PA, LLC	DE	07/24/07	26-0622002	PA	HCR III Healthcare, LLC
Manor Care of Bethlehem PA (2021), LLC	DE	07/24/07	26-0614878	PA	HCR III Healthcare, LLC
Manor Care of Bethlehem PA (2029), LLC	DE	07/24/07	26-0621845	PA	HCR III Healthcare, LLC
Manor Care of Camp Hill PA, LLC	DE	07/24/07	26-0623070	PA	HCR III Healthcare, LLC
Manor Care of Carlisle PA, LLC	DE	07/24/07	26-0610623	PA	HCR III Healthcare, LLC
Manor Care of Chambersburg PA, LLC	DE	07/24/07	26-0614915	PA	HCR III Healthcare, LLC
Manor Care of Dallastown PA, LLC	DE	07/24/07	26-0614534	PA	HCR III Healthcare, LLC
Donahoe Manor-Bedford PA, LLC	DE	07/24/07	26-0623108	PA	HCR III Healthcare, LLC
Manor Care of Easton PA, LLC	DE	07/24/07	26-0621877	PA	HCR III Healthcare, LLC
Manor Care-Greentree of Pittsburgh PA, LLC	DE	07/24/07	26-0622713	PA	HCR III Healthcare, LLC
Hampton House-Wilkes Barre, PA, LLC	DE	07/24/07	26-0610244	PA	HCR III Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

PART 1 - ORGANIZATIONAL CHART

Entity Name con't	State Formed	Date Formed	EIN	State Qual.	Member
Arden Courts of Jefferson Hills PA, LLC	DE	07/24/07	26-0624075	PA	HCR III Healthcare, LLC
Manor Care of Jersey Shore PA, LLC	DE	07/24/07	26-0614957	PA	HCR III Healthcare, LLC
Arden Courts of King of Prussia PA, LLC	DE	07/24/07	26-0624032	PA	HCR III Healthcare, LLC
Manor Care of King of Prussia PA, LLC	DE	07/24/07	26-0610645	PA	HCR III Healthcare, LLC
Manor Care of Kingston PA, LLC	DE	07/24/07	26-0615323	PA	HCR III Healthcare, LLC
Manor Care-Kingston Court of York PA, LLC	DE	07/24/07	26-0610561	PA	HCR III Healthcare, LLC
Manor Care of Lancaster PA, LLC	DE	07/24/07	26-0621637	PA	HCR III Healthcare, LLC
Manor Care-Lansdale of Montgomeryville PA, LLC	DE	07/24/07	26-0614451	PA	HCR III Healthcare, LLC
Manor Care of Laureldale PA, LLC	DE	07/24/07	26-0615380	PA	HCR III Healthcare, LLC
Manor Care of Lebanon PA, LLC	DE	07/24/07	26-0615358	PA	HCR III Healthcare, LLC
Manor Care-Linden Village of Lebanon PA, LLC	DE	07/24/07	26-0621960	PA	HCR III Healthcare, LLC
Manor Care of McMurray PA, LLC	DE	07/24/07	26-0614341	PA	HCR III Healthcare, LLC
Arden Courts of Monroeville PA, LLC	DE	07/24/07	26-0623898	PA	HCR III Healthcare, LLC
Manor Care of Monroeville PA, LLC	DE	07/24/07	26-0614497	PA	HCR III Healthcare, LLC
Arden Courts-North Hills of Pittsburgh PA, LLC	DE	07/24/07	26-0623920	PA	HCR III Healthcare, LLC
Manor Care-North Hills of Pittsburgh PA, LLC	DE	07/24/07	26-0610604	PA	HCR III Healthcare, LLC
Old Orchard Health Care Center-Easton PA, LLC	DE	07/24/07	26-0623007	PA	HCR III Healthcare, LLC
Heartland of Pittsburgh PA, LLC	DE	07/24/07	26-0610260	PA	HCR III Healthcare, LLC
Manor Care of Pottstown PA, LLC	DE	07/24/07	26-0615421	PA	HCR III Healthcare, LLC
Manor Care of Pottsville PA, LLC	DE	07/24/07	26-0615453	PA	HCR III Healthcare, LLC
Shadyside Nursing and Rehabilitation Center-Pittsburgh PA, LLC	DE	07/24/07	26-0610325	PA	HCR III Healthcare, LLC
Manor Care of Sinking Spring PA, LLC	DE	07/24/07	26-0621908	PA	HCR III Healthcare, LLC
Sky Vue Terrace-Pittsburgh PA, LLC	DE	07/24/07	26-0610347	PA	HCR III Healthcare, LLC
Manor Care of Sunbury PA, LLC	DE	07/24/07	26-0615499	PA	HCR III Healthcare, LLC
Arden Courts-Susquehanna of Harrisburg PA, LLC	DE	07/24/07	26-0624065	PA	HCR III Healthcare, LLC
Wallingford Nursing and Rehabilitation Center-Wallingford PA, LLC	DE	07/24/07	26-0610542	PA	HCR III Healthcare, LLC
Manor Care of West Reading PA, LLC	DE	07/24/07	26-0615529	PA	HCR III Healthcare, LLC
Arden Courts-Warminster of Hatboro PA, LLC	DE	07/24/07	26-0623869	PA	HCR III Healthcare, LLC
Whitehall Borough-Pittsburgh PA, LLC	DE	07/24/07	26-0622805	PA	HCR III Healthcare, LLC
Manor Care of Williamsport PA (North), LLC	DE	07/24/07	26-0621747	PA	HCR III Healthcare, LLC
Manor Care of Williamsport PA (South), LLC	DE	07/24/07	26-0621778	PA	HCR III Healthcare, LLC
Arden Courts of Yardley PA, LLC	DE	07/24/07	26-0623944	PA	HCR III Healthcare, LLC
Manor Care of Yardley PA, LLC	DE	07/24/07	26-0614171	PA	HCR III Healthcare, LLC
Manor Care of Yeadon PA, LLC	DE	07/24/07	26-0621815	PA	HCR III Healthcare, LLC
Manor Care of York PA (North), LLC	DE	07/24/07	26-0622887	PA	HCR III Healthcare, LLC
Manor Care of York PA (South), LLC	DE	07/24/07	26-0622947	PA	HCR III Healthcare, LLC
Heartland-Charleston of Hanahan SC, LLC	DE	07/24/07	26-0623167	SC	HCR III Healthcare, LLC
Columbia Rehabilitation and Nursing Center-Columbia SC, LLC	DE	07/24/07	26-0623408	SC	HCR III Healthcare, LLC
Oakmont East-Greenville SC, LLC	DE	07/24/07	26-0623316	SC	HCR III Healthcare, LLC
Oakmont West-Greenville SC, LLC	DE	07/24/07	26-0623335	SC	HCR III Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

PART 1 - ORGANIZATIONAL CHART

Entity Name con't	State Formed	Date Formed	EIN	State Qual.	Member
West Ashley Rehabilitation and Nursing Center-Charleston SC, LLC	DE	07/24/07	26-0623364	SC	HCR III Healthcare, LLC
ProMedica Senior Care of Brightwood, MD, LLC	DE	12/23/20	86-1310885	MD	HCR III Healthcare, LLC
ProMedica Senior Care of Exton, PA, LLC	DE	12/14/20	86-1376199	PA	HCR III Healthcare, LLC
ProMedica Senior Care of Lafayette, CO, LLC	DE	12/14/20	86-1504827	CO	HCR III Healthcare, LLC
ProMedica Senior Care of Lakewood, CO, LLC	DE	12/22/20	86-4395571	CO	HCR III Healthcare, LLC
ProMedica Senior Care of Moorestown, NJ, LLC	DE	12/14/20	86-1448854	NJ	HCR III Healthcare, LLC
ProMedica Senior Care of Philadelphia, PA, LLC	DE	12/14/20	86-1430242	PA	HCR III Healthcare, LLC
ProMedica Senior Care of Piscataway NJ, Inc	DE	12/22/20	86-1179270	NJ	HCR III Healthcare, LLC
ProMedica Senior Care of Voorhees NJ, LLC	DE	12/22/20	86-1243633	NJ	HCR III Healthcare, LLC
ProMedica Senior Care of Willow Grove, PA, LLC	DE	12/23/20	86-1360692	PA	HCR III Healthcare, LLC
Manor Care of Citrus Heights CA, LLC	DE	07/24/07	26-0622564	CA	HCR IV Healthcare, LLC
Manor Care of Fountain Valley CA, LLC	DE	07/24/07	26-0622988	CA	HCR IV Healthcare, LLC
Manor Care of Hemet CA, LLC	DE	07/24/07	26-0623107	CA	HCR IV Healthcare, LLC
Manor Care of Palm Desert CA, LLC	DE	07/24/07	26-0623221	CA	HCR IV Healthcare, LLC
Manor Care of Sunnyvale CA, LLC	DE	07/24/07	26-0623034	CA	HCR IV Healthcare, LLC
Manor Care-Tice Valley CA, LLC	DE	07/24/07	26-0622591	CA	HCR IV Healthcare, LLC
Manor Care of Walnut Creek CA, LLC	DE	07/24/07	26-0623196	CA	HCR IV Healthcare, LLC
Manor Care of Denver CO, LLC	DE	07/24/07	26-0623262	CO	HCR IV Healthcare, LLC
Manor Care of Boulder CO, LLC	DE	07/24/07	26-0623287	CO	HCR IV Healthcare, LLC
Manor Care of Elk Grove Village IL, LLC	DE	07/24/07	26-0618782	IL	HCR IV Healthcare, LLC
Heartland of Galesburg IL, LLC	DE	07/24/07	26-0624455	IL	HCR IV Healthcare, LLC
Arden Courts of Geneva IL, LLC	DE	07/24/07	26-0625428	IL	HCR IV Healthcare, LLC
Arden Courts of Glen Ellyn IL, LLC	DE	07/24/07	26-0625418	IL	HCR IV Healthcare, LLC
Heartland of Henry IL, LLC	DE	07/24/07	26-0614845	IL	HCR IV Healthcare, LLC
Manor Care of Hinsdale IL, LLC	DE	07/24/07	26-0615984	IL	HCR IV Healthcare, LLC
Manor Care of Homewood IL, LLC	DE	07/24/07	26-0614920	IL	HCR IV Healthcare, LLC
Manor Care of Libertyville IL, LLC	DE	07/24/07	26-0615859	IL	HCR IV Healthcare, LLC
Heartland of Macomb IL, LLC	DE	07/24/07	26-0624476	IL	HCR IV Healthcare, LLC
Heartland of Moline IL, LLC	DE	07/24/07	26-0624491	IL	HCR IV Healthcare, LLC
Manor Care of Oak Lawn (East) IL, LLC	DE	07/24/07	26-0615929	IL	HCR IV Healthcare, LLC
Manor Care of Oak Lawn (West) IL, LLC	DE	07/24/07	26-0616038	IL	HCR IV Healthcare, LLC
Manor Care of Palos Heights IL, LLC	DE	07/24/07	26-0615889	IL	HCR IV Healthcare, LLC
Manor Care of Palos Heights (West) IL, LLC	DE	07/24/07	26-0618879	IL	HCR IV Healthcare, LLC
Arden Courts of South Holland IL, LLC	DE	07/24/07	26-0622045	IL	HCR IV Healthcare, LLC
Arden Courts of Palos Heights IL, LLC	DE	07/24/07	26-0625390	IL	HCR IV Healthcare, LLC
Arden Courts of Elk Grove Village IL, LLC	DE	07/24/07	26-0625405	IL	HCR IV Healthcare, LLC
Arden Courts of Northbrook IL, LLC	DE	07/24/07	26-0625378	IL	HCR IV Healthcare, LLC
Manor Care of Indy (South) IN, LLC	DE	07/24/07	26-0619623	IN	HCR IV Healthcare, LLC
Manor Care-Summer Trace of Carmel IN, LLC	DE	07/24/07	26-0619716	IN	HCR IV Healthcare, LLC
Heartland of Allen Park MI, LLC	DE	07/24/07	26-0611286	MI	HCR IV Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

PART 1 - ORGANIZATIONAL CHART

Entity Name con't	State Formed	Date Formed	EIN	State Qual.	Member
Heartland of Battle Creek MI, LLC	DE	07/24/07	26-0612206	MI	HCR IV Healthcare, LLC
Arden Courts of Bingham Farms MI, LLC	DE	07/24/07	26-0622828	MI	HCR IV Healthcare, LLC
Heartland-Briarwood MI, LLC	DE	07/24/07	26-0611711	MI	HCR IV Healthcare, LLC
Heartland of Canton MI, LLC	DE	07/24/07	26-0620527	MI	HCR IV Healthcare, LLC
Heartland of Dearborn Heights MI, LLC	DE	07/24/07	26-0611231	MI	HCR IV Healthcare, LLC
Fostrian Courts Assisted Living-Flushing MI, LLC	DE	07/24/07	26-0622894	MI	HCR IV Healthcare, LLC
Heartland-Fostrian of Flushing MI, LLC	DE	07/24/07	26-0611818	MI	HCR IV Healthcare, LLC
Heartland-Georgian East of Grosse Pointe MI, LLC	DE	07/24/07	26-0611334	MI	HCR IV Healthcare, LLC
Heartland-Hampton of Bay City MI, LLC	DE	07/24/07	26-0611865	MI	HCR IV Healthcare, LLC
Manor Care of Kingsford MI, LLC	DE	07/24/07	26-0611592	MI	HCR IV Healthcare, LLC
Arden Courts of Livonia MI, LLC	DE	07/24/07	26-0622866	MI	HCR IV Healthcare, LLC
Heartland-Oakland MI, LLC	DE	07/24/07	26-0620480	MI	HCR IV Healthcare, LLC
Arden Courts of Sterling Heights MI, LLC	DE	07/24/07	26-0622772	MI	HCR IV Healthcare, LLC
Heartland of Three Rivers MI, LLC	DE	07/24/07	26-0612325	MI	HCR IV Healthcare, LLC
Heartland-University of Livonia MI, LLC	DE	07/24/07	26-0611184	MI	HCR IV Healthcare, LLC
Arden Courts of Akron OH, LLC	DE	07/24/07	26-0623857	OH	HCR IV Healthcare, LLC
Manor Care of Barberton OH, LLC	DE	07/24/07	26-0609528	OH	HCR IV Healthcare, LLC
Heartland-Beavercreek of Dayton OH, LLC	DE	07/24/07	26-0609445	OH	HCR IV Healthcare, LLC
Heartland of Bucyrus OH, LLC	DE	07/24/07	26-0614610	OH	HCR IV Healthcare, LLC
Arden Courts-Anderson of Cincinnati OH, LLC	DE	07/24/07	26-0623677	OH	HCR IV Healthcare, LLC
Arden Courts-Bainbridge of Chagrin Falls OH, LLC	DE	07/24/07	26-0623202	OH	HCR IV Healthcare, LLC
Heartland of Centerville OH, LLC	DE	07/24/07	26-0609683	OH	HCR IV Healthcare, LLC
Heartland of Chillicothe OH, LLC	DE	07/24/07	26-0609311	OH	HCR IV Healthcare, LLC
Heartland of Hillsboro OH, LLC	DE	07/24/07	26-0609351	OH	HCR IV Healthcare, LLC
Arden Courts of Kenwood OH, LLC	DE	07/24/07	26-0623245	OH	HCR IV Healthcare, LLC
Heartland of Kettering OH, LLC	DE	07/24/07	26-0609231	OH	HCR IV Healthcare, LLC
Heartland of Marion OH, LLC	DE	07/24/07	26-0613105	OH	HCR IV Healthcare, LLC
Heartland of Marietta OH, LLC	DE	07/24/07	26-0609259	OH	HCR IV Healthcare, LLC
Heartland of Mentor OH, LLC	DE	07/24/07	26-0610122	OH	HCR IV Healthcare, LLC
Heartland of Miamisburg OH, LLC	DE	07/24/07		OH	HCR IV Healthcare, LLC
Heartland-Oak Pavilion of Cincinnati OH, LLC	DE	07/24/07	26-0614533	OH	HCR IV Healthcare, LLC
Arden Courts of Parma OH, LLC	DE	07/24/07	26-0623801	OH	HCR IV Healthcare, LLC
Manor Care of Parma OH, LLC	DE	07/24/07	26-0609661	OH	HCR IV Healthcare, LLC
Heartland of Perrysburg OH, LLC	DE	07/24/07	26-0609189	OH	HCR IV Healthcare, LLC
Perrysburg Commons Senior Housing-Perrysburg OH, LLC	DE	07/24/07	26-0623264	OH	HCR IV Healthcare, LLC
Heartland-Riverview of South Point OH, LLC	DE	07/24/07	26-0609484	OH	HCR IV Healthcare, LLC
Heartland Village of Westerville OH (NC), LLC	DE	07/24/07	26-0609323	OH	HCR IV Healthcare, LLC
Heartland Village of Westerville OH (RC), LLC	DE	07/24/07	26-0609337	OH	HCR IV Healthcare, LLC
Arden Courts of Westlake OH, LLC	DE	07/24/07	26-0623289	OH	HCR IV Healthcare, LLC
Manor Care of Willoughby OH, LLC	DE	07/24/07	26-0610097	OH	HCR IV Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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

Heartland Woodbridge of Fairfield OH, LLC was dissolved 10/2/2023

Entity Name con't	State Formed	Date Formed	EIN	State Qual.	Member
Arden Courts of Austin TX, LLC	DE	07/24/07	26-0624145	TX	HCR IV Healthcare, LLC
Arden Courts of Richardson TX, LLC	DE	07/24/07	26-0624214	TX	HCR IV Healthcare, LLC
Arden Courts of San Antonio TX, LLC	DE	07/24/07	26-0624189	TX	HCR IV Healthcare, LLC
Manor Care of Alexandria VA, LLC	DE	07/24/07	26-0624590	VA	HCR IV Healthcare, LLC
Arden Courts of Annandale VA, LLC	DE	07/24/07	26-0624314	VA	HCR IV Healthcare, LLC
Manor Care of Arlington VA, LLC	DE	07/24/07	26-0624619	VA	HCR IV Healthcare, LLC
Arden Courts-Fair Oaks of Fairfax VA, LLC	DE	07/24/07	26-0624353	VA	HCR IV Healthcare, LLC
Manor Care-Fair Oaks of Fairfax VA, LLC	DE	07/24/07	26-0624605	VA	HCR IV Healthcare, LLC
Manor Care-Imperial of Richmond VA, LLC	DE	07/24/07	26-0624643	VA	HCR IV Healthcare, LLC
Medical Care Center-Lynchburg VA, LLC	DE	07/24/07	26-0624567	VA	HCR IV Healthcare, LLC
Manor Care-Stratford Hall of Richmond VA, LLC	DE	07/24/07	26-0624664	VA	HCR IV Healthcare, LLC
Manor Care of Gig Harbor WA, LLC	DE	07/24/07	26-0624719	WA	HCR IV Healthcare, LLC
Manor Care of Lynwood WA, Association	DE	07/24/07	26-0624675	WA	HCR IV Healthcare, LLC
Manor Care of Spokane WA, Association	DE	07/24/07	26-0624687	WA	HCR IV Healthcare, LLC
Manor Care of Tacoma WA, Association	DE	07/24/07	26-0624696	WA	HCR IV Healthcare, LLC
Arden Courts-Richmond, VA, LLC	DE	12/01/20	85-4214133	VA	HCR IV Healthcare, LLC
Arden Courts-Virginia Beach, VA, LLC	DE	12/01/20	85-4220787	VA	HCR IV Healthcare, LLC

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	34-1517671.....				1611 Monroe Investors, LLC.....	....OH.....	....NIA.....	ProMedica Health System, Inc.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	82-2062486.....				300 Madison Building, LLC.....	....OH.....	....NIA.....	ProMedica Health System, Inc.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	86-1364813.....				AAA HealthConnect, LLC.....	....DE.....	....NIA.....	ProMedica Health System, Inc.....	Ownership.....	....50.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	85-3725776.....				Air Diverter Solutions, LLC.....	....OH.....	....NIA.....	ProMedica Innovations, LLC.....	Ownership.....	....67.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	34-1636874.....				Ancillary Services Management, LLC.....	....OH.....	....NIA.....	HCR Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0623857.....				Arden Courts of Akron OH, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0623965.....				Arden Courts of Allentown PA, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0624314.....				Arden Courts of Annandale VA, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0624145.....				Arden Courts of Austin TX, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625113.....				Arden Courts of Avon CT, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0622828.....				Arden Courts of Bingham Farms MI, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0623009.....				Arden Courts of Cherry Hill NJ, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625237.....				Arden Courts of Delray Beach FL, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625405.....				Arden Courts of Elk Grove Village IL, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625092.....				Arden Courts of Farmington CT, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625314.....				Arden Courts of Ft. Myers FL, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625428.....				Arden Courts of Geneva IL, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625418.....				Arden Courts of Glen Ellyn IL, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0624075.....				Arden Courts of Jefferson Hills PA, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0622568.....				Arden Courts of Kensington MD, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0623245.....				Arden Courts of Kenwood OH, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0624032.....				Arden Courts of King of Prussia PA, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0625141.....				Arden Courts of Largo FL, LLC.....	....DE.....	....NIA.....	HCR III Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....
00000.....		00000.....	26-0622866.....				Arden Courts of Livonia MI, LLC.....	....DE.....	....NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	....100.0.....	ProMedica Health System, Inc.....	....NO.....	....0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0623898.....				Arden Courts of Monroeville PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625378.....				Arden Courts of Northbrook IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625222.....				Arden Courts of Palm Harbor FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625390.....				Arden Courts of Palos Heights IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623801.....				Arden Courts of Parma OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622121.....				Arden Courts of Pikesville MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622198.....				Arden Courts of Potomac MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624214.....				Arden Courts of Richardson TX, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624189.....				Arden Courts of San Antonio TX, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625246.....				Arden Courts of Sarasota FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625266.....				Arden Courts of Seminole FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622164.....				Arden Courts of Silver Spring MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622045.....				Arden Courts of South Holland IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622772.....				Arden Courts of Sterling Heights MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625330.....				Arden Courts of Tampa FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622661.....				Arden Courts of Towson MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622938.....				Arden Courts of W. Orange NJ, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625258.....				Arden Courts of W. Palm Beach FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622912.....				Arden Courts of Wayne NJ, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623289.....				Arden Courts of Westlake OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623155.....				Arden Courts of Whippany NJ, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625127.....				Arden Courts of Wilmington DE, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625340.....				Arden Courts of Winter Springs FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623944.....				Arden Courts of Yardley PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0623677.....				Arden Courts-Anderson of Cincinnati OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623202.....				Arden Courts-Bainbridge of Chagrin Falls OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624353.....				Arden Courts-Fair Oaks of Fairfax VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625279.....				Arden Courts-Lely Palms of Naples FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623920.....				Arden Courts-North Hills of Pittsburgh PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	85-4214133.....				Arden Courts-Richmond VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624065.....				Arden Courts-Susquehanna of Harrisburg PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	85-4220787.....				Arden Courts-Virginia Beach VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623869.....				Arden Courts-Warminster of Hatboro PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	27-0608044.....				Arrowhead Behavioral Health, LLC.....	DE.....	NIA.....	The Toledo Hospital.....	Ownership.....	30.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	82-3954332.....				Ball Park Properties, LLC.....	OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1883132.....				Bay Park Community Hospital.....	OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623408.....				Columbia Rehabilitation and Nursing Center-Columbia SC, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-6108110.....				Community Health Center of Branch County.....	MI.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-4446484.....				Defiance Hospital, Inc.....	OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623108.....				Donahoe Manor-Bedford PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	20-4066818.....				East-West Holdings, LTD.....	OH.....	NIA.....	Memorial Hospital.....	Ownership.....	50.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-2796005.....				Emma L. Bixby Medical Center.....	MI.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	20-5752995.....				Erie West Hospice and Palliative Care, Ltd.....	OH.....	NIA.....	Heartland Hospice Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	84-4675266.....				Fort Industry JV Partner, LLC.....	OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1517671.....				Fort Industry Manager, LLC.....	OH.....	NIA.....	Fort Industry JV Partner, LLC.....	Ownership.....	30.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-0898745.....				Fostoria Hospital Association.....	OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622894.....				Fostrian Courts Assisted Living-Flushing MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1762402.....				Fremont Hospital/Physician Organization, Inc.....	OH.....	NIA.....	Memorial Hospital.....	Ownership.....	50.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000		00000	26-0610244				Hampton House-Wilkes-Barre PA, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-2032536				HCR Canterbury Village, LLC	DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0624435				HCR Healthcare, LLC	DE	NIA	HCR ManorCare, Inc. (Formerly Suburban Healthco, Inc.)	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1787978				HCR Home Health Care and Hospice, LLC	OH	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-1250342				HCR II Healthcare, LLC	DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0624411				HCR III Healthcare, LLC	DE	NIA	HCR II Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-1283803				HCR IV Healthcare, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	45-2507279				HCR Manor Care Services of Florida III, LLC	FL	NIA	HCR Home Health Care and Hospice, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	74-3193136				HCR Manor Care Services of Florida, LLC	FL	NIA	HCR Home Health Care and Hospice, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1838217				HCR Manor Care Services, LLC	OH	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	52-2031975				HCR ManorCare Foundation, Inc.	MD	NIA	ProMedica Foundation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	65-0666550				HCR ManorCare Medical Services of Florida, LLC	FL	NIA	Heartland Rehabilitation Services, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	82-5373223				HCR ManorCare, Inc. (Formerly Suburban Healthco, Inc.)	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	92-0801524				HCR Well PM Holdco, LLC	DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	46-1343453				HCRMC-ProMedica, LLC	DE	NIA	ManorCare Health Services of Toledo OH, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-1305723				Health Care and Retirement Corporation of America, LLC	DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
01212	ProMedica Insurance Corp.	17613	93-4022317				Health Resources of Ohio, Inc.	OH	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
01212	ProMedica Insurance Corp.	96687	35-1682400				Health Resources, Inc.	IN	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	85-3949811				Healthonomy, LLC	OH	NIA	ProMedica Health System, Inc.	Ownership	33.3	ProMedica Health System, Inc.	NO	0
00000		00000	32-0091717				Heartland Care, LLC	OH	NIA	HCR Manor Care Services, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1766299				Heartland Healthcare Services, LLC	OH	NIA	Heartland Services, LLC	Ownership	50.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1787895				Heartland Home Care, LLC	OH	NIA	Heartland Rehabilitation Services, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1787967				Heartland Home Health Care Services, LLC	OH	NIA	HCR Home Health Care and Hospice, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	27-0497199				Heartland Hospice Memorial Fund, Inc.	OH	NIA	ProMedica Foundation	Ownership	100.0	ProMedica Health System, Inc.	NO	0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	34-1788398.....				Heartland Hospice Services, LLC.....	OH.....	NIA.....	HCR Home Health Care and Hospice, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620015.....				Heartland of Adelphi MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611286.....				Heartland of Allen Park MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0612384.....				Heartland of Ann Arbor MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0612206.....				Heartland of Battle Creek MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623949.....				Heartland of Boca Raton FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623523.....				Heartland of Boynton Beach FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614610.....				Heartland of Bucyrus OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620527.....				Heartland of Canton MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609683.....				Heartland of Centerville OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609311.....				Heartland of Chillicothe OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611231.....				Heartland of Dearborn Heights MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623726.....				Heartland of Fort Myers FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624455.....				Heartland of Galesburg IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614845.....				Heartland of Henry IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609351.....				Heartland of Hillsboro OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0619980.....				Heartland of Hyattsville MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623590.....				Heartland of Jacksonville FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609231.....				Heartland of Kettering OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624476.....				Heartland of Macomb IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609259.....				Heartland of Marietta OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0613105.....				Heartland of Marion OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610122.....				Heartland of Mentor OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0794075.....				Heartland of Miamisburg OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0624491.....				Heartland of Moline IL, LLC..... Heartland of Orange Park FL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623613.....					DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609189.....				Heartland of Perrysburg OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610260.....				Heartland of Pittsburgh PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623968.....				Heartland of Sarasota FL, LLC..... Heartland of Three Rivers MI, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0612325.....					DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	30-1202528.....				Heartland of Toledo OH, LLC..... Heartland of Zephyrhills FL, LLC.....	OH.....	NIA.....	ManorCare Health Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623476.....				Heartland Rehabilitation Services of Michigan, LLC..... Heartland Rehabilitation Services, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC..... Heartland Rehabilitation Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	30-0535129.....					DE.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1280619.....					OH.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1760503.....				Heartland Services, LLC.....	OH.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609323.....				Heartland Village of Westerville OH (NC), LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609337.....				Heartland Village of Westerville OH (RC), LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609445.....				Heartland-Beavercreek of Dayton OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611711.....				Heartland-Briarwood MI, LLC..... Heartland-Charleston of Hanahan SC, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623167.....				Heartland-Fostrian of Flushing MI, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611818.....				Heartland-Georgian East of Grosse Pointe MI, LLC..... Heartland-Hampton of Bay City MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611334.....				Heartland-Oak Pavilion of Cincinnati OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611865.....				Heartland-Oakland MI, LLC..... Heartland-Prosperity Oaks of Palm Beach Gardens FL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614533.....				Heartland-Riverview of South Point OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620480.....				Heartland-South Jacksonville of Jacksonville FL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623909.....					DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609484.....					DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623559.....					DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0611184.....			Heartland-University of Livonia MI, LLC.....		DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-3146907.....			Herrick Memorial Development Corporation.....		MI.....	NIA.....	Emma L. Bixby Medical Center.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-3639616.....			Herrick Memorial Office Plaza Condominium Association.....		MI.....	NIA.....	Herrick Memorial Development Corporation.....	Ownership.....	71.8.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	41-1458213.....			In Home Health, LLC.....		MN.....	NIA.....	ManorCare Health Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	25-1457630.....			Industrial Wastes, LLC.....		DE.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1517671.....			IST Theatre, LLC.....		OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	45-4781053.....			Kaitlyn's Cottage, Inc.....		OH.....	NIA.....	Defiance Hospital, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	81-2624635.....			Kapios, LLC.....		OH.....	NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623931.....			Kensington Manor-Sarasota FL, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	System, Inc.....	NO.....	0.....
00000.....		00000.....	38-2879330.....			Lenawee Long Term Care.....		MI.....	NIA.....	ManorCare Health Services of Toledo OH, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1883284.....			Lima Memorial Joint Operating Company.....		OH.....	NIA.....	PHS Ventures, LLC.....	Ownership.....	50.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	52-1462072.....			Manor Care Aviation, LLC.....		DE.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0625295.....			Manor Care- Lely Palms of Naples FL (SH), LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624159.....			Manor Care Nursing Center of Sarasota FL, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624590.....			Manor Care of Alexandria VA, LLC.....		DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610673.....			Manor Care of Allentown PA, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624619.....			Manor Care of Arlington VA, LLC.....		DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609528.....			Manor Care of Barberton OH, LLC.....		DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622002.....			Manor Care of Bethel Park PA, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620122.....			Manor Care of Bethesda MD, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614878.....			Manor Care of Bethlehem PA (2021), LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621845.....			Manor Care of Bethlehem PA (2029), LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624217.....			Manor Care of Boca Raton FL, LLC.....		DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623287.....			Manor Care of Boulder CO, LLC.....		DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0624241.....				Manor Care of Boynton Beach FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623070.....				Manor Care of Camp Hill PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610623.....				Manor Care of Carlisle PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624378.....				Manor Care of Cedar Rapids IA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614915.....				Manor Care of Chambersburg PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620158.....				Manor Care of Chevy Chase MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622564.....				Manor Care of Citrus Heights CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614534.....				Manor Care of Dallastown PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624394.....				Manor Care of Davenport IA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	52-1916053.....				Manor Care of Delaware County, LLC.....	DE.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624068.....				Manor Care of Delray Beach FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623262.....				Manor Care of Denver CO, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624416.....				Manor Care of Dubuque IA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624190.....				Manor Care of Dunedin FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621877.....				Manor Care of Easton PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0618782.....				Manor Care of Elk Grove Village IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622988.....				Manor Care of Fountain Valley CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624272.....				Manor Care of Ft. Myers FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624719.....				Manor Care of Gig Harbor WA, Association (fka Manor Care of Gig Harbor WA, LLC).....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623107.....				Manor Care of Hemet CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615984.....				Manor Care of Hinsdale IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614920.....				Manor Care of Homewood IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610582.....				Manor Care of Huntingdon Valley PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0619623.....				Manor Care of Indy (South) IN, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614957.....				Manor Care of Jersey Shore PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610645.....				Manor Care of King of Prussia PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0611592.....				Manor Care of Kingsford MI, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615323.....				Manor Care of Kingston PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624391.....				Manor Care of Lacey WA, Association (fka Manor Care of Lacey WA, LLC).....	DE.....	NIA.....	ManorCare Health Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621637.....				Manor Care of Lancaster PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615380.....				Manor Care of Laureldale PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615358.....				Manor Care of Lebanon PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615859.....				Manor Care of Libertyville IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624675.....				Manor Care of Lynnwood WA, Association (fka Manor Care of Lynnwood WA, LLC).....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624336.....				Manor Care of Marietta GA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614341.....				Manor Care of McMurray PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614497.....				Manor Care of Monroeville PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0612791.....				Manor Care of Mountainside NJ, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624049.....				Manor Care of Naples FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615929.....				Manor Care of Oak Lawn (East) IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0616038.....				Manor Care of Oak Lawn (West) IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623221.....				Manor Care of Palm Desert CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624018.....				Manor Care of Palm Harbor FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0618879.....				Manor Care of Palos Heights (West) IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615889.....				Manor Care of Palos Heights IL, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0609661.....				Manor Care of Parma OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	26-0620187.....				Manor Care of Potomac MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615421.....				Manor Care of Pottstown PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615453.....				Manor Care of Pottsville PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624375.....				Manor Care of Salmon Creek WA, Association (fka Manor Care of Salmon Creek WA, LLC).....	DE.....	NIA.....	ManorCare Health Services, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620058.....				Manor Care of Silver Spring MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621908.....				Manor Care of Sinking Spring PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624687.....				Manor Care of Spokane WA, Association (fka Manor Care of Spokane WA, LLC).....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615499.....				Manor Care of Sunbury PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623034.....				Manor Care of Sunnyvale CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624696.....				Manor Care of Tacoma WA, Association (fka Manor Care of Tacoma WA, LLC).....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620456.....				Manor Care of Towson, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624092.....				Manor Care of Venice FL, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0612955.....				Manor Care of Voorhees NJ, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623196.....				Manor Care of Walnut Creek CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624363.....				Manor Care of Waterloo IA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624438.....				Manor Care of West Des Moines IA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0615529.....				Manor Care of West Reading PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620376.....				Manor Care of Wheaton MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621747.....				Manor Care of Williamsport PA (North), LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621778.....				Manor Care of Williamsport PA (South), LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610097.....				Manor Care of Willoughby OH, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623367.....				Manor Care of Wilmington DE, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	36-2899194.....				Manor Care of Winter Park FL, LLC.....	DE.....	NIA.....	ManorCare Health Services, LLC.....	Ownership.....	50.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	36-2899194.....				Manor Care of Winter Park FL, LLC.....	DE.....	NIA.....	Winter Park Nursing Center, LLC.....	Ownership.....	50.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614171.....				Manor Care of Yardley PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621815.....				Manor Care of Yeadon PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622887.....				Manor Care of York PA (North), LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622947.....				Manor Care of York PA (South), LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624293.....				Manor Care Rehabilitation Center of Decatur GA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	52-2055097.....				Manor Care Supply, LLC.....	DE.....	NIA.....	HCR Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0619923.....				Manor Care-Dulaney MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624605.....				Manor Care-Fair Oaks of Fairfax VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622713.....				Manor Care-Greentree of Pittsburgh PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624643.....				Manor Care-Imperial of Richmond VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610561.....				Manor Care-Kingston Court of York PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0614451.....				Manor Care-Lansdale of Montgomeryville PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620266.....				Manor Care-Largo MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0621960.....				Manor Care-Linden Village of Lebanon PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610604.....				Manor Care-North Hills of Pittsburgh PA, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0623346.....				Manor Care-Pike Creek of Wilmington DE, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620341.....				Manor Care-Roland Park MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620310.....				Manor Care-Rossville MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620431.....				Manor Care-Ruxton MD, LLC.....	DE.....	NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0624664.....				Manor Care-Stratford Hall of Richmond VA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0619716.....				Manor Care-Summer Trace of Carmel IN, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622591.....				Manor Care-Tice Valley CA, LLC.....	DE.....	NIA.....	HCR IV Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000		00000	26-0612993			Manor Care-West Deptford of Paulsboro NJ, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0620223			Manor Care-Woodbridge Valley MD, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	90-0904333			ManorCare Health Services of Toledo OH, LLC		DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-1305666			ManorCare Health Services, LLC		DE	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1517671			Marina District Development, LLC		OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0624567			Medical Care Center-Lynchburg VA, LLC		DE	NIA	HCR IV Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-4430849			Memorial Hospital		OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	27-3763993			Memorial Professional Services		MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-1984289			Mercy Memorial Hospital Corporation		MI	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	46-4315135			Mercy Memorial Surgical Co-Management Company, LLC		MI	NIA	Mercy Memorial Hospital Corporation	Ownership	50.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-3439267			Midwest Physician Services, P.C.		MI	NIA	--	--	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1517671			Mission Pointe Golf Course, LLC		MI	NIA	ProMedica Foundation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	02-0753921			Monroe Community Ambulance		MI	NIA	Mercy Memorial Hospital Corporation	Ownership	25.0	ProMedica Health System, Inc.	NO	0
00000		00000	02-0753921			Monroe Community Ambulance		MI	NIA	ProMedica Continuing Care Services Corporation	Ownership	25.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-2934134			Monroe Community Health Services		MI	NIA	ManorCare Health Services of Toledo OH, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-2704426			Monroe Health Ventures, Inc.		MI	NIA	Mercy Memorial Hospital Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0679898			Northwest Ohio Dedicated Breast MRI, LLC		OH	NIA	The Toledo Hospital	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0623316			Oakmont East-Greenville SC, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0623208			Oakmont of Union SC, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0623335			Oakmont West-Greenville SC, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0623007			Old Orchard Health Care Center-Easton PA, LLC		DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
01212	ProMedica Insurance Corp.	12353	20-3376102			Paramount Advantage		OH	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1773766			Paramount Benefits Agency, Inc.		OH	NIA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	88-1097334			Paramount Care of Connecticut, Inc.		CT	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000		00000	85-4374415			Paramount Care of Florida, Inc.	FL	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	88-1051496			Paramount Care of Kentucky, Inc.	KY	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	88-1148265			Paramount Care of New Jersey, Inc.	NJ	IA	ProMedica Insurance Corporation	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	26-0623264			Perrysburg Commons Senior Housing-Perrysburg OH, LLC	DE	NIA	HCR IV Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1517671			PHS Investments, LLC	OH	NIA	The Toledo Hospital	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	87-1433009			PHS Toledo Innovation Center Holdings, LLC	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1880473			PHS Ventures, LLC	DE	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	22-1604502			Portfolio One, LLC	OH	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	81-5178173			ProMedica Active Mobility, LLC	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	85-2320857			ProMedica at Home, Inc.	MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	38-3322278			ProMedica Central Corporation of Michigan	MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1881137			ProMedica Central Physicians	MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	20-8734161			ProMedica Children's Specialists	MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-4492440			ProMedica Continuing Care Services Corporation	OH	NIA	ProMedica Continuum Services	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1880767			ProMedica Continuum Services	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	26-0324790			ProMedica Courier Services, Inc.	OH	NIA	ProMedica Continuum Services	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	88-3193329			ProMedica Employment Services II, LLC	OH	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1903270			ProMedica Employment Services, LLC	OH	NIA	HCR Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1517672			ProMedica Foundation	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	46-1120436			ProMedica Genito-Urinary Surgeons	MI	NIA	PROMEDICA PHYSICIAN GROUP, INC.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	47-4006496			ProMedica Health Network, Inc.	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1517671			ProMedica Health System, Inc.	OH	NIA	ProMedica Health System, Inc.	--	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	34-1517671			ProMedica Hickman Cancer Center Pharmacy, LLC	OH	NIA	The Toledo Hospital	Ownership	100.0	ProMedica Health System, Inc.	NO	0	
00000		00000	87-2414012			ProMedica Hospice of Marion County, FL, LLC	OH	NIA	HCR Home Health Care and Hospice, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0	

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	87-2417068.....				ProMedica Hospice of Palm Beach County, FL, LLC.....	.OH.....	.NIA.....	HCR Home Health Care and Hospice, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1931936.....				ProMedica Indemnity Corporation.....	.VT.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	30-1221601.....				ProMedica Innovations, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1570675.....				ProMedica Insurance Corporation.....	.OH.....		ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	83-2427163.....				ProMedica International, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	85-2085627.....				ProMedica Intuitive Management of Ohio, LLC.....	.DE.....	.NIA.....	The Toledo Hospital.....	Ownership.....	51.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	87-3850599.....				ProMedica Longevity and Wellness International, LLC.....	.OH.....	.NIA.....	ProMedica Innovations, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	87-3874203.....				ProMedica Longevity and Wellness US, LLC.....	.OH.....	.NIA.....	ProMedica Innovations, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	47-5168737.....				ProMedica Manager Member, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	27-2920342.....				ProMedica Monroe Cardiology.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	46-1111822.....				ProMedica Monroe Physicians.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	45-4976786.....				ProMedica Multi Specialty Physicians.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	82-1587026.....				ProMedica Natural Wellness, LLC.....	.OH.....	.NIA.....	ProMedica Innovations, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-3482148.....				ProMedica North Physicians Corporation.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-3888045.....				ProMedica Northwest Ohio Cardiology Consultants.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	38-3985660.....				ProMedica of Adrian MI, LLC.....	.DE.....	.NIA.....	ManorCare Health Services of Toledo OH, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	61-1771805.....				ProMedica of Sylvania OH, LLC.....	.DE.....	.NIA.....	ManorCare Health Services of Toledo OH, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-4105613.....				ProMedica Orthopedic Co-Management Company, LLC.....	.OH.....	.NIA.....	Bay Park Community Hospital.....	Ownership.....	4.7.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-4105613.....				ProMedica Orthopedic Co-Management Company, LLC.....	.OH.....	.NIA.....	The Toledo Hospital.....	Ownership.....	33.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	36-4949156.....				ProMedica Pharmacy Group, LLC.....	.OH.....	.NIA.....	ProMedica Continuum Services.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1899439.....				PROMEDICA PHYSICIAN GROUP, INC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	45-3230331.....				ProMedica Physician Management Services, LLC.....	.OH.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	85-2181349.....				ProMedica Physicians at Home, Inc.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	83-1731861.....				ProMedica Primary Care Providers.....	.MI.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000.....		00000.....	86-1651504.....				ProMedica Resourceful, LLC..... ProMedica Senior Care Medical Services I, LLC.....	.OH..... .DE.....	.NIA..... .NIA.....	ProMedica Innovations, LLC..... HCR ManorCare Medical Services of Florida, LLC.....	Ownership..... Ownership.....	100.0..... 100.0.....	ProMedica Health System, Inc..... ProMedica Health System, Inc.....	NO..... NO.....	0..... 0.....
00000.....		00000.....	86-2223807.....				ProMedica Senior Care of Brightwood MD, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1310885.....				ProMedica Senior Care of Exton PA, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1376199.....				ProMedica Senior Care of Georgia, LLC.....	.DE.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	90.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	87-1802834.....				ProMedica Senior Care of Lafayette CO, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1504827.....				ProMedica Senior Care of Lakewood CO, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	85-4395571.....				ProMedica Senior Care of Moorestown NJ, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1448854.....				ProMedica Senior Care of Philadelphia PA, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1430242.....				ProMedica Senior Care of Piscataway NJ, Inc. (fka ProMedica Piscataway NJ, LLC).....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1179270.....				ProMedica Senior Care of Voorhees NJ, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1243633.....				ProMedica Senior Care of Willow Grove PA, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	86-1360692.....				ProMedica Shared Services, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	88-3490894.....				ProMedica Surgical Services Co-Management Company, LLC.....	.OH.....	.NIA.....	Bay Park Community Hospital.....	Ownership.....	5.7.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	46-1989695.....				ProMedica Surgical Services Co-Management Company, LLC.....	.OH.....	.NIA.....	The Toledo Hospital.....	Ownership.....	45.3.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	46-1989695.....				ProMedica Surgical Services, LLC.....	.OH.....	.NIA.....	PROMEDICA PHYSICIAN GROUP, INC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	34-1517671.....				Reynolds Road Surgical Center, Ltd.....	.OH.....	.NIA.....		Ownership.....		ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	31-1569454.....				Sandusky County Medical Specialists, LLC.....	.OH.....	.NIA.....	The Toledo Hospital.....	Ownership.....	62.7.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	74-3254720.....				Senior & Rehab Care at MetroHealth, LLC.....	.OH.....	.NIA.....	Fremont Hospital/Physician Organization, Inc.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	87-2465544.....				Shadyside Nursing and Rehabilitation Center-Pittsburgh PA, LLC.....	.OH.....	.NIA.....	ProMedica Health System, Inc.....	Ownership.....	51.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610325.....				Sky Vue Terrace-Pittsburgh PA, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0610347.....				Springhouse of Bethesda MD, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0622235.....				Springhouse of Pikesville MD, LLC.....	.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....
00000.....		00000.....	26-0620079.....					.DE.....	.NIA.....	HCR III Healthcare, LLC.....	Ownership.....	100.0.....	ProMedica Health System, Inc.....	NO.....	0.....

16.14

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS 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 Domiciliary 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 *
00000		00000	26-0622508				Springhouse of Silver Spring MD, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	88-2454853				TH Levis MOB I, LLC	OH	NIA	The Toledo Hospital	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	20-2272848				The Hug Fund	OH	NIA	ProMedica Foundation	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	27-1325141				The Pharmacy Counter, LLC	OH	NIA	HCR Home Health Care and Hospice, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	27-0843485				The Surgical Institute of Monroe Ambulatory Surgery Center, LLC	MI	NIA	ProMedica Continuum Services	Ownership	54.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-4428256				The Toledo Hospital	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	87-1277852				Toledo Innovation Center Landlord, LLC	OH	NIA	Toledo Innovation Center Manager LLC	Ownership	99.0	ProMedica Health System, Inc.	NO	0
00000		00000	87-1277852				Toledo Innovation Center Landlord, LLC	OH	NIA	Toledo Innovation Center Master Tenant LLC	Ownership	1.0	ProMedica Health System, Inc.	NO	0
00000		00000	87-1386349				Toledo Innovation Center Leverage Lender LLC	OH	NIA	ProMedica Health System, Inc.	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	87-1343313				Toledo Innovation Center Manager LLC	OH	NIA	PHS Toledo Innovation Center Holdings, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	87-1364401				Toledo Innovation Center Master Tenant LLC	OH	NIA	Toledo Innovation Center Manager LLC	Ownership	1.0	ProMedica Health System, Inc.	NO	0
00000		00000	42-2211190				Toledo Riverfront Hotel, LLC	OH	NIA	JFW JR Riverfront Investment Company, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0610373				Twinbrook Medical Center-Erie PA, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	34-1517671				Vision Associates MOB, LLC	OH	NIA	The Toledo Hospital	Ownership	12.5	ProMedica Health System, Inc.	NO	0
00000		00000	34-1831624				Visiting Nurse Hospice and Health Care	OH	NIA	In Home Health, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0610542				Wallingford Nursing and Rehabilitation Center-Wallingford PA, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0623364				West Ashley Rehabilitation and Nursing Center-Charleston SC, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	20-0088459				West Central Surgical Center, LLC	OH	NIA	The Toledo Hospital	Ownership	50.0	ProMedica Health System, Inc.	NO	0
00000		00000	26-0622805				Whitehall Borough-Pittsburgh PA, LLC	DE	NIA	HCR III Healthcare, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	37-1019107				Winter Park Nursing Center, LLC	DE	NIA	ManorCare Health Services, LLC	Ownership	100.0	ProMedica Health System, Inc.	NO	0
00000		00000	38-3164818				Wolf Creek Associates, L.L.C.	MI	NIA	Emma L. Bixby Medical Center	Ownership	100.0	ProMedica Health System, Inc.	NO	0
												0.0			0
												0.0			0
												0.0			0
												0.0			0

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE Y
PART 1A – DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

16.17

Asterisk	Explanation
----------	-------------

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

Explanation:

Bar Code:



OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

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.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Current year change in encumbrances.....	0	0
4. Total gain (loss) on disposals.....	0	0
5. Deduct amounts received on disposals.....	0	0
6. Total foreign exchange change in book/adjusted carrying value.....	0	0
7. Deduct current year's other-than-temporary impairment recognized.....	0	0
8. Deduct current year's depreciation.....	0	0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8).....	0	0
10. Deduct total nonadmitted amounts.....	0	0
11. Statement value at end of current period (Line 9 minus Line 10).....	0	0

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.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase/(decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees.....	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....	0	0
10. Deduct current year's other-than-temporary impairment recognized.....	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Total valuation allowance.....	0	0
13. Subtotal (Line 11 plus Line 12).....	0	0
14. Deduct total nonadmitted amounts.....	0	0
15. Statement value at end of current period (Line 13 minus Line 14).....	0	0

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.....	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition.....	0	0
2.2 Additional investment made after acquisition.....	0	0
3. Capitalized deferred interest and other.....	0	0
4. Accrual of discount.....	0	0
5. Unrealized valuation increase/(decrease).....	0	0
6. Total gain (loss) on disposals.....	0	0
7. Deduct amounts received on disposals.....	0	0
8. Deduct amortization of premium, depreciation and proportional amortization.....	0	0
9. Total foreign exchange change in book/adjusted carrying value.....	0	0
10. Deduct current year's other-than-temporary impairment recognized.....	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	0	0
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

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.....	101,510	0
2. Cost of bonds and stocks acquired.....		101,510
3. Accrual of discount.....		0
4. Unrealized valuation increase/(decrease).....		0
5. Total gain (loss) on disposals.....		0
6. Deduct consideration for bonds and stocks disposed of.....		0
7. Deduct amortization of premium.....		0
8. Total foreign exchange change in book/adjusted carrying value.....		0
9. Deduct current year's other-than-temporary impairment recognized.....		0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	101,510	101,510
12. Deduct total nonadmitted amounts.....	0	0
13. Statement value at end of current period (Line 11 minus Line 12).....	101,510	101,510

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources 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
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a).....	101,510				101,510	0	0	101,510
2. NAIC 2 (a).....	0				0	0	0	0
3. NAIC 3 (a).....	0				0	0	0	0
4. NAIC 4 (a).....	0				0	0	0	0
5. NAIC 5 (a).....	0				0	0	0	0
6. NAIC 6 (a).....	0				0	0	0	0
7. Total ICO.....	101,510	0	0	0	101,510	0	0	101,510
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	0
12. NAIC 5	0				0	0	0	0
13. NAIC 6	0				0	0	0	0
14. Total ABS.....	0	0	0	0	0	0	0	0
PREFERRED STOCK								
15. NAIC 1	0				0	0	0	0
16. NAIC 2	0				0	0	0	0
17. NAIC 3	0				0	0	0	0
18. NAIC 4	0				0	0	0	0
19. NAIC 5	0				0	0	0	0
20. NAIC 6	0				0	0	0	0
21. Total Preferred Stock.....	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock.....	101,510	0	0	0	101,510	0	0	101,510

(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 \$; NAIC 2 \$;

NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

Schedule DA - Part 1

NONE

Schedule DA - Verification

NONE

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

Schedule E - Part 2 - Verification

NONE

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

Schedule D - Part 3

NONE

Schedule D - Part 4

NONE

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DB - Part E

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Restricted Asset 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 * XXX
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
Fifth Third Securities.....Toledo OH.....		0.000	2,040	.147	4,080	6,120	.6,120	XXX.....
The Huntington National Bank.....Columbus OH.....		0.160	11,535	0	2,676,660	2,970,167	2,981,359	XXX.....
0199998 Deposits in depositaries that do not exceed the allowable limit in any one depository (See Instructions) - Open Depositories	XXX	XXX						XXX
0199999 Total Open Depositories	XXX	XXX	13,575	147	2,680,740	2,976,287	2,987,479	XXX
0399999 Total Cash on Deposit	XXX	XXX	13,575	147	2,680,740	2,976,287	2,987,479	XXX
0499999 Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999 Total	XXX	XXX	13,575	147	2,680,740	2,976,287	2,987,479	XXX

STATEMENT AS OF MARCH 31, 2025 OF THE Health Resources of Ohio, Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

NONE

E14