



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2025
OF THE CONDITION AND AFFAIRS OF THE
Humana Health Plan of Ohio, Inc.

NAIC Group Code 0119 0119 NAIC Company Code 95348 Employer's ID Number 31-1154200
(Current) (Prior)

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes No

Incorporated/Organized 08/19/1985 Commenced Business 01/01/1986

Statutory Home Office c/o CT Corporation System, 4400 Easton Commons Way, Suite 125 Columbus, OH, US 43219
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 500 West Main Street 513-784-5320
(Street and Number) (Area Code) (Telephone Number)
Louisville, KY, US 40202

(City or Town, State, Country and Zip Code)

Mail Address P.O. Box 740036 Louisville, KY, US 40201-7436
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 500 West Main Street 513-784-5320
(Street and Number) (Area Code) (Telephone Number)
Louisville, KY, US 40202

(City or Town, State, Country and Zip Code)

Internet Website Address www.humana.com

Statutory Statement Contact Amanda Nethery 502-580-1624
(Name) (Area Code) (Telephone Number)
DOIINQUIRIES@humana.com 502-580-2099
(E-mail Address) (FAX Number)

OFFICERS

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

OTHER

Erin Fegan Banet #, SVP, Chief Audit and Risk Officer	John Edward Barger III, SVP, Medicaid President	Courtney Danielle Durall, Assistant Corporate Secretary & Director, ESG Strategy
Daniel Kevin Feld, Associate VP, Tax	John-Paul William Felter, SVP, Chief Accounting Officer & Controller	Leann Moren Hutchinson, VP, Specialty Service and Operations
John Stephen Littig, VP, Medicare Regional President	Sean Joseph O'Reilly, SVP, Chief Compliance Officer	William Mark Preston, VP, Investments
Frederick William Roth, VP, Medicare Supplement	Lisa Thornell Stephens #, SVP & Chief Operating Officer, Insurance	Gilbert Alan Stewart, SVP, Medicare Divisional Leader

DIRECTORS OR TRUSTEES

Sean Joseph O'Reilly George Renaudin II Joseph Matthew Ruschell

State of Kentucky SS:
County of Jefferson

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

George Renaudin II
President

Joseph Matthew Ruschell
VP, Associate General Counsel & Corporate
Secretary

Robert Martin Marcoux, Jr.
VP & Treasurer

Subscribed and sworn to before me this
8th day of August, 2025

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

Julia Wentworth
Notary Public
January 10, 2029

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	134,752,599	0	134,752,599	118,423,046
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less \$ encumbrances)	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances)	0	0	0	0
5. Cash (\$ 75,915,782), cash equivalents (\$ 100,765,823) and short-term investments (\$ 0)	176,681,604	0	176,681,604	109,080,322
6. Contract loans (including \$ 0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets	2,787,667	0	2,787,667	1,952,173
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	314,221,870	0	314,221,870	229,455,541
13. Title plants less \$ 0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	986,756	0	986,756	756,809
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	56,994,373	12,584	56,981,789	80,047,355
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums (\$ 172,656) and contracts subject to redetermination (\$ 47,440,375)	47,613,031	0	47,613,031	40,565,234
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	1,726,696	18,396	1,708,301	.876,683
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0	0
18.2 Net deferred tax asset	5,875,298	0	5,875,298	5,875,298
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ 0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0	0
24. Health care (\$ 3,295,793) and other amounts receivable	8,274,513	4,909,818	3,364,695	3,340,079
25. Aggregate write-ins for other-than-invested assets	323,336	323,336	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	436,015,874	5,264,134	430,751,740	360,916,998
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	436,015,874	5,264,134	430,751,740	360,916,998
DETAILS OF WRITE-INS				
1101.	0	0	0	0
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Commissions	323,336	323,336	0	0
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	323,336	323,336	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 0 reinsurance ceded)	139,011,787	9,155,458	148,167,245	140,013,674
2. Accrued medical incentive pool and bonus amounts	492,461	0	492,461	999,531
3. Unpaid claims adjustment expenses	2,062,612	0	2,062,612	1,364,862
4. Aggregate health policy reserves, including the liability of \$ 27,930 for medical loss ratio rebate per the Public Health Service Act	24,901,984	0	24,901,984	12,041,544
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	1,467	0	1,467	1,467
8. Premiums received in advance	58,605	0	58,605	19,200
9. General expenses due or accrued	11,455,614	0	11,455,614	21,642,996
10.1 Current federal and foreign income tax payable and interest thereon (including \$ 23,070 on realized gains (losses))	6,910,463	0	6,910,463	766,405
10.2 Net deferred tax liability	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others	0	0	0	0
13. Remittances and items not allocated	82,140	0	82,140	13,375
14. Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	59,576,868	0	59,576,868	57,164,402
16. Derivatives	0	0	0	0
17. Payable for securities	1,476,699	0	1,476,699	0
18. Payable for securities lending	2,787,667	0	2,787,667	1,952,173
19. Funds held under reinsurance treaties (with \$ 0 authorized reinsurers, \$ 0 unauthorized reinsurers and \$ 0 certified reinsurers)	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ 0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	923,596	0	923,596	952,684
23. Aggregate write-ins for other liabilities (including \$ 10,260,955 current)	11,549,166	0	11,549,166	4,661,998
24. Total liabilities (Lines 1 to 23)	261,291,129	9,155,458	270,446,587	241,594,311
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,000	1,000
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	210,223,747	195,223,747
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(49,919,595)	(75,902,060)
32. Less treasury stock, at cost:				
32.1 \$ 0 shares common (value included in Line 26 \$ 0)	XXX	XXX	0	0
32.2 \$ 0 shares preferred (value included in Line 27 \$ 0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	160,305,152	119,322,687
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	430,751,740	360,916,998
DETAILS OF WRITE-INS				
2301. Unclaimed Property	69,893	0	69,893	22,375
2302. Premium Payable	11,479,273	0	11,479,273	4,639,623
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	11,549,166	0	11,549,166	4,661,998
2501.	XXX	XXX	0	0
2502.	XXX	XXX	0	0
2503.	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months .....	....XXX.....	.....1,181,024	.....912,278	.....2,013,224
2. Net premium income (including \$ 0 non-health premium income).....	....XXX.....	.....681,478,327	.....533,092,001	.....1,186,896,210
3. Change in unearned premium reserves and reserve for rate credits.....	....XXX.....	.....0	.....0	.....(27,930)
4. Fee-for-service (net of \$ 0 medical expenses).....	....XXX.....	.....0	.....0	.....0
5. Risk revenue .....	....XXX.....	.....0	.....0	.....0
6. Aggregate write-ins for other health care related revenues .....	....XXX.....	.....0	.....0	.....0
7. Aggregate write-ins for other non-health revenues .....	....XXX.....	.....0	.....0	.....0
8. Total revenues (Lines 2 to 7) .....	....XXX.....	.....681,478,327	.....533,092,001	.....1,186,868,280
Hospital and Medical:				
9. Hospital/medical benefits .....	.....40,594,317	.....515,119,752	.....418,398,367	.....936,672,113
10. Other professional services .....	.....81,687	.....1,036,563	.....1,124,216	.....2,136,923
11. Outside referrals .....	.....0	.....0	.....0	.....0
12. Emergency room and out-of-area .....	.....2,084,387	.....26,449,741	.....21,347,783	.....45,946,614
13. Prescription drugs .....	.....883,962	.....11,216,992	.....9,572,163	.....15,508,396
14. Aggregate write-ins for other hospital and medical .....	.....0	.....0	.....0	.....0
15. Incentive pool, withhold adjustments and bonus amounts .....	.....0	.....1,446,860	.....837,491	.....17,009,549
16. Subtotal (Lines 9 to 15) .....	.....43,644,353	.....555,269,908	.....451,280,019	.....1,017,273,595
Less:				
17. Net reinsurance recoveries .....	.....0	.....0	.....0	.....0
18. Total hospital and medical (Lines 16 minus 17) .....	.....43,644,353	.....555,269,908	.....451,280,019	.....1,017,273,595
19. Non-health claims (net) .....	.....0	.....0	.....0	.....0
20. Claims adjustment expenses, including \$ 20,160,104 cost containment expenses .....	.....0	.....24,090,919	.....21,016,704	.....46,304,344
21. General administrative expenses .....	.....0	.....75,792,439	.....63,757,933	.....147,998,820
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only) .....	.....0	.....0	.....0	.....(13,990,646)
23. Total underwriting deductions (Lines 18 through 22).....	.....43,644,353	.....655,153,266	.....536,054,656	.....1,197,586,113
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	....XXX.....	.....26,325,061	.....(2,962,655)	.....(10,717,833)
25. Net investment income earned .....	.....0	.....6,180,024	.....5,188,713	.....9,949,547
26. Net realized capital gains (losses) less capital gains tax of \$ 53,191 .....	.....0	.....200,100	.....4,324	.....145,436
27. Net investment gains (losses) (Lines 25 plus 26) .....	.....0	.....6,380,124	.....5,193,037	.....10,094,983
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 0 )].....	.....0	.....0	.....0	.....0
29. Aggregate write-ins for other income or expenses .....	.....0	.....0	.....1	.....1
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.....	.....32,705,185	.....2,230,383	.....(622,849)
31. Federal and foreign income taxes incurred .....	....XXX.....	.....6,857,272	.....1,001,230	.....(1,684,826)
32. Net income (loss) (Lines 30 minus 31) .....	....XXX.....	.....25,847,912	.....1,229,153	.....1,061,977
DETAILS OF WRITE-INS				
0601. ....	....XXX.....	.....0	.....0	.....0
0602. ....	....XXX.....	.....	.....	.....
0603. ....	....XXX.....	.....	.....	.....
0698. Summary of remaining write-ins for Line 6 from overflow page .....	....XXX.....	.....0	.....0	.....0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above) .....	....XXX.....	.....0	.....0	.....0
0701. ....	....XXX.....	.....0	.....0	.....0
0702. ....	....XXX.....	.....	.....	.....
0703. ....	....XXX.....	.....	.....	.....
0798. Summary of remaining write-ins for Line 7 from overflow page .....	....XXX.....	.....0	.....0	.....0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) .....	....XXX.....	.....0	.....0	.....0
1401. ....	.....0	.....0	.....0	.....0
1402. ....	.....	.....	.....	.....
1403. ....	.....	.....	.....	.....
1498. Summary of remaining write-ins for Line 14 from overflow page .....	.....0	.....0	.....0	.....0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) .....	.....0	.....0	.....0	.....0
2901. Miscellaneous Income(Expense) .....	.....0	.....0	.....1	.....1
2902. ....	.....	.....	.....	.....
2903. ....	.....	.....	.....	.....
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.....0	.....0	.....0	.....0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) .....	.....0	.....0	.....1	.....1

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	119,322,687	122,234,326	122,234,326
34. Net income or (loss) from Line 32	25,847,912	1,229,153	1,061,977
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	(1,212,472)
39. Change in nonadmitted assets	134,552	1,313,866	(2,761,144)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....	0	0	0
44. Capital Changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....	0	0	0
45. Surplus adjustments:			
45.1 Paid in	15,000,000	0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	40,982,465	2,543,019	(2,911,639)
49. Capital and surplus end of reporting period (Line 33 plus 48)	160,305,152	124,777,345	119,322,687
DETAILS OF WRITE-INS			
4701.	0	0	0
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	717,239,643	487,984,159	1,138,205,636
2. Net investment income	5,857,544	5,133,669	9,523,441
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	723,097,188	493,117,828	1,147,729,077
5. Benefit and loss related payments	547,381,984	443,238,138	986,889,349
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	110,408,223	87,957,049	189,336,486
8. Dividends paid to policyholders	0	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 50,221 tax on capital gains (losses)	766,405	(2,903,113)	(6,216,025)
10. Total (Lines 5 through 9)	658,556,612	528,292,074	1,170,009,810
11. Net cash from operations (Line 4 minus Line 10)	64,540,575	(35,174,246)	(22,280,734)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	21,599,793	6,242,121	23,041,758
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	(610)	11	11
12.7 Miscellaneous proceeds	1,476,699	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	23,075,882	6,242,132	23,041,769
13. Cost of investments acquired (long-term only):			
13.1 Bonds	37,582,914	11,532,689	54,178,009
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	835,494	29,471	1,952,173
13.7 Total investments acquired (Lines 13.1 to 13.6)	38,418,408	11,562,161	56,130,182
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)	(15,342,526)	(5,320,029)	(33,088,413)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	15,000,000	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	3,403,232	21,861,009	39,350,742
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	18,403,232	21,861,009	39,350,742
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)	67,601,282	(18,633,266)	(16,018,404)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	109,080,322	125,098,726	125,098,726
19.2 End of period (Line 18 plus Line 19.1)	176,681,604	106,465,459	109,080,322

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

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STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
1. Prior Year	197,279	0	0	0	0	0	0	10,863	186,416	0	0	0	0	0
2. First Quarter	199,068	0	0	0	0	0	0	9,149	189,919	0	0	0	0	0
3. Second Quarter	201,016	0	0	0	0	0	0	8,908	192,108	0	0	0	0	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	1,181,024	0	0	0	0	0	0	54,659	1,126,365	0	0	0	0	0
Total Member Ambulatory Encounters for Period:														
7. Physician	1,707,571	0	0	0	0	0	0	132,358	1,575,213	0	0	0	0	0
8. Non-Physician	695,442	0	0	0	0	0	0	65,167	630,275	0	0	0	0	0
9. Total	2,403,013	0	0	0	0	0	0	197,525	2,205,488	0	0	0	0	0
10. Hospital Patient Days Incurred	165,952	0	0	0	0	0	0	16,974	148,978	0	0	0	0	0
11. Number of Inpatient Admissions	13,364	0	0	0	0	0	0	1,563	11,801	0	0	0	0	0
12. Health Premiums Written (a)	681,478,327	0	0	0	0	0	0	82,877,897	598,600,430	0	0	0	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	681,478,327	0	0	0	0	0	0	82,877,897	598,600,430	0	0	0	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	547,508,292	251,885	(231,682)	0	0	0	316,582	69,165,424	478,006,084	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	555,269,908	251,885	327,651	0	0	0	(30,357)	70,276,365	484,444,364	0	0	0	0	0

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 82,877,897

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc

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

Aging Analysis of Unpaid Claim

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0299999 Aggregate accounts not individually listed-uncovered	1,365,481	92,387	1,846	926	4,234	1,464,87
0399999 Aggregate accounts not individually listed-covered	8,950,514	605,583	12,102	6,067	27,751	9,602,01
0499999 Subtotals	10,315,995	697,970	13,948	6,992	31,985	11,066,88
0599999 Unreported claims and other claim reserves						137,100,35
0699999 Total amounts withheld						
0799999 Total claims unpaid						148,167,24
0899999 Accrued medical incentive pool and bonus amounts						492,46

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	251,885	0	0	0	251,885	0
2. Comprehensive (hospital and medical) group	(231,682)	0	1,413,162	0	1,181,480	1,210,728
3. Medicare Supplement	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0
5. Dental only	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan	316,582	0	4,908	0	321,490	4,068
7. Title XVIII - Medicare	8,933,252	59,254,596	3,696,490	10,809,607	12,629,742	12,819,313
8. Title XIX - Medicaid	86,591,082	390,438,647	7,716,761	124,527,785	94,307,843	125,981,032
9. Credit A&H	0	0	0	0	0	0
10. Disability Income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12)	95,861,118	449,693,243	12,831,320	135,337,392	108,692,438	140,015,141
14. Health care receivables (a)	527,464	7,509,675	0	0	527,464	8,152,254
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	1,953,931	0	7,303	485,157	1,961,235	999,531
17. Totals (Lines 13 - 14 + 15 + 16)	97,287,586	442,183,568	12,838,623	135,822,549	110,126,209	132,862,418

(a) Excludes \$ 168,472 loans or advances to providers not yet expensed.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

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

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

	SSAP #	F/S Page	F/S Line #	2025	2024
Net Income					
1. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ 25,847,912	\$ 1,061,977
2. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-	-
3. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-	-
4. NAIC SSAP	xxx	xxx	xxx	\$ 25,847,912	\$ 1,061,977
Surplus					
5. Humana Health Plan of Ohio, Inc. Ohio basis	xxx	xxx	xxx	\$ 160,305,152	\$ 119,322,687
6. State Prescribed Practices that is an increase/(decrease) NAIC SSAP				-	-
7. State Permitted Practices that is an increase/(decrease) NAIC SSAP				-	-
8. NAIC SSAP	xxx	xxx	xxx	\$ 160,305,152	\$ 119,322,687

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

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

C. Accounting Policy

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

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

In addition, the Company uses the following accounting policies:

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

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

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

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

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

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

(5) Not Applicable.

(6) For loan backed and structured securities where the securities fair value is less than the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.

(7) Not Applicable.

(8) Not Applicable.

(9) Not Applicable.

(10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is utilized in the calculation of the premium deficiency liability.

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

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

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

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

(13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.

(14) Not Applicable.

(15) Not Applicable.

D. Going Concern

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

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

2. Accounting Changes and Corrections of Errors

Not Applicable.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

D. Impairment Loss

Not Applicable.

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

Not Applicable.

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Asset-Backed Securities

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

(2) Not Applicable.

(3) Not Applicable.

(4) The Company does not have any investments in an other-than-temporary impairment position at June 30, 2025.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at June 30, 2025:

(a) The aggregate amount of unrealized losses:

1. Less than Twelve Months	\$	(827,452)
2. Twelve Months or Longer	\$	(2,649,142)

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

1. Less than Twelve Months	\$	45,383,724
2. Twelve Months or Longer	\$	16,946,179

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

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company participates in securities lending transactions. The book/adjusted carrying value and fair value of securities on loan at June 30, 2025 and December 31, 2024 was \$2,938,577 and \$2,148,691, respectively. Book/adjusted carrying value approximates fair value due to the short-term maturity of the investments. The Company maintains effective control over the loaned securities and requires collateral initially equal to at least 102% of the market value of the loaned securities. Collateral received consists of cash and fixed-income securities. Non-cash collateral is not recorded in the statements of assets, liabilities, capital and surplus, as the Company does not have the right to sell, pledge, or otherwise reinvest the non-cash collateral. The Company did not have OTTIs on invested collateral at June 30, 2025 and December 31, 2024.
- (2) The Company has not pledged any of its assets as collateral that are not reclassified and separately reported in the statement of assets, liabilities, capital and surplus.

(3) Collateral Received

- a. The aggregate amounts of contractually obligated open collateral positions and the corresponding liabilities that represented the Company's obligations to return the collateral at June 30, 2025 and December 31, 2024 were as follows:

	June 30, 2025	December 31, 2024
(1) Securities Lending		
a. Open	\$ -	\$ -
b. 30 days or less	2,787,667	1,952,173
c. 31 to 60 days	-	-
d. 61 to 90 days	-	-
e. Greater than 90 days	-	-
f. Sub-total (Sum of a+b+c+d+e)	2,787,667	1,952,173
g. Securities received	213,475	244,892
h. Total collateral received (f+g)	<u>\$ 3,001,143</u>	<u>\$ 2,197,065</u>

- b. The fair value of the collateral and the portion of the collateral that was sold or repledged was \$3,001,143 and \$2,197,065, at June 30, 2025 and December 31, 2024, respectively.
- c. Cash collateral is invested in fixed income, short-term and cash equivalent securities and the offsetting collateral liability is included in payable for securities lending in the statements of assets, liabilities, capital and surplus. Non-cash collateral consists of fixed income debt securities.
- (4) The Company did not have any securities lending transactions administered by an affiliated agent which were "one-line" at June 30, 2025 and December 31, 2024.

(5) Collateral Reinvested

- a. The aggregate amounts of reinvested cash collateral and securities available to repledge by maturity term at June 30, 2025 and December 31, 2024 were as follows:

	June 30, 2025		December 31, 2024	
	Amortized	Fair Value	Amortized	Fair Value
	Cost	\$	Cost	\$
(1) Securities Lending				
a. Open	\$ -	\$ -	\$ -	\$ -
b. 30 days or less	1,277,092	1,277,097	1,359,738	1,359,749
c. 31 to 60 days	961,069	961,076	363,813	363,815
d. 61 to 90 days	47,773	47,787	27,990	27,983
e. 91 to 120 days	77,632	77,656	41,985	41,981
f. 121 to 180 days	226,924	226,906	37,320	37,332
g. 181 to 365 days	197,065	197,146	121,291	121,313
h. 1 to 2 years	-	-	-	-
i. 2 to 3 years	-	-	-	-
j. Greater than 3 years	-	-	-	-
k. Sub-total (Sum of a through j)	2,787,556	2,787,667	1,952,138	1,952,173
l. Securities reinvested	-	-	-	-
m. Total collateral reinvested (k+l)	<u>\$ 2,787,556</u>	<u>\$ 2,787,667</u>	<u>\$ 1,952,138</u>	<u>\$ 1,952,173</u>

- b. The Company did not have maturity dates of the collateral to be returned that did not match the invested assets at June 30, 2025 and December 31, 2024.
- (6) The Company accepts non-cash collateral through its participation in securities lending transactions with its lending agent. Non-cash collateral generally consists of U.S. government securities which are not recorded in the statements of assets, liabilities, capital and surplus as the Company does not have the right to sell, pledge or otherwise reinvest these securities unless the counterparty defaults. The aggregate fair value of non-cash collateral accepted was \$213,475 and \$244,892, at June 30, 2025 and December 31, 2024, respectively.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(7) The Company had no cash or non-cash collateral for securities lending transactions that extended beyond one year at June 30, 2025 and December 31, 2024, respectively.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not Applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not Applicable.

J. Real Estate

Not Applicable.

K. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

L. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted from Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	3 Increase/ (Decrease) (1 minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Percentage Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 Percentage Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	-%	-%
b. Collateral held under security lending agreements	2,787,667	1,952,173	835,494	-	2,787,667	0.64%	0.65%
c. Subject to repurchase agreements	-	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-	-
h. Letter stock or securities restricted to sale – excluding FHLB capital stock	-	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-	-
j. On deposit with states	1,110,026	1,112,357	(2,331)	-	1,110,026	0.25%	0.26%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-	-
o. Total Restricted Assets	\$ 3,897,693	\$ 3,064,530	\$ 833,163	-	\$ 3,897,693	0.89%	0.90%

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

Not Applicable.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

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

Not Applicable.

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

Not Applicable.

M. Working Capital Finance Investments

Not Applicable.

N. Offsetting and Netting of Assets and Liabilities

Not Applicable.

O. 5GI* Securities

Not Applicable.

P. Short Sales

Not Applicable.

Q. Prepayment Penalty and Acceleration Fees

Not Applicable.

R. Share of Cash Pool by Asset Type

Not Applicable.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

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

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

B. The total amount excluded was \$0.

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

Interest Income Due and Accrued	Amount
1. Gross	\$ 986,756
2. Nonadmitted	\$ -
3. Admitted	\$ 986,756

D. The aggregate deferred interest.

	Amount
Aggregate Deferred Interest	\$ -

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

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

8. Derivative Instruments

Not Applicable.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

9. Income Taxes

The Inflation Reduction Act (Act) was enacted on August 16, 2022 and included a new corporate alternative minimum tax (CAMT). The Act and the CAMT went into effect for tax years beginning after 2022. The Company is an applicable corporation for 2025 as the average adjusted financial statement income for Humana Inc. and Subsidiaries for the applicable three-tax-year period exceeds the \$1 billion income-based threshold. However, the Company does not expect to incur a CAMT liability in 2025 as its regular tax liability is expected to exceed the tentative minimum tax. Further, no other taxable entities or taxable groups within the Company's structure are expected to exceed the average adjusted financial statement income threshold. The Company has not made an accounting policy election to disregard CAMT when evaluating the need for a valuation allowance for its non-CAMT DTAs.

No material change since year-end December 31, 2024.

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-B. The Company has several management contracts with Humana Inc. and other related parties whereby the Company is provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by the Company. Management fees charged to operations for the years ended December 31, 2024 and 2023 were \$110,488,761 and \$88,573,316, respectively. As a part of this agreement, Humana Inc. makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. The Company continues to be primarily liable for any outstanding payments made on behalf of the Company, should Humana Inc. not be able to fulfill its obligations.

The Company has various related party agreements with no material change since year-end December 31, 2024.

No dividends or returns of capital were paid by the Company as of June 30, 2025.

The Company received a \$15,000,000 capital contribution from Humana Inc. on March 28, 2025.

C. (1) Detail of Material Related Party Transactions

The Company has related party transactions with no material change since year-end December 31, 2024.

(2) Detail of Material Related Party Transactions Involving Services

The Company has related party transactions involving services with no material change since year-end December 31, 2024.

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

Not Applicable.

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

The Company has amounts owed to/from a related party with no material change since year-end December 31, 2024.

D. At June 30, 2025, the Company reported \$59,576,868 due to Humana Inc. Amounts due to or from parent are generally settled within 90 days.

E. Not Applicable.

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

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

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

M. All SCA Investments

Not Applicable.

N. Investment in Insurance SCA

Not Applicable.

O. SCA Loss Tracking

Not Applicable.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

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

A.-D. Defined Benefit Plans

Not Applicable.

E. Defined Contribution Plans

Not Applicable.

F. Multiemployer Plans

Not Applicable.

G. Consolidated/Holding Company Plans

No material change since year-end December 31, 2024.

H. Postemployment Benefits and Compensated Absences

Not Applicable.

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

Not Applicable.

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

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

B. The Company has no preferred stock outstanding.

C.-E. No material change since year-end December 31, 2024.

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

G. Not Applicable.

H. Not Applicable.

I. Not Applicable.

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

K. Not Applicable.

L. Not Applicable.

M. Not Applicable.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

C. Gain Contingencies

Not Applicable.

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

Not Applicable.

E. Joint and Several Liabilities

Not Applicable.

F. All Other Contingencies

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

On May 1, 2025, the Department of Justice (DOJ) filed a complaint in partial intervention related to a qui tam lawsuit filed by an individual formerly employed by eHealth, Inc., in the United States District Court for the District of Massachusetts. The intervened lawsuit is captioned *United States of America ex. rel. Andrew Shea v. eHealth, Inc., et al.*, Case No. 1:21-cv-11777-DJC. The complaint alleges certain civil violations in connection with non-commission payments Humana made to three call center broker partners. The complaint also includes allegations relating to Humana's marketing of Medicare Advantage plans to Medicare-eligible beneficiaries under the age of 65. The action seeks damages and penalties on behalf of the United States under the federal False Claims Act. The court ordered the qui tam action unsealed following the filing of DOJ's complaint in partial intervention on May 1, 2025. Humana takes seriously its obligations to comply with applicable regulatory requirements and laws, and will vigorously defend against these allegations. This matter could lead to additional federal securities law and stockholder derivative allegations.

The Company is not aware of any other material contingent liabilities as of June 30, 2025.

15. Leases

Not Applicable.

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

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

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

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Refer to Note 5E – *Dollar Repurchase Agreements and/or Securities Lending Transactions*.

C. Wash Sales

Not Applicable.

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

A. ASO Plans

Not Applicable.

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

(1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of its Medicare or other similarly structured cost based reimbursement contracts.

(2) As of June 30, 2025, the Company has recorded a receivable from CMS of \$1,691,443 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any receivables greater than 10% of the Company's accounts receivable from uninsured accident and health plans or \$10,000.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

(3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or other similarly structured cost based reimbursement contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.

(4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

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

Not Applicable.

20. Fair Value Measurements

A. (1) The Company did not have any financial assets carried at fair value at June 30, 2025.

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2024 and June 30, 2025.

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

Not Applicable.

(3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2024 and June 30, 2025.

(4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the quarter ended June 30, 2025.

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

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

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

Type of Financial	Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds and cash								
equivalents		\$ 231,525,849	\$ 235,518,422	\$ 100,765,822	\$ 130,760,027	\$ -	\$ -	\$ -
Securities								
lending								
collateral								
assets		2,787,667	2,787,667	2,787,667	-	-	-	-
Total		\$ 234,313,516	\$ 238,306,089	\$ 103,553,489	\$ 130,760,027	\$ -	\$ -	\$ -

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

Not Applicable.

21. Other Items

A. Extraordinary Items

Not Applicable.

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures and Unusual Items

Not Applicable.

D. Business Interruption Insurance Recoveries

Not Applicable.

E. State Transferable and Non-transferable Tax Credits

Not Applicable.

F. Subprime Mortgage Related Risk Exposure

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

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

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

(3) Direct exposure through other investments:

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

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

The Company does not have sub-prime mortgage risk.

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

G. Retained Assets

Not Applicable.

H. Insurance Linked Securities

Not Applicable.

22. Events Subsequent

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through August 13, 2025 for the Statutory Statement issued on August 13, 2025.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

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

Yes () No (X)

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

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

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

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

Yes () No (X)

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

Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

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

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

Yes () No (X)

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

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

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

C. The amount of net premiums written by the Company at June 30, 2025 that are subject to retrospective rating features was \$681,478,327, or 100.00% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

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

	Individual	Small Group Employer	Large Group Employer	Other Categories with rebates	Total
Prior Reporting Year:					
Medical loss ratio rebates incurred	\$ -	\$ 27,930	\$ -	\$ -	\$ 27,930
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	-	27,930	-	-	27,930
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 27,930
Current Reporting Year-to-date:					
Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	-
Medical loss ratio rebates paid	-	-	-	-	-
Medical loss rebates unpaid	-	27,930	-	-	27,930
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 27,930

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

E. Risk Sharing Provisions of the Affordable Care Act

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

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

a. Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) \$ 102

Liabilities

2. Risk adjustment user fees payable for ACA Risk Adjustment \$ 631

3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium) \$ 171,458

Operations (Revenue & Expenses)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment \$ -

5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) \$ -

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

Accrued During the Prior Year on Business Written Before December 31 of the Prior Year	Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year	Differences		Adjustments		Unsettled Balances as of the Reporting Date					
		Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)				
		1	2	3	4	5	6	7	8	9	10
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	-	-	-	-	-	-	-	102	A.	102	
2. Premium adjustments (payables) (including high risk pool premium)		(171,356)		-		(171,356)		(102)	B.	(171,458)	
3. Subtotal ACA Permanent Risk Adjustment Program	-	(171,356)	-	-	-	(171,356)		102	(102)	102	(171,458)
b. Total for ACA Risk Sharing Provisions	-	(171,356)	-	-	-	(171,356)		102	(102)	102	(171,458)

Explanations of adjustments

A. Adjustments related to updates received from CMS associated with 2024 benefit year and the latest data from Wakely Consulting.

B. Adjustments related to updates received from CMS associated with 2024 benefit year and the latest data from Wakely Consulting.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Not Applicable.

(5) ACA Risk Corridors Receivable as of Reporting Date

Not Applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

Benefits and loss adjustment expenses payable, net of health care receivables, as of December 31, 2024, were \$134,227,281. As of June 30, 2025, \$98,473,823 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$13,017,244 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$22,736,213 favorable prior-year development since December 31, 2024. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$23,876,059 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

26. Intercompany Pooling Arrangements

STATEMENT AS OF June 30, 2025 OF Humana Health Plan of Ohio, Inc.

NOTES TO THE FINANCIAL STATEMENTS

Not Applicable.

27. Structured Settlements

The Company has no structured settlements.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
12/31/2025	\$ -	\$ -	\$ -	\$ -	\$ -
9/30/2025	-	-	-	-	-
6/30/2025	2,699,564	2,699,564	-	-	-
3/31/2025	2,413,436	2,466,742	2,360,026	-	-
12/31/2024	3,024,156	2,968,694	2,842,421	-	-
9/30/2024	3,399,888	3,405,654	3,122,511	230,948	-
6/30/2024	3,324,391	3,252,606	2,928,159	323,994	612
3/31/2024	4,038,301	3,925,389	3,738,792	186,796	2,690
12/31/2023	5,996,180	6,157,202	3,808,354	2,366,009	(6,065)
9/30/2023	6,300,606	6,383,687	3,748,753	2,547,949	119,504
6/30/2023	6,391,734	6,486,079	4,010,070	2,498,715	(1,426)
3/31/2023	6,170,306	6,153,198	3,780,023	2,427,313	(27,800)

B. Risk Sharing Receivables

Risk sharing receivables represent capitation receivables and provider advance receivables over 90 days and are fully non-admitted.

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves \$ 10,996,341
2. Date of the most recent evaluation of this liability December 31, 2024
3. Was anticipated investment income utilized in the calculation? Yes (X) No ()

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change: _____

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]

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

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

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0000049071

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.
.....

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

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2020

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/23/2022

6.4 By what department or departments?
Ohio Department of Insurance

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

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

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:
.....

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]

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

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

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

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

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

GENERAL INTERROGATORIES

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [] No []

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

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

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

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

(e) Accountability for adherence to the code.

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

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

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
Ethics Every Day was amended in June 2025 to update content based on operational changes, clarify content where necessary and perform general document maintenance.

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

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

FINANCIAL

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

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
11.2 If yes, give full and complete information relating thereto:

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

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

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.

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

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 2,787,667
16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$ 2,787,556
16.3 Total payable for securities lending reported on the liability page.	\$ 2,787,667

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.
GENERAL INTERROGATORIES

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

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

1 Name of Custodian(s)	2 Custodian Address
JP Morgan Chase	4 Metro Tech Center, 6th Floor, Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Zaida Cepeda

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No []

17.4 If yes, give full information relating thereto:

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

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. 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
BLACKROCK FINANCIAL MANAGEMENT, INC	U.....
Humana Inc.	I.....

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
107105	BLACKROCK FINANCIAL MANAGEMENT, INC	549300LVXYIVJKE13M84	The SEC	DS.....

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [] No []

18.2 If no, list exceptions:

.....

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

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

Has the reporting entity self-designated 5GI securities? Yes [] No []

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No []

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

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

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No []

GENERAL INTERROGATORIES**PART 2 - HEALTH**

1. Operating Percentages:

1.1 A&H loss percent	84.440 %
1.2 A&H cost containment percent	2.960 %
1.3 A&H expense percent excluding cost containment expenses	11.700 %

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

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

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

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

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

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

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

None

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only								
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama	AL	N	0	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0	0
15. Indiana	IN	L	0	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0	0
18. Kentucky	KY	L	0	82,984,193	0	0	0	0	82,984,193	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0
36. Ohio	OH	L	0	(106,296)	598,600,430	0	0	0	598,494,134	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0	0
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal		XXX	0	82,877,897	598,600,430	0	0	0	681,478,327	0
60. Reporting Entity Contributions for Employee Benefit Plans		XXX	0	0	0	0	0	0	0	0
61. Totals (Direct Business)		XXX	0	82,877,897	598,600,430	0	0	0	681,478,327	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:

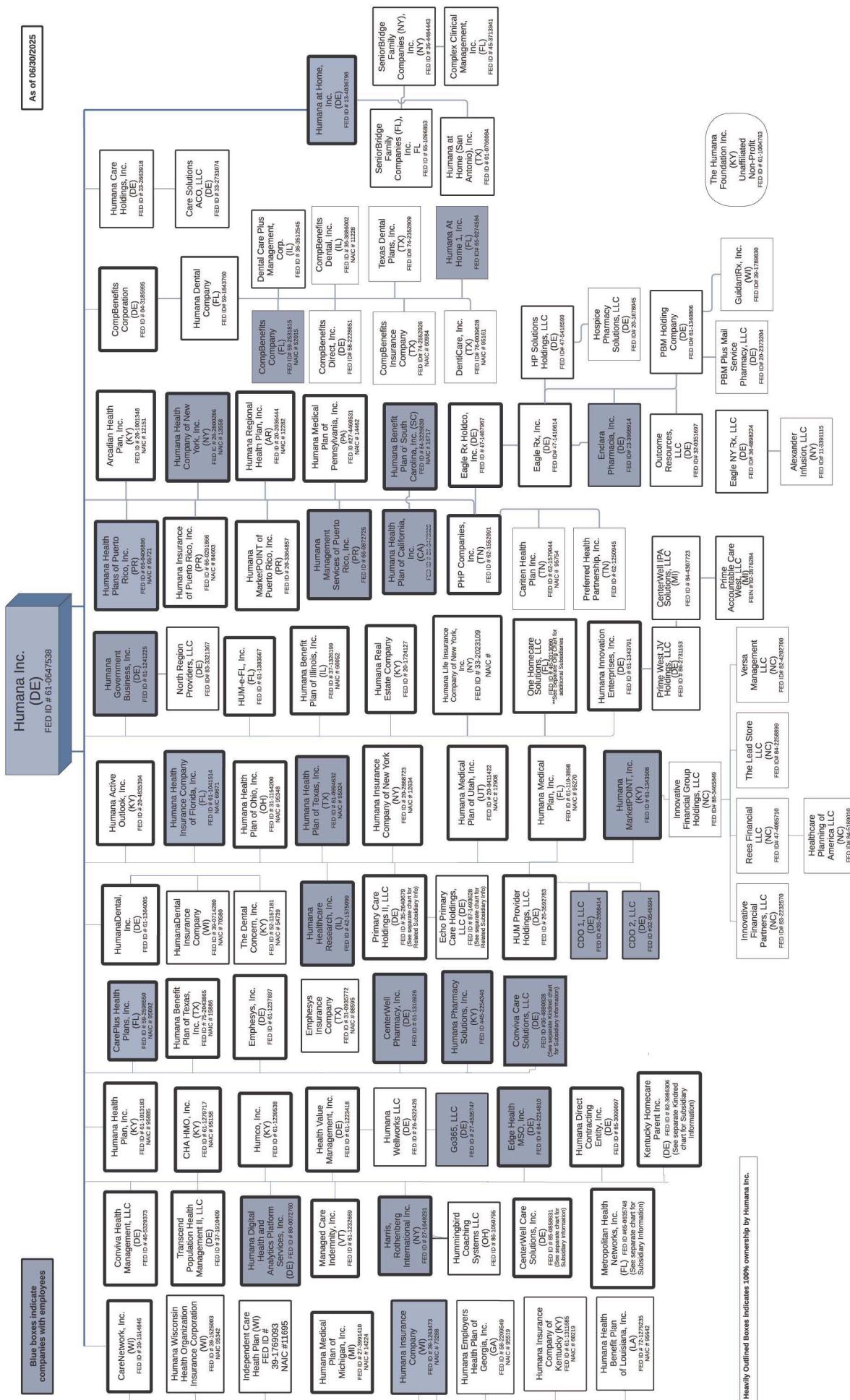
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 3 4. Q - Qualified - Qualified or accredited reinsurer..... 0
 2. R - Registered - Non-domiciled RRGs..... 0 5. N - None of the above - Not allowed to write business in the state..... 54
 3. E - Eligible - Reporting entities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

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

Blue boxes indicate companies with employees

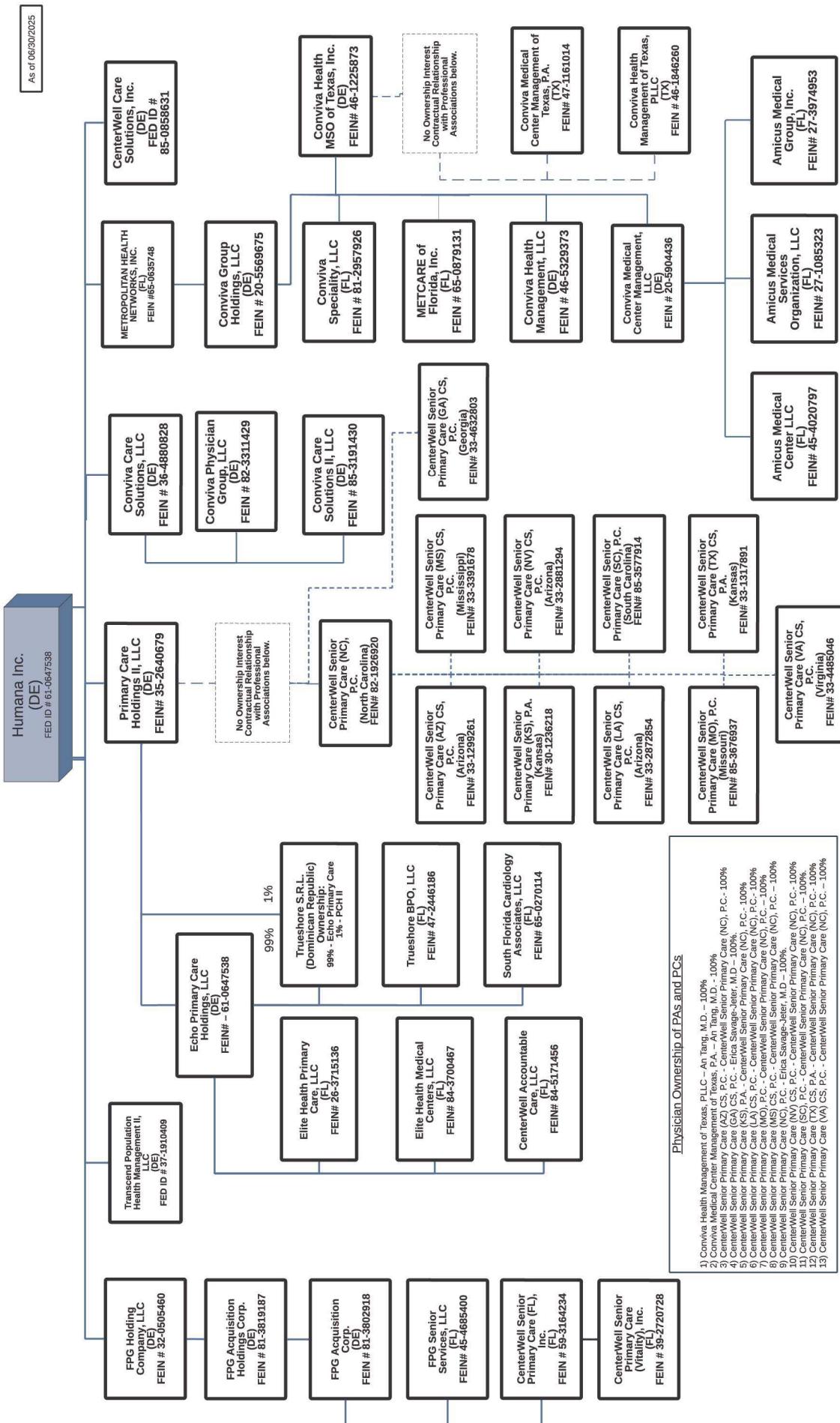
Humana Inc.
(DE)
FED ID # 61-0647538

(DE) FED ID # 61-0647538

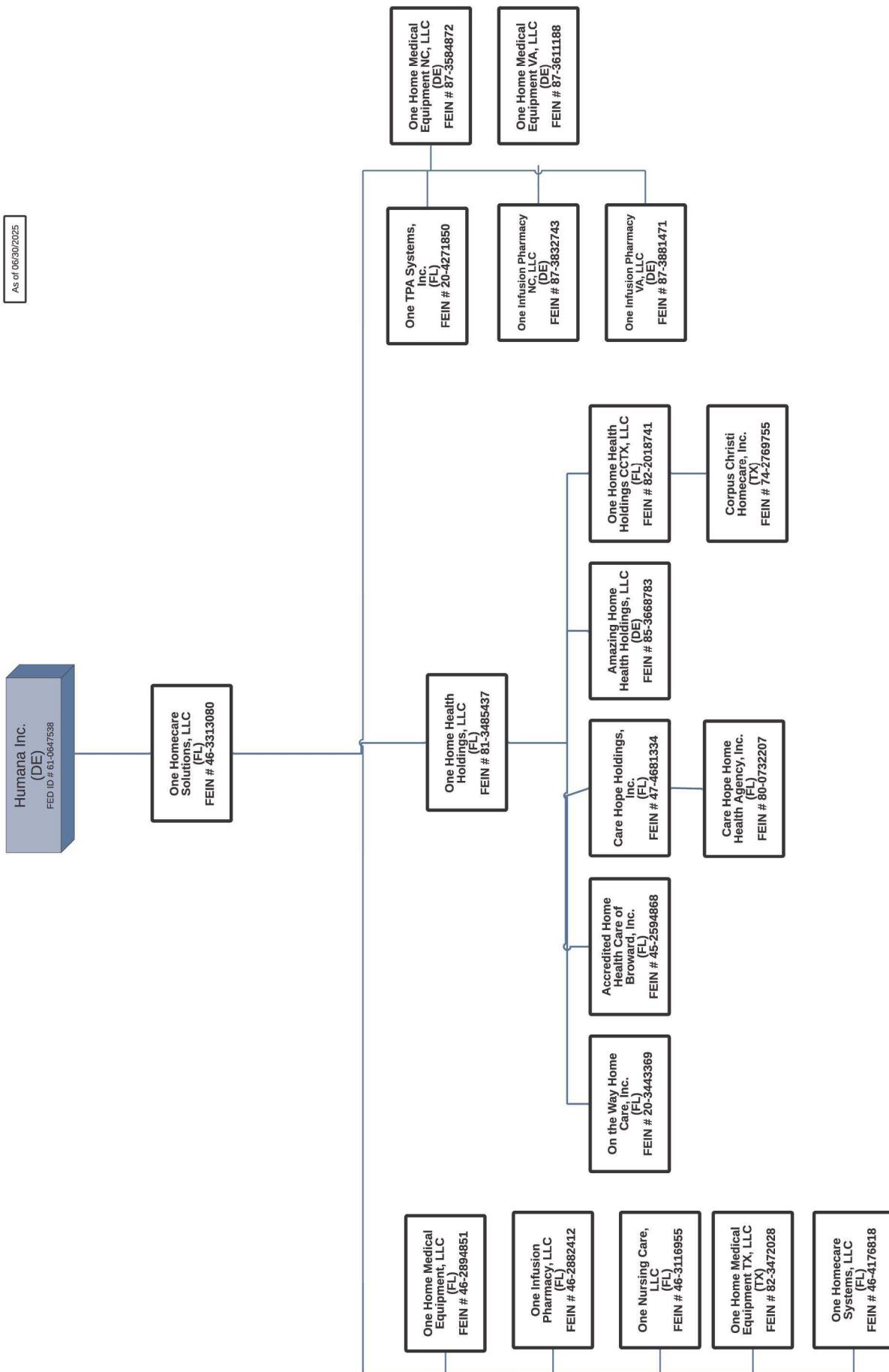


Note: Heavily Outlined Boxes Indicate 100% ownership by Humana Inc.

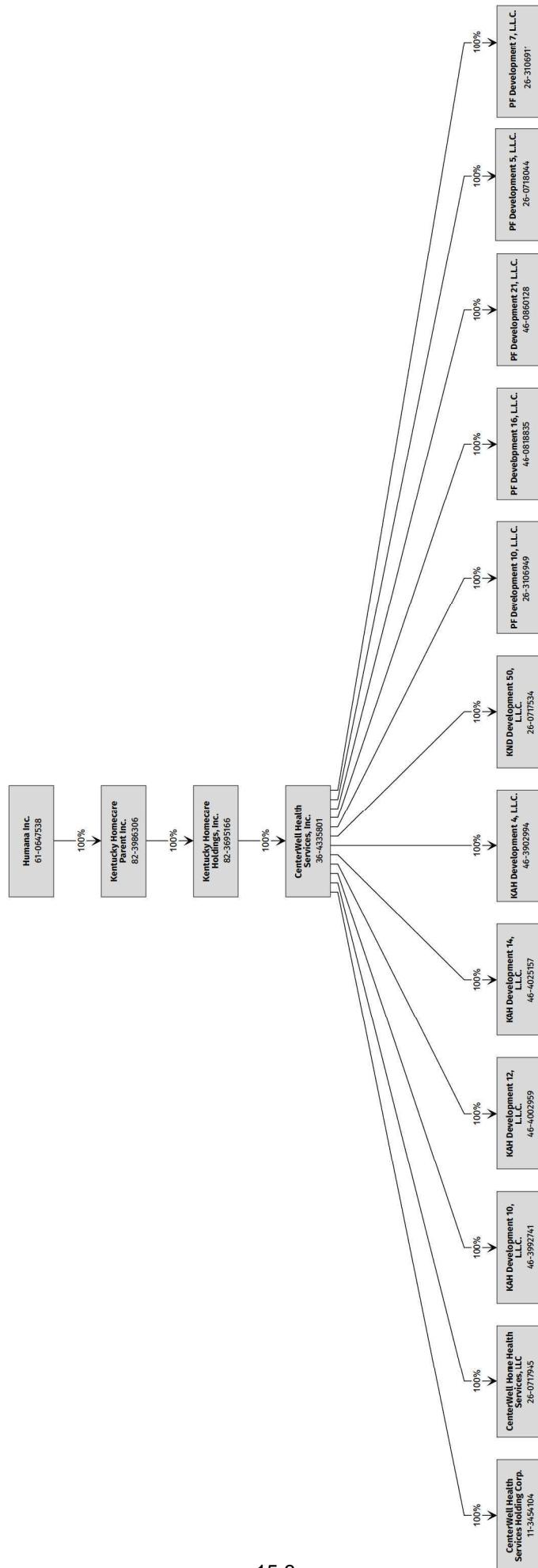
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

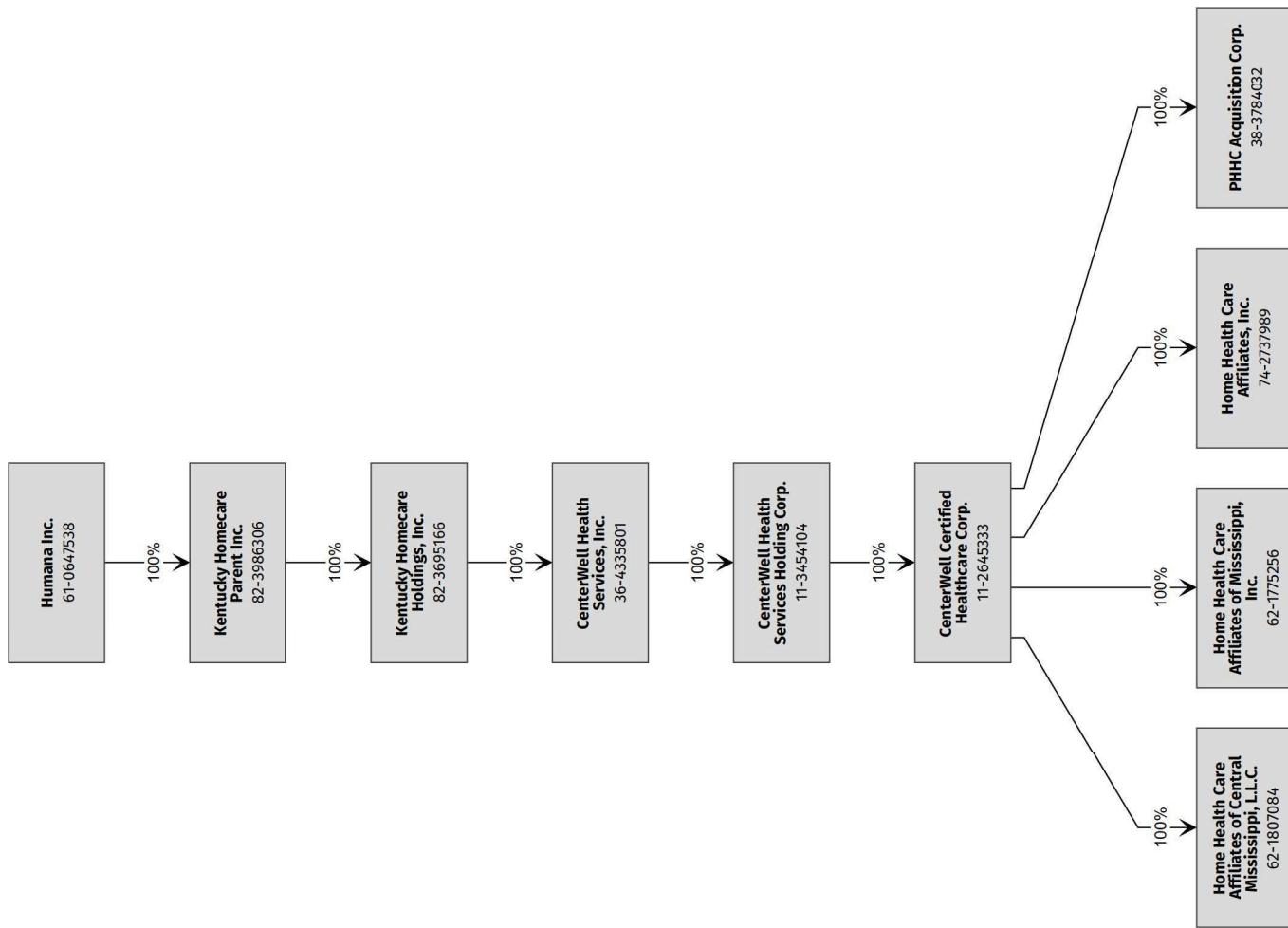


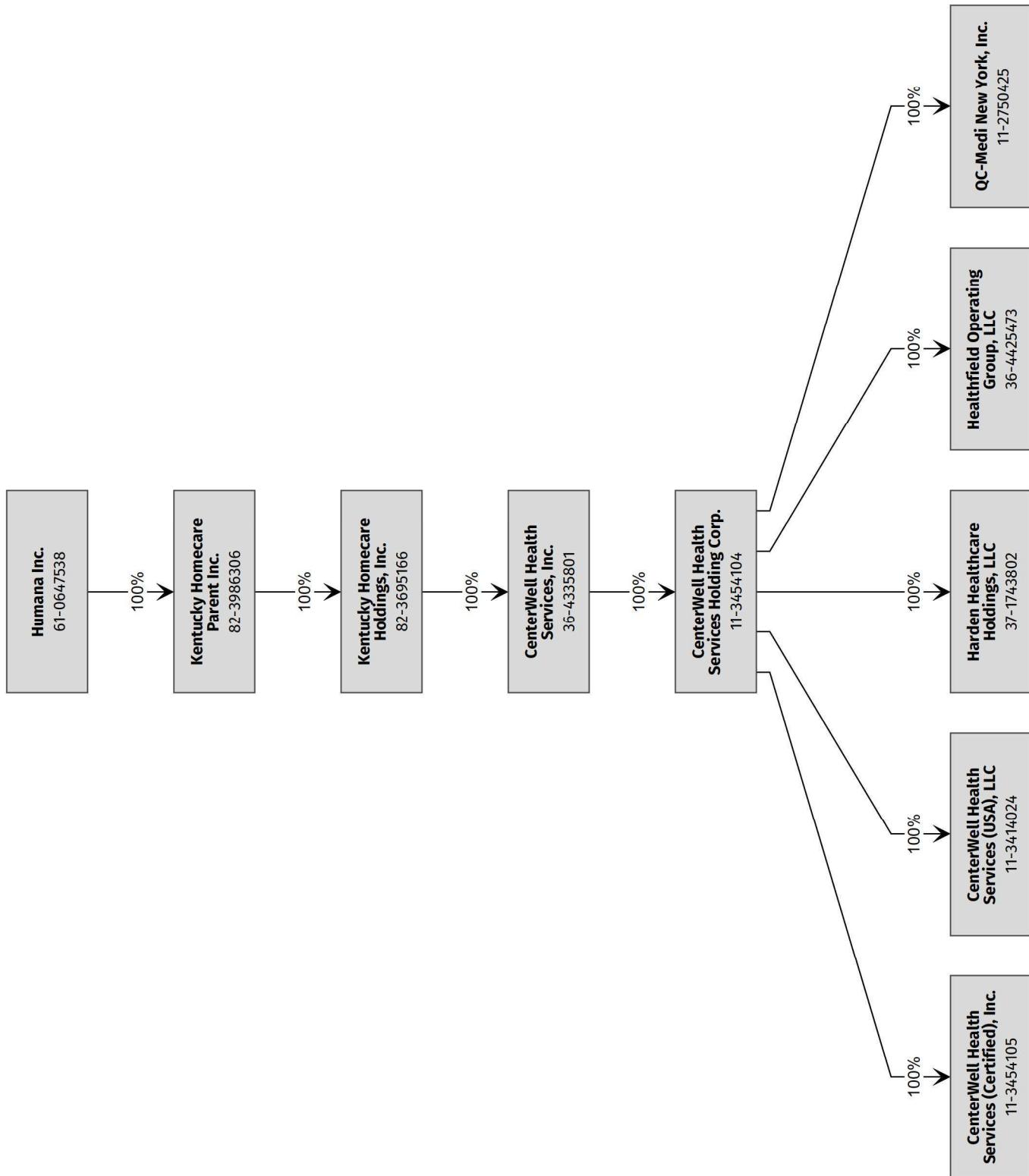
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

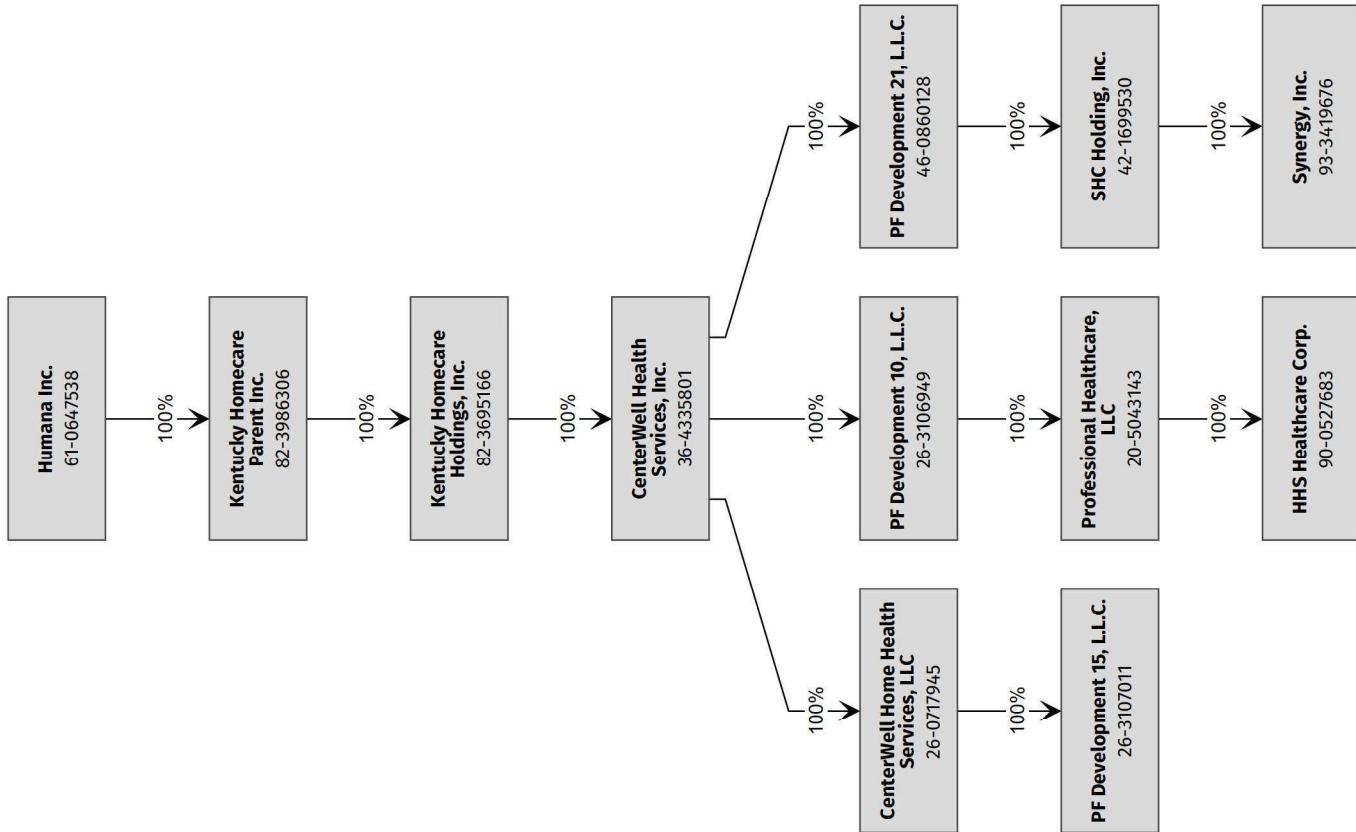


STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

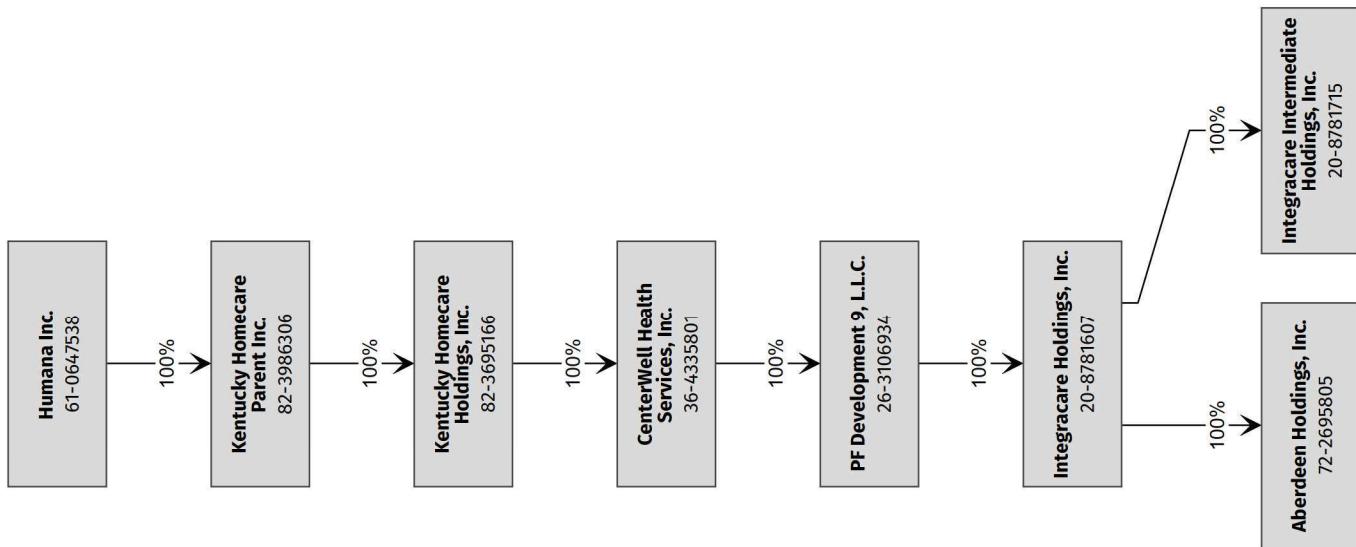




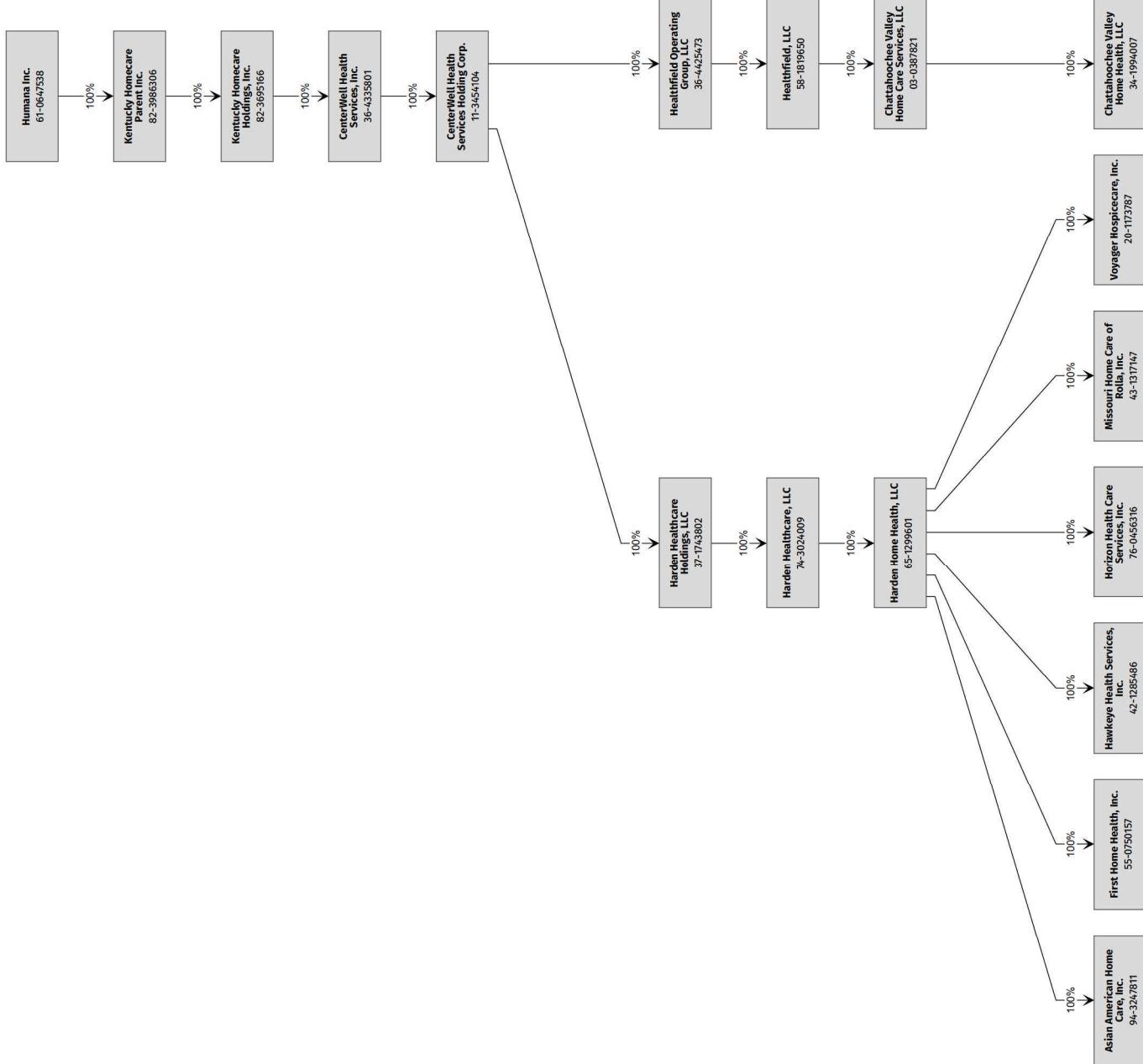




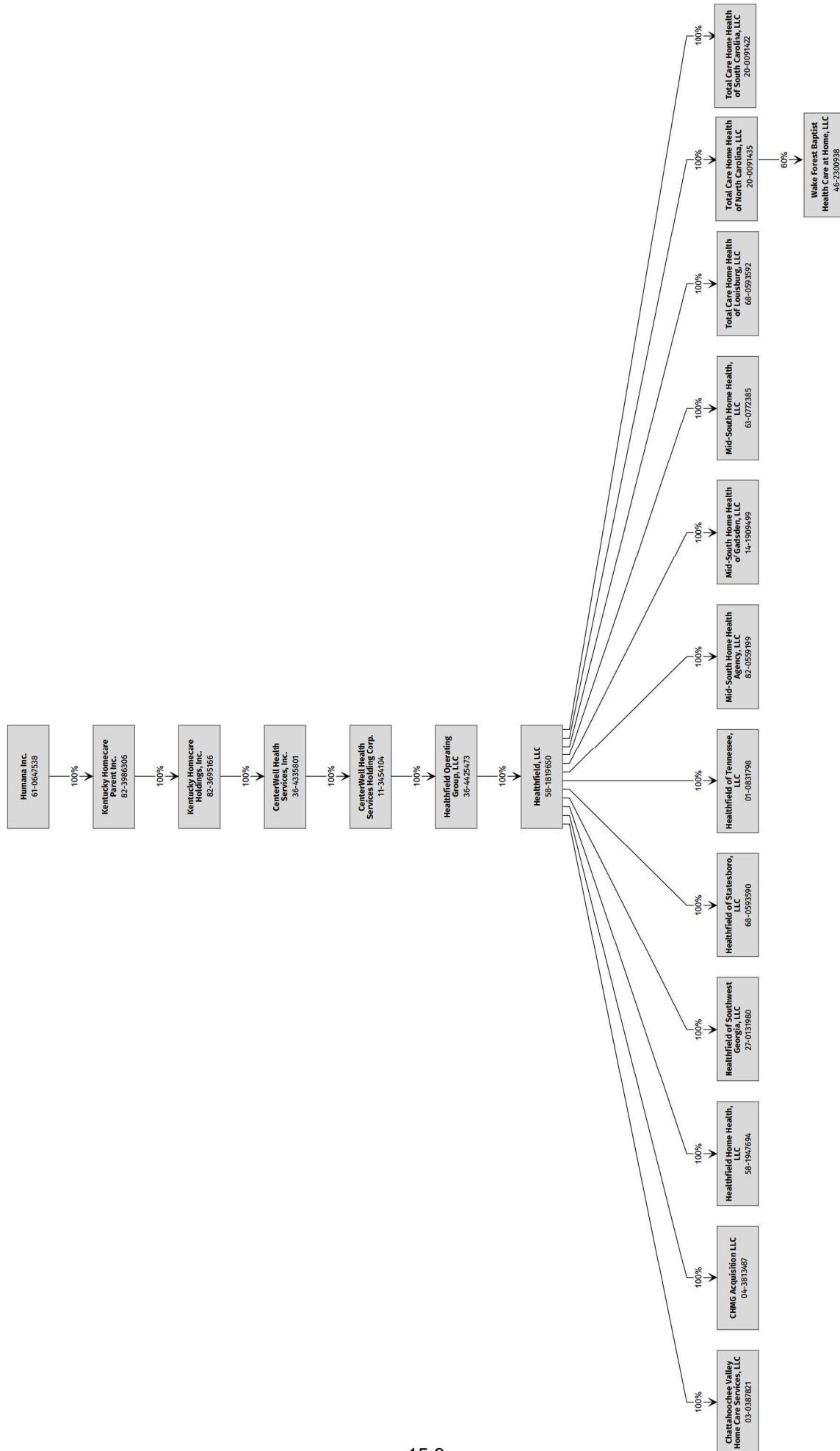
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.



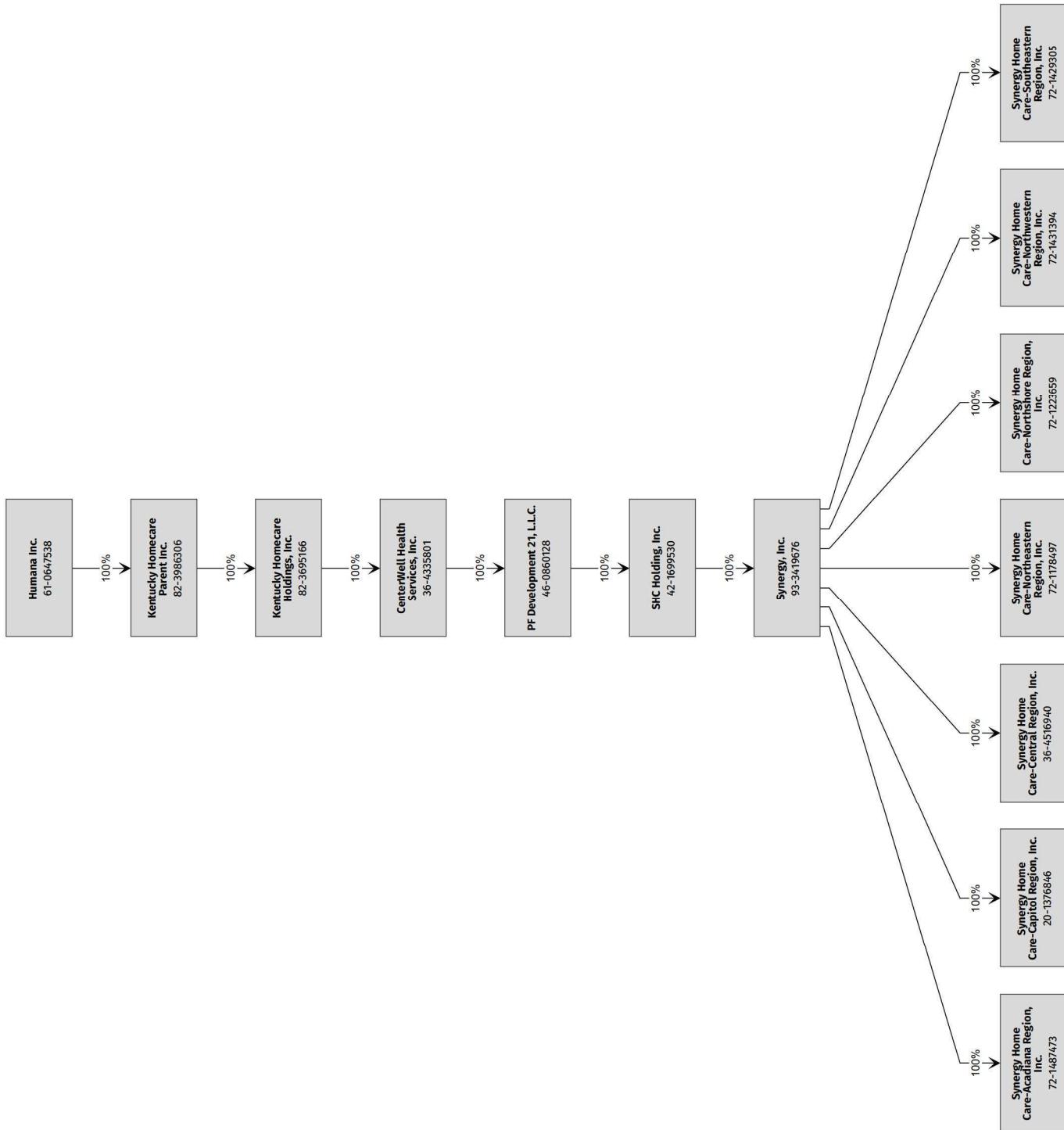
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

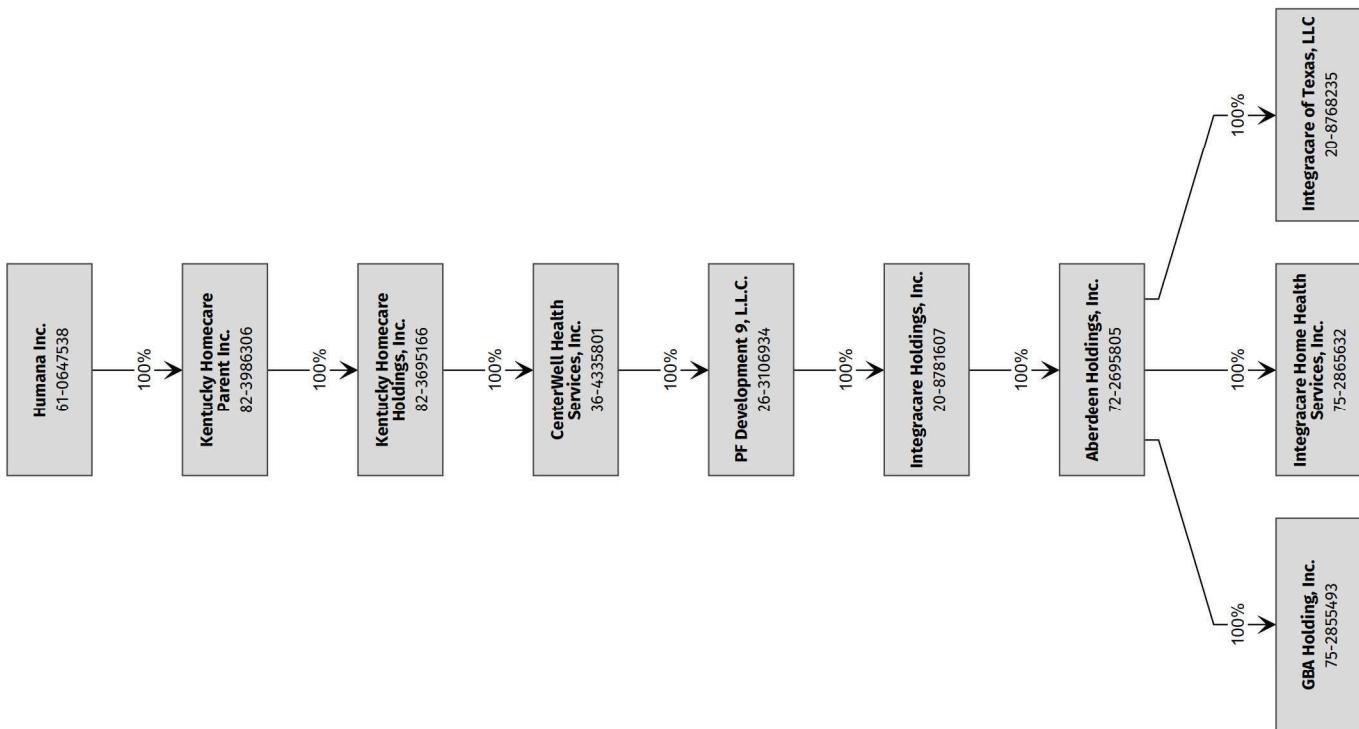


STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

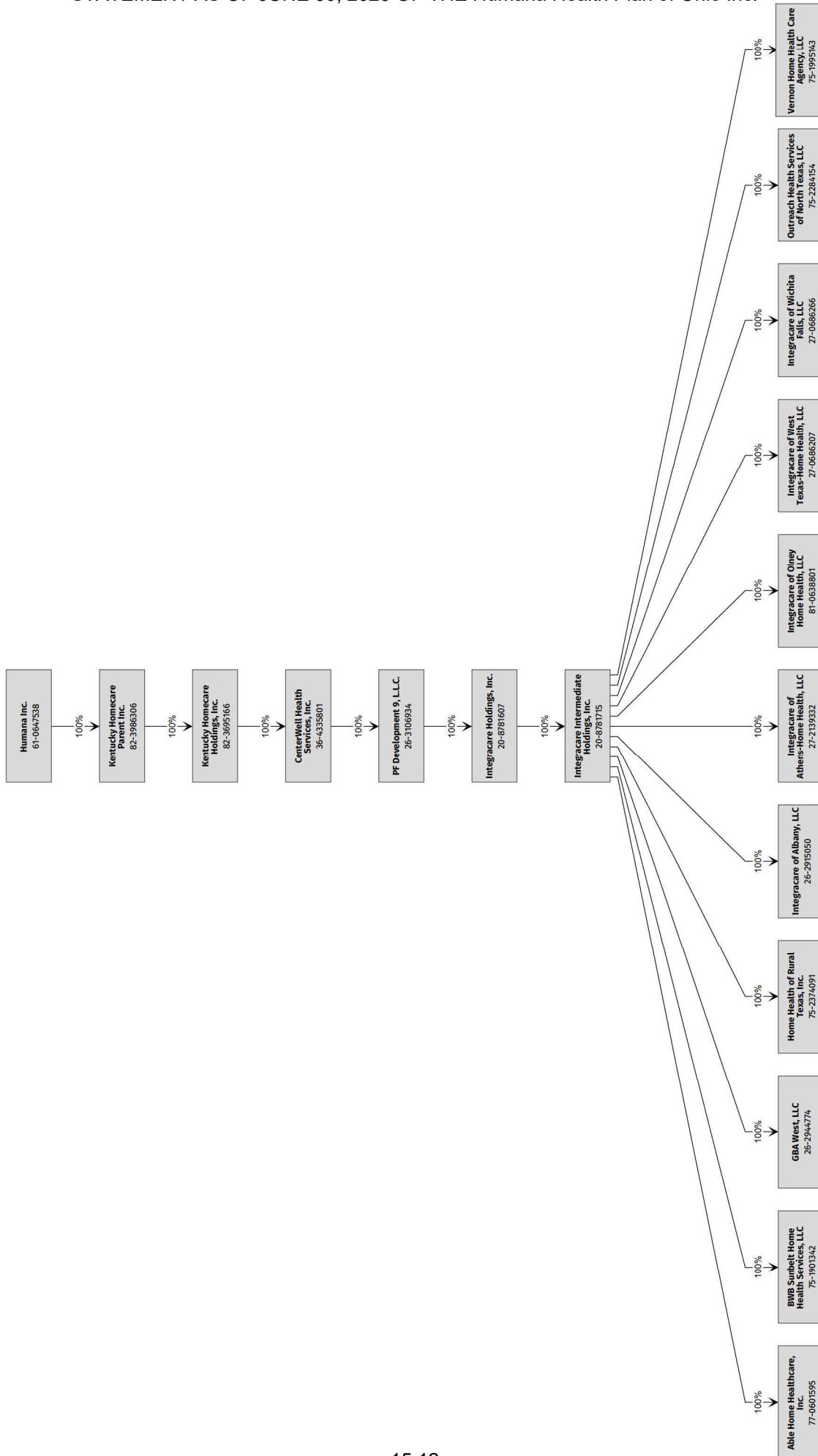


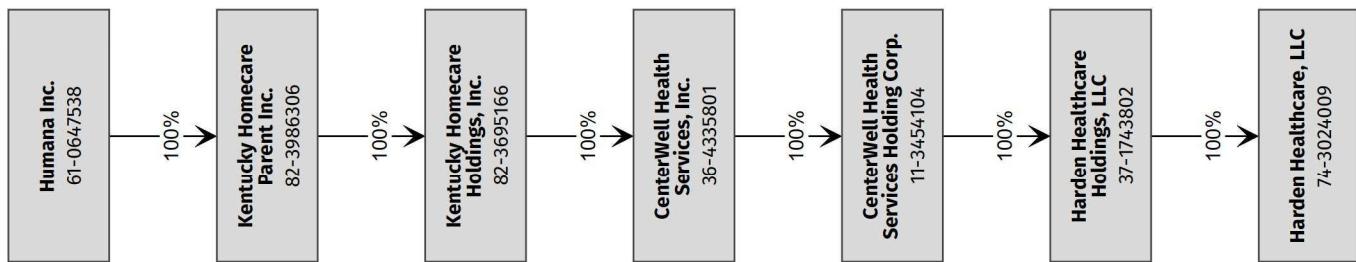
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

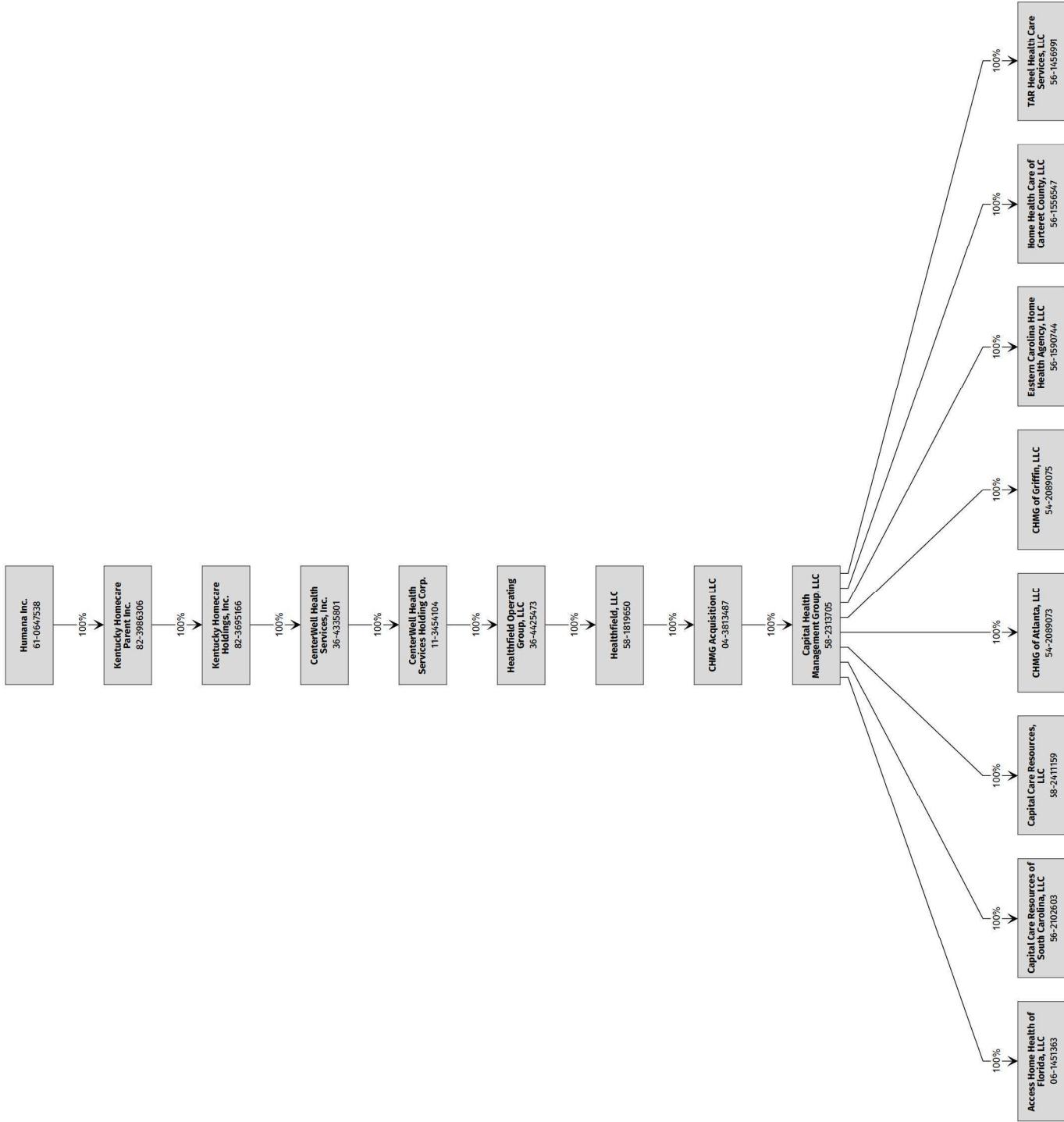




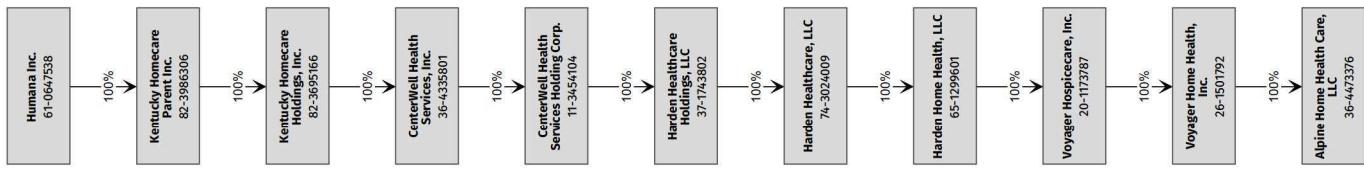
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.



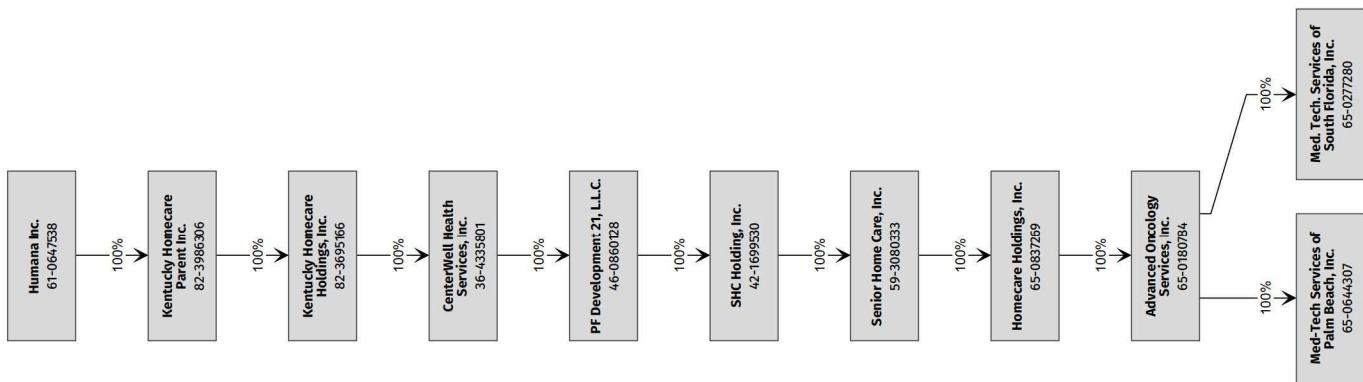




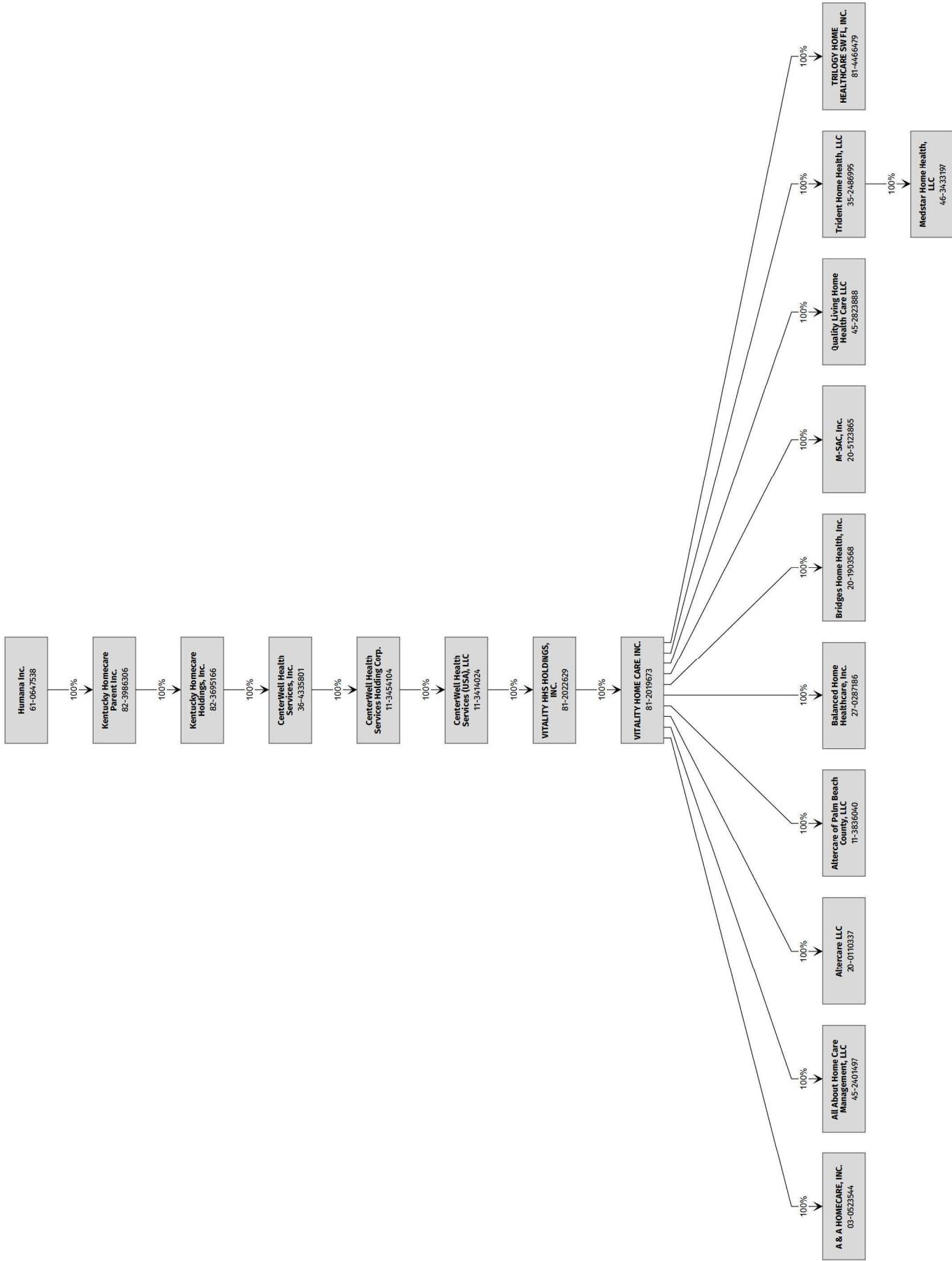
STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.



STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.



STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.



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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc.	12151	20-1001348			Arcadian Health Plan, Inc. ....		. KY....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	39-1514846			CareNetwork, Inc. ....		. WI....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95092	59-2598550			CarePlus Health Plans, Inc. ....		. FL....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95754	62-1579044			Cariten Health Plan Inc. ....		. TN....	. IA....	PHP Companies, Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	35-2608414			CDO 1, LLC ....		. DE....	. NIA....	HUM Provider Holdings, LLC	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	32-0545504			CDO 2, LLC ....		. DE....	. NIA....	HUM Provider Holdings, LLC	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95158	61-1279717			CHA HMO, Inc. ....		. KY....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	52015	59-2531815			CompBenefits Company ....		. FL....	. IA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	04-3185995			CompBenefits Corporation ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	11228	36-3686002			CompBenefits Dental, Inc. ....		. IL....	. IA....	Dental Care Plus Management, Corp.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	58-2228851			CompBenefits Direct, Inc. ....		. DE....	. NIA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	60984	74-2552026			CompBenefits Insurance Company ....		. TX....	. IA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	45-3713941			Complex Clinical Management, Inc. ....		. FL....	. NIA....	SeniorBridge Family Companies (FL), Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	42-1575099			Humana Healthcare Research, Inc. ....		. IL....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	36-4880828			Conviva Care Solutions, LLC ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	15886	75-2043865			Humana Benefit Plan of Texas, Inc. ....		. TX....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	36-3512545			Dental Care Plus Management, Corp. ....		. IL....	. NIA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95161	76-0039628			DentiCare, Inc. ....		. TX....	. IA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	88595	31-0935772			Emphesys Insurance Company ....		. TX....	. IA....	Emphesys, Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	61-1237697			Emphesys, Inc. ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	59-3164234			CenterWell Senior Primary Care (FL), Inc. ....		. FL....	. NIA....	FPG Acquisition Corp.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	81-3802918			FPG Acquisition Corp. ....		. DE....	. NIA....	FPG Acquisition Holdings Corp.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	81-3819187			FPG Acquisition Holdings Corp. ....		. DE....	. NIA....	FPG Holding Company, LLC	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	32-0505460			FPG Holding Company, LLC ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	45-4685400			FPG Senior Services, LLC ....		. FL....	. NIA....	FPG Acquisition Corp.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	27-1649291			Harris, Rothenberg International Inc. ....		. NY....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	61-1223418			Health Value Management, Inc. ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	26-3592783			HUM Provider Holdings, LLC ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	20-4835394			Humana Active Outlook, Inc. ....		. KY....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	65-0274594			Humana At Home 1, Inc. ....		. FL....	. NIA....	Humana Dental Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	13-4036798			Humana At Home, Inc. ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	60052	37-1326199			Humana Benefit Plan of Illinois, Inc. ....		. IL....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	59-1843760			Humana Dental Company ....		. FL....	. NIA....	CompBenefits Corporation	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95519	58-2209549			Humana Employers Health Plan of Georgia, Inc. ....		. GA....	. IA....	Humana Insurance Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	61-1241225			Humana Government Business, Inc. ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95642	72-1279235			Humana Health Benefit Plan of Louisiana, Inc. ....		. LA....	. IA....	Humana Insurance Company	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	13558	26-2800286			Humana Health Company of New York, Inc. ....		. NY....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	69671	61-1041514			Humana Health Insurance Company of Florida, Inc. ....		. FL....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	16280	26-3473328			Humana Health Plan of California, Inc. ....		. CA....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95348	31-1154200			Humana Health Plan of Ohio, Inc. ....		. OH....	. RE....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95024	61-0994632			Humana Health Plan of Texas, Inc. ....		. TX....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95885	61-1013183			Humana Health Plan, Inc. ....		. KY....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	95721	66-0406896			Humana Health Plans of Puerto Rico, Inc. ....		. PR....	. IA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	00000	61-0647538		00000049071	NYSE				See Footnote 1	Other.....	0.000 ...	See Footnote 1	....NO....	2
.0119	Humana Inc.	00000	61-1343791			Humana Innovation Enterprises, Inc. ....		. DE....	. NIA....	Humana Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0
.0119	Humana Inc.	73288	39-1263473			Humana Insurance Company ....		. WI....	. IA....	CareNetwork, Inc.	Ownership.....	100.00 ...	Humana Inc. ....	....NO....	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc.	60219	61-1311685			Humana Insurance Company of Kentucky		KY	IA	Humana Insurance Company	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	12634	20-2888723			Humana Insurance Company of New York		NY	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	84603	66-0291866			Humana Insurance of Puerto Rico, Inc.		PR	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	20-3364857			Humana MarketPOINT of Puerto Rico, Inc.		PR	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1343508			Humana MarketPOINT, Inc.		KY	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	14224	27-3991410			Humana Medical Plan of Michigan, Inc.		MI	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	14462	27-4460531			Humana Medical Plan of Pennsylvania, Inc.		PA	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	12908	20-8411422			Humana Medical Plan of Utah, Inc.		UT	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	95270	61-1103898			Humana Medical Plan, Inc.		FL	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	45-2254346			Humana Pharmacy Solutions, Inc.		KY	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1316926			CenterWell Pharmacy, Inc.		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	12828	20-2036444			Humana Regional Health Plan, Inc.		AR	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	26-4522426			Humana WellWorks LLC		DE	NIA	Health Value Management, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	95342	39-1525003			Humana Wisconsin Health Organization		WI	IA	CareNetwork, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	70580	39-0714280			Insurance Corporation		WI	IA	HumanaDental, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1364005			HumanaDental, Inc.		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	27-4535747			Go365, LLC		DE	NIA	HumanaWellworks LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1239538			Humco, Inc.		KY	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1383567			HUM-eFL, Inc.		FL	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	86-1050795			Hummingbird Coaching Systems LLC		OH	NIA	Harris, Rothenberg International Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	11695	39-1769093			Independent Care Health Plan		WI	IA	CareNetwork, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	61-1232669			Managed Care Indemnity, Inc.		VT	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	20-5569675			Conviva Group Holdings, LLC		DE	NIA	Metropolitan Health Networks, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	20-5904436			Conviva Medical Center Management, LLC		DE	NIA	Conviva Group Holdings, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	81-2957926			Conviva Speciality, LLC		FL	NIA	Conviva Group Holdings, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	65-0879131			METCARE of Florida, Inc.		FL	NIA	Conviva Group Holdings, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	65-0635728			Metropolitan Health Networks, Inc.		FL	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	62-1552091			PHP Companies, Inc.		TN	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	62-1250945			Preferred Health Partnership, Inc.		TN	NIA	PHP Companies, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	20-1724127			Humana Real Estate Company		KY	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	46-1225873			Conviva Health MSO of Texas, Inc.		DE	NIA	Conviva Group Holdings, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	65-1096853			SeniorBridge Family Companies (FL), Inc.		FL	NIA	Humana at Home, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	36-4484443			SeniorBridge Family Companies (NY), Inc.		NY	NIA	Humana at Home, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	01-0766084			Humana At Home (San Antonio), Inc.		TX	NIA	Humana at Home, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	74-2352809			Texas Dental Plans, Inc.		TX	NIA	Humana Dental Company	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	54739	52-1157181			The Dental Concern, Inc.		KY	IA	HumanaDental, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	80-0072760			Humana Digital Health and Analytics Platform Services, Inc.		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	46-5329373			Conviva Health Management, LLC		DE	NIA	Conviva Group Holdings, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	66-0872725			Humana Management Services of Puerto Rico, Inc.		PR	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	83-3321367			North Region Providers, LLC		DE	NIA	Humana Government Business, Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	35-2640679			Primary Care Holdings II, LLC		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	37-1910409			Transcend Population Health Management II, LLC		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	84-2214810			Edge Health MSO, Inc.		DE	NIA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	16717	84-3226630			Humana Benefit Plan of South Carolina, Inc.		SC	IA	Humana Inc.	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	11-3391115			Alexander Infusion, LLC		NY	NIA	Eagle NY Rx, LLC	Ownership	100.00	Humana Inc.	NO	0
.0119	Humana Inc.	00000	36-4898224			Eagle NY Rx, LLC		DE	NIA	Eagle Rx, Inc.	Ownership	100.00	Humana Inc.	NO	0

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.0119	Humana Inc.	00000	47-1407967			Eagle Rx Holdco, Inc.		.DE.	.NIA.	Humana Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	47-1416614			Eagle Rx, Inc.		.DE.	.NIA.	Eagle Rx Holdco, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	23-3068914			Enclara Pharmacia, Inc.		.DE.	.NIA.	Eagle Rx, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	39-1789830			GuidantRx, Inc.		.WI.	.NIA.	PBM Holding Company	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	61-1340806			PBM Holding Co.		.DE.	.NIA.	Eagle Rx, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	20-2373204			PBM Plus Mail Service Pharmacy, LLC		.DE.	.NIA.	PBM Holding Company	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	85-3191430			Conviva Care Solutions II, LLC		.DE.	.NIA.	Conviva Care Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	85-3099097			Humana Direct Contracting Entity, Inc.		.DE.	.NIA.	Humana Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	85-0858631			CenterWell Care Solutions, Inc.		.DE.	.NIA.	Humana Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	87-1493628			Echo Primary Care Holdings, LLC		.DE.	.NIA.	Primary Care Holdings II, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	45-2594868			Accredited Home Health of Broward, Inc.		.FL.	.NIA.	One Home Health Holdings, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	85-3668783			Amazing Home Health Holdings, LLC		.DE.	.NIA.	One Home Health Holdings, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	47-4681334			Care Hope Holdings, Inc.		.FL.	.NIA.	One Home Health Holdings, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	80-0732207			Care Hope Home Health Agency, Inc.		.FL.	.NIA.	Care Hope Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	74-2769755			Corpus Christi Home Care, Inc.		.TX.	.NIA.	One Home Health Holdings CCTX, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	20-3443369			On the Way Home Care, Inc.		.FL.	.NIA.	One Home Health Holdings, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	81-3485437			One Home Health Holdings, LLC		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	82-2018741			One Home Health Holdings CCTX, LLC		.TX.	.NIA.	One Home Health Holdings, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	46-2894851			One Home Medical Equipment, LLC		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	82-3472028			One Home Medical Equipment TX, LLC		.TX.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	46-3116955			One Nursing Care, LLC		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	46-3313080			One Homecare Solutions, LLC		.FL.	.NIA.	Humana Inc. - 100%	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	46-4176818			One Homecare Systems, LLC		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	46-2882412			One Infusion Pharmacy, LLC		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	20-4271850			One TPA Systems, Inc.		.FL.	.NIA.	One Homecare Solutions, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	72-2695805			Aberdeen Holdings, Inc.		.TX.	.NIA.	Integracare Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	77-0601595			Able Home Healthcare, Inc.		.TX.	.NIA.	Integracare Intermediate Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	06-1451363			Access Home Health of Florida, LLC		.DE.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	65-0180784			Advanced Oncology Services, Inc.		.FL.	.NIA.	Homecare Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	36-4473376			Alpine Home Health Care, LLC		.CO.	.NIA.	Voyager Home Health, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	11-3306095			American Homecare Management Corp.		.DE.	.NIA.	Missouri Home Care of Rolla, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	94-3247811			Asian American Home Care, Inc.		.CA.	.NIA.	Harden Home Health, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	75-1901342			BWB Sunbelt Home Health Services, LLC		.TX.	.NIA.	Integracare Intermediate Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	56-2102603			Capital Care Resources of South Carolina, LLC		.GA.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	58-2411159			Capital Care Resources, LLC		.GA.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	58-2313705			Capital Health Management Group, LLC		.GA.	.NIA.	CHMG Acquisition LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	03-0387821			Chattahoochee Valley Home Care Services, LLC		.GA.	.NIA.	Healthfield, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	34-1994007			Chattahoochee Valley Home Health, LLC		.GA.	.NIA.	Chattahoochee Valley Home Care Services, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	04-3813487			CHMG Acquisition LLC		.GA.	.NIA.	Healthfield, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	54-2089073			CHMG of Atlanta, LLC		.GA.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	54-2089075			CHMG of Griffin, LLC		.GA.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	56-1590744			Eastern Carolina Home Health Agency, LLC		.NC.	.NIA.	Capital Health Management Group, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	55-0750157			First Home Health, Inc.		.WV.	.NIA.	Harden Home Health, LLC	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	75-2855493			GBA Holding, Inc.		.TX.	.NIA.	Aberdeen Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0
.0119	Humana Inc.	00000	26-2944774			GBA West, LLC		.TX.	.NIA.	Integracare Intermediate Holdings, Inc.	Ownership.	100.00	Humana Inc.	NO.	0

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.0119	Humana Inc.	00000	11-2645333			CenterWell Certified Healthcare Corp.DE....	..NIA....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc.NO....	0	
.0119	Humana Inc.	00000	11-3454105			CenterWell Health Services (Certified), Inc. ....	..DE....	..NIA....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	11-3414024			CenterWell Health Services (USA), LLC ....	..DE....	..NIA....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	11-3454104			CenterWell Health Services Holding Corp. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	36-4335801			CenterWell Health Services, Inc. ....	..DE....	..NIA....	Kentucky Homecare Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	64-0730826			Gilbert's Home Health Agency, Inc. ....	..MS....	..NIA....	Home Health Care Affiliates, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	37-1743802			Harden Healthcare Holdings, LLC ....	..DE....	..NIA....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	74-3024009			Harden Healthcare, LLC ....	..TX....	..NIA....	Harden Healthcare Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-1299601			Harden Home Health, LLC ....	..DE....	..NIA....	Harden Healthcare, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	42-1285486			Hawkeye Health Services, Inc. ....	..IA....	..NIA....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	58-1947694			Healthfield Home Health, LLC ....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	27-0131980			Healthfield of Southwest Georgia, LLC ....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	68-0593590			Healthfield of Statesboro, LLC ....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	01-0831798			Healthfield of Tennessee, LLC ....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	36-4425473			Healthfield Operating Group, LLC ....	..DE....	..NIA....	CenterWell Health Services Holding Corp. ..	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	58-1819650			Healthfield, LLC ....	..DE....	..NIA....	Healthfield Operating Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	90-0527683			HHS Healthcare Corp. ....	..DE....	..NIA....	Professional Healthcare, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	62-1807084			Home Health Care Affiliates of Central Mississippi, L.L.C. ....	..MS....	..NIA....	CenterWell Certified Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	62-1775256			Home Health Care Affiliates of Mississippi, Inc. ....	..MS....	..NIA....	CenterWell Certified Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	74-2737989			Home Health Care Affiliates, Inc. ....	..MS....	..NIA....	CenterWell Certified Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	56-1556547			Home Health Care of Carteret County, LLC ....	..NC....	..NIA....	Capital Health Management Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	75-2374091			Home Health of Rural Texas, Inc. ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	87-0494759			Home Health Services, Inc. ....	..UT....	..NIA....	HHS Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-0837269			Homecare Holdings, Inc. ....	..FL....	..NIA....	Senior Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	76-0456316			Horizon Health Care Services, Inc. ....	..TX....	..NIA....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-8781607			Integracare Holdings, Inc. ....	..DE....	..NIA....	PF Development 9, L.L.C.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	75-2865632			Integracare Home Health Services, Inc. ....	..TX....	..NIA....	Aberdeen Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-8781715			Integracare Intermediate Holdings, Inc. ....	..DE....	..NIA....	Integracare Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-2915050			Integracare of Albany, LLC ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	27-2139332			Integracare of Athens-Home Health, LLC ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	81-0638801			Integracare of Olney Home Health, LLC ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-8768235			Integracare of Texas, LLC ....	..TX....	..NIA....	Aberdeen Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	27-0686207			Integracare of West Texas-Home Health, LLC ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	27-0686266			Integracare of Wichita Falls, LLC ....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-3992741			KAH Development 10, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-4002359			KAH Development 12, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-4025157			KAH Development 14, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-3902994			KAH Development 4, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	82-3695166			Kentucky Homecare Holdings, Inc. ....	..DE....	..NIA....	Kentucky Homecare Parent Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	82-3986306			Kentucky Homecare Parent Inc. ....	..DE....	..NIA....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-0717945			CenterWell Home Health Services, LLC ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-0717534			KND Development 50, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-0277280			Med. Tech. Services of South Florida, Inc. ....	..FL....	..NIA....	Advanced Oncology Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-1033439			Med-Tech Services of Dade, Inc. ....	..FL....	..NIA....	Homecare Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-0644307			Med-Tech Services of Palm Beach, Inc. ....	..FL....	..NIA....	Advanced Oncology Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	82-0559199			Mid-South Home Health Agency, LLCAL....	..NIA....	Horizon Health Network LLC	Ownership.....	100.000 ...	Humana Inc.NO....	0	

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.0119	Humana Inc.	00000	14-1909499			Mid-South Home Health of Gadsden, LLCGA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc.NO....	0	
.0119	Humana Inc.	00000	63-0772385			Mid-South Home Health, LLC .....	..DE....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-1285069			Missouri Home Care of Rolla, Inc. ....	..MO....	..NIA....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	55-0633030			Nursing Care-Home Health Agency, Inc. ....	..WV....	..NIA....	First Home Health, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	75-2284154			Outreach Health Services of North Texas, LLC .....	..TX....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-3106949			PF Development 10, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-3107011			PF Development 15, L.L.C. ....	..DE....	..NIA....	Kindred Hospice Services, L.L.C.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-0818835			PF Development 16, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-0860128			PF Development 21, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-0718044			PF Development 5, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-3106911			PF Development 7, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-3106934			PF Development 9, L.L.C. ....	..DE....	..NIA....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	33-1178066			PHH Acquisition Corp. ....	..DE....	..NIA....	CenterWell Certified Healthcare Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-5143963			Professional Healthcare at Home, LLC .....	..CA....	..NIA....	99% owned by Professional Healthcare, LLC and 1% owned by PHH Acquisition Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-5043143			Professional Healthcare, LLC .....	..DE....	..NIA....	PF Development 10, L.L.C.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	11-2750425			QC-Medi New York, Inc. ....	..NY....	..NIA....	CenterWell Health Services Holding Corp.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	59-3080333			Senior Home Care, Inc. ....	..FL....	..NIA....	SHC Holding, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	42-1699530			SHC Holding, Inc. ....	..DE....	..NIA....	PF Development 21, L.L.C.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	87-0494757			Southern Nevada Home Health Care, Inc. ....	..NV....	..NIA....	Home Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	72-1487473			Synergy Home Care-Acadia Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-1376846			Synergy Home Care-Capitol Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	36-4516940			Synergy Home Care-Central Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	72-1178497			Synergy Home Care-Northeastern Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	72-1223659			Synergy Home Care-Northshore Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	72-1431394			Synergy Home Care-Northwestern Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	72-1429305			Synergy Home Care-Southeastern Region, Inc. ....	..LA....	..NIA....	Synergy, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	94-3419676			Synergy, Inc. ....	..LA....	..NIA....	SHC Holding, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	56-1456991			TAR Heel Health Care Services, LLC .....	..NC....	..NIA....	Capital Health Management Group, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	68-0593592			Total Care Home Health of Louisburg, LLC .....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-0091435			Total Care Home Health of South Carolina, LLC .....	..GA....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-0091422			Van Winkle Home Health Care, Inc. ....	..MS....	..NIA....	Healthfield, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	62-1669388			Vernon Home Health Care Agency, LLC .....	..TX....	..NIA....	Home Health Care Affiliates, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	75-1995143			Voyager Home Health, Inc. ....	..DE....	..NIA....	Integracare Intermediate Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-1501792			Voyager Hospicecare, Inc. ....	..DE....	..NIA....	Voyager Hospicecare, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	20-1173787			Voyager Hospicecare, Inc. ....	..DE....	..NIA....	Harden Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	46-2300938			Wake Forest Baptist Health Care at Home, LLC .....	..NC....	..NIA....	60% owned by Total Care Home Health of North Carolina, LLC and 40% owned by Wake Forest University Baptist Medical Center .	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	84-3700467			Elite Health Medical Centers, LLC .....	..FL....	..NIA....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	26-3715136			Elite Health Primary Care, LLC .....	..FL....	..NIA....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	65-0270114			South Florida Cardiology Associates, LLC .....	..FL....	..NIA....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	47-2446186			Trueshore BPO, LLC .....	..FL....	..NIA....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	Trueshore S.R. L.			Trueshore S.R. L. ....	..DOM....	..NIA....	Primary Care Holdings II, LLC - 1%	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	84-5171456			CenterWell Accountable Care, LLC .....	..FL....	..NIA....	Echo Primary Care Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0
.0119	Humana Inc.	00000	87-3584872			One Home Medical Equipment NC, LLC .....	..DE....	..NIA....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	...NO....	0

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percent-age	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0119	Humana Inc.	00000	87-3611188			One Home Medical Equipment VA, LLC .....	..DE.....NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	87-3832743			One Infusion Pharmacy NC, LLC .....	..DE.....NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	87-3881471			One Infusion Pharmacy VA, LLC .....	..DE.....NIA.....	One Homecare Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	45-4020797			Amicus Medical Center LLC .....	..FL.....NIA.....	Conviva Medical Center Management, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	27-3974953			Amicus Medical Group, Inc. ....	..FL.....NIA.....	Conviva Medical Center Management, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	27-1085323			Amicus Medical Services Organization, LLC .....	..FL.....NIA.....	Conviva Medical Center Management, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	20-1078045			Hospice Pharmacy Solutions, LLC .....	..DE.....NIA.....	HP Solutions Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	47-5418599			HP Solutions Holdings, LLC .....	..DE.....NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	32-0351697			Outcome Resources, LLC .....	..DE.....NIA.....	Eagle Rx, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	88-3465849			Innovative Financial Group Holdings, LLC .....	..NC.....NIA.....	Humana MarketPOINT, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	83-2232570			Innovative Financial Partners, LLC .....	..NC.....NIA.....	Innovative Financial Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	84-5189010			Medicare Planning of America LLC .....	..NC.....NIA.....	Innovative Financial Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	47-4085710			Rees Financial LLC .....	..NC.....NIA.....	Innovative Financial Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	84-2258899			The Lead Store LLC .....	..NC.....NIA.....	Innovative Financial Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	82-4202700			Versa Management LLC .....	..NC.....NIA.....	Innovative Financial Group Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	86-2731153			Prime West JV Holdings, LLC .....	..DE.....NIA.....	Humana Innovation Enterprises, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	84-4307723			CenterWell IPA Solutions, LLC .....	..MI.....NIA.....	Prime West JV Holdings, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	82-1676284			Prime Accountable Care West, LLC .....	..MI.....NIA.....	CenterWell IPA Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	03-0523544			A and A Homecare, Inc. ....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	45-2401497			All About Home Care Management, LLC .....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	11-3836040			Altercare of Palm Beach County, LLC .....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	20-0110337			Altercare, LLC .....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	20-7287186			Balanced Home Healthcare, Inc. ....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	20-1903568			Bridges Home Health, Inc. ....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	46-3433197			Medstar Home Health, LLC .....	..FL.....NIA.....	Trident Home Health, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	20-5123865			M-SAC, Inc. ....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	45-2823888			Quality Living Home Health Care, LLC .....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	35-2466995			Trident Home Health, LLC .....	..FL.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	81-4466479			Trilogy Home Health Care SW FL, Inc. ....	..DE.....NIA.....	Vitality Home Care, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	81-2022629			Vitality HHS Holdings, Inc. ....	..DE.....NIA.....	CenterWell Health Services (USA), LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	81-2019673			Vitality Home Care, Inc. ....	..DE.....NIA.....	Vitality HHS Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	82-3311429			Conviva Physician Group, LLC .....	..FL.....NIA.....	Conviva Care Solutions, LLC	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	33-2663918			Humana Care Holdings, Inc. ....	..DE.....NIA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	33-2731074			Care Solutions ACO, LLC .....	..DE.....NIA.....	Humana Care Holdings, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	33-2023109			Humana Life Insurance Company of New York, Inc. ....	..NY.....IA.....	Humana Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	33-3124105			CenterWell Therapy Services, LLC .....	..DE.....NIA.....	CenterWell Health Services, Inc.	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		
.0119	Humana Inc.	00000	39-2720728			CenterWell Senior Primary Care (Vitality), Inc. ....	..FL.....NIA.....	CenterWell Senior Primary Care (FL), Inc.?	Ownership.....	100.000 ...	Humana Inc. ....	.....NO.....	.....0.....		

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Response

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

NO

AUGUST FILING

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

YES

Explanation:

1. This type of business is not written.

Bar Code:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

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

NONE**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	118,423,046	86,994,366
2. Cost of bonds and stocks acquired	37,582,914	54,178,009
3. Accrual of discount	204,569	373,421
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	253,900	184,085
6. Deduct consideration for bonds and stocks disposed of	21,599,793	23,041,758
7. Deduct amortization of premium	112,037	265,077
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	134,752,599	118,423,046
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	134,752,599	118,423,046

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	145,365,751	731,103,690	788,072,192	884,539	145,365,751	89,281,787	0	90,271,370
2. NAIC 2 (a)	43,578,258	534,334,960	522,698,876	657,412	43,578,258	55,871,755	0	53,442,816
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total ICO	188,944,009	1,265,438,651	1,310,771,068	1,541,951	188,944,009	145,153,542	0	143,714,186
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	73,526,205	17,511,258	4,669,323	16,914	73,526,205	86,385,054	0	72,309,413
9. NAIC 2	42,617	0	686	85	42,617	42,016	0	43,990
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total ABS	73,568,822	17,511,258	4,670,009	16,998	73,568,822	86,427,070	0	72,353,403
PREFERRED STOCK								
15. NAIC 1	0	0	0	0	0	0	0	0
16. NAIC 2	0	0	0	0	0	0	0	0
17. NAIC 3	0	0	0	0	0	0	0	0
18. NAIC 4	0	0	0	0	0	0	0	0
19. NAIC 5	0	0	0	0	0	0	0	0
20. NAIC 6	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	262,512,831	1,282,949,909	1,315,441,077	1,558,949	262,512,831	231,580,612	0	216,067,589

(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 \$ 47,893,860 ; NAIC 2 \$ 48,934,153 ; NAIC 3 \$ 0 ; NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

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

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

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

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

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

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

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

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	101,638,091	128,064,655
2. Cost of cash equivalents acquired	2,692,580,162	4,171,381,290
3. Accrual of discount	3,110,034	5,650,747
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	(610)	11
6. Deduct consideration received on disposals	2,696,561,855	4,203,458,611
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	100,765,823	101,638,091
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	100,765,823	101,638,091

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

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

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

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

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

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

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation, NAIC Designation Modifier and SVO Adminis- trative Symbol
91282C-NY-4	UNITED STATES TREASURY	05/21/2025	HSBC SECURITIES INC	1,990,394	2,000,000	4,484	1.A	
0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)				1,990,394	2,000,000	4,484	1.A	XXX
015271-BA-6	ALEXANDRIA REAL ESTATE EQUITIES INC	06/24/2025	JP MORGAN SEC'S INC., - FIXED INCOME	152,442	160,000	1,478	2.A FE	
06051G-LH-0	BANK OF AMERICA CORP	06/24/2025	Bank of America Securities	303,699	300,000	2,644	1.E FE	
075887-CS-6	BECTON DICKINSON AND CO	06/24/2025	MORGAN STANLEY CO	199,490	200,000	3,889	2.B FE	
172967-NN-7	CITIGROUP INC	06/24/2025	CITIGROUP GLOBAL MARKETS INC.	185,788	200,000	2,061	1.G FE	
20030N-EP-2	COMCAST CORP	06/24/2025	MORGAN STANLEY CO	202,852	200,000	1,384	1.G FE	
42250P-AE-3	HEALTHPEAK OP LLC	06/24/2025	WELLS FARGO SECURITIES	101,286	100,000	146	2.A FE	
460690-BU-3	INTERPUBLIC GROUP OF COMPANIES INC	06/24/2025	US BANCORP INVESTMENTS INC.	80,831	80,000	119	2.B FE	
50077L-BN-5	KRAFT HEINZ FOODS CO	06/24/2025	JEFFERIES & COMPANY, INC.	201,512	200,000	3,600	2.B FE	
65339K-DL-1	NEXTERA ENERGY CAPITAL HOLDINGS INC	06/24/2025	BNP PARIBAS SECURITIES BOND	304,349	300,000	6,404	2.A FE	
68389X-BE-4	ORACLE CORP	06/24/2025	Bank of America Securities	179,362	200,000	867	2.B FE	
92343V-GY-4	VERIZON COMMUNICATIONS INC	06/24/2025	Bank of America Securities	194,058	200,000	3,452	2.A FE	
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)				2,105,668	2,140,000	26,044	XXX	
0489999999. Total - Issuer Credit Obligations (Unaffiliated)				4,096,062	4,140,000	30,527	XXX	
0499999999. Total - Issuer Credit Obligations (Affiliated)				0	0	0	XXX	
0509999997. Total - Issuer Credit Obligations - Part 3				4,096,062	4,140,000	30,527	XXX	
0509999998. Total - Issuer Credit Obligations - Part 5				XXX	XXX	XXX	XXX	
0509999999. Total - Issuer Credit Obligations				4,096,062	4,140,000	30,527	XXX	
3132DQ-Y6-7	FH SD3433 - RMBS	06/13/2025	MORGAN STANLEY CO	1,257,023	1,263,538	2,896	1.A	
3132DQ-LL-5	FH SD8431 - RMBS	06/17/2025	CITIGROUP GLOBAL MARKETS INC.	595,539	600,039	1,558	1.A	
3140W1-T6-8	FN FA1450 - RMBS	06/17/2025	CITIGROUP GLOBAL MARKETS INC.	596,202	600,046	1,558	1.A	
31418E-YM-6	FN MA5215 - RMBS	04/28/2025	Various	1,448,998	1,452,599	6,214	1.A	
31418E-ZL-7	FN MA5246 - RMBS	04/28/2025	BARCLAYS CAPITAL INC FIXED INC	544,556	545,750	2,335	1.A	
3142TN-XW-4	FH SL1592 - RMBS	06/13/2025	MORGAN STANLEY CO	3,714,580	3,740,000	8,571	1.A	
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)				8,156,897	8,201,972	23,132	XXX	
44216X-AA-3	HGMT 25HGLR A - CMBS	06/13/2025	JP MORGAN SEC'S INC., - FIXED INCOME	100,813	100,000	235	1.A FE	
1079999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)				100,813	100,000	235	XXX	
63943E-AA-5	NAVEL 25A A - CDO	06/17/2025	BARCLAYS CAPITAL INC FIXED INC	901,845	902,000	0	1.A FE	
1099999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency - CLOs/CBOs/CDOs (Unaffiliated)				901,845	902,000	0	XXX	
00833B-AG-3	AFRMIT 252 A - ABS	06/18/2025	MORGAN STANLEY CO	1,652,784	1,653,000	0	1.A FE	
35042N-AA-3	FFIN 2025-2 A - ABS	06/27/2025	GOLDMAN	1,476,699	1,477,000	0	1.A FE	
50117L-AD-0	KCOT 252 A4 - ABS	06/17/2025	BANK OF NYC/MIZUHO SEC	293,939	294,000	0	1.A FE	
68270D-AA-9	OMFIT 251 A - ABS	06/17/2025	BARCLAYS CAPITAL INC FIXED INC	999,895	1,000,000	0	1.A FE	
78398H-AC-2	SFAST 2025-2 A3 - ABS	06/17/2025	BNP PARIBAS SECURITIES BOND	983,937	984,000	0	1.A FE	
891950-AA-5	TALNT 251 A - ABS	06/05/2025	Bank of America Securities	960,716	961,000	0	1.A FE	
92348K-EK-5	VZMT 256 A - ABS	06/17/2025	RBC CAPITAL MARKETS	1,727,752	1,728,000	0	1.A FE	
1119999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)				8,095,722	8,097,000	0	XXX	
29375T-AD-4	EFF 252 A4 - ABS	04/29/2025	JP MORGAN SEC'S INC., - FIXED INCOME	255,981	256,000	0	1.A FE	
1519999999. Subtotal - Asset-Backed Securities - Non-Financial Asset-Backed Securities - Practical Expedient - Lease-Backed Securities - Practical Expedient (Unaffiliated)				255,981	256,000	0	XXX	
1889999999. Total - Asset-Backed Securities (Unaffiliated)				17,511,258	17,556,972	23,367	XXX	
1899999999. Total - Asset-Backed Securities (Affiliated)				0	0	0	XXX	
1909999997. Total - Asset-Backed Securities - Part 3				17,511,258	17,556,972	23,367	XXX	
1909999998. Total - Asset-Backed Securities - Part 5				XXX	XXX	XXX	XXX	
1909999999. Total - Asset-Backed Securities				17,511,258	17,556,972	23,367	XXX	
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities				21,607,321	21,696,972	53,894	XXX	
4509999997. Total - Preferred Stocks - Part 3				0	XXX	0	XXX	
4509999998. Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX	
4509999999. Total - Preferred Stocks				0	XXX	0	XXX	
5989999997. Total - Common Stocks - Part 3				0	XXX	0	XXX	

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Date Acquired	4 Name of Vendor	5 Number of Shares of Stock	6 Actual Cost	7 Par Value	8 Paid for Accrued Interest and Dividends	9 NAIC Designation, NAIC Designation Modifier and SVO Admini- stra- tive Symbol
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks				0	XXX	0	XXX	
5999999999. Total - Preferred and Common Stocks				0	XXX	0	XXX	
6009999999 - Totals				21,607,321	XXX	53,894	XXX	

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 4

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

1 CUSIP Ident- ification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consid- eration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/ Stock Dividends Received During Year	20 Stated Con- tractual Maturity Date	21 NAIC Design- nation, NAIC Design- nation Modifi- er and SVO Adminis- trative Symbol	
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's Other Than Temporary Impairment Recogn- ized	12 Current Year's Temporar- y Impairment Accre- tion	13 Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	14 Total Foreign Change in Book/ Adjusted Carrying Value								
.91282C-HF-1	UNITED STATES TREASURY	04/04/2025	CITADEL SECURITIES LLC	201,320	200,000	200,641	200,510	0	(23)	0	(23)	0	0	200,487	0	833	833	2,637	05/31/2030	1.A	
.91282C-MM-0	UNITED STATES TREASURY	04/04/2025	JP MORGAN SEC'S INC., - FIXED INCOME	2,113,902	2,000,000	2,062,582	0	0	(233)	0	(233)	0	0	2,062,349	0	51,553	51,553	13,032	02/15/2035	1.A	
0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)				2,315,222	2,200,000	2,263,223	200,510	0	(256)	0	(256)	0	0	2,262,836	0	52,386	52,386	15,669	XXX	XXX	
.57584X-XZ-9	MASSACHUSETTS ST DEV FIN AGY REV	04/22/2025	JP MORGAN SEC'S INC., - FIXED INCOME	20,213	20,000	25,142	20,882	0	(175)	0	(175)	0	0	20,707	0	(494)	(494)	772	07/15/2031	1.A FE	
.956622-K3-7	WEST VIRGINIA ST HOSP FIN AUTH HOSP REV	06/01/2025	Maturity @ 100.00	345,000	345,000	432,416	349,380	0	(4,380)	0	(4,380)	0	0	345,000	0	0	0	8,625	06/01/2025	1.F FE	
0059999999. Subtotal - Issuer Credit Obligations - Municipal Bonds - Special Revenues				365,213	365,000	457,559	370,263	0	(4,555)	0	(4,555)	0	0	365,707	0	(494)	(494)	9,397	XXX	XXX	
.172967-PF-2	CITIGROUP INC	06/26/2025	MORGAN STANLEY CO	61,098	60,000	60,000	60,000	0	0	0	0	0	0	60,000	0	1,098	1,098	2,708	02/13/2030	1.G FE	
.571748-BN-1	MARSH & MCLENNAN COMPANIES INC	06/26/2025	PERSHING LLC	40,231	45,000	37,777	39,056	0	432	0	432	0	0	39,488	0	743	743	624	11/15/2030	1.G FE	
.65339K-CM-0	NEXTERA ENERGY CAPITAL HOLDINGS INC	06/12/2025	MORGAN STANLEY CO	90,875	90,000	89,814	89,853	0	23	0	23	0	0	89,876	0	999	999	3,491	02/28/2028	2.A FE	
.756109-BS-2	REALTY INCOME CORP	06/12/2025	BONY/TORONTO DOMINION SECURITI	45,355	45,000	44,527	44,661	0	35	0	35	0	0	44,696	0	659	659	1,046	12/15/2028	1.G FE	
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)				237,558	240,000	232,117	233,570	0	490	0	490	0	0	234,060	0	0	3,498	3,498	7,869	XXX	XXX
0489999999. Total - Issuer Credit Obligations (Unaffiliated)				2,917,994	2,805,000	2,952,899	804,342	0	(4,321)	0	(4,321)	0	0	2,862,603	0	55,390	55,390	32,935	XXX	XXX	
0499999999. Total - Issuer Credit Obligations (Affiliated)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
0509999997. Total - Issuer Credit Obligations - Part 4				2,917,994	2,805,000	2,952,899	804,342	0	(4,321)	0	(4,321)	0	0	2,862,603	0	55,390	55,390	32,935	XXX	XXX	
0509999998. Total - Issuer Credit Obligations - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations				2,917,994	2,805,000	2,952,899	804,342	0	(4,321)	0	(4,321)	0	0	2,862,603	0	55,390	55,390	32,935	XXX	XXX	
.3131XX-11S-6	FH ZM4257 - RMBS	06/01/2025	Paydown	1,832	1,832	1,950	1,999	0	(167)	0	(167)	0	0	1,832	0	0	0	0	27	09/01/2047	1.A
.3132DN-4N-2	FH SD0829 - RMBS	06/01/2025	Paydown	12,799	12,799	13,203	13,170	0	(371)	0	(371)	0	0	12,799	0	0	0	0	143	01/10/2052	1.A
.3132DN-5C-3	FH SD1743 - RMBS	06/01/2025	Paydown	4,687	4,687	4,450	4,457	0	230	0	230	0	0	4,687	0	0	0	0	76	01/10/2052	1.A
.3132DN-7K-3	FH SD1798 - RMBS	06/01/2025	Paydown	1,947	1,947	1,975	1,974	0	(27)	0	(27)	0	0	1,947	0	0	0	0	44	11/01/2052	1.A
.3132DN-7L-1	FH SD1799 - RMBS	06/01/2025	Paydown	2,935	2,935	2,974	2,970	0	(36)	0	(36)	0	0	2,935	0	0	0	0	72	11/01/2052	1.A
.3132DN-E2-5	FH SD1053 - RMBS	06/01/2025	Paydown	3,024	3,024	3,037	3,036	0	(12)	0	(12)	0	0	3,024	0	0	0	0	43	06/01/2052	1.A
.3132DN-G5-6	FH SD1120 - RMBS	06/01/2025	Paydown	3,489	3,489	3,548	3,550	0	(61)	0	(61)	0	0	3,489	0	0	0	0	62	06/01/2052	1.A
.3132DN-NS-8	FH SD1301 - RMBS	06/01/2025	Paydown	53,613	53,613	54,894	54,818	0	(1,205)	0	(1,205)	0	0	53,613	0	0	0	0	1,088	07/01/2052	1.A
.3132DN-GH-9	FH SD1356 - RMBS	06/01/2025	Paydown	21,152	21,152	21,597	0	(445)	0	(445)	0	0	21,152	0	0	0	0	435	07/01/2052	1.A	
.3132DN-VJ-9	FH SD1517 - RMBS	06/01/2025	Paydown	656	656	657	656	0	(1)	0	(1)	0	0	656	0	0	0	0	13	09/01/2052	1.A
.3132DN-VR-1	FH SD1524 - RMBS	06/01/2025	Paydown	1,666	1,666	1,583	1,584	0	83	0	83	0	0	1,666	0	0	0	0	28	08/01/2052	1.A
.3132DN-V5-6	FH SD1632 - RMBS	04/04/2025	Various	118,835	116,822	117,096	0	(31)	0	(31)	0	0	117,001	0	0	1,833	1,833	2,246	09/01/2052	1.A	
.3132DN-V7-2	FH SD1634 - RMBS	04/04/2025	Various	75,767	74,337	74,755	74,723	0	(33)	0	(33)	0	0	74,691	0	0	1,076	1,076	1,431	09/01/2052	1.A
.3132DN-V8-0	FH SD1635 - RMBS	06/01/2025	Paydown	3,428	3,428	3,473	3,469	0	(41)	0	(41)	0	0	3,428	0	0	0	0	75	09/01/2052	1.A
.3132DP-KY-3	FH SD2111 - RMBS	06/01/2025	Paydown	506	506	492	493	0	13	0	13	0	0	506	0	0	0	0	9	12/01/2052	1.A
.3132DO-C6-1	FH SD2793 - RMBS	06/01/2025	Paydown	398	398	389	389	0	9	0	9	0	0	398	0	0	0	0	9	03/01/2053	1.A
.3132DO-QV-1	FH SD3168 - RMBS	06/01/2025	Paydown	2,346	2,346	2,327	2,328	0	18	0	18	0	0	2,346	0	0	0	0	49	06/01/2053	1.A
.3132DS-A4-4	FH SD5323 - RMBS	06/01/2025	Paydown	18,530	18,530	17,979	17,982	0	548	0	548	0	0	18,530	0	0	0	0	305	01/01/2054	1.A
.3132DS-B3-5	FH SD4558 - RMBS	06/01/2025	Paydown	11,443	11,443	10,831	10,844	0	599	0	599	0	0	11,443	0	0	0	0	185	10/01/2052	1.A
.3132DT-MZ-2	FH SD5776 - RMBS	06/01/2025	Paydown	15,684	15,684	15,500	15,502	0	182	0	182	0	0	15,684	0	0	0	0	250	07/01/2050	1.A
.3132DU-TT-4	FEDERAL HOME LOAN MORTGAGE CORPORATION -	04/04/2025	Various	1,001,561	989,431	986,184	986,185	0	18	0	18	0	0	986,203	0	0	15,358	15,358	19,040	10/01/2054	1.A
.3132DV-SZ-4	FH SD8064 - RMBS	06/01/2025	Paydown	2,271	2,271	2,173	2,177	0	94	0	94	0	0	2,271	0	0	0	0	36	05/01/2050	1.A
.3132DV-LA-1	FH SD7521 - RMBS	06/01/2025	Paydown	5,380	5,380	5,759	5,757	0	(377)	0	(377)	0	0	5,380	0	0	0	0	56	07/01/2050	1.A
.3132DV-LC-7	FH SD7523 - RMBS	06/01/2025	Paydown	2,634	2,634	2,810	2,810	0	(176)	0	(176)	0	0	2,634	0	0	0	0	27	08/01/2050	1.A
.3132DV-LV-5	FH SD7540 - RMBS	06/01/2025	Paydown	3,304	3,304	3,484	3,473	0	(169)	0	(169)	0	0	3,304	0	0	0</				

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21
									10	11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Total Change in Book/Adjusted Carrying Value (10 + 11 - 12)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
3133BM-06-5	FH QF0477 - RMBS	06/01/2025	Paydown		8,783	8,783	8,867	0	(86)	0	(86)	0	8,783	0	0	0	0	158	09/01/2052	1.A
3133BQ-5W-2	FN QF3561 - RMBS	06/01/2025	Paydown		4,604	4,604	4,686	0	(84)	0	(84)	0	4,604	0	0	0	0	109	11/01/2052	1.A
3133KX-3X-5	FN RA4414 - RMBS	06/01/2025	Paydown		9,520	9,520	10,117	0	609	0	(578)	0	9,520	0	0	0	0	97	01/01/2051	1.A
3133KM-RT-4	FN RA5898 - RMBS	06/01/2025	Paydown		1,537	1,537	1,562	0	(23)	0	(23)	0	1,537	0	0	0	0	12	09/01/2051	1.A
3133KN-KX-0	FN RA6610 - RMBS	06/01/2025	Paydown		16,975	16,975	17,346	0	(371)	0	(371)	0	16,975	0	0	0	0	216	01/01/2052	1.A
3133KP-YM-4	FN RA7916 - RMBS	06/01/2025	Paydown		3,245	3,245	3,160	0	82	0	82	0	3,245	0	0	0	0	56	09/01/2052	1.A
3133KQ-VZ-6	FN RA8732 - RMBS	06/01/2025	Paydown		2,879	2,879	2,866	0	13	0	13	0	2,879	0	0	0	0	63	03/01/2053	1.A
3137BP-DW-6	FHR 4583 UP - CMO/RMBS	06/01/2025	Paydown		9,382	9,382	9,842	0	(460)	0	(460)	0	9,382	0	0	0	0	113	07/15/2045	1.A
3137BS-ZE-6	FHR 4631 GP - CMO/RMBS	06/01/2025	Paydown		6,690	6,690	7,164	0	(540)	0	(540)	0	6,690	0	0	0	0	108	03/15/2046	1.A
3140HD-7A-6	FN BK0888 - RMBS	06/01/2025	Paydown		2,268	2,268	2,449	0	(377)	0	(377)	0	2,268	0	0	0	0	40	07/01/2048	1.A
3140J8-UJ-9	FN BM1497 - RMBS	06/01/2025	Paydown		118	118	125	0	(9)	0	(9)	0	118	0	0	0	0	1	03/01/2047	1.A
3140KV-EU-0	FN BQ9146 - RMBS	06/01/2025	Paydown		1,270	1,270	1,316	0	(43)	0	(43)	0	1,270	0	0	0	0	11	12/01/2050	1.A
3140KV-F5-4	FN BQ9187 - RMBS	06/01/2025	Paydown		1,071	1,071	1,111	0	(38)	0	(38)	0	1,071	0	0	0	0	8	01/01/2051	1.A
3140KV-GN-4	FN BQ9204 - RMBS	06/01/2025	Paydown		1,080	1,080	1,120	0	(38)	0	(38)	0	1,080	0	0	0	0	10	01/01/2051	1.A
3140KV-SP-2	FN BQ9253 - RMBS	06/01/2025	Paydown		895	895	932	0	(34)	0	(34)	0	895	0	0	0	0	8	12/01/2050	1.A
3140LO-C8-8	FN B11894 - RMBS	06/01/2025	Paydown		2,515	2,515	2,611	0	(86)	0	(86)	0	2,515	0	0	0	0	20	01/01/2051	1.A
3140LO-D4-6	FN B11922 - RMBS	06/01/2025	Paydown		1,620	1,620	1,683	0	(59)	0	(59)	0	1,620	0	0	0	0	13	01/01/2051	1.A
3140LO-DR-5	FN B11911 - RMBS	06/01/2025	Paydown		2,327	2,327	2,413	0	(79)	0	(79)	0	2,327	0	0	0	0	21	01/01/2051	1.A
3140MR-ZN-6	FN B110780 - RMBS	06/01/2025	Paydown		610	610	618	0	(7)	0	(7)	0	610	0	0	0	0	10	08/01/2052	1.A
3140MY-AD-4	FN B116303 - RMBS	06/01/2025	Paydown		26,546	26,546	26,799	0	(280)	0	(280)	0	26,546	0	0	0	0	479	08/01/2052	1.A
3140N3-AS-5	FN B11927 - RMBS	06/01/2025	Paydown		7,460	7,460	7,553	0	(94)	0	(94)	0	7,460	0	0	0	0	173	10/01/2052	1.A
3140O9-4Z-3	FN CA2639 - RMBS	06/01/2025	Paydown		600	600	590	0	9	0	9	0	600	0	0	0	0	12	11/01/2048	1.A
3140O9-MM-2	FN CA2163 - RMBS	06/01/2025	Paydown		4,273	4,273	4,247	0	26	0	26	0	4,273	0	0	0	0	73	08/01/2048	1.A
3140QE-AP-7	FN CA6313 - RMBS	06/01/2025	Paydown		6,156	6,156	6,573	0	(494)	0	(494)	0	6,156	0	0	0	0	73	07/01/2050	1.A
3140QE-DX-7	FN CA6417 - RMBS	06/01/2025	Paydown		6,343	6,343	6,781	0	(500)	0	(500)	0	6,343	0	0	0	0	77	07/01/2050	1.A
3140QE-KY-7	FN CA6610 - RMBS	06/01/2025	Paydown		4,360	4,360	4,661	0	(358)	0	(358)	0	4,360	0	0	0	0	57	08/01/2050	1.A
3140QE-YJ-5	FN C7012 - RMBS	06/01/2025	Paydown		6,709	6,709	6,881	0	(164)	0	(164)	0	6,709	0	0	0	0	56	09/01/2052	1.A
3140OF-4E-6	FN CA8020 - RMBS	06/01/2025	Paydown		3,241	3,241	3,441	0	(185)	0	(185)	0	3,241	0	0	0	0	34	12/01/2050	1.A
3140OG-3C-9	FN CA8894 - RMBS	06/01/2025	Paydown		6,374	6,374	6,807	0	(400)	0	(400)	0	6,374	0	0	0	0	69	02/01/2051	1.A
3140OG-U4-7	FN CA8702 - RMBS	06/01/2025	Paydown		13,594	13,594	14,522	0	(685)	0	(685)	0	13,594	0	0	0	0	141	01/01/2036	1.A
3140QG-ZQ-3	FN CA8850 - RMBS	06/01/2025	Paydown		3,693	3,693	3,828	0	(122)	0	(122)	0	3,693	0	0	0	0	31	02/01/2051	1.A
3140QL-MY-9	FN C11274 - RMBS	06/01/2025	Paydown		3,015	3,015	3,139	0	(124)	0	(124)	0	3,015	0	0	0	0	31	08/01/2051	1.A
3140QM-5T-7	FN C2657 - RMBS	06/01/2025	Paydown		1,147	1,147	1,171	0	(21)	0	(21)	0	1,147	0	0	0	0	14	01/01/2052	1.A
3140QM-VP-6	FN C2421 - RMBS	06/01/2025	Paydown		6,482	6,482	6,837	0	(323)	0	(323)	0	6,482	0	0	0	0	84	12/01/2051	1.A
3140QP-BA-4	FN C3632 - RMBS	06/01/2025	Paydown		44,695	44,695	46,127	0	(1,406)	0	(1,406)	0	44,695	0	0	0	0	754	05/01/2052	1.A
3140QP-BG-1	FN C3638 - RMBS	06/01/2025	Paydown		2,893	2,893	2,940	0	(46)	0	(46)	0	2,893	0	0	0	0	54	05/01/2052	1.A
3140QP-ZB-6	FN C84337 - RMBS	06/01/2025	Paydown		2,406	2,406	2,450	0	(42)	0	(42)	0	2,406	0	0	0	0	46	08/01/2052	1.A
3140QP-ZE-0	FN C84340 - RMBS	06/01/2025	Paydown		4,518	4,518	4,533	0	(16)	0	(16)	0	4,518	0	0	0	0	78	08/01/2052	1.A
3140QQ-F6-7	FN C94688 - RMBS	06/01/2025	Paydown		39,468	39,468	40,611	0	(1,143)	0	(1,143)	0	39,468	0	0	0	0	795	09/01/2052	1.A
3140QQ-GA-7	FN C84692 - RMBS	06/01/2025	Paydown		14,690	14,690	15,034	0	(319)	0	(319)	0	14,690	0	0	0	0	352	09/01/2052	1.A
3140QQ-UM-5	FN C85087 - RMBS	06/01/2025	Paydown		1,142	1,142	1,163	0	(21)	0	(21)	0	1,142	0	0	0	0	26	11/01/2052	1.A
3140X8-3F-2	FN M5297 - RMBS	06/01/2025	Paydown		1,341	1,341	1,434	0	(115)	0	(115)	0	1,341	0	0	0	0	16	11/01/2050	1.A
3140X8-G6-8	FN M4720 - RMBS	06/01/2025	Paydown		5,820	5,820	6,218	0	(462)	0	(462)	0	5,820	0	0	0	0	75	10/01/2050	1.A
3140X8-UU-9	FN M5094 - RMBS	06/01/2025	Paydown		8,753	8,753	9,356	0	(909)	0	(909)	0	8,753	0	0	0	0	129	06/01/2049	1.A
3140X8-WR-4	FN M5155 - RMBS	06/01/2025	Paydown		905	905	941	0	(31)	0	(31)	0	905	0	0	0	0	8	12/01/2050	1.A
3140X8-Y6-8	FN M5232 - RMBS	06/01/2025	Paydown		723	723	773	0	(59)	0	(59)	0	723	0	0	0	0	9	06/01/2050	1.A
3140X8-Y7-6	FN M5233 - RMBS	06/01/2025	Paydown		2,580	2,580	2,749	0	(167)	0	(167)	0	2,580	0	0	0	0	30	11/01/2050	1.A
3140X8-YK-7	FN M5213 - RMBS	06/01/2025	Paydown		2,038	2,038	2,115	0	(77)	0	(77)	0	2,038	0	0	0	0	17	12/01/2050	1.A
3140X9-JB-2	FN M5657 - RMBS	06/01/2025	Paydown		564	564	601	0	(44)	0	(44)	0	564	0	0	0	0	7	12/01/2050	1.A
3140X9-UJ-2	FN M5984 - RMBS	06/01/2025	Paydown		12,103	12,103	12,504	0	(361)	0	(361)	0	12,103	0	0	0	0	107	02/01/2051	1.A
3140X9-ID-3	FN M6043 - RMBS	06/01/2025	Paydown		6,713	6,713	7,311	0	(598)	0	(598)	0	6,713	0	0	0	0	99	06/01/2049	1.A
3140XB-QD-5	FN M7651 - RMBS	06/01/2025	Paydown		12,080	12,080	12,408	0	(328)	0	(328)	0	12,080	0	0	0	0	222	09/01/2049	1.A
3140XB-X7-0	FN M7901 - RMBS	06/01/2025	Paydown		678	678	709	0	(28)	0	(28)	0	678	0	0	0	0	7	07/01/2051	1.A
3140XC-AZ-8	FN M8939 - RMBS	06/01/2025	Paydown		6,214	6,214	6,266	0	(52)	0	(52)	0	6,214	0	0	0	0	52	10/01/2051	1.A

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 4

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

1 CUSIP Ident- ification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consid- eration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/ Stock Dividends Received During Year	20 Stated Con- tractual Maturity Date	21 NAIC Design- nation, NAIC Design- nation Modifer and SVO Adminis- trative Symbol				
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amor- tization)/ Accretion	12 Other Than Temporary Impairment Recogn- ized	13 Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	14 Total Foreign Change in Book /Adjusted Carrying Value											
.3140XC-YX-0	FN FM8825 - RMBS	06/01/2025	Paydown		1,492	1,492	1,517	0	(22)	0	(22)	0	0	0	0	0	0	0	0	0	09/01/2051	1.A ..		
.3140XD-2J-4	FN FM9776 - RMBS	06/01/2025	Paydown		26,872	26,872	27,594	0	27,560	0	(688)	0	(688)	0	0	0	0	0	0	0	0	0		
.3140XF-H3-8	FN F90249 - RMBS	06/01/2025	Paydown		10,393	10,393	10,808	0	10,762	0	(370)	0	(370)	0	0	0	0	0	0	0	0	0		
.3140XF-H5-3	FN F90251 - RMBS	06/01/2025	Paydown		26,530	26,530	27,500	0	27,397	0	(868)	0	(868)	0	0	0	0	0	0	0	0	0		
.3140XF-HY-0	FN FS0246 - RMBS	06/01/2025	Paydown		1,039	1,039	1,085	0	1,080	0	(41)	0	(41)	0	0	0	0	0	0	0	0	0		
.3140XF-LL-3	FN FS0330 - RMBS	06/01/2025	Paydown		12,071	12,071	12,480	0	12,446	0	(375)	0	(375)	0	0	0	0	0	0	0	0	0		
.3140XG-7F-0	FN FS1793 - RMBS	06/01/2025	Paydown		5,895	5,895	5,926	0	5,924	0	(29)	0	(29)	0	0	0	0	0	0	0	0	0		
.3140XG-CH-0	FN FS0971 - RMBS	06/01/2025	Paydown		1,780	1,780	1,790	0	1,789	0	(9)	0	(9)	0	0	0	0	0	0	0	0	0		
.3140XG-TV-1	FN FS1463 - RMBS	06/01/2025	Paydown		30,101	30,101	29,574	0	29,576	0	525	0	525	0	0	0	0	0	0	0	0	0		
.3140XG-VJ-5	FN FS1516 - RMBS	06/01/2025	Paydown		12,471	12,471	12,462	0	12,461	0	11	0	11	0	0	0	0	0	0	0	0	0		
.3140XG-IM-7	FN FS1551 - RMBS	06/01/2025	Paydown		1,992	1,992	2,007	0	2,006	0	(14)	0	(14)	0	0	0	0	0	0	0	0	0		
.3140XG-ZA-0	FN FS1636 - RMBS	06/01/2025	Paydown		10,578	10,578	10,603	0	10,599	0	(21)	0	(21)	0	0	0	0	0	0	0	0	0		
.3140XH-3U-9	FN FS2610 - RMBS	06/01/2025	Paydown		1,306	1,306	1,326	0	1,326	0	(19)	0	(19)	0	0	0	0	0	0	0	0	0		
.3140XH-GY-8	FN FS2686 - RMBS	06/01/2025	Paydown		2,620	2,620	2,640	0	2,620	0	(20)	0	(20)	0	0	0	0	0	0	0	0	0		
.3140XH-JL-2	FN FS2066 - RMBS	06/01/2025	Paydown		50,942	50,942	48,376	0	48,307	0	2,635	0	2,635	0	0	0	0	0	0	0	0	0		
.3140XH-NC-7	FN FS2186 - RMBS	06/01/2025	Paydown		6,587	6,587	6,324	0	6,324	0	262	0	262	0	0	0	0	0	0	0	0	0		
.3140XJ-LC-5	FN FS3022 - RMBS	06/01/2025	Paydown		1,077	1,077	1,046	0	1,046	0	29	0	29	0	0	0	0	0	0	0	0	0		
.3140XJ-QG-1	FN FS3154 - RMBS	06/01/2025	Paydown		2,123	2,123	2,097	0	2,098	0	25	0	25	0	0	0	0	0	0	0	0	0		
.3140XJ-IK-5	FN FS3349 - RMBS	06/01/2025	Paydown		3,118	3,118	3,052	0	3,053	0	65	0	65	0	0	0	0	0	0	0	0	0		
.3140XL-5L-8	FN FS3530 - RMBS	06/01/2025	Paydown		264,703	264,703	253,453	0	253,180	0	11,523	0	11,523	0	0	0	0	0	0	0	0	0		
.3140XM-E7-7	FN FS5557 - RMBS	04/04/2025	Var ious		378,306	378,306	409,315	0	370,951	0	533	0	533	0	0	0	0	0	0	0	0	0		
.3140XM-J6-4	FN FS5684 - RMBS	06/01/2025	Paydown		1,981	1,981	1,885	0	1,885	0	96	0	96	0	0	0	0	0	0	0	0	0		
.3140XN-BU-7	FN FS6350 - RMBS	06/01/2025	Paydown		91,377	91,377	88,579	0	88,601	0	2,776	0	2,776	0	0	0	0	0	0	0	0	0		
.3140XP-TH-2	FN FS7751 - RMBS	06/01/2025	Paydown		27,321	27,321	26,510	0	26,516	0	805	0	805	0	0	0	0	0	0	0	0	0		
.31418C-MG-6	FN MA3058 - RMBS	06/01/2025	Paydown		4,509	4,509	4,875	0	4,875	0	5,071	0	5,071	0	(561)	0	(561)	0	0	0	0	0		
.31418D-HL-9	FN MA3834 - RMBS	06/01/2025	Paydown		1,150	1,150	1,201	0	1,201	0	1,232	0	1,232	0	(83)	0	(83)	0	0	0	0	0		
.31418E-DE-7	FN MA4600 - RMBS	06/01/2025	Paydown		124,397	124,397	113,979	0	113,979	0	10,396	0	10,396	0	0	0	0	0	0	0	0	0		
.31418E-KS-8	FN MA4804 - RMBS	06/01/2025	Paydown		20,065	20,065	19,141	0	19,158	0	907	0	907	0	0	0	0	0	0	0	0	0		
.31418E-YM-2	FN MA5215 - RMBS	06/01/2025	Paydown		21,326	21,326	21,273	0	21,273	0	53	0	53	0	0	0	0	0	0	0	0	0		
.31418F-ZL-7	FN MA5246 - RMBS	06/01/2025	Paydown		10,595	10,595	10,572	0	10,572	0	23	0	23	0	0	0	0	0	0	0	0	0		
.35563P-LH-0	SCR 2019-3 MA - CMO/RMBS	06/01/2025	Paydown		1,678	1,678	1,754	0	1,723	0	(44)	0	(44)	0	0	0	0	0	0	0	0	0		
.35563P-ML-0	SCR 2019-4 MA - CMO/RMBS	06/01/2025	Paydown		1,366	1,366	1,396	0	1,384	0	(18)	0	(18)	0	0	0	0	0	0	0	0	0		
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)						3,066,184	3,081,620	3,023,922	2,992,189	0	17,061	0	17,061	0	0	3,041,095	0	25,090	25,090	52,253	XXX	XXX		
.05946X-BV-4	BAFC 2003-1 A1 - CMO/RMBS	06/01/2025	Paydown		6	6	6	0	0	0	0	0	0	0	0	6	0	0	0	0	0	05/20/2033	1.D FE	
.33852J-AE-8	FSMT 217 A5 - CMO/RMBS	06/01/2025	Paydown		2,036	2,036	2,078	0	2,070	0	(34)	0	(34)	0	0	0	2,036	0	0	0	0	0	08/25/2051	1.A FE
.36262W-AJ-5	GSMB 21PJB A8 - CMO/RMBS	06/01/2025	Paydown		2,243	2,243	2,295	0	2,286	0	(43)	0	(43)	0	0	0	2,243	0	0	0	0	0	01/25/2052	1.A FE
.46592W-AF-3	JPMIT 2112 A4 - CMO/RMBS	06/01/2025	Paydown		6,010	6,010	6,111	0	6,091	0	(81)	0	(81)	0	0	0	6,010	0	0	0	0	0	02/25/2052	1.A FE
.46653X-AE-0	JPMIT 2021-INV5 A2A - CMO/RMBS	06/01/2025	Paydown		2,913	2,913	2,947	0	2,942	0	(29)	0	(29)	0	0	0	2,913	0	0	0	0	0	12/26/2051	1.A FE
.46654W-AH-4	JPMIT 221 A4 - CMO/RMBS	06/01/2025	Paydown		2,455	2,455	2,433	0	2,442	0	13	0	13	0	0	0	2,455	0	0	0	0	0	07/25/2052	1.A FE
.46655L-AE-4	JPMIT 22LTV2 A3 - RMBS	06/01/2025	Paydown		5,142	5,142	4,436	0	4,496	0	646	0	646	0	0	0	5,142	0	0	0	0	0	09/25/2052	1.A FE
.61772C-AH-4	MSRM 2021-3 A4 - CMO/RMBS	06/01/2025	Paydown		3,728	3,728	3,805	0	3,790	0	(62)	0	(62)	0	0	0	3,728	0	0	0	0	0	06/26/2051	1.A FE
.74936R-AE-4	RCKT 212 A5 - CMO/RMBS	06/01/2025	Paydown		1,825	1,825	1,863	0	1,857	0	(32)	0	(32)	0	0	0	1,825	0	0	0	0	0	12/01/2051	1.A FE
.74938G-AB-2	RCKT 224 A2 - CMO/RMBS	06/01/2025	Paydown		11,087	11,087																		

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE D - PART 4

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

1 CUSIP Ident- ification	2 Description	3 Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consid- eration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15 Book/ Adjusted Carrying Value at Disposal Date	16 Foreign Exchange Gain or Loss on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Bond Interest/ Stock Dividends Received During Year	20 Stated Con- tractual Maturity Date	21 NAIC Design- nation, NAIC Design- nation Modifier and SVO Adminis- trative Symbol		
									10 Unrealized Valuation Increase/ (Decrease)	11 Current Year's (Amor- tization)/ Accretion	12 Current Year's Other Than Temporary Impairment Recogn- ized	13 Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	14 Total Foreign Exchange Change in Book/ Adjusted Carrying Value									
1079999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)				58,586	58,586	59,638	59,087	0	(501)	0	(501)	0	58,586	0	0	0	0	1,121	XXX	XXX		
..34532M-AA-5 FORDR 2025-REV1 A - ABS	06/26/2025	Bank of America Securities		1,529,648	1,500,000	1,499,638	0	0	26	0	0	0	1,499,664	0	29,985	29,985	27,540	08/15/2037	1.A FE			
..63942C-AA-0 NAVSL 2021-D A - ABS	06/15/2025	Paydown		1,789	1,789	1,789	0	0	0	0	0	0	1,789	0	0	0	0	39	04/15/2060	1.A FE		
..63942E-AA-6 NAVSL 2021-E A - ABS	06/15/2025	Paydown		3,164	3,164	3,163	0	0	1	0	0	0	3,164	0	0	0	0	13	12/16/2069	1.A FE		
..64034Q-AA-6 NSLT 2021-B AFL - ABS	06/20/2025	Paydown		3,319	3,319	3,319	0	0	0	0	0	0	3,319	0	0	0	0	72	04/20/2062	1.A FE		
..64034Q-AB-4 NSLT 2021-B AFX - ABS	06/20/2025	Paydown		3,319	3,319	3,318	0	0	1	0	0	0	3,319	0	0	0	0	19	04/20/2062	1.A FE		
..64035D-AA-4 NSLT 21A A1 - ABS	06/20/2025	Paydown		4,613	4,613	4,609	4,759	0	(146)	0	(146)	0	4,613	0	0	0	0	101	04/20/2062	1.A FE		
..64035D-AD-8 NSLT 21A AP2 - ABS	06/20/2025	Paydown		2,946	2,946	2,942	2,943	0	3	0	3	0	2,946	0	0	0	0	17	04/20/2062	1.A FE		
..68267H-AA-5 CMFLT 2022-S1 A - ABS	06/14/2025	Paydown		14,072	14,072	14,069	14,071	0	1	0	1	0	14,072	0	0	0	0	270	05/14/2035	1.A FE		
1119999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)				1,562,869	1,533,220	1,532,846	33,362	0	(116)	0	(116)	0	1,532,884	0	29,985	29,985	28,071	XXX	XXX			
1889999999. Total - Asset-Backed Securities (Unaffiliated)				4,725,083	4,710,871	4,651,846	3,120,151	0	18,376	0	18,376	0	4,670,009	0	55,075	55,075	81,903	XXX	XXX			
1899999999. Total - Asset-Backed Securities (Affiliated)				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
1909999997. Total - Asset-Backed Securities - Part 4				4,725,083	4,710,871	4,651,846	3,120,151	0	18,376	0	18,376	0	4,670,009	0	55,075	55,075	81,903	XXX	XXX			
1909999998. Total - Asset-Backed Securities - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1909999999. Total - Asset-Backed Securities				4,725,083	4,710,871	4,651,846	3,120,151	0	18,376	0	18,376	0	4,670,009	0	55,075	55,075	81,903	XXX	XXX			
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities				7,643,077	7,515,871	7,604,745	3,924,493	0	14,055	0	14,055	0	7,532,612	0	110,465	110,465	114,838	XXX	XXX			
4509999997. Total - Preferred Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
4509999998. Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4509999999. Total - Preferred Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
5989999997. Total - Common Stocks - Part 4				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
5989999998. Total - Common Stocks - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5989999999. Total - Common Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
5999999999. Total - Preferred and Common Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
6009999999 - Totals				7,643,077	XXX	7,604,745	3,924,493	0	14,055	0	14,055	0	7,532,612	0	110,465	110,465	114,838	XXX	XXX			

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

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

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

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

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

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

1 CUSIP Identification	2 Description	3 Restricted Asset Code	4 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	5 Fair Value	6 Book/Adjusted Carrying Value	7 Maturity Date
0489999999. Total - Issuer Credit Obligations (Schedule D, Part 1, Section 1 type) - (Unaffiliated)				0	0	XXX
0499999999. Total - Issuer Credit Obligations (Schedule D, Part 1, Section 1 type) - (Affiliated)				0	0	XXX
0509999999. Total - Issuer Credit Obligations (Schedule D, Part 1, Section 1 type)				0	0	XXX
1889999999. Total - Asset-Backed Securities (Schedule D, Part 1, Section 2 type) - (Unaffiliated)				0	0	XXX
1899999999. Total - Asset-Backed Securities (Schedule D, Part 1, Section 2 type) - (Affiliated)				0	0	XXX
1909999999. Total - Asset-Backed Securities (Schedule D, Part 1, Section 2 type)				0	0	XXX
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities				0	0	XXX
4109999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Industrial and Miscellaneous (Unaffiliated)				0	0	XXX
4409999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type) - Parent, Subsidiaries and Affiliates				0	0	XXX
4509999999. Total - Preferred Stocks (Schedule D, Part 2, Section 1 type)				0	0	XXX
5109999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Industrial and Miscellaneous (Unaffiliated)				0	0	XXX
5409999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Mutual Funds				0	0	XXX
5609999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Unit Investment Trusts				0	0	XXX
5809999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Closed-End Funds				0	0	XXX
5979999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type) - Parent, Subsidiaries and Affiliates				0	0	XXX
5989999999. Total - Common Stocks (Schedule D, Part 2, Section 2 type)				0	0	XXX
5999999999. Total - Preferred and Common Stocks				0	0	XXX
000000-00-0 NATWEST MARKETS SECURITIES INC		1.E		447,875	447,875	07/01/2025
000000-00-0 RBC CAPITAL MARKETS LLC		1.C		388,159	388,159	07/01/2025
000000-00-0 BOFA SECURITIES, INC		1.E		328,442	328,442	08/04/2025
000000-00-0 ROYAL BANK CANADA TORONTO		1.C		179,150	179,150	08/04/2025
000000-00-0 TD PRIME SERVICES LLC		1.G		161,235	161,235	08/04/2025
000000-00-0 HSBC SECURITIES USA INC		1.E		88,730	88,730	07/01/2025
06418N-EA-6 BANK OF NOVA SCOTIA HOUSTON		1.E		59,719	59,717	11/06/2025
00182H-JZ-6 ANZ NATIONAL (INTL) LTD		1.C		59,717	59,717	08/20/2025
000000-00-0 NATL BANK CANADA		1.E		59,717	59,717	07/07/2025
000000-00-0 TD PRIME SERVICES LLC		1.G		59,717	59,717	07/01/2025
13606D-FU-1 CIBC NY		1.E		59,704	59,717	12/05/2025
000000-00-0 Mitsubishi UFJ Trust & Bank Co		1.E		59,347	59,347	08/20/2025
78015J-CY-1 ROYAL BANK OF CANADA NY		1.C		47,792	47,773	02/02/2026
86959T-KY-1 SVENSKA NY		1.C		41,802	41,802	08/11/2025
69033N-FD-2 OCBC NEW YORK		1.C		35,830	35,830	11/21/2025
89115D-5C-5 TORONTO DOMINION NY		1.E		29,882	29,858	04/23/2026
06745G-DG-3 BARCLAYS NEW YORK		1.E		29,875	29,858	10/21/2025
06370B-3N-2 BANK OF MONTREAL CHICAGO		1.E		29,872	29,858	06/10/2026
96130A-XX-1 WESTPAC BKG CORP, NEW YORK		1.C		29,867	29,858	09/11/2025
13606D-ES-7 CIBC NY		1.E		29,863	29,858	01/23/2026
000000-00-0 SUMITOMO MITSUI TRUST BANK LTD, LDN		1.E		29,863	29,858	08/04/2025
06745G-CJ-8 BARCLAYS NEW YORK		1.E		29,862	29,858	07/30/2025
06051W-UU-6 BANK OF AMERICA NA		1.E		29,860	29,858	10/15/2025
87020Y-DII-5 SWEDBANK STOCKHOLM		1.E		29,859	29,858	07/17/2025
86565G-JG-6 SUMITOMO MITSUI BANKING CORP NY		1.E		29,858	29,858	07/09/2025
60683D-N9-6 MIT UFJ TR NY		1.E		29,858	29,858	07/07/2025
000000-00-0 SANTANDER US CAPITAL MARKETS LLC		1.G		29,858	29,858	07/01/2025
000000-00-0 CF SECURED LLC		1.G		29,858	29,858	07/01/2025
000000-00-0 BANCO SANTANDER SA NY		1.E		29,858	29,858	07/01/2025
22536W-KG-0 CIC NY		1.E		29,858	29,858	08/07/2025
22532X-D7-0 CREDIT AGRICOLE CIB, NY		1.E		29,856	29,858	11/03/2025
60710T-DB-1 MIZUHO BANK LIMITED NEW YORK		1.E		29,856	29,858	08/19/2025
69033N-FJ-9 OCBC NEW YORK		1.C		29,854	29,858	12/05/2025
78015J-F8-5 ROYAL BANK OF CANADA NY		1.C		23,898	23,887	05/01/2026
000000-00-0 SUMITOMO MITSUI TRUST BANK LTD, LDN		1.E		17,921	17,915	10/06/2025
86959T-KQ-8 SVENSKA NY		1.C		17,921	17,915	01/21/2026
13606D-AF-9 CIBC NY		1.E		17,920	17,915	09/23/2025
06367D-NR-2 BANQ OF MONTREAL CHICAGO		1.E		17,919	17,915	01/08/2026
06367D-LE-3 BANK OF MONTREAL CHICAGO		1.E		11,945	11,943	08/07/2025
89115B-ID-8 TORONTO DOMINION NY		1.E		11,944	11,943	08/12/2025
78015J-DQ-7 ROYAL BANK OF CANADA NY		1.C		11,944	11,943	12/12/2025
60683D-4Y-2 MIT UFJ TR NY		1.E		11,943	11,943	08/08/2025
78015J-VK-0 ROYAL BANK OF CANADA NY		1.C		5,973	5,972	08/15/2025
65558W-CM-8 NORDEA BANK ABP, NEW YORK BRANCH		1.C		5,972	5,972	07/18/2025
000000-00-0 RABOBANK LONDON		1.E		5,972	5,972	07/03/2025
000000-00-0 MIZUHO SECURITIES USA INC		1.E		5,972	5,972	07/01/2025
000000-00-0 BANK OF MONTREAL, LONDON		1.E		5,972	5,972	07/14/2025
9709999999. Subtotal - Cash Equivalents (Schedule E Part 2 type)				2,787,667	2,787,556	XXX
9999999999 - Totals				2,787,667	2,787,556	XXX

General Interrogatories:

1. Total activity for the year Fair Value \$ 835,494 Book/Adjusted Carrying Value \$ 835,418
2. Average balance for the year Fair Value \$ 4,782,301 Book/Adjusted Carrying Value \$ 4,782,195
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1 \$ 2,787,556 NAIC 2 \$ 0 NAIC 3 \$ 0 NAIC 4 \$ 0 NAIC 5 \$ 0 NAIC 6 \$ 0

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

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

gggggggggg - Totals
General Interrogatories

XXX

General Interrogatories:

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

Fair Value \$

Book/Adjusted Carrying Value \$

Fair value \$

Book/Adjusted Carrying Value \$

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan 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 *
					6 First Month	7 Second Month	8 Third Month	
PNC BANK	Louisville, KY	0.000	0	0	49,891	82,595	62,478	XXX
JP MORGAN CHASE	New York, NY	0.000	0	0	15,162	294,529	12,051	XXX
US BANK	St. Louis, MO	0.000	0	0	(3,705,170)	(4,723,300)	(5,023,226)	XXX
JP MORGAN CHASE-Humana Health Plan of Ohio, Inc.	New York, NY	0.000	0	0	0	0	0	XXX
JP Morgan Time Deposit	New York, NY	4.150	148,945	0	44,875,256	43,626,173	80,864,479	XXX
0199998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	148,945	0	41,235,139	39,279,996	75,915,782	XXX
0299998. Deposits in ... 0 depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	148,945	0	41,235,139	39,279,996	75,915,782	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
0599999. Total - Cash	XXX	XXX	148,945	0	41,235,139	39,279,996	75,915,782	XXX

STATEMENT AS OF JUNE 30, 2025 OF THE Humana Health Plan of Ohio Inc.

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Restricted Asset Code	4 Date Acquired	5 Stated Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
	FEDERAL HOME LOAN BANKS		06/24/2025	0.000	07/18/2025	23,952,157	0	22,397
0029999999. Subtotal - Issuer Credit Obligations - Other U.S. Government Obligations (Not Exempt from RBC)						23,952,157	0	22,397
..... Bell Canada, Inc.			06/25/2025	0.000	07/02/2025	9,998,725	0	7,650
..... Bunge Limited Finance Corp.			06/23/2025	0.000	07/14/2025	11,980,067	0	12,267
..... DCAT, LLC			06/26/2025	0.000	07/16/2025	14,972,688	0	9,104
..... Hyundai Capital America			06/30/2025	0.000	07/23/2025	10,969,481	0	1,387
..... Eli Lilly and Company			06/26/2025	0.000	07/25/2025	997,113	0	.601
..... Lockheed Martin Corporation			06/27/2025	0.000	07/07/2025	7,993,987	0	4,009
..... Northwestern Mutual Short Terminal Fundi			06/25/2025	0.000	07/30/2025	7,971,902	0	5,813
..... Southern Power Company			06/27/2025	0.000	07/09/2025	7,991,893	0	4,053
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)						72,875,856	0	44,885
0489999999. Total - Issuer Credit Obligations (Unaffiliated)						96,828,013	0	67,282
0499999999. Total - Issuer Credit Obligations (Affiliated)						0	0	0
0509999999. Total - Issuer Credit Obligations						96,828,013	0	67,282
09248U-71-8	BLKPK LC:T-FUND INSTL		06/02/2025	.4,210		.857	3	.26
31607A-88-5	FIDELITY IMM:TRS INSTL		06/02/2025	.4,230		4,606	16	.66
31846V-80-7	FIRST AMER:TRS OBG Y	SD	04/04/2023	.3,940		11	0	0
8209999999. Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO						5,474	19	92
X9USD0-5C-6	FIRST AMERICAN TRSY OBL X 5387		06/27/2025	0.000		3,932,335	0	0
8309999999. Subtotal - All Other Money Market Mutual Funds						3,932,335	0	0
8589999999. Total Cash Equivalents (Unaffiliated)						100,765,822	19	67,374
8599999999. Total Cash Equivalents (Affiliated)						0	0	0
8609999999 - Total Cash Equivalents						100,765,822	19	67,374