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ANNUAL STATEMENT

For the Year Ended December 31, 2019 of the Condition and Affairs of the

Wellmark, Inc.

NAIC Company Code..... 88848 NAIC Group Code 0770, 0770 Employer's ID Number..... 42-0318333 (Current Period) (Prior Period) Organized under the Laws of IA State of Domicile or Port of Entry IA Country of Domicile Is HMO Federally Qualified? Yes [] No [] Licensed as Business Type Life, Accident & Health Incorporated/Organized..... September 19, 1939 Commenced Business..... October 1, 1939 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 Statutory Home Office (Street and Number) (City or Town, State, Country and Zip Code) Main Administrative Office 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 515-376-4500 (City or Town, State, Country and Zip Code) (Street and Number) (Area Code) (Telephone Number) Mail Address 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code) 515-376-4500 Primary Location of Books and Records 1331 Grand Avenue .. Des Moines .. IA .. US .. 50309-2901 (Street and Number) (City or Town, State, Country and Zip Code) Internet Web Site Address www.wellmark.com 515-376-4144 Christa Daneen Kuennen Statutory Statement Contact (Name) 515-376-9054 kuennencd@wellmark.com (E-Mail Address) (Fax Number) **OFFICERS** Title Name Name Title Chairman & CEO 2. Scott Andrew Sundstrom # 1. John Douglas Forsyth Secretary EVP, COO 4. David Seth Brown EVP, CFO & Treasurer 3. Cory Randall Harris # OTHER Marcelle Jo Chickering John Thomas Clendenin G. Paul Eddv Michael James Crowley

DIRECTORS OR TRUSTEES

Thomas Matthew Cink MD William Curt Hunter David George Neil

Timothy Robert Gutshall MD

Vicki Lynn Signor

Melanie Creagan Dreher PhD, RN Paul Edward Larson Timothy John Theriault

John Douglas Forsyth-Chairman Angeline Marie Lavin Therese Michele Vaughan

Laura Jean Jackson

Daryl Keith Henze Terrence Joseph Mulligan

State of lowa County of..... Polk

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.

| | (Signature) John Douglas Forsyth | | (Signature) Scott Andrew Sundst | rom | (Signature) David Seth Brown | | | |
|---------------|-------------------------------------|------|------------------------------------|-------------------------------|---------------------------------|--|--|--|
| | 1. (Printed Name) | | 2. (Printed Name | | 3. (Printed Name) | | | |
| | Chairman & CEO | | Secretary | | EVP, CFO & Treasurer | | | |
| | (Title) | | (Title) | | (Title) | | | |
| Subscribed an | nd sworn to before me | | a. Is this a | n original filing? | Yes [X] No [] | | | |
| This | day of | 2020 | b. If no | 1. State the amendment number | | | | |
| | | | | 2. Date filed | | | | |
| | | | | 3. Number of pages attached | | | | |

US

(Area Code) (Telephone Number)

(Area Code) (Telephone Number) (Extension)

ASSETS

| | | | Current Veer | | Drior Voor |
|------|---|---------------|-----------------------|-------------------------|------------------------|
| | | 1 | Current Year 2 | 3 | Prior Year 4 |
| | | | | Net Admitted | N. / |
| | | Assets | Nonadmitted Assets | Assets (Cols. 1 - 2) | Net Admitted Assets |
| 1. | Bonds (Schedule D) | | | | |
| | Stocks (Schedule D): | | | | |
| ۷. | | 0.504.040 | 050 700 | 4 604 000 | 750.000 |
| | 2.1 Preferred stocks | | | | |
| | 2.2 Common stocks | 1,087,984,614 | | 1,053,357,920 | 845,015,364 |
| 3. | Mortgage loans on real estate (Schedule B): | | | | |
| | 3.1 First liens | | | 0 | |
| | 3.2 Other than first liens | | | 0 | |
| 4. | Real estate (Schedule A): | | | | |
| | 4.1 Properties occupied by the company (less \$0 | | | | |
| | encumbrances) | 148,365,151 | | 148,365,151 | 155,804,028 |
| | 4.2 Properties held for the production of income (less \$0 encumbrances) | | | 0 | |
| | 4.3 Properties held for sale (less \$0 encumbrances) | | | 0 | |
| 5. | Cash (\$112,936,161, Schedule E-Part 1), cash equivalents (\$87,753,643, Schedule E-Part 2) and short-term investments (\$7,386,854, Schedule DA) | 208,076,658 | | | |
| 6. | Contract loans (including \$0 premium notes) | | | 0 | |
| 7. | Derivatives (Schedule DB) | | | | |
| 8. | Other invested assets (Schedule BA) | | | | |
| 9. | Receivables for securities | | | | |
| | Securities lending reinvested collateral assets (Schedule DL) | | | | |
| 10. | - | | | | |
| 11. | Aggregate write-ins for invested assets | | | | |
| 12. | Subtotals, cash and invested assets (Lines 1 to 11) | | | | |
| 13. | Title plants less \$0 charged off (for Title insurers only) | | | 0 | |
| 14. | Investment income due and accrued | 7,827,408 | 87,608 | 7,739,800 | 7,454,143 |
| 15. | Premiums and considerations: | | | | |
| | 15.1 Uncollected premiums and agents' balances in the course of collection | | | 79,982,611 | 82,488,574 |
| | 15.2 Deferred premiums, agents' balances and installments booked but deferred | | | | |
| | and not yet due (including \$0 earned but unbilled premiums) | | | 0 | |
| | 15.3 Accrued retrospective premiums (\$1,945,902) and contracts subject to redetermination (\$15,735,000) | 17,680,902 | | 17,680,902 | 12,329,889 |
| 16. | Reinsurance: | | | | |
| | 16.1 Amounts recoverable from reinsurers | | | 0 | |
| | 16.2 Funds held by or deposited with reinsured companies | | | 0 | |
| | 16.3 Other amounts receivable under reinsurance contracts | | | 0 | |
| 17 | Amounts receivable relating to uninsured plans | 115 770 054 | 12 012 661 | 103 757 393 | 95 715 929 |
| | Current federal and foreign income tax recoverable and interest thereon | | | | |
| | Net deferred tax asset | | | | |
| | | | | | |
| | Guaranty funds receivable or on deposit | | | | |
| 20. | Electronic data processing equipment and software | | | | |
| 21. | Furniture and equipment, including health care delivery assets (\$0). | | | | |
| 22. | Net adjustment in assets and liabilities due to foreign exchange rates | | | | |
| 23. | Receivables from parent, subsidiaries and affiliates | 5,744,977 | 5,741,767 | 3,210 | 33,005 |
| 24. | Health care (\$70,383,391) and other amounts receivable | 104,790,311 | 22,300,180 | 82,490,131 | 69,255,487 |
| 25. | Aggregate write-ins for other-than-invested assets | 66,921,725 | | <u>598,92</u> 9 | <u>580,0</u> 61 |
| 26. | Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | | | | |
| | From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | | |
| 28. | | 1 | | 2,762,240,921 | 2,438,665,980 |
| 4404 | | DF WRITE-INS | | | |
| | | | | | |
| | | | | | |
| | Summary of remaining write-ins for Line 11 from overflow page | | | | C |
| | Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | | | | |
| | Prepaid Premium Tax Assets | | | 0 0 | |
| | Prepaid Premium Tax Assets | | | 0 | |
| | Other Prepaid Expenses | | , ., | 0 | |
| | Summary of remaining write-ins for Line 25 from overflow page | | | | |
| 2598 | | | | | |

LIABILITIES, CAPITAL AND SURPLUS

| <u> </u> | LIABILITIES, CA | AFTIAL AND 5 | Current Period | I | Prior Year |
|----------|--|------------------|----------------|---------------|---------------|
| | | 1 Covered | 2 Uncovered | 3 Total | 4 Total |
| 1. | Claims unpaid (less \$0 reinsurance ceded) | | | | |
| 2. | Accrued medical incentive pool and bonus amounts | | | | |
| 2. 3. | Unpaid claims adjustment expenses | | | | |
| 3. 4. | Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act | | | | |
| 5. | Aggregate life policy reserves | | | | |
| 6. | Property/casualty unearned premium reserves | | | | |
| 7. | Aggregate health claim reserves | | | | |
| 8. | Premiums received in advance | | | | |
| 9. | General expenses due or accrued | | | | |
| 10.1 | | | | | |
| 10.2 | Net deferred tax liability | | | | |
| 11. | | | | | |
| 12. | | | | | |
| 12. | Remittances and items not allocated | | | | |
| 13. | | | | | |
| 15. | | | | | |
| 16. | Derivatives | | | | |
| 17. | Payable for securities | | | | |
| 18. | Payable for securities lending | | | | |
| 19. | | | | | |
| 20. | Reinsurance in unauthorized and certified (\$0) companies | | | | |
| 21. | | | | | |
| | Liability for amounts held under uninsured plans | | | | |
| 23. | | | | | |
| 24. | Total liabilities (Lines 1 to 23) | | | | |
| 25. | Aggregate write-ins for special surplus funds | | | | 0 |
| 26. | Common capital stock | | | | |
| 27. | Preferred capital stock | | | | |
| 28. | Gross paid in and contributed surplus | | | | |
| 29. | Surplus notes | | | | |
| 30. | Aggregate write-ins for other-than-special surplus funds | | | | 0 |
| 31. | Unassigned funds (surplus) | | | | |
| 32. | Less treasury stock at cost: | | | | |
| 52. | 32.10.000 shares common (value included in Line 26 \$0) | XXX | XXX | | |
| | 32.20.000 shares preferred (value included in Line 27 \$0) | | | | |
| 33. | Total capital and surplus (Lines 25 to 31 minus Line 32) | | | | |
| 34. | Total liabilities, capital and surplus (Lines 24 and 33) | | | | |
| 54. | | ILS OF WRITE-INS | | 2,702,240,921 | 2,430,003,900 |
| 2301 | Other Liabilities | | | 24 326 350 | 21 668 562 |
| | Escheat Liability | | | | |
| | Liability for Postretirement Benefits | | | | |
| | . Summary of remaining write-ins for Line 23 from overflow page | | | | 0 |
| | . Totals (Lines 2301 through 2303 plus 2398) (Line 23 above) | | | | |
| | Special Surplus for Health Insurer Fee | | | | |
| | · · · · · · | | | | |
| 2503 | | | XXX | | |
| 2598 | . Summary of remaining write-ins for Line 25 from overflow page | | XXX | 0 | 0 |
| 2599. | . Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | | XXX | 44,511,000 | 0 |
| 3001 | | | XXX | | |
| 3002 | | | XXX | | |
| 3003 | | | XXX | | |
| 3098 | . Summary of remaining write-ins for Line 30 from overflow page | XXX | XXX | 0 | 0 |
| | . Totals (Lines 3001 through 3003 plus 3098) (Line 30 above) | | | | |

STATEMENT OF REVENUE AND EXPENSES

| | | LE AND EXPEN | | Prior Year |
|-------|--|----------------|---------------|---------------|
| | | 1 Uncovered | 2 Total | 3 Total |
| 1. | Member months | | | |
| 2. | Net premium income (including \$0 non-health premium income) | | | |
| 3. | Change in unearned premium reserves and reserve for rate credits | | | |
| 4. | Fee-for-service (net of \$0 medical expenses) | | | |
| 5. | Risk revenue | | | |
| 6. | Aggregate write-ins for other health care related revenues | | | |
| 7. | Aggregate write-ins for other non-health revenues | | | |
| 8. | Total revenues (Lines 2 to 7) | | | |
| Hosp | ital and Medical: | | | |
| 9. | Hospital/medical benefits | | 1,473,582,339 | 1,490,321,649 |
| 10. | Other professional services | | | 230,496,928 |
| 11. | Outside referrals | | | 71,914,523 |
| 12. | Emergency room and out-of-area | | | |
| 13. | Prescription drugs | | | |
| 14. | Aggregate write-ins for other hospital and medical | | | 0 |
| 15. | Incentive pool, withhold adjustments and bonus amounts | | | |
| 16. | Subtotal (Lines 9 to 15) | | | 2,263,994,172 |
| Less | | | | |
| 17. | Net reinsurance recoveries | | 39 957 | |
| 18. | Total hospital and medical (Lines 16 minus 17) | | | |
| 19. | Non-health claims (net) | | | |
| 20. | Claims adjustment expenses, including \$19,793,745 cost containment expenses | | | |
| 20. | General administrative expenses | | | |
| 21. | Increase in reserves for life and accident and health contracts including \$0 | | | |
| 22. | increase in reserves for life only) | | | |
| 23. | Total underwriting deductions (Lines 18 through 22) | | | |
| 24. | Net underwriting gain or (loss) (Lines 8 minus 23) | | | |
| 25. | Net investment income earned (Exhibit of Net Investment Income, Line 17) | | | |
| 26. | Net realized capital gains or (losses) less capital gains tax of \$965,000 | | | |
| 27. | Net investment gains or (losses) (Lines 25 plus 26) | | | |
| 28. | Net gain or (loss) from agents' or premium balances charged off [(amount recovered | | | |
| | \$0) (amount charged off \$240,116)] | | (240,116) | |
| 29. | Aggregate write-ins for other income or expenses | 0 . | (12,082,533) | (312,917) |
| 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 | | |
| 31. | Federal and foreign income taxes incurred | | | |
| 32. | Net income (loss) (Lines 30 minus 31) | XXX | | 127,475,750 |
| | DETAILS OF WRIT | | | |
| | | | | |
| | | | | |
| | Summary of remaining write-ins for Line 6 from overflow page | | | |
| | Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) | | | |
| 0701. | Commission Income | XXX | 9,229 | |
| | | | | |
| | | | | |
| | Summary of remaining write-ins for Line 7 from overflow page | | | |
| | Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) | | | |
| | | | | |
| | | | | |
| 1498. | Summary of remaining write-ins for Line 14 from overflow page | 0 . | 0 | 0 |
| 1499. | Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) | 0 . | 0 | 0 |
| | Other Expense | | · · · · · · | , , |
| | Contribution Expense | | | · · · / |
| | Summary of remaining write-ins for Line 29 from overflow page | | | |
| 2008 | Summary of remaining write-ins for Line 20 from overflow page | | | |

Statement as of December 31, 2019 of the Wellmark, Inc.

STATEMENT OF REVENUE AND EXPENSES (Continued)

| | | 1 | 2 |
|-------|--|---------------|---------------|
| | CAPITAL AND SURPLUS ACCOUNT | Current Year | Prior Year |
| 33. | Capital and surplus prior reporting period | 1,567,303,983 | 1,524,119,468 |
| 34. | Net income or (loss) from Line 32 | | 127,475,750 |
| 35. | Change in valuation basis of aggregate policy and claim reserves | | |
| 36. | Change in net unrealized capital gains and (losses) less capital gains tax of \$19,078,000 | 129,751,441 | (64,495,326) |
| 37. | Change in net unrealized foreign exchange capital gain or (loss) | 955,979 | (4,247,953) |
| 38. | Change in net deferred income tax | 10,423,000 | 6,948,000 |
| 39. | Change in nonadmitted assets | (11,972,158) | (20,075,318) |
| 40. | Change in unauthorized and certified reinsurance | | |
| 41. | Change in treasury stock | | |
| 42. | Change in surplus notes | | |
| 43. | Cumulative effect of changes in accounting principles | | |
| 44. | Capital changes: | | |
| | 44.1 Paid in | | |
| | 44.2 Transferred from surplus (Stock Dividend) | | |
| | 44.3 Transferred to surplus | | |
| 45. | Surplus adjustments: | | |
| | 45.1 Paid in | | |
| | 45.2 Transferred to capital (Stock Dividend) | | |
| | 45.3 Transferred from capital | | |
| 46. | Dividends to stockholders | | |
| 47. | Aggregate write-ins for gains or (losses) in surplus | (1,487,484) | (2,420,638) |
| 48. | Net change in capital and surplus (Lines 34 to 47) | | 43,184,515 |
| 49. | Capital and surplus end of reporting period (Line 33 plus 48) | 1,853,666,963 | 1,567,303,983 |
| | DETAILS OF WRITE-INS | | |
| 4701. | Change in Pension and Other Postemployment Benefit Obligation | (1,487,484) | (2,420,638) |
| 4702. | | | |
| 4703. | | | |
| 4798. | Summary of remaining write-ins for Line 47 from overflow page | 0 | 0 |
| | | | |

4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above).....

...(1,487,484)

.....(2,420,638)

CASH FLOW

| | | 1 Current Year | 2 Prior Year |
|-----|---|-------------------|-----------------|
| | CASH FROM OPERATIONS | | |
| 1. | Premiums collected net of reinsurance | | |
| 2. | Net investment income | | 61,681,21 |
| 3. | Miscellaneous income | | |
| 4. | Total (Lines 1 through 3) | | 2,697,450,71 |
| 5. | Benefit and loss related payments | | 2,256,745,58 |
| 6. | Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts. | | |
| 7. | Commissions, expenses paid and aggregate write-ins for deductions. | | |
| 8. | Dividends paid to policyholders. | | |
| 9. | Federal and foreign income taxes paid (recovered) net of \$965,000 tax on capital gains (losses) | | |
| 10. | Total (Lines 5 through 9) | | |
| 11. | Net cash from operations (Line 4 minus Line 10) CASH FROM INVESTMENTS | | 11,906,85 |
| 40 | | | |
| 12. | Proceeds from investments sold, matured or repaid: | 170 000 005 | |
| | 12.1 Bonds | | |
| | 12.2 Stocks | | |
| | 12.3 Mortgage loans | | |
| | 12.4 Real estate | | |
| | 12.5 Other invested assets | | |
| | 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | (5,65 |
| | 12.7 Miscellaneous proceeds | | |
| 40 | 12.8 Total investment proceeds (Lines 12.1 to 12.7) | | 952,565,21 |
| 13. | Cost of investments acquired (long-term only): | 100 700 000 | 050 050 07 |
| | 13.1 Bonds | | |
| | 13.2 Stocks | | |
| | 13.3 Mortgage loans | | |
| | 13.4 Real estate | | , |
| | 13.5 Other invested assets | | |
| | 13.6 Miscellaneous applications | | 1,953,92 |
| | 13.7 Total investments acquired (Lines 13.1 to 13.6) | | 966,680,78 |
| | Net increase (decrease) in contract loans and premium notes Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14) | | |
| 15. | | (125,494,195) | (14,115,57 |
| | CASH FROM FINANCING AND MISCELLANEOUS SOURCES | | |
| 16. | Cash provided (applied): | | |
| | 16.1 Surplus notes, capital notes | | |
| | 16.2 Capital and paid in surplus, less treasury stock | | |
| | 16.3 Borrowed funds | | |
| | 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | |
| | 16.5 Dividends to stockholders | | |
| | 16.6 Other cash provided (applied) | | |
| 17. | Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) | <u></u> | 17,536,33 |
| | 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) | 45,420,181 | 15,327,61 |
| 19. | Cash, cash equivalents and short-term investments: | | |
| | 19.1 Beginning of year | | |
| | 19.2 End of year (Line 18 plus Line 19.1) | | |

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

| | | 1 Total | 2 Comprehensive (Hospital and Medical) | 3 Medicare Supplement | 4 Dental Only | 5 Vision Only | 6 Federal Employees Health Benefits Plans | 7 Title XVIII Medicare | 8 Title XIX Medicaid | 9 Other Health | 10 Other Non-Health |
|-----|---|---------------|---|-----------------------------|---------------------|---------------------|---|---------------------------------|-------------------------------|----------------------|---------------------------|
| 1 | Net premium income | 2,561,042,188 | | | | 1,021,125 | 258,210,655 | | | | |
| 2 | Change in unearned premium reserves and reserve for rate credit | (819,283) | (3,001,617) | (15,674) . | | | 2,198,008 | | | | |
| 3 | Fee-for-service (net of \$0 medical expenses) | 0 | | | | | | | | | XXX |
| 4 | Risk revenue | 0 | | | | | | | | | XXX |
| 5 | Aggregate write-ins for other health care related revenues | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 6 | Aggregate write-ins for other non-health care related revenues | 9,229 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 9,229 |
| 7 | Total revenues (Lines 1 to 6) | 2,560,232,134 | 1,560,535,663 | | | 1,021,125 | | 0 | 0 . | | |
| 8 | Hospital/medical benefits | 1,473,582,339 | | | | | 137,293,056 | | | 176,908,444 | XXX |
| g | Other professional services | 237,837,005 | 125,973,559 | 41,443,951 | 24,243,099 | 804,909 | 19,825,463 | | | 25,546,024 | XXX |
| 1 |). Outside referrals | 74,698,576 | | 14,548,704 . | | | 6,959,635 | | | 8,967,812 | XXX |
| 1 | I. Emergency room and out-of-area | 92,492,778 | | | | | 8,617,514 | | . | 11,104,065 | XXX |
| 1 | 2. Prescription drugs | | | 5,068 | | | 63,720,341 | | | | XXX |
| 1 | 3. Aggregate write-ins for other hospital and medical | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 1 | Incentive pool, withhold adjustments and bonus amounts | 3,408,988 | 3,408,988 | | | | | | | | XXX |
| 1 | 5. Subtotal (Lines 8 to 14) | 2,172,239,126 | 1,292,613,632 | | 24,243,099 | 804,909 | 236,416,009 | 0 | 0 . | | XXX |
| 1 | 6. Net reinsurance recoveries | | | | | | | | | | XXX |
| 1 | 7. Total hospital and medical (Lines 15 minus 16) | 2,172,199,169 | 1,292,573,675 | | | | | 0 | 0 | | XXX |
| 1 | 3. Non-health claims (net) | 0 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| . 1 | Claims adjustment expenses including \$19,793,745 cost containment expenses | | | | 1,176,763 | | | | | | |
| 2 |). General administrative expenses | 227,641,958 | | 67,307,749 . | | | 5,502,442 | | | | |
| 2 | I. Increase in reserves for accident and health contracts | 0 | | | | | | | | | XXX |
| 2 | 2. Increase in reserve for life contracts | 0 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 2 | B. Total underwriting deductions (Lines 17 to 22) | 2,498,931,203 | 1,447,360,619 | | | 941,525 | 258,082,280 | 0 | 0 . | | 440,112 |
| 2 | I. Net underwriting gain or (loss) (Line 7 minus Line 23) | 61,300,931 | 113,175,044 | (22,933,368) . | 1,193,039 | 79,600 | 2,326,383 | 0 | 0 . | (32,108,884) | (430,883) |
| | | | | DETAILS OF W | RITE-INS | | | | | | |
| 05 |)1 | 0 | | | | | | | | | XXX |
| 05 |)2 | 0 | | | | | | | | | XXX |
| 05 |)3 | 0 | | | | | | | | | XXX |
| 05 | 98. Summary of remaining write-ins for Line 5 from overflow page | 0 | 0 | 0 . | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 05 | 99. Total (Lines 0501 through 0503 plus 0598) (Line 5 above) | 0 | 0 | 0 . | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 06 | 1. Commission Income | 9,229 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 9,229 |
| 06 |)2 | 0 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 06 |)3 | 0 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | |
| 06 | 98. Summary of remaining write-ins for Line 6 from overflow page | 0 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 0 |
| | 99. Total (Lines 0601 through 0603 plus 0698) (Line 6 above) | 9,229 | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | 9,229 |
| 13 |)1 | 0 | | | | | | | | | XXX |
| 13 |)2 | 0 | | | | | | | | | XXX |
| 13 |)3 | 0 | | | | | | | | | XXX |
| 13 | 98. Summary of remaining write-ins for Line 13 from overflow page | 0 | 0 | 0 . | 0 | 0 | 0 | 0 | 0 | 0 | XXX |
| 13 | 99. Total (Lines 1301 through 1303 plus 1398) (Line 13 above) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | XXX |

PART 1 - PREMIUMS

| | | 2 | 3 | 4 |
|---|--------------------|------------------------|----------------------|--|
| Line of Business | Direct Business | Reinsurance Assumed | Reinsurance Ceded | Net Premium Income (Cols. 1 + 2 - 3) |
| 1. Comprehensive (hospital and medical) | | | | 1,563,537,280 |
| 2. Medicare Supplement | | | | |
| 3. Dental only | | | | |
| 4. Vision only | | | | 1,021,125 |
| 5. Federal Employees Health Benefits Plan | | | | |
| 6. Title XVIII - Medicare | | | | 0 |
| 7. Title XIX - Medicaid | | | | 0 |
| 8. Other health | | | | |
| 9. Health subtotal (Lines 1 through 8) | | 0 | 0 | 2,561,042,188 |
| ∞ _{10. Life} | | | | 0 |
| 11. Property/casualty | | | | 0 |
| 12. Totals (Lines 9 to 11) | | 0 | 0 | |

UNDERWRITING AND INVESTMENT EXHIBIT PART 2 - CLAIMS INCURRED DURING THE YEAR

| | 1 | 2 | 3 | 4 | 5 | 6 Fadaral | 7 | 8 | 9 | 10 |
|---|---------------|--|------------------------|----------------|----------------|---|----------------------------|--------------------------|-----------------|---------------------|
| | Total | Comprehensive (Hospital and Medical) | Medicare Supplement | Dental Only | Vision Only | Federal Employees Health Benefits Plan | Title XVIII Medicare | Title XIX Medicaid | Other Health | Other Non-Health |
| 1. Payments during the year: | | | | | | | | | | |
| 1.1 Direct | 2,180,231,309 | 1,300,516,052 | | 24,024,936 | 803,866 | 232,968,479 | | | 265,034,019 | |
| 1.2 Reinsurance assumed | 0 | | | | | | | | | |
| 1.3 Reinsurance ceded | | | | | | | | | | |
| 1.4 Net | 2,180,141,267 | 1,300,426,010 | | 24,024,936 | 803,866 | 232,968,479 | 0 | 0 | | |
| 2. Paid medical incentive pools and bonuses | | | | | | | | | | |
| 3. Claim liability December 31, current year from Part 2A: | | | | | | | | | | |
| 3.1 Direct | | | | 1,717,866 | | | | | 24,172,929 | |
| 3.2 Reinsurance assumed | 0 | | | | | | | | | |
| 3.3 Reinsurance ceded | 0 | | | | | | | | | |
| 3.4 Net | | | | | | | 0 | 0 | 24,172,929 | |
| 4. Claim reserve December 31, current year from Part 2D: | , | ,, | ,, - | , , | , | , , | | | , , | |
| 4.1 Direct | | | | | | | | | | |
| 4.2 Reinsurance assumed | | | | | | | | | | |
| 4.3 Reinsurance ceded | | | | | | | | | | |
| 4.4 Net | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Accrued medical incentive pools and bonuses, current year | | | | | | | | | | |
| Net healthcare receivables (a) | | | 39.456 | | | (437,460) | | | | |
| And the annual electropies (a) | - / - / | | | | | (437,400) | | | | |
| Claim liability December 31, prior year from Part 2A: | | | | | | | | | | |
| 8.1 Direct. | | | | 1,499,703 | | | | | | |
| 8.2 Reinsurance assumed | | | | 1,499,703 | 20,641 | | | | | |
| 8.3 Reinsurance ceded | 0 | | | | | | | | | |
| | | | | | | | 0 | | | |
| | | | | 1,499,703 | 20,641 | | 0 | 0 | | |
| 9. Claim reserve December 31, prior year from Part 2D: | • | | | | | | | | | |
| 9.1 Direct | 0 | | | | | | | | | |
| 9.2 Reinsurance assumed | | | | | | | | | | |
| 9.3 Reinsurance ceded | | | | | | | | | | |
| 9.4 Net | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 10. Accrued medical incentive pools and bonuses, prior year | | | ······ ··· ··· | | | | | | | |
| | | | | | | | | | | |
| 12. Incurred benefits: | | | | | | | | | | |
| 12.1 Direct | | 1,289,204,644 | | 24,243,099 | 804,909 | 236,416,009 | 0 | 0 | 257,146,380 | |
| 12.2 Reinsurance assumed | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 12.3 Reinsurance ceded | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 12.4 Net | 2,168,790,181 | 1,289,164,687 | | 24,243,099 | 804,909 | 236,416,009 | 0 | 0 | 257,146,380 | |
| 13. Incurred medical incentive pools and bonuses | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |

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

UNDERWRITING AND INVESTMENT EXHIBIT PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

| | 1 | 2 | 3 | 4 | 5 | 6 Federal | 7 | 8 | 9 | 10 |
|---|-------------|--|------------------------|----------------|----------------|--------------------------------------|----------------------------|--------------------------|-----------------|---------------------|
| | Total | Comprehensive (Medical and Hospital) | Medicare Supplement | Dental Only | Vision Only | Employees Health Benefits Plan | Title XVIII Medicare | Title XIX Medicaid | Other Health | Other Non-Health |
| 1. Reported in process of adjustment: | | | | | | | | | | |
| 1.1 Direct | | 138,298,011 | 40,502,128 | | 4,337 | 14,654,677 | | | 9,338,664 | |
| 1.2 Reinsurance assumed | 0 | | | | | | | | | |
| 1.3 Reinsurance ceded | 0 | | | | | | | | | |
| 1.4 Net | | 138,298,011 | 40,502,128 | | 4,337 | 14,654,677 | 0 | 0 | 9,338,664 | 0 |
| 2. Incurred but unreported: | | | | | | | | | | |
| 2.1 Direct | 163,767,915 | | | | | | | | | |
| 2.2 Reinsurance assumed | 0 | | | | | | | | | |
| 2.3 Reinsurance ceded | 0 | | | | | | | | | |
| 2.4 Net | | 98,080,700 | | 1,374,293 | 17,347 | | 0 | 0 | 14,834,265 | 0 |
| 3. Amounts withheld from paid claims and capitations: | | | | | | | | | | |
| 3.1 Direct | 0 | | | | | | | | | |
| 3.2 Reinsurance assumed | | | | | | | | | | |
| 3.3 Reinsurance ceded | 0 | | | | | | | | | |
| 3.4 Net | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 4. Totals: | | | | | | | | | | |
| 4.1 Direct | | 236,378,711 | 71,390,792 | 1,717,866 | 21,684 | | 0 | 0 | 24,172,929 | 0 |
| 4.2 Reinsurance assumed | | 0 | 0 | 0 | 0 | 0 | 0 | | 0 | 0 |
| 4.3 Reinsurance ceded | | 0 | | | 0 | 0 | 0 | 0 | 0 | 0 |
| 4.4 Net | | | | 1,717,866 | | | 0 | 0 | 24,172,929 | 0 |

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

| [| PART 20 - ANAL 1515 C | Claims | Paid | Claim Reserve ar | | 5 | 6 Estimated Claim | |
|---|---|---------------------------------------|-----------------------------|------------------------------|-----------------------------|-----------------------------------|------------------------------|--|
| | | During tr 1 | 2 | December 31 o 3 | 4 | | Reserve and | |
| | | On Claims Incurred | On Claims | On Claims Unpaid | On Claims | Claims Incurred | Claim Liability | |
| | Line of Business | Prior to January 1 of Current Year | Incurred During the Year | December 31 of Prior Year | Incurred During the Year | in Prior Years (Columns 1 + 3) | December 31 of Prior Year | |
| - | | of Guilent Tear | (ile i edi | T HOL TEAL | lile i edi | | | |
| | 1. Comprehensive (hospital and medical) | 200,944,517 | 1,099,531,578 | 1,912,596 | 234,466,115 | 202,857,113 | 226,562,100 | |
| | 2. Medicare Supplement | 60,622,063 | | 147,565 | | 60,769,628 | 67,220,196 | |
| | 3. Dental only | 1,479,417 | 22,545,519 | | 1,714,209 | 1,483,074 | 1,499,703 | |
| | 4. Vision only | | | 44 | 21,640 | 20,641 | 20,641 | |
| | 5. Federal Employees Health Benefits Plan | | 204,426,103 | 248,585 | | | 30,217,253 | |
| | 6. Title XVIII - Medicare | | | | | 0 | | |
| | 7. Title XIX - Medicaid | | | | | 0 | | |
| | 8. Other health | | | | 24,011,466 | 20,434,848 | 24,772,779 | |
| | 9. Health subtotal (Lines 1 to 8) | | 1,868,308,997 | 2,473,910 | | | | |
| 1 | 10. Healthcare receivables (a) | 7,291,538 | | 1,218 | 712,606 | 7,292,756 | 64,273,883 | |
| | 1. Other non-health | | | | | 0 | | |
| | 12. Medical incentive pools and bonus amounts | | | | | 13,742,656 | | |
| | 13. Totals (Lines 9 - 10 + 11 + 12) | | 1,784,022,672 | 2,472,692 | | | | |

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

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(000 Omitted)

SECTION A - PAID HEALTH CLAIMS - GRAND TOTAL

| | Cumulative Net Amounts Paid | | | | | | | | |
|----------------------|-----------------------------|-----------|-----------|-----------|-----------|--|--|--|--|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | | |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | | |
| 1. Prior | | | | | | | | | |
| 2. 2015 | 1,984,986 | 2,233,748 | 2,233,384 | 2,233,384 | | | | | |
| 3. 2016 | XXX | 1,962,851 | | | | | | | |
| 4. 2017 | XXX | xxx | | | | | | | |
| 5. 2018 | XXX | XXX | XXX | 1,929,661 | 2,254,789 | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | 1,868,310 | | | | |

SECTION B - INCURRED HEALTH CLAIMS - GRAND TOTAL

| | | Sum of Curr | ulative Net Amount Paid and Claim Liabili | ity, Claim Reserve and Medical Incer | ntive Pool and Bonuses Outstanding at | End of Year |
|----|----------------------|-------------|---|--------------------------------------|---------------------------------------|-------------|
| - | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| G | 1. Prior | | | | | |
| - | 2. 2015 | 2,270,732 | 2,235,529 | 2,233,384 | 2,233,384 | 2,233,384 |
| | 3. 2016 | XXX | | 2,316,304 | 2,313,564 | 2,313,564 |
| | 4. 2017 | XXX | XXX | 2,313,658 | | |
| | 5. 2018 | XXX | XXX | XXX | 2,297,135 | |
| | 6. 2019 | XXX | XXX | XXX | XXX | 2,241,206 |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - GRAND TOTAL

| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---------------|------------|-----------|-----------|------------------|------------|------------------|------------|--------|--------------|-------------------|------------|
| | | | | | | Claim and Claim | | | | Total Claims and | |
| Years in V | | | | | | Adjustment | | | Unpaid Claim | Claims Adjustment | |
| Premiums were | Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were | Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expense | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | | 2,535,836 | 2,233,384 | 65,291 | 2.9 | 2,298,675 | | | | 2,298,675 | 90.6 |
| 2. 2016 | | 2,656,268 | 2,313,564 | 71,120 | 3.1 | 2,384,684 | | | | 2,384,684 | |
| 3. 2017 | | 2,646,943 | | | | 2,355,331 | | | | 2,355,331 | |
| 4. 2018 | | 2,625,888 | | | | | | 2,474 | | 2,328,716 | |
| 5. 2019 | | 2,560,223 | 1,868,310 | | | 1,940,066 | | | | 2,316,816 | |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - HOSPITAL AND MEDICAL

| | | | Cumulative Net Amounts Paid | | |
|----------------------|-----------|-----------|-----------------------------|-----------|-----------|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| 1. Prior | | | | | |
| 2. 2015 | 1,348,437 | 1,518,852 | 1,518,128 | 1,518,128 | 1,518,128 |
| 3. 2016 | XXX | 1,333,953 | 1,583,146 | 1,582,557 | 1,582,557 |
| 4. 2017 | XXX | XXX | 1,290,037 | 1,519,450 | 1,519,972 |
| 5. 2018 | XXX | XXX | XXX | 1,201,041 | 1,415,207 |
| 6. 2019 | XXX | XXX | XXX | XXX | 1,099,532 |

SECTION B - INCURRED HEALTH CLAIMS - HOSPITAL AND MEDICAL

| | | Sum of Cum | ulative Net Amount Paid and Claim Lia | bility, Claim Reserve and Medical Incentive | Pool and Bonuses Outstanding at End of | f Year |
|--------|----------------------|------------|---------------------------------------|---|--|-----------|
| | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| Ξ | 1. Prior | | | 148,116 | 148,116 | 148,116 |
| \leq | 2. 2015 | 1,548,138 | 1,520,200 | 1,518,128 | 1,518,128 | 1,518,128 |
| | 3. 2016 | XXX | 1,610,468 | 1,584,362 | | 1,582,557 |
| | 4. 2017 | XXX | XXX | 1,542,348 | 1,520,675 | 1,519,972 |
| | 5. 2018 | XXX | XXX | XXX | 1,445,173 | 1,417,119 |
| | 6. 2019 | XXX | XXX | XXX | XXX | 1,342,459 |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - HOSPITAL AND MEDICAL

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|-----------|-----------|------------------|------------|-------------------------------|------------|--------|--------------|---------------------------------------|------------|
| Years in Which | | | | | Claim and Claim Adjustment | | | Unpaid Claim | Total Claims and Claims Adjustment | |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | 1,698,974 | 1,518,128 | 21,544 | 1.4 | 1,539,672 | 90.6 | | | 1,539,672 | 90.6 |
| 2. 2016 | 1,789,401 | 1,582,557 | | 1.7 | 1,609,530 | | | | 1,609,530 | |
| 3. 2017 | 1,751,446 | 1,519,972 | 35,811 | 2.4 | 1,555,783 | | | | 1,555,783 | |
| 4. 2018 | 1,657,118 | 1,415,207 | 21,606 | 1.5 | 1,436,813 | | 1,912 | 19 | 1,438,744 | 86.8 |
| 5. 2019 | 1,560,536 | 1,099,532 | 24,267 | 2.2 | 1,123,799 | 72.0 | | 2,398 | 1,369,125 | |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - MEDICARE SUPPLEMENT

| | Cumulative Net Amounts Paid | | | | | | | | |
|----------------------|-----------------------------|------|------|------|------|--|--|--|--|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | | |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | | |
| 1. Prior | | | | | | | | | |
| 2. 2015 | | | | | | | | | |
| 3. 2016 | XXX | | | | | | | | |
| 4. 2017 | XXX | XXX | | | | | | | |
| 5. 2018 | XXX | XXX | XXX | | | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | | | | | |

SECTION B - INCURRED HEALTH CLAIMS - MEDICARE SUPPLEMENT

| | | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year | | | | | | |
|----|----------------------|--|------|------|------|--------|--|--|
| | Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | |
| S | 1. Prior | | | | | 42,947 | | |
| S | 2. 2015 | | | | | | | |
| | 3. 2016 | XXX | | | | | | |
| | 4. 2017 | XXX | XXX | | | | | |
| | 5. 2018 | XXX | XXX | XXX | | | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | | | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - MEDICARE SUPPLEMENT

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|----------|----------|------------------|------------|-------------------------------|------------|--------|--------------|---------------------------------------|------------|
| Years in Which | | | | | Claim and Claim Adjustment | | | Unpaid Claim | Total Claims and Claims Adjustment | |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | | | 14,524 | 5.0 | | 85.1 | | | | 85.1 |
| 2. 2016 | | | 12,740 | 4.1 | | 85.0 | | | | 85.0 |
| 3. 2017 | | | 13,192 | 4.0 | | | | | | 85.4 |
| 4. 2018 | | | | 3.9 | | | 148 | 1 | | |
| 5. 2019 | | | 14,385 | 4.9 | | 73.9 | 71,243 | | | 91.0 |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - DENTAL ONLY

| | | | Cumulative Net Amounts Paid | | |
|----------------------|------|------|-----------------------------|--------|------|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| 1. Prior | | | | | |
| 2. 2015 | | | 20,310 | | |
| 3. 2016 | XXX | | | | |
| 4. 2017 | XXX | XXX | | | |
| 5. 2018 | XXX | XXX | XXX | 20,485 | |
| 6. 2019 | XXX | XXX | XXX | XXX | |

SECTION B - INCURRED HEALTH CLAIMS - DENTAL ONLY

| Γ | | Sum of Cumulativ | e Net Amount Paid and Claim Liability, (| Claim Reserve and Medical Incentive Po | ool and Bonuses Outstanding at End of Y | 'ear |
|----|----------------------|------------------|--|--|---|------|
| | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| D | 1. Prior | | | | | |
| 0 | 2. 2015 | | | | | |
| | 3. 2016 | | | | | |
| | 4. 2017 | | XXX | | | |
| | 5. 2018 | | XXX | XXX | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - DENTAL ONLY

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|----------|----------|------------------|------------|-------------------------------|------------|--------|--------------|---------------------------------------|------------|
| Years in Which | | | | | Claim and Claim Adjustment | | | Unpaid Claim | Total Claims and Claims Adjustment | |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | | 20,310 | 1,476 | 7.3 | 21,786 | | | | 21,786 | |
| 2. 2016 | | 20,371 | 1,330 | 6.5 | 21,701 | | | | 21,701 | |
| 3. 2017 | | 20,485 | 1,108 | 5.4 | | 80.5 | | | | |
| 4. 2018 | | 21,900 | 1,363 | 6.2 | | | 4 | | | 83.8 |
| 5. 2019 | | | 1,160 | 5.1 | 23,706 | | 1,714 | 17 | | 83.8 |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - VISION ONLY

| | Cumulative Net Amounts Paid | | | | | | | |
|----------------------|-----------------------------|------|------|------|------|--|--|--|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | |
| 1. Prior | | | 16 | 16 | 16 | | | |
| 2. 2015 | | | | | 672 | | | |
| 3. 2016 | XXX | | | | | | | |
| 4. 2017 | XXX | | | | | | | |
| 5. 2018 | XXX | XXX | XXX | | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | | | | |

SECTION B - INCURRED HEALTH CLAIMS - VISION ONLY

| Γ | | Sum of Cun | nulative Net Amount Paid and Claim Liabili | ty, Claim Reserve and Medical Incentive | e Pool and Bonuses Outstanding at End of | Year |
|----|----------------------|------------|--|---|--|------|
| | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| < | 1. Prior | 17 | , | | | |
| 0 | 2. 2015 | | | | | 672 |
| | 3. 2016 | XXX | | | | |
| | 4. 2017 | XXX | | | | |
| | 5. 2018 | XXX | | XXX | | |
| | 6. 2019 | XXX | | XXX | XXX | 805 |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - VISION ONLY

| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|----|--------------------------|----------|----------|------------------|------------|------------------|------------|--------|--------------|-------------------|------------|
| | | | | | | Claim and Claim | | | | Total Claims and | |
| | Years in Which | | | | | Adjustment | | | Unpaid Claim | Claims Adjustment | |
| | Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| | Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. | 2015 | 743 | 672 | 91 | | | 102.7 | | | | 102.7 |
| 2. | 2016 | | | | 14.5 | | | | | | |
| 3. | 2017 | | | | 4.4 | | | | | | |
| 4. | 2018 | | | | | | | | | | |
| 5. | 2019 | 1,021 | | 84 | | 867 | 84.9 | | | | |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

| | Cumulative Net Amounts Paid | | | | | | | |
|----------------------|-----------------------------|------|------|------|------|--|--|--|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | |
| 1. Prior | | | | | | | | |
| 2. 2015 | | | | | | | | |
| 3. 2016 | XXX | | | | | | | |
| 4. 2017 | XXX | XXX | | | | | | |
| 5. 2018 | XXX | XXX | XXX | | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | | | | |

SECTION B - INCURRED HEALTH CLAIMS - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

| | | Sum of Cum | ulative Net Amount Paid and Claim Lia | bility, Claim Reserve and Medical Incentive | Pool and Bonuses Outstanding at End of ` | Year |
|----|----------------------|------------|---------------------------------------|---|--|--------|
| _ | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| F | 1. Prior | | | | 13,905 | 13,905 |
| Ш | 2. 2015 | | | | | |
| | 3. 2016 | XXX | | | | |
| | 4. 2017 | XXX | XXX | | | |
| | 5. 2018 | XXX | XXX | XXX | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - FEDERAL EMPLOYEES HEALTH BENEFITS PLAN PREMIUM

| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|----|--|--------------------|-------------------|--------------------------------------|-----------------------|---|-----------------------|------------------|--|---|-----------------------|
| | Years in Which Premiums were Earned and Claims were Incurred | Premiums Earned | Claim Payments | Claim Adjustment Expense Payments | Percent (Col. 3/2) | Claim and Claim Adjustment Expense Payments (Col. 2 + 3) | Percent (Col. 5/1) | Claims Unpaid | Unpaid Claim Adjustment Expenses | Total Claims and Claims Adjustment Expense Incurred (Col. 5 + 7 + 8) | Percent (Col. 9/1) |
| | | | , | | (001: 3/2) | · · · · · · | (001.0/1) | Olipaid | Expenses | i ì | |
| 1. | . 2015 | | | 13,678 | 6.9 | | | | | | 96.2 |
| 2 | . 2016 | | | 14,559 | 7.0 | | | | | | |
| 3. | . 2017 | | | 11,056 | 5.2 | | | | | | |
| 4 | . 2018 | | | | 7.9 | | | | 4 | | |
| 5. | . 2019 | | | | 7.7 | | | | | | 97.4 |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XVIII - MEDICARE

| | Cumulative Net Amounts Paid | | | | | | | |
|---------------------------------------|-----------------------------|------|------|------|------|--|--|--|
| Year in Which Losses Were Incurred | 1 | 2 | 3 | 4 | 5 | | | |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | |
| 1. Prior | | (1) | (1) | (1) | (1) | | | |
| 2. 2015 | | | | | | | | |
| 3. 2016 | | | | | | | | |
| 4. 2017 | | XXX | | | | | | |
| 5. 2018 | XXX | XXX | XXX | | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | | | | |

SECTION B - INCURRED HEALTH CLAIMS - TITLE XVIII - MEDICARE

| | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year | | | | | | | | | |
|---|--|------|------|------|------|------|--|--|--|--|
| _ | Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | | |
| 2 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | | |
| × | 1. Prior | (1) | (1) | (1) | (1) | (1) | | | | |
| < | 2. 2015 | | | | | | | | | |
| | 3. 2016 | XXX | | | | | | | | |
| | 4. 2017 | XXX | | | | | | | | |
| | 5. 2018 | XXX | XXX | XXX | | | | | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | | | | | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XVIII - MEDICARE

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|----------|----------|------------------|------------|------------------|------------|--------|--------------|-------------------|------------|
| | | | | | Claim and Claim | | | | Total Claims and | |
| Years in Which | | | | | Adjustment | | | Unpaid Claim | Claims Adjustment | |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | 1 | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |
| 2. 2016 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |
| 3. 2017 | | 0 | | 0.0 | 0 | | | | 0 | |
| 4. 2018 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | |
| 5. 2019 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - TITLE XIX - MEDICAID

| | Cumulative Net Amounts Paid | | | | | | | | |
|---------------------------------------|-----------------------------|------|------|------|------|--|--|--|--|
| Year in Which Losses Were Incurred | | 2 | 3 | 4 | 5 | | | | |
| Were Incurred | 015 | 2016 | 2017 | 2018 | 2019 | | | | |
| 1. Prior | | | | | | | | | |
| 2. 2015 | | | | | | | | | |
| 3. 2016 | | | | | | | | | |
| 4. 2017 | XXX | XXX | | | | | | | |
| 5. 2018 | XXX | XXX | XXX | | | | | | |
| 6. 2019 | XXX | XXX | XXX | XXX | | | | | |

SECTION B - INCURRED HEALTH CLAIMS - TITLE XIX - MEDICAID

| | | Sum of Cum | ulative Net Amount Paid and Claim Lia | bility, Claim Reserve and Medical Ince | ntive Pool and Bonuses Outstanding a | t End of Year |
|---------------|----------------------|------------|---------------------------------------|--|--------------------------------------|---------------|
| | Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| \rightarrow | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| 2 | 1. Prior | | | | | |
| \sim | 2. 2015 | | | | | |
| | 3. 2016 | | | | | |
| | 4. 2017 | XXX | XXX | | | |
| | 5. 2018 | XXX | XXX | XXX | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - TITLE XIX - MEDICAID

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|----------|----------|------------------|------------|------------------|------------|--------|--------------|-------------------|------------|
| | | | | | Claim and Claim | | | | Total Claims and | |
| Years in Which | | | | | Adjustment | | | Unpaid Claim | Claims Adjustment | |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | | 0 | | 0 | | 0.0 | | | 0 | 0.0 |
| | | | | | | | | | | |
| 2. 2016 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |
| 3. 2017 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |
| 4. 2018 | | 0 | | 0.0 | 0 | | | | 0 | 0.0 |
| 5. 2019 | | 0 | | 0.0 | 0 | 0.0 | | | 0 | 0.0 |

PART 2C - DEVELOPMENT OF PAID AND INCURRED CLAIMS

(\$000 Omitted)

SECTION A - PAID HEALTH CLAIMS - OTHER

| | | Cu | umulative Net Amounts Paid | | |
|----------------------|------|------|----------------------------|---------|------|
| Year in Which Losses | 1 | 2 | 3 | 4 | 5 |
| Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 |
| 1. Prior | | | | | |
| 2. 2015 | | | | 207,411 | |
| 3. 2016 | XXX | | | | |
| 4. 2017 | XXX | XXX | | | |
| 5. 2018 | XXX | XXX | XXX | | |
| 6. 2019 | XXX | XXX | XXX | XXX | |

SECTION B - INCURRED HEALTH CLAIMS - OTHER

| | | Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year | | | | | | | | |
|----|----------------------|--|------|------|---------|------|--|--|--|--|
| - | Year in Which Losses | 1 | 2 | 3 | 4 | 5 | | | | |
| 12 | Were Incurred | 2015 | 2016 | 2017 | 2018 | 2019 | | | | |
| 0 | 1. Prior | | | | 15,958 | | | | | |
| - | 2. 2015 | | | | 207,411 | | | | | |
| | 3. 2016 | XXX | | | | | | | | |
| | 4. 2017 | XXX | | | | | | | | |
| | 5. 2018 | XXX | XXX | XXX | | | | | | |
| | 6. 2019 | XXX | XXX | XXX | XXX | | | | | |

SECTION C - INCURRED YEAR HEALTH CLAIM AND CLAIM ADJUSTMENT EXPENSE RATIO - OTHER

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|--------------------------|----------|----------|------------------|------------|-------------------------------|------------|---------|--------------|---------------------------------------|------------|
| Years in Which | | | | 5 | Claim and Claim Adjustment | 2 | | Unpaid Claim | Total Claims and Claims Adjustment | _ |
| Premiums were Earned and | Premiums | Claim | Claim Adjustment | Percent | Expense Payments | Percent | Claims | Adjustment | Expense Incurred | Percent |
| Claims were Incurred | Earned | Payments | Expense Payments | (Col. 3/2) | (Col. 2 + 3) | (Col. 5/1) | Unpaid | Expenses | (Col. 5 + 7 + 8) | (Col. 9/1) |
| 1. 2015 | | 207,411 | 13,978 | 6.7 | 221,389 | 95. | 0 | | | 95.0 |
| 2. 2016 | | 195,285 | 15,422 | 7.9 | 210,707 | 92. | 6 | | | 92.6 |
| 3. 2017 | | | 15,667 | 7.9 | 214,617 | | 7 | | | |
| 4. 2018 | | 244,680 | | 6.9 | 261,620 | | 8161 | | | |
| 5. 2019 | | 244,761 | | 6.6 | | | 824,011 | | | |

UNDERWRITING AND INVESTMENT EXHIBIT PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

| | 1 Total | 2 Comprehensive (Hospital and Medical) | 3 Medicare Supplement | 4 Dental Only | 5 Vision Only | 6 Federal Employees Health Benefits Plan | 7 Title XVIII Medicare | 8 Title XIX Medicaid | 9 Other |
|---|------------|---|-----------------------------|---------------------|---------------------|--|---------------------------------|-------------------------------|------------|
| 1. Unearned premium reserves | | | | | | | | | |
| 2. Additional policy reserves (a) | 0 | | | | | | | | |
| 3. Reserve for future contingent benefits | 0 | | | | | | | | |
| Reserve for rate credits or experience rating refunds (including \$0 for investment income) | | 5,787,748 | | | | | | | |
| 5. Aggregate write-ins for other policy reserves | | 1,263,994 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 6. Totals (gross) 7. Reinsurance ceded | | 7,223,118 | 0 | 0 | 0 | 47,756,586 | 0 | 0 | |
| Totals (net) (Page 3, Line 4) Present value of amounts not yet due on claims | | 7,223,118 | 0 | 0 | 0 | 47,756,586 . | 0 | 0 | |
| 10. Reserve for future contingent benefits | 0 | | | ····· | | ······ | | | |
| 11. Aggregate write-ins for other claim reserves | | | 0 | | 0 | 0 . | 0 | 0 | |
| 12. Totals (gross) | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 13. Reinsurance ceded | 0 | | | | | | | | |
| 14. Totals (net) (Page 3, Line 7) | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | 1 1 | | DETAILS OF | WRITE-INS | | | | | 1 |
|)501. ACA Risk Adjustment Payable | | 1,263,994 | | | | | | | |
|)502 | | | | | | | | | |
| 1598. Summary of remaining write-ins for Line 5 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
|)599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above) | | | 0 | 0 | 0 | 0 | 0 | 0 | |
| 101 | 0 | | | | | | | | |
| 102 | | | | | | | | | |
| 1198. Summary of remaining write-ins for Line 11 from overflow page | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | | | 0 | | 0 | 0 | 0 | 0 | |

(a) Includes \$.....0 premium deficiency reserve.

Statement as of December 31, 2019 of the Wellmark, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

| | PART 3 - | ANALYSIS OF EXP | | 3 | 4 | 5 |
|----------------|--|---------------------------------|---------------------------------------|---------------------------------------|------------------------|---------------|
| | | Claim Adjustm 1 | 2 | 3 | 4 | 5 |
| | | Cost Containment Expenses | Other Claim Adjustment Expenses | General Administrative Expenses | Investment Expenses | Total |
| 1. | Rent (\$13,475,025 for occupancy of own building) | | | 15,252,670 | | |
| 2. | Salaries, wages and other benefits | | | | | |
| 3. | Commissions (less \$0 ceded plus \$0 assumed) | | | | | |
| 4. | Legal fees and expenses | | | | | |
| 5. | Certifications and accreditation fees | | | | | |
| 6. | Auditing, actuarial and other consulting services. | | | | | |
| | Traveling expenses | | | | | |
| 7. | | | | | | |
| 8. | Marketing and advertising | | | | | |
| 9. | Postage, express and telephone | | | | | |
| 10. | Printing and office supplies | | | | | |
| 11. | Occupancy, depreciation and amortization | | 1,414,638 | (2,508,728) | | (652,826) |
| 12. | Equipment | | 61,272 | 158,363 | | |
| 13. | Cost or depreciation of EDP equipment and software | 2,328,715 | 2,529,935 | | | 23,842,424 |
| 14. | Outsourced services including EDP, claims, and other services | 13,057,434 | 46,048,065 | 54,979,323 | | 114,084,822 |
| 15. | Boards, bureaus and association fees | | 2,734 | 1,841,304 | | 1,847,666 |
| 16. | Insurance, except on real estate | | 192,114 | 1,018,795 | | 1,268,936 |
| 17. | Collection and bank service charges | | 20 | | | 20 |
| 18. | Group service and administration fees | | 11,448,839 | 1,085 | | 19,659,697 |
| 19. | Reimbursements by uninsured plans | (23,520,333) | (29,498,664) | (78,759,697) | | (131,778,694) |
| 20. | Reimbursements from fiscal intermediaries | | | | | 0 |
| 21. | Real estate expenses | | | | | 512,400 |
| 22. | Real estate taxes | | | 2,476,991 | | |
| 23. | Taxes, licenses and fees: | | | | | |
| | 23.1 State and local insurance taxes. | | | | | 0 |
| | 23.2 State premium taxes | | | | | |
| | 23.3 Regulatory authority licenses and fees | | | | | |
| | 23.4 Payroll taxes | | | | | |
| | 23.5 Other (excluding federal income and real estate taxes) | | | | | |
| | | | | | | |
| 24. | Investment expenses not included elsewhere | | | | | |
| 25. | Aggregate write-ins for expenses | | | | | |
| 26. | Total expenses incurred (Lines 1 to 25) | | | | 5,038,922 | |
| 27. | Less expenses unpaid December 31, current year | | | 213,482,976 | 1,100,484 | , , |
| 28. | Add expenses unpaid December 31, prior year | | | | 940,497 | |
| 29. | Amounts receivable relating to uninsured plans, prior year | | | 96,651,964 | | 96,651,964 |
| 30. | Amounts receivable relating to uninsured plans, current year | | | 115,770,054 | | 115,770,054 |
| 31. | Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30) | 19,795,558 | 79,210,421 | | 4,878,935 | |
| | 1 | DETAILS OF WRITE-INS | | | | |
| 2501. | BlueCard Home Access Fees | 4,972,437 | 3,323,268 | | | 8,295,705 |
| 2502. | Miscellaneous Expenses and Reimbursements | | 1,771,662 | | | 1,804,771 |
| 2503. | | | | | | 0 |
| 2598. | Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 | 0 |
| 2 <u>599</u> . | TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) | 4,972,830 | | | 0 | |
| 2033. | | | | | 0 | 10,100,47 |

(a) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

| | | | 1 Collected During Year | 2 Earned During Year |
|------------|--|-----|-------------------------------|---------------------------------------|
| 1. | U.S. government bonds | (a) | | |
| 1.1 | Bonds exempt from U.S. tax | . , | | |
| 1.2 | Other bonds (unaffiliated) | (a) | | |
| 1.3 | Bonds of affiliates | (a) | | |
| 2.1 | Preferred stocks (unaffiliated) | (b) | | |
| 2.11 | Preferred stocks of affiliates. | | | |
| 2.2 | Common stocks (unaffiliated) | | | |
| 2.21 | Common stocks of affiliates. | | | |
| 3. | Mortgage loans | (c) | | |
| 4. | Real estate | | | |
| 5. | Contract loans | | | |
| 6. | Cash, cash equivalents and short-term investments | (e) | 5,194,243 | 5,163,839 |
| 7. | Derivative instruments | (f) | | |
| 8. | Other invested assets | | | |
| 9. | Aggregate write-ins for investment income | | | |
| 10. | Total gross investment income | | | |
| 11. | Investment expenses | | | |
| 12. | Investment taxes, licenses and fees, excluding federal income taxes | | | |
| 13. | Interest expense | | | |
| 14. | Depreciation on real estate and other invested assets | | | |
| 15. | Aggregate write-ins for deductions from investment income | | | |
| 16. | Total deductions (Lines 11 through 15) | | | |
| 17. | Net investment income (Line 10 minus Line 16) | | | |
| | DETAILS OF WRITE-INS | | | <u> </u> |
| 0901. | Miscellaneous Investment Income | | | |
| | Securities Lending | | | |
| 0903. | ч | | , | · · · · · · · · · · · · · · · · · · · |
| 0998. | Summary of remaining write-ins for Line 9 from overflow page | | 0 | 0 |
| | Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) | | | |
| | Other Investment Expenses | | | |
| | | | | |
| 1503. | | | | |
| 1598. | Summary of remaining write-ins for Line 15 from overflow page | | | 0 |
| | Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) | | | |
| (a) | Includes \$7,065,399 accrual of discount less \$1,502,626 paid for | | | ,, |
| (b) | Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividence | | | |
| (c) (c) | Includes \$0 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest | | | |
| (d) | Includes \$13,475,025 for company's occupancy of its own buildings; and excludes \$0 interest on encumbrance | | | |
| (e) | Includes \$197,166 accrual of discount less \$0 amortization of premium and less \$0 paid for accrued inte | | urchases. | |
| (0) (f) | Includes \$ 0 accrual of discount less \$ 0 amortization of premium | P | | |

(f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.

(g) Includes \$.....0 investment expenses and \$......0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
 (i) Includes \$....7,158,929 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

| | | 1 | 2 | 3 | 4 | 5 |
|-------|--|-------------|--------------|---------------------|---------------------|---------------------|
| | | Realized | | | | Change in |
| | | Gain (Loss) | Other | Total Realized | Change in | Unrealized |
| | | on Sales | Realized | Capital Gain (Loss) | Unrealized | Foreign Exchange |
| | | or Maturity | Adjustments | (Columns 1 + 2) | Capital Gain (Loss) | Capital Gain (Loss) |
| 1. | U.S. government bonds | 649,838 | | 649,838 | | |
| 1.1 | Bonds exempt from U.S. tax | | | 0 | | |
| 1.2 | Other bonds (unaffiliated) | 5,234,427 | (120,724) | 5,113,703 | | |
| 1.3 | Bonds of affiliates | | | 0 | | |
| 2.1 | Preferred stocks (unaffiliated) | 2,440 | (2,374) | 66 | | (15,491) |
| 2.11 | Preferred stocks of affiliates | | | 0 | | |
| 2.2 | Common stocks (unaffiliated) | | (6,853,271) | (6,054,203) | | |
| 2.21 | Common stocks of affiliates | | | 0 | | |
| 3. | Mortgage loans | | | 0 | | |
| 4. | Real estate | | | 0 | | |
| 5. | Contract loans | | | 0 | | |
| 6. | Cash, cash equivalents and short-term investments | 2,537 | (23,402) | (20,865) | | |
| 7. | Derivative instruments | 13,999 | | 13,999 | | |
| 8. | Other invested assets | | | 0 | 6,184,888 | |
| 9. | Aggregate write-ins for capital gains (losses) | 0 | 0 | 0 | 0 | 0 |
| 10. | Total capital gains (losses) | 6,702,309 | (6,999,771) | (297,462) | | 955,979 |
| | | DETAILS C | OF WRITE-INS | | • | |
| 0901. | | | | 0 | | |
| 0902. | | | | 0 | | |
| 0903. | | | | 0 | | |
| 0998. | Summary of remaining write-ins for Line 9 from overflow page | 0 | 0 | 0 | 0 | 0 |
| | Totals (Lines 0901 through 0903 plus 0998) (Line 9 above) | | 0 | 0 | 0 | 0 |

EXHIBIT OF NONADMITTED ASSETS

| | | 1 Current Year Total | 2 Prior Year Total | 3 Change in Total Nonadmitted Assets |
|----------|--|----------------------------|--------------------------|--|
| 1. | Bonds (Schedule D) | Nonadmitted Assets | Nonadmitted Assets | (Col. 2 - Col. 1) |
| 1. 2. | Stocks (Schedule D): | | | |
| ۷. | 2.1 Preferred stocks | | | (100,000 |
| | 2.1 Prefered stocks | | | (17,469,304 |
| 3. | Mortgage loans on real estate (Schedule B): | | | (17,409,504 |
| э. | 3.1 First liens | | | 0 |
| | 3.2 Other than first liens. | | | 0 |
| 4. | Real estate (Schedule A): | | | |
| 4. | 4.1 Properties occupied by the company | | | 0 |
| | | | | |
| | | | | |
| ~ | 4.3 Properties held for sale | | | 0 |
| 5. | Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA) | | | ſ |
| 6. | Contract loans | | | |
| | | | | |
| 7. | Derivatives (Schedule DB) | | | |
| 8. 0 | Other invested assets (Schedule BA) | ,, | ,,_, | (127,209 |
| 9. | Receivables for securities | | | 0 |
| 10. | Securities lending reinvested collateral assets (Schedule DL) | | | |
| 11. | | | | 0 |
| 12. | Subtotals, cash and invested assets (Lines 1 to 11) | | | (17,696,513 |
| 13. | Title plants (for Title insurers only) | | | 0 |
| 14. | Investment income due and accrued | | | (44,396 |
| 15. | Premiums and considerations: | | | |
| | 15.1 Uncollected premiums and agents' balances in the course of collection | | | 0 |
| | 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due | | | 0 |
| | 15.3 Accrued retrospective premiums and contracts subject to redetermination | | | C |
| 16. | Reinsurance: | | | |
| | 16.1 Amounts recoverable from reinsurers | | | |
| | 16.2 Funds held by or deposited with reinsured companies | | | |
| | 16.3 Other amounts receivable under reinsurance contracts | | | |
| 17. | Amounts receivable relating to uninsured plans | | | (11,076,626 |
| | Current federal and foreign income tax recoverable and interest thereon | | | |
| | Net deferred tax asset | | | |
| 19. | Guaranty funds receivable or on deposit | | | |
| 20. | Electronic data processing equipment and software | | | |
| 20. | | | - , | |
| | | | | |
| 22. | Net adjustment in assets and liabilities due to foreign exchange rates | | | |
| 23. | Receivables from parent, subsidiaries and affiliates | | | (2,511,498 |
| 24. | Health care and other amounts receivable | | | (11,575,042 |
| 25. | Aggregate write-ins for other-than-invested assets | | | 21,189,950 |
| 26. | Total assets excluding Separate Accounts, Segregated Accounts and Protected | 162,006,714 | 150 004 556 | (11.070.150 |
| 07 | Cell Accounts (Lines 12 through 25) | | | (11,972,158 |
| | From Separate Accounts, Segregated Accounts and Protected Cell Accounts. | | | |
| 28. | TOTALS (Lines 26 and 27) | 63,996,714 . | | (11,972,158 |
| | DETAILS OF | WRITE-INS | 1 | |
| 1101 | | | | |
| 1102 |) | | | 0 |
| 1103 | l | | | C |
| 1198 | 8. Summary of remaining write-ins for Line 11 from overflow page | 0 . | 0 | 0 |
| 1199 | 9. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) | | 0 | C |
| 2501 | . Prepaid Premium Tax Assets | | | 4,663,736 |
| 2502 | 2. Prepaid Pension Costs | 11,176,289 . | | |
| 2503 | 8. Other Prepaid Expenses | 16,081,858 . | | |
| | B. Summary of remaining write-ins for Line 25 from overflow page | | | |
| |). Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) | | | |

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

| | | | Total Members at End of | | | 6 | |
|--|------------|------------------|-------------------------|------------|--------------|------------------------|--|
| | 1 Prior | 2 First | 3 Second | 4 Third | 5 Current | Current Year Member | |
| Source of Enrollment | Year | Quarter | Quarter | Quarter | Year | Months | |
| 1. Health maintenance organizations | | | | | | | |
| 2. Provider service organizations | | | | | | | |
| 3. Preferred provider organizations | 865,621 | | | 856,648 | | | |
| 4. Point of service | | | | | | | |
| 5. Indemnity only | 178,877 | | | 179,908 | | 2,151,0 | |
| 6. Aggregate write-ins for other lines of business | 179,288 | | | | | 2,154,9 | |
| 7. Total | 1,223,786 | | | | | | |
| | DETA | ILS OF WRITE-INS | | | | | |
| 0601. Dental | | | | | | 1,054,5 | |
| 0602. Medicare Part D | | | 81,880 | 81,787 | 81,549 | | |
| 0603. Vision | 8,558 | 9,856 | 9,817 | | 9,851 | 117,9 | |
| 0698. Summary of remaining write-ins for Line 6 from overflow page | 0 | 0 | 0 | 0 | 0 | | |
| 0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) | 179,288 | | | | | 2,154,9 | |

Note 1 – Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Wellmark, Inc. (the Company) have been prepared in conformity with the accounting practices prescribed by the National Association of Insurance Commissioners (NAIC) and the State of Iowa.

The NAIC Accounting Practices and Procedures manual has been adopted as a component of prescribed or permitted practices by the State of Iowa. The Commissioner of Insurance has the right to permit specific practices that deviate from prescribed practices. The Company does not have any permitted practices.

| | | SSAP # | F/S Page | F/S Line # | 2019 | 2018 |
|-----|--|--------|----------|------------|-----------------|-----------------|
| NET | INCOME | | | | • | - |
| (1) | Wellmark, Inc. state basis (Page 4, Line 32, Columns 2 & 3) | XXX | XXX | XXX | \$ 158,692,202 | \$ 127,475,750 |
| (2) | State Prescribed Practices that are an increase/(decrease) from NAIC SAP | | | | | |
| | | | | | \$ | \$ |
| (3) | State Permitted Practices that are an increase/(decrease) from NAIC SAP | | | | | |
| | | | | | \$ | \$ |
| (4) | NAIC SAP (1-2-3=4) | XXX | XXX | XXX | \$ 158,692,202 | \$ 127,475,750 |
| SUF | RPLUS | | | | • | <u>.</u> |
| (5) | Wellmark, Inc. state basis (Page 3, Line 33, Columns 3 & 4) | XXX | XXX | XXX | \$1,853,666,963 | \$1,567,303,983 |
| (6) | State Prescribed Practices that are an increase/(decrease) from NAIC SAP | | | | | |
| | | | | | \$ | \$ |
| (7) | State Permitted Practices that are an increase/(decrease) from NAIC SAP | | | | | - |
| | | | | | \$ | \$ |
| (8) | NAIC SAP (5-6-7=8) | XXX | XXX | XXX | \$1,853,666,963 | \$1,567,303,983 |

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. Actual results could differ from those estimates.

C. Accounting Policy

Premiums on fully insured accident and health plans are billed in advance of their respective coverage periods. Receivables and income for such premiums are recorded at the effective date of the coverage period. Premiums received in advance and any unearned portion of premiums are recorded on the balance sheets as premiums received in advance and unearned premiums and reported as income when earned.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Other costs, such as premium taxes and other underwriting expenses, are also charged to operations as incurred.

Real estate is carried at depreciated cost, less encumbrances. The fair value of real estate owned is determined by an internal analysis and evaluation of relevant market data.

In addition, the Company uses the following accounting policies:

(1) Basis for Short-Term Investments

Short-term investments that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Short-term investments that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value.

(2) Basis for Bonds and Amortization Schedule

Bonds that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Bonds that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value. When a decline in the fair value of a bond has been determined to be other than temporary, the Company evaluates whether the decline is interest or credit related. For those credit-related declines in value that are considered to be other than temporary, the bond's carrying value is reduced and a loss is realized on the Statement of Revenues and Expenses. Surplus notes that are rated by an NAIC credit rating provider and have an NAIC designation of 1 are reported at cost, adjusted for amortization of premiums and accretion of discounts using the effective interest method.

The Company does not own any mandatory convertible securities or SVO-Identified investments identified in SSAP No. 26R.

(3) Basis for Common Stocks

Unaffiliated common stocks are reported at fair value. When a decline in the fair value of an unaffiliated common stock is considered to be other than temporary, the carrying value of the stock is reduced to fair value and a loss is realized on the Statement of Revenues and Expenses. The Company has no restricted common stock.

(4) Basis for Preferred Stocks

Preferred stock is reported based on the underlying characteristics of the security (redeemable or perpetual) and the quality rating of the security expressed as an NAIC designation.

(5) Basis for Mortgage Loans

Not Applicable

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Loan-backed securities that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. For all securities except for interest only securities or securities where the yield had become negative, the amortization of premiums and accretion of discounts on loan-backed securities is adjusted quarterly using current estimated future cash flows, including any new prepayment assumptions, using the retrospective adjustment method. Interest only securities and securities where the yield had become negative are valued using the prospective method. Loan-backed securities are stated at the lower of amortized cost or fair value if they are NAIC designation 3 through 6.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

Common stock of the Company's insurance subsidiaries are recorded at the equity in the underlying statutory basis of their net assets. Common stock of the Company's non-insurance subsidiaries is recorded at their U.S. GAAP equity, but all ownership interests have been nonadmitted at December 31, 2019 as GAAP audited financial statements are not obtained for these subsidiaries.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Company has ownership interests in two affiliated joint ventures. The Company carries these interests based on the underlying statutory equity of the investees.

The Company also has minor ownership interests in limited liability companies. The Company carries these interests based on the underlying equity of the investee. If a GAAP audited statement is unavailable, the Company considers these investments non-admitted. All ownership interests in limited liability companies have been nonadmitted at December 31, 2019.

The Company has a minor ownership interest in a limited partnership. The Company carries this interest based on the underlying audited GAAP equity of the investee.

(9) Accounting Policies for Derivatives

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not enter into derivative transactions for hedging, income generation, or replication purposes. All derivatives are reported at fair value.

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with Statement of Statutory Accounting Principles (SSAP) 54, Individual and Group Accident and Health Contracts.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

The Company provides a liability for unpaid and unreported benefits, which represents the estimated ultimate cost of benefits incurred through the balance sheet date. The liability is estimated on the basis of past experience and accumulated statistical data. Subsequent actual benefit experience may differ from the estimated liability due to variances in estimated and actual utilization of health care services, the amount of charges and other factors. These estimates are continuously reviewed and, as adjustments become necessary, such adjustments are reflected in current operations.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

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

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company estimates pharmaceutical rebates utilizing past experience and accumulated statistical data. These estimates are continuously reviewed, and any adjustments are reflected in current operations.

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern and has concluded that there are no events or circumstances that raise any doubt about the Company's ability to continue as a going concern.

Note 2 – Accounting Changes and Correction of Errors

Not Applicable

Note 3 – Business Combinations and Goodwill

Not Applicable

Note 4 – Discontinued Operations

Not Applicable

Note 5 – Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
 - Not Applicable
- B. Debt Restructuring
 - Not Applicable

C. Reverse Mortgages

Not Applicable

- D. Loan-Backed Securities
 - (1) Description of Sources Used to Determine Prepayment Assumptions

For fixed-rate agency mortgage-backed securities, prepayment speeds are calculated utilizing Mortgage Industry Advisory Corporation (MIAC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer-consensus survey of long-term prepayment projections. For other mortgage-backed, loan-backed, and structured securities, prepayment assumptions are utilized from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. In instances where Moody's projections are not available, data from Reuters is used, which utilizes the median prepayment speed from contributors' models.

(2) Other-Than-Temporary Impairments

There were no loan-backed securities with a current period recognized other-than-temporary impairment (OTTI) classified on the basis for the OTTI as "Intent to sell" or "Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis."

(3) Recognized OTTI Securities

Loan-backed securities with a current period recognized other-than-temporary impairment, currently held by the Company, as the present value of cash flows expected to be collected is less than the amortized cost basis of the securities follows as of December 31, 2019:

| CUSIP | | | Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI | Present Value of Projected Cash Flows | Recognized Other-Than- Temporary Impairment | Amortized Cost After Other-Than- emporary Impairment | Fair Value at Time of OTTI | Date of Financial Statement Where Reported |
|--------|----|---|--|---|--|--|-------------------------------|--|
| 83149V | AB | 5 | \$ 2,370,090 | \$ 2,311,542 | \$ 58,548 | \$ 2,311,542 | \$ 2,311,542 | 12/01/2019 |
| 200474 | BD | 5 | \$ 609,473 | \$ 547,297 | \$ 62,176 | \$ 547,297 | \$ 547,297 | 12/01/2019 |
| Total | | | | | \$ 120,724 | | | |

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

| а. | The aggregate amount of unrealized losses: | 1. Less than 12 Months | \$ 1,359,487 |
|----|--|------------------------|------------------|
| | | 2. 12 Months or Longer | \$ 1,398,727 |
| b. | The aggregate related fair value of securities with unrealized losses: | 1. Less than 12 Months | \$ 94,636,695 |
| | | 2. 12 Months or Longer | \$ 40,528,652 |

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The unrealized losses on the Company's investments in loan-backed securities were due to temporary changes in interest rates and market conditions. The contractual cash flows of the agency mortgage-backed investments are guaranteed by an agency of the U.S. government and the non-agency mortgage-backed and asset-backed securities include collateral which reduce the risk of loss. Based on cash flow projections, the Company believes it will recover the carrying value of these investments. Because the Company does not have the intent to sell these securities, nor is it more likely than not the Company will be required to sell these securities until a recovery of carrying value, which may be maturity, the Company does not consider these investments to be other-than-temporarily impaired.

- Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) Policy for Requiring Collateral or Other Security

The Company participates in a securities lending program through its custodian bank, Bank of New York Mellon (BNYM). On the day the loan is delivered, BNYM obtains collateral equal in amount to 102% for securities of United States issuers and 105% for securities of non-United States issuers of the market value of the securities loaned plus accrued interest. The collateralization of all loans is then reviewed daily during the term of the loan. Cash received as collateral will be held and maintained by BNYM in one of its collective investment vehicles in accordance with investment guidelines provided in the securities lending agreement. Because the Company and BNYM are not permitted by contract to sell or repledge the collateral, the collateral is not recorded on the Company's statutory Balance Sheet.

(2) Disclose the Carrying Amount and Classification of Both Assets and Liabilities

Not Applicable

E.

(3) Collateral Received

Not Applicable

(4) Aggregate Value of the Reinvested Collateral

Not Applicable

(5) Collateral Reinvestment

Not Applicable

(6) Detail on Collateral Transactions Not Permitted by Contract or Custom to Sell or Repledge

The Company accepts collateral through its securities lending program with BNYM that it is not permitted by contract or custom to sell or repledge. As of December 31, 2019, no securities were on loan and no collateral had been accepted.

(7) Collateral for Securities Lending Transactions that Extend Beyond One Year from the Reporting Date.

Not Applicable

- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
 - (1) Company Policies or Strategies for Repo Programs

The Company participates in a repurchase agreement with Bankers Trust (the Bank). The repurchase agreement is an obligation of the Bank to repay the Company the principal amount invested by the Company with interest upon demand by the Company. To secure the obligations under the repurchase agreement, the Bank grants to the Company an undivided security interest in certain United States government securities having a market value equal to at least 102% of the principal amount invested. The United States government securities comprising the collateral are at all times owned by the Bank; therefore, this collateral was not recorded on the Company's statutory Balance Sheet. Since the repurchase agreement matures upon demand, there is no asset-liability mismatch.

(2) Type of Repo Trades Used

| | | First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
|---------|------------------|---------------|----------------|---------------|----------------|
| a. Bila | lateral (YES/NO) | YES | YES | YES | YES |
| b. Tri- | i-Party (YES/NO | NO | NO | NO | NO |

(3) Original (Flow) and Residual Maturity

| | F | First Quarter | S | econd Quarter | 1 | Third Quarter | F | ourth Quarter |
|-------------------------|----|---------------|----|---------------|----|---------------|----|---------------|
| a. Maximum Amount | | | | | | | | |
| 1. Open – No Maturity | \$ | 58,222,526 | \$ | 64,417,604 | \$ | 55,820,033 | \$ | 78,278,990 |
| 2. Overnight | \$ | | \$ | | \$ | | \$ | |
| 3. 2 Days to 1 Week | \$ | | \$ | | \$ | | \$ | |
| 4. >1 Week to 1 Month | \$ | | \$ | | \$ | | \$ | |
| 5. >1 Month to 3 Months | \$ | | \$ | | \$ | | \$ | |
| 6. >3 Months to 1 Year | \$ | | \$ | | \$ | | \$ | |
| 7. > 1 Year | \$ | | \$ | | \$ | | \$ | |
| b. Ending Balance | | | | | | | | |
| 1. Open – No Maturity | \$ | 4,233,352 | \$ | 64,417,604 | \$ | 20,965,802 | \$ | 60,533,926 |
| 2. Overnight | \$ | | \$ | | \$ | | \$ | |
| 3. 2 Days to 1 Week | \$ | | \$ | | \$ | | \$ | |
| 4. >1 Week to 1 Month | \$ | | \$ | | \$ | | \$ | |
| 5. >1 Month to 3 Months | \$ | | \$ | | \$ | | \$ | |
| 6. >3 Months to 1 Year | \$ | | \$ | | \$ | | \$ | |
| 7. > 1 Year | \$ | | \$ | | \$ | | \$ | |

(4) Fair Value Securities Sold and/or Acquired that Resulted in Default

No securities were sold and/or acquired that resulted in default.

(5) Securities Sold Under Repo - Secured Borrowing

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(7) Collateral Received – Secured Borrowing

| | First Quarter | Second Quarter | Third Quarter | | | Fourth Quarter | |
|--------------------|------------------|----------------|---------------|----|------------|----------------|------------|
| a. Maximum Amount | | | | | | | |
| 1. Cash | \$ | \$ | | \$ | | \$ | |
| 2. Securities (FV) | \$ 59,387,513 | \$ | 65,706,127 | \$ | 56,937,370 | \$ | 79,844,698 |
| b. Ending Balance | | | | | | | |
| 1. Cash | \$ | \$ | | \$ | | \$ | |
| 2. Securities (FV) | \$ 4,318,500 | \$ | 65,706,127 | \$ | 21,385,689 | \$ | 61,745,040 |

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

| | 1 | 2 | 3 | 4 |
|---------------------------------|------|---------------|--------|--------|
| Ending Balance | None | NAIC 1 | NAIC 2 | NAIC 3 |
| a. Cash | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | 61,745,040 | | |
| c. LB & SS- FV | | | | |
| d. Preferred Stock- FV | | | | |
| e. Common Stock | | | | |
| f. Mortgage Loans- FV | | | | |
| g. Real Estate- FV | | | | |
| h. Derivatives- FV | | | | |
| i. Other Invested Assets- FV | | | | |
| j. Total Collateral Assets – FV | | | | |
| (Sum of a through i) | \$ | \$ 61,745,040 | \$ | \$ |

| | 5 | 6 | 7 | 8 Does Not Qualify as |
|---------------------------------|--------|--------|--------|--------------------------|
| Ending Balance | NAIC 4 | NAIC 5 | NAIC 6 | Admitted |
| a. Cash | \$ | \$ | \$ | \$ |
| b. Bonds- FV | | | | |
| c. LB & SS- FV | | | | |
| d. Preferred Stock- FV | | | | |
| e. Common Stock | | | | |
| f. Mortgage Loans- FV | | | | |
| g. Real Estate- FV | | | | |
| h. Derivatives- FV | | | | |
| i. Other Invested Assets- FV | | | | |
| j. Total Collateral Assets – FV | | | | |
| (Sum of a through i) | \$ | \$ | \$ | \$ |

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

| | | Fair Value |
|----|--------------------------|---------------|
| a. | Overnight and Continuous | \$ 61,745,040 |
| b. | 30 Days or Less | \$ |
| C. | 31 to 90 Days | \$ |
| d. | >90 Days | \$ |

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Company does not have any authority to reinvest the collateral.

(11) Liability to Return Collateral - Secured Borrowing (Total)

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Bank retains all rights of ownership in the collateral unless or until a default under the repurchase agreement. As a result, no liability has been recognized on the Company's Balance Sheet.

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

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

| (1) | Number of CUSIPs | 11 |
|-----|---------------------------------------|---------------|
| (2) | Aggregate Amount of Investment Income | \$ 236,112 |

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

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

As of December 31, 2019, the Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships or Limited Liability Companies during 2019 or 2018.

Note 7 – Investment Income

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

All investment income due and accrued relating to the Company's minor ownership interests in limited liability companies has been nonadmitted, on the basis that the related ownership interests in limited liability companies have been nonadmitted.

B. The total amount excluded:

The total amount excluded at December 31, 2019 was \$87,608.

Note 8 – Derivative Instruments

- A. Derivatives Under SSAP No. 86 Derivatives
 - (1) Market Risk, Credit Risk and Cash Requirements

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not purchase derivatives and has no future cash commitments related to derivatives held.

(2) Objectives for Derivative Use

On occasion, the Company receives stock rights through corporate actions by common stock issuers that are reported as derivatives. The Company does not enter into derivative transactions for hedging, income generation, or replication purposes.

(3) Accounting Policies for Recognition and Measurement

All derivatives are reported at fair value with changes in fair value recorded in surplus. Realized gains and losses upon settlement or expiration of the derivatives are reported in net realized capital gains (losses) on the Statement of Revenue and Expenses.

(4) Identification of Whether the Reporting Entity has Derivative Contracts with Financing Premiums

Not Applicable

(5) Net Gain or Loss Recognized and Excluded From the Assessment of Hedge Effectiveness

Not Applicable

(6) Net Gain or Loss Recognized from Derivatives that no Longer Qualify for Hedge Accounting

Not Applicable

(7) Derivatives Accounted for as Cash Flow Hedges

Not Applicable

(8) Total Premium Costs for Contracts

Not Applicable

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

Not Applicable

Note 9 – Income Taxes

- A. Deferred Tax Assets/(Liabilities)
 - 1. Components of Net Deferred Tax Asset/(Liability)

| | | | 2019 | | | 2018 | | | Change | |
|----|--|---------------|----------------|--------------------|---------------|----------------|--------------------|-----------------------|----------------------|--------------------|
| | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| | | Ordinary | Capital | (Col 1+2) Total | Ordinary | Capital | (Col 4+5) Total | (Col 1-4) Ordinary | (Col 2-5) Capital | (Col 7+8) Total |
| a. | Gross deferred tax assets | \$ 52,848,000 | | | \$ 43,949,000 | \$ 1,711,000 | \$ 45,660,000 | \$ 8,899,000 | \$ 1,189,000 | \$ 10,088,000 |
| b. | Statutory valuation allowance adjustment | | | | | | | | | |
| C. | Adjusted gross deferred tax assets (1a-1b) | \$ 52,848,000 | \$ 2,900,000 | \$ 55,748,000 | \$ 43,949,000 | \$ 1,711,000 | \$ 45,660,000 | \$ 8,899,000 | \$ 1,189,000 | \$ 10,088,000 |
| d. | Deferred tax assets nonadmitted | | | | 8,151,000 | | 8,151,000 | (8,151,000) | | (8,151,000) |
| e. | Subtotal net admitted deferred tax asset (1c-1d) | \$ 52,848,000 | \$ 2,900,000 | \$ 55,748,000 | \$ 35,798,000 | \$ 1,711,000 | \$ 37,509,000 | \$ 17,050,000 | \$ 1,189,000 | \$ 18,239,000 |
| f. | Deferred tax liabilities | 551,000 | 28,206,000 | 28,757,000 | 419,000 | 9,991,000 | 10,410,000 | 132,000 | 18,215,000 | 18,347,000 |
| g. | Net admitted deferred tax assets/(net deferred tax liability) (1e-1f) | \$ 52,297,000 | \$(25,306,000) | \$ 26,991,000 | \$ 35.379.000 | \$ (8,280,000) | \$ 27.099.000 | \$ 16.918.000 | \$(17,026,000) | \$ (108,000) |

2. Admission Calculation Components SSAP No. 101

| | | 2019 | | | 2018 | | | Change | |
|--|---------------|--------------|---------------|---------------|--------------|---------------|--------------|--------------|--------------|
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| | | | (Col 1+2) | | | (Col 4+5) | (Col 1-4) | (Col 2-5) | (Col 7+8) |
| | Ordinary | Capital | Total | Ordinary | Capital | Total | Ordinary | Capital | Total |
| Federal income taxes paid in prior years recoverable through loss carrybacks | \$ 28,081,000 | \$ 1,471,000 | \$ 29,552,000 | \$ 25,093,000 | \$ 898,000 | \$ 25,991,000 | \$ 2,988,000 | \$ 573,000 | \$ 3,561,000 |
| Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The lesser of 2(b)1 and 2(b)2 below) | | | | 1,108,000 | | 1.108.000 | (1,108,000) | | (1,108,000) |
| 1. Adjusted gross deferred tax assets expected to be realized following the balance sheet | | | | | | 1,100,000 | (1,100,000) | | (1,108,000) |
| date | | | | 1,108,000 | | 1,108,000 | (1,108,000) | | (1,108,000) |
| 2. Adjusted gross deferred tax assets allowed per limitation threshold | | | 273,635,000 | | | 230,612,000 | | | 43,023,000 |
| c. Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities | 24,767,000 | 1,429,000 | 26,196,000 | 9,597,000 | 813,000 | 10,410,000 | 15,170,000 | 616,000 | 15,786,000 |
| d. Deferred tax assets admitted as the result of application of SSAP 101. Total (2(a)+2(b)+2(c)) | | | | | \$ 1 711 000 | \$ 37 500 000 | | \$ 1 180 000 | |
| of SSAP 1 | 01. | 01. | 01. | 01. | 01. | 01. | 01. | 01. | 01. |

3. Other Admissibility Criteria

| | | 2019 | 2018 |
|----|--|------------------|------------------|
| a. | Ratio percentage used to determine recovery period and threshold limitation amount | 1,102.5% | 1,000.3% |
| b. | Amount of adjusted capital and surplus used to determine recovery period and threshold | | |
| | limitation in 2(b)2 above | \$ 1,826,675,963 | \$ 1,540,204,983 |

4. Impact of Tax Planning Strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

| | | 2019 | | | 2018 | ; | | Change | |
|----|------------------------|------------------|----|-----------|------------------|----|--------------|------------------|-----------------|
| | | 1 | | 2 | 3 | | 4 | 5 | 6 |
| | | | | | | | | (Col. 1-3) | (Col. 2-4) |
| | | Ordinary | - | Capital | Ordinary | | Capital | Ordinary | Capital |
| 1. | Adjusted gross DTAs | | | | | | | | |
| | amount from Note | | | | | | | | |
| | 9A1(c) | \$ 52,848,000 | \$ | 2,900,000 | \$ 43,949,000 | \$ | \$ 1,711,000 | \$ 8,899,000 | \$ 1,189,000 |
| 2. | Percentage of | | | | | | | | |
| | adjusted gross DTAs | | | | | | | | |
| | by tax character | | | | | | | | |
| | attributable to the | | | | | | | | |
| | impact of tax planning | | | | | | | <u>.</u> | |
| | strategies | % | | % | % | 1 | % | % | % |
| 3. | Net Admitted Adjusted | | | | | | | | |
| | Gross DTAs amount | | | | | L | | | |
| _ | from Note 9A1(e) | \$ 52,848,000 | \$ | 2,900,000 | \$ 35,798,000 | 3 | \$ 1,711,000 | \$ 17,050,000 | \$ 1,189,000 |
| 4 | Percentage of net | | | | | | | | |
| | admitted adjusted | | | | | | | | |
| | gross DTAs by tax | | | | | | | | |
| | character admitted | | | | | | | | |
| | because of the impact | | | | | | | | |
| | of tax planning | 0/ | | 0/ | 0/ | | 0/ | 0/ | 0/ |
| | strategies | % | | % | % | 1 | % | % | % |

(b) Does the company's tax planning strategies include the use of reinsurance? \underline{NO}

B. Deferred Tax Liabilities Not Recognized

The Company does not have any deferred tax liabilities not recognized.

C. Current and Deferred Income Taxes

1. Current Income Tax

| | 1 | 2 | 3 (Col 1-2) |
|---|------------------|---------------|----------------|
| | 2019 | 2018 | Change |
| a. Federal | \$ 29,667,000 | \$ 26,181,593 | \$ 3,485,407 |
| b. Foreign | \$ | \$ | \$ |
| c. Subtotal | \$ 29,667,000 | \$ 26,181,593 | \$ 3,485,407 |
| d. Federal income tax on net capital gains | \$ 965,000 | \$ 8,365,000 | \$ (7,400,000) |
| e. Utilization of capital loss carry-forwards | \$ | \$ | \$ |
| f. Other | \$ | \$ | \$ |
| g. Federal and Foreign income taxes incurred | \$ 30,632,000 | \$ 34,546,593 | \$ (3,914,593) |

2. Deferred Tax Assets

| | 1 | 2 | 3 |
|--|------------------|---------------|---------------------|
| | 2019 | 2018 | (Col 1-2) Change |
| a. Ordinary: | | 20.0 | endige |
| 1. Discounting of unpaid losses | \$ 1,595,000 | \$ 1,806,000 | \$ (211,000) |
| 2. Unearned premium reserve | | | |
| 3. Policyholder reserves | | | |
| 4. Investments | | | |
| 5. Deferred acquisition costs | | | |
| 6. Policyholder dividends accrual | | | |
| 7. Fixed assets | 316,000 | 362,000 | (46,000) |
| 8. Compensation and benefits accrual | 16,697,000 | 15,734,000 | 963,000 |
| 9. Pension accrual | | | |
| 10. Receivables - nonadmitted | 8,430,000 | 3,147,000 | 5,283,000 |
| 11. Net operating loss carry-forward | | | |
| 12. Tax credit carry-forward | | | |
| 13. Other (items <=5% and >5% of total ordinary tax assets) | 25,810,000 | 22,900,000 | 2,910,000 |
| Other (items listed individually >5% of total ordinary tax assets) | | | |
| Intangible assets at transition date | 1,995,000 | 3,033,000 | (1,038,000) |
| Prepaid assets - nonadmitted | 9,481,000 | 10,791,000 | (1,310,000) |
| Invested assets - nonadmitted | 9,026,000 | 5,310,000 | 3,716,000 |
| Nondeductible guaranty fund assessment | | | |
| Nondeductible legal expenses | 4,906,000 | 3,360,000 | 1,546,000 |
| Other - nonadmitted | 381,000 | 402,000 | (21,000) |
| 99. Subtotal | \$ 52,848,000 | \$ 43,949,000 | \$ 8,899,000 |
| b. Statutory valuation allowance adjustment | | | |
| c. Nonadmitted | | 8,151,000 | (8,151,000) |
| d. Admitted ordinary deferred tax assets (2a99-2b-2c) | \$ 52,848,000 | \$ 35,798,000 | \$ 17,050,000 |

| e. | Capital: | | | |
|----|--|------------------|------------------|------------------|
| | 1. Investments | \$ 2,900,000 | \$ 1,711,000 | \$ 1,189,000 |
| | 2. Net capital loss carry-forward | | | |
| | 3. Real estate | | | |
| | Other (items <=5% and >5% of total capital tax assets) | | | |
| | Other (items listed individually >5% of total capital tax assets) | | | |
| | | | | |
| | 99. Subtotal | \$ 2,900,000 | \$ 1,711,000 | \$ 1,189,000 |
| f. | Statutory valuation allowance adjustment | | | |
| g. | Nonadmitted | | | |
| h. | Admitted capital deferred tax assets (2e99-2f-2g) | 2,900,000 | 1,711,000 | 1,189,000 |
| i. | Admitted deferred tax assets (2d+2h) | \$ 55,748,000 | \$ 37,509,000 | \$ 18,239,000 |

3. Deferred Tax Liabilities

| | 1 | 2 | 3 (Col 1-2) |
|---|------------------|---------------|------------------|
| | 2019 | 2018 | Change |
| a. Ordinary: | | | 0 |
| 1. Investments | \$ 331,000 | \$ 209,000 | \$ 122,000 |
| 2. Fixed assets | 220,000 | 210,000 | 10,000 |
| 3. Deferred and uncollected premium | | | |
| 4. Policyholder reserves | | | |
| 5. Other (items <=5% and >5% of total ordinary tax liabilities) | | | |
| Other (items listed individually >5% of total ordinary tax liabilities) | | | |
| Compensation and benefits accrual | | | |
| 99. Subtotal | \$ 551,000 | \$ 419,000 | \$ 132,000 |
| b. Capital: | | | |
| 1. Investments | \$ 27,425,000 | \$ 8,640,000 | \$ 18,785,000 |
| 2. Real estate | 781,000 | 1,351,000 | (570,000 |
| Other (Items <=5% and >5% of total capital tax liabilities) | | | |
| Other (items listed individually >5% of total capital tax liabilities) | | | |
| | | | |
| 99. Subtotal | \$ 28,206,000 | | 18,215,000 |
| c. Deferred tax liabilities (3a99+3b99) | \$ 28,757,000 | \$ 10,410,000 | \$ 18,347,000 |
| Net Deferred Tax Assets/Liabilities (2i – 3c) | \$ 26,991,000 | \$ 27,099,000 | \$ (108,000 |

5. The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the change in nonadmitted assets is reported separately from the change in net deferred income taxes in unassigned surplus):

| | 12/31/2019 | | | | 12/31/18 | | Change | | | |
|---------------------------------------|--------------|--------------|------------------|---------------|--------------|------------------|------------------|------------------|------------------|--|
| | (1) | (2) | (3) (Col 1+2) | (4) | (5) | (6) (Col 4+5) | (7) (Col 1-4) | (8) (Col 2-5) | (9) (Col 7+8) | |
| | Ordinary | Capital | Total | Ordinary | Capital | Total | Ordinary | Capital | Total | |
| Total deferred tax assets | \$52,848,000 | \$ 2,900,000 | \$ 55,748,000 | \$ 43,949,000 | \$ 1,711,000 | \$ 45,660,000 | \$ 8,899,000 | \$1,189,000 | \$ 10,088,000 | |
| Total deferred tax liabilities | (551,000) | (28,206,000) | (28,757,000) | (419,000) | (9,991,000) | (10,410,000) | (132,000) | (18,215,000) | (18,347,000) | |
| Net deferred tax asset (liability) | 52,297,000 | (25,306,000) | 26,991,000 | 43,530,000 | (8,280,000) | 32,250,000 | 8,767,000 | (17,026,000) | (8,259,000) | |
| Tax effect of unrealized gains | | | | | | | | | 19,078,000 | |
| Tax effect of SSAP92/SSAP102 | | | | | | | | | (396,000) | |
| Change in net deferred income tax \$1 | | | | | | | | \$ 10,423,000 | | |

D.

Ε.

Reconciliation of Federal Income Tax Rate to Actual Effective Rate Among the more significant book to tax adjustments were the following:

| | 12/31/19 |
|---|---------------|
| Provision computed at statutory rate | \$ 39,758,000 |
| | |
| Change in nonadmitted assets | (4,226,000) |
| Tax exempt income deduction | (723,000) |
| Dividends received deduction | (183,000) |
| 100% dividend received from affiliate | (17,535,000) |
| Other permanent differences | 458,000 |
| §162(m)(6) limitation | 3,351,000 |
| Credits generated in current year | (519,000) |
| Accrual adjustment – prior year | (176,000) |
| Other | 4,000 |
| Totals | \$ 20,209,000 |
| Federal and foreign income taxes incurred | 29,667,000 |
| Realized capital gains (losses) tax | 965,000 |
| Change in net deferred income taxes | (10,423,000) |
| Total statutory income taxes | \$ 20,209,000 |

Operating Loss Carry Forwards and Income Taxes Available for Recoupment

1. At December 31, 2019, the Company did not have any unused operating loss carryforwards or tax credit carryforwards available to offset against future taxable income.

2. The following is income tax expense for current year and proceeding years that is available for recoupment in the event of future net losses:

| Year | Amounts |
|-------|--------------|
| 2019 | \$30,900,000 |
| 2018 | \$36,194,000 |
| 2017 | \$3,813,000 |
| TOTAL | \$70,907,000 |

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Service Code.

F. Consolidated Federal Income Tax Return

1. The Company's federal income tax return is consolidated with the following entities:

Wellmark of South Dakota, Inc. Wellmark Health Plan of Iowa, Inc. First Administrators, Inc. Midwest Benefit Consultants, Inc. Wellmark Holdings, Inc.

2. The manner in which the Board of Directors sets forth for allocating the consolidated federal income tax:

The method of allocation between the companies is subject to a written agreement, approved by the Board of Directors and the Iowa Insurance Division. Allocation is based upon separate return calculations with current credit for net losses.

At December 31, 2019 the Company's tax related balance due from subsidiaries was \$29,298,884.

G. Federal or Foreign Federal Income Tax Loss Contingencies:

At December 31, 2019, it is not reasonably possible to determine the Company's amount of tax loss contingencies that will significantly increase or decrease within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT) - RTT owed under the TCJA

Not Applicable

I. Alternative Minimum Tax Credit

The Company recognized no AMT credit as a current year recoverable or as a deferred tax asset.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A, B & C. Nature of the Relationship Involved

The Company and Wellmark Health Plan of Iowa, Inc. (WHPI), a wholly owned subsidiary, have a management agreement whereby WHPI agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2019 and 2018, these costs were \$90,238,709 and \$81,008,664, respectively. The Company and WHPI also have an intercompany tax sharing arrangement (See Note 9). For 2019 and 2018, the tax related balance due from WHPI under this tax sharing arrangement was \$13,594,923 and \$11,103,294, respectively.

The Company and Wellmark of South Dakota, Inc. (WSD), a wholly owned subsidiary, have an intercorporate service agreement whereby WSD agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2019 and 2018, these costs were \$70,710,181 and \$66,077,823, respectively. The Company and WSD also have an intercompany tax sharing arrangement (See Note 9). For 2019 and 2018, the tax related balance due from WSD under this tax sharing arrangement was \$15,551,593 and \$13,549,520, respectively.

The Company received dividends of \$35,000,000 and \$28,000,000 from WHPI in 2019 and 2018, respectively. The Company also received dividends of \$48,500,000 and \$40,000,000 from WSD in 2019 and 2018, respectively. The dividends reduced the payable to WHPI and WSD and were recorded in net investment income.

D. Amounts Due From or To Related Parties

At December 31, 2019, the Company reported \$37,835,127 as amounts due to subsidiaries and affiliates and \$3,210 as admitted amounts due from subsidiaries and affiliates. At December 31, 2018, the Company reported \$36,131,163 as amounts due to subsidiaries and affiliates and \$33,005 as admitted amounts due from subsidiaries and affiliates. The terms of the agreements require these amounts to be settled within 30 days.

E. Guarantees or Undertakings

Not Applicable

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

The Company has an intercorporate services and investment and management agreement with some of its subsidiaries and affiliates to provide certain management and administrative services.

G. Nature of the Control Relationship

Not Applicable

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

Not Applicable

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

The Company owns a 100% interest in WSD, whose carrying value exceeded 10% of the admitted assets of the Company in both 2019 and 2018. The Company carries WSD at its statutory equity, which was \$300,653,929 and \$283,051,803 as of December 31, 2019 and 2018, respectively. At December 31, 2019, WSD's statutory assets and liabilities were \$507,272,992 and \$206,619,063, respectively. At December 31, 2018, WSD's statutory assets and liabilities were \$472,745,060 and \$189,693,257, respectively. Statutory net income for WSD was \$53,413,288 and \$48,730,108 for the years ended December 31, 2019 and 2018, respectively.

J. Investments in Impaired SCAs

Not Applicable

K. Investment in Foreign Insurance Subsidiary

Not Applicable

L. Investment in Downstream Noninsurance Holding Company

Not Applicable

- M. All SCA Investments
 - (1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

| | Percentage of SCA | | | | | |
|--|-------------------|----|--------------|-----------------|--------------------|-----------|
| SCA Entity | Ownership | | Gross Amount | Admitted Amount | Nonadmitted Amount | |
| a. SSAP No. 97 8a Entities | | | | | | |
| | % | \$ | | \$ | \$ | |
| Total SSAP No. 97 8a Entities | XXX | \$ | | \$ | \$ | |
| b. SSAP No. 97 8b(ii) Entities | | | | | | |
| | % | \$ | | \$ | \$ | |
| Total SSAP No. 97 8b(ii) Entities | XXX | \$ | | \$ | \$ | |
| c. SSAP No. 97 8b(iii) Entities | | | | | | |
| Wellmark Holdings, Inc. | 100.0% | \$ | 57,034 | \$ | \$ | 57,034 |
| First Administrators, Inc. | 100.0% | \$ | 3,493,747 | \$ | \$ | 3,493,747 |
| Midwest Benefit Consultants, Inc. | 100.0% | \$ | 4,463,764 | \$ | \$ | 4,463,764 |
| Total SSAP No. 97 8b(iii) Entities | XXX | \$ | 8,014,545 | \$ | \$ | 8,014,545 |
| d. SSAP No. 97 8b(iv) Entities | | | | | | |
| | % | \$ | | \$ | \$ | |
| Total SSAP No. 97 8b(iv) Entities | XXX | \$ | | \$ | \$ | |
| e. Total SSAP No. 97 8b Entities (except 8b(i) entities) | | | | | | |
| (b + c + d) | XXX | \$ | 8,014,545 | \$ | \$ | 8,014,545 |
| f. Aggregate Total (a + e) | XXX | \$ | 8,014,545 | \$ | \$ | 8,014,545 |

(2) NAIC Filing Response Information

| | | | | | NAIC | |
|--|--------------|------------|----------------|----------|--------------|--------|
| | | | | | Disallowed | |
| | | | | | Entities | |
| | | | | NAIC | Valuation | |
| SCA Entity | | | | Response | Method | |
| (Should be the same entities as | Type of NAIC | • | NAIC Valuation | Received | Resubmission | |
| shown in M(1) above) | Filing* | the NAIC | Amount | Y/N | Required Y/N | Code** |
| a. SSAP No. 97 8a Entities | | | | | | |
| | | | \$ | | | |
| Total SSAP No. 97 8a Entities | XXX | XXX | \$ | XXX | XXX | XXX |
| b. SSAP No. 97 8b(ii) Entities | | | | | | |
| | | | \$ | | | |
| Total SSAP No. 97 8b(ii) Entities | XXX | XXX | \$ | XXX | XXX | XXX |
| c. SSAP No. 97 8b(iii) Entities | | | | | | |
| Wellmark Holdings, Inc. | S1 | 10/25/2016 | \$ | Y | Ν | N/A |
| First Administrators, Inc. | S1 | 10/25/2016 | \$ | Y | Ν | N/A |
| Midwest Benefit Consultants, Inc. | S1 | 10/25/2016 | \$ | Y | N | N/A |
| Total SSAP No. 97 8b(iii) Entities | XXX | XXX | \$ | XXX | XXX | XXX |
| d. SSAP No. 97 8b(iv) Entities | | | | | | |
| | | | \$ | | | |
| Total SSAP No. 97 8b(iv) Entities | XXX | XXX | \$ | XXX | XXX | XXX |
| e. Total SSAP No. 97 8b Entities (except 8b(i) entities) | | | | | | |
| (b + c + d) | XXX | XXX | \$ | XXX | XXX | XXX |
| f. Aggregate Total (a + e) | XXX | XXX | \$ | XXX | XXX | XXX |

* S1 – Sub-1, S2 – Sub-2 or RDF – Resubmission of Disallowed Filing

** I – Immaterial or M – Material

The Company is exempt from a Sub-2 filing for its SSAP 97 8b(iii) subsidiaries because they are fully nonadmitted.
O. SCA or SSAP 48 Entity Loss Tracking

Not Applicable

Note 11 – Debt

Not Applicable

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

A. Defined Benefit Plan

The Company sponsors a pension program covering substantially all employees of the Company and its subsidiaries. The pension program contains both a defined benefit and cash balance plan available to eligible employees depending on the date of hire. The defined benefit pension plan benefits are based on years of service and the employee's highest five consecutive years' compensation in the last ten years of service. Under the cash balance plan employees earn annual credits based on a percentage of salary which are accumulated in an account that earns interest annually. The pension plan assets are held in the Non-Contributory Retirement Program for Certain Employees of Wellmark, Inc. Trust (Trust) with Prudential Bank & Trust, F.S.B. as the trustee. The recordkeeping responsibilities are performed by Prudential Retirement Insurance and Annuity Company (Prudential). The funding policy is to contribute amounts to the plan sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security Act of 1974 and the Pension Protection Act of 1996, plus additional amounts as determined to be appropriate from time to time.

The Company also sponsors a postretirement health care benefit program. The program has two separate benefit plan calculations available to employees depending on the date of hire. One plan contributes toward the cost of health care premiums based on years of service and is available to employees who retire from the Company who have at least ten years of service and have attained age 65 while in service to the Company. This plan also includes a life insurance benefit based on the employee's annual salary at retirement and is available to employees who retire from the Company who have at least five years of service and have attained age 55 while in service to the Company. The second plan option allows employees to accumulate annual credits in an account that earns interest annually and can be used to pay for health care premiums when the employee becomes Medicare eligible. The Company has not funded either the postretirement health care or life insurance plans, but intends to meet the obligations of the plans through general assets of the Company.

A summary of assets, obligations and assumptions of the Pension and Other Postretirement Benefit Plans are as follows at December 31, 2019 and 2018:

(1) Change in Benefit Obligation

| | | | Overfunded | | | | Underfunded | 1 | |
|----|------|---|-------------------|----|--------------|----|-------------|----|-------------|
| | | | 2019 | | 2018 | | 2019 | | 2018 |
| a. | Pen | sion Benefits | | | | | | | |
| | 1. | Benefit obligation at beginning of year | \$ 299,079,086 | \$ | 320,505,868 | \$ | | \$ | |
| | 2. | Service cost | 9,793,718 | | 11,062,696 | | | | |
| | 3. | Interest cost | 12,963,176 | | 11,795,259 | | | | |
| | 4. | Contribution by plan participants | ,, - | | , , | | | | |
| | 5. | Actuarial gain (loss) | 49,715,248 | | (21,415,072) | | | | |
| | 6. | Foreign currency exchange rate changes | , , | | | | | | |
| | 7. | Benefits paid | 20,267,975 | | 22,869,665 | | | | |
| | 8. | Plan amendments | | | | | | | |
| | 9. | Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | |
| | 10. | Benefit obligation at end of year | \$ 351,283,253 | \$ | 299,079,086 | \$ | | \$ | |
| | | | Overfunded | | , , | İ | Underfunded | 1 | |
| b. | Post | tretirement Benefits | 2019 | | 2018 | | 2019 | | 2018 |
| | 1. | Benefit obligation at beginning of year | \$ | \$ | | \$ | 34,696,477 | \$ | 36,173,351 |
| | 2. | Service cost | | | | | 1,352,760 | | 1,563,863 |
| | 3. | Interest cost | | | | | 1,428,025 | | 1,301,655 |
| | 4. | Contribution by plan participants | | | | | | | |
| | 5. | Actuarial gain (loss) | | | | | 2,336,107 | | (3,109,194) |
| | 6. | Foreign currency exchange rate changes | | | | | | | |
| | 7. | Benefits paid | | | | | 1,193,698 | | 1,233,198 |
| | 8. | Plan amendments | | | | | | | |
| | 9. | Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | |
| | 10. | Benefit obligation at end of year | \$ | \$ | | \$ | 38,619,671 | \$ | 34,696,477 |
| | | | Overfunded | | | | Underfunded | 1 | |
| C. | Spe | cial or Contractual Benefits per SSAP No. 11 | 2019 | | 2018 | | 2019 | | 2018 |
| | 1. | Benefit obligation at beginning of year | \$ | \$ | | \$ | 9,350,534 | \$ | 8,440,445 |
| | 2. | Service cost | | | | | 18,950,901 | | 21,188,428 |
| _ | 3. | Interest cost | | | | | | | |
| _ | 4. | Contribution by plan participants | | | | | | | |
| | 5. | Actuarial gain (loss) | | | | | | | |
| | 6. | Foreign currency exchange rate changes | | | - | | | | |
| | 7. | Benefits paid | | | | | 18,524,760 | | 20,278,339 |
| | 8. | Plan amendments | | | | | | | |
| | 9 | Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | |
| | 10. | Benefit obligation at end of year | \$ | \$ | | \$ | 9,776,675 | \$ | 9,350,534 |

(2) Change in Plan Assets

| | | Pension Benefits | | | Postretireme | nt Bene | fits | Special or Contractual Benefits per SSAP No. 11 | | |
|----|---|-------------------|----|--------------|--------------|---------|------|--|------|--|
| | | 2019 | | 2018 | 2019 | | 2018 | 2019 | 2018 | |
| a. | Fair value of plan assets at | | | | | | | | | |
| | beginning of year | \$ 324,167,802 | \$ | 302,978,428 | \$ | \$ | | \$ | \$ | |
| b. | Actual return on plan assets | 58,559,715 | | (15,940,961) | | | | | | |
| C. | Foreign currency exchange | | | | | | | | | |
| | rate changes | | | | | | | | | |
| d. | Reporting entity contribution | | | 60,000,000 | | | | | | |
| e. | Plan participants' contributions | | | | | | | | | |
| f. | Benefits paid | 20,267,975 | | 22,869,665 | | | | | | |
| g. | Business combinations, divestitures and settlements | | | | | | | | | |
| h. | Fair value of plan assets at end | | | | | | | | | |
| | of year | \$ 362,459,542 | \$ | 324,167,802 | \$ | \$ | | \$ | \$ | |

(3) Funded Status

| | | | | Pension Benefits | | | | Postretirement Benefits | | | |
|----|-----|--------------------------------|----|------------------|----|---------------|----|-------------------------|----|------------|--|
| | | | | 2019 | | 2018 | | 2019 | | 2018 | |
| a. | Cor | nponents | - | | | | | | | | |
| | 1. | Prepaid benefit costs | \$ | 132,170,033 | \$ | 145,976,908 | \$ | | \$ | | |
| | 2. | Overfunded plans assets | \$ | (120,993,744) | \$ | (120,888,192) | \$ | | \$ | | |
| | 3. | Accrued benefit costs | \$ | · · · | \$ | · · · | \$ | 36,551,642 | \$ | 34,406,379 | |
| | 4. | Liability for pension benefits | \$ | | \$ | | \$ | 2,068,029 | \$ | 290,098 | |
| b. | Ass | ets and liabilities recognized | - | | | | | | | | |
| | 1. | Assets (nonadmitted) | \$ | 11,176,289 | \$ | 25,088,716 | \$ | | \$ | | |
| | 2. | Liabilities recognized | \$ | | \$ | | \$ | 38,619,671 | \$ | 34,696,477 | |
| C. | Unr | ecognized liabilities | \$ | | \$ | | \$ | | \$ | | |

(4) Components of Net Periodic Benefit Cost

| | | | | | | | | Special or | Coi | ntractual |
|----|---|------------------|-------|--------------|-----------------|----|-----------|------------------|-----|------------|
| | | Pension | Benef | its | Postretirement | B | enefits | Benefits per | SS | AP No. 11 |
| | | 2019 | | 2018 | 2019 | | 2018 | 2019 | | 2018 |
| a. | Service cost | \$ 9,793,718 | \$ | 11,062,696 | \$ 1,352,760 | \$ | 1,563,863 | \$ 18,950,901 | \$ | 21,188,428 |
| b. | Interest cost | 12,963,176 | | 11,795,259 | 1,428,025 | | 1,301,655 | | | |
| C. | Expected return on plan assets | (20,205,472) | | (22,360,397) | | | | | | |
| d. | Transition asset or obligation | | | | | | | | | |
| e. | Gains and losses | 11,152,980 | | 9,942,007 | (10,884) | | | | | |
| f. | Prior service cost or credit | 102,473 | | 201,387 | 569,060 | | 569,060 | | | |
| g. | Gain or loss recognized due to a settlement curtailment | | | | | | | | | |
| h. | Total net periodic benefit cost | \$ 13,806,875 | \$ | 10,640,952 | \$ 3,338,961 | \$ | 3,434,578 | \$ 18,950,901 | \$ | 21,188,428 |

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Periodic Benefit Cost

| | | Pension | Bene | efits | Postretirement | Benefi | ts |
|----|---|-------------------|------|-------------|----------------|--------|------------|
| | | 2019 | | 2018 | 2019 | | 2018 |
| a. | Items not yet recognized as a component of net periodic cost – prior year | \$ 120,888,192 | \$ | 114,145,300 | \$ 290,098 | \$ | 3,968,352 |
| b. | Net transition asset or obligation recognized | | | | | | |
| C. | Net prior service cost or credit arising during the period | | | | | | |
| d. | Net prior service cost or credit recognized | (102,473) | | (201,387) | (569,060) | | (569,060 |
| e. | Net gain and loss arising during the period | 11,361,005 | | 16,886,286 | 2,336,107 | | (3,109,194 |
| f. | Net gain and loss recognized | (11,152,980) | | (9,942,007) | 10,884 | | |
| g. | Items not yet recognized as a component of net periodic cost – current period | \$ 120,993,744 | \$ | 120,888,192 | \$ 2,068,029 | \$ | 290,098 |

(6) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been Recognized as Components of Net Periodic Benefit Cost

| | | Pension Benefits | | | | Postretirement Benefits | | | |
|----|------------------------------------|-------------------|----|-------------|----|-------------------------|----|-------------|--|
| | | 2019 | | 2018 | | 2019 | | 2018 | |
| a. | Net transition asset or obligation | \$ | \$ | | \$ | | \$ | | |
| b. | Net prior service cost or credit | \$ 495,918 | \$ | 598,391 | \$ | 2,598,549 | \$ | 3,167,609 | |
| C. | Net recognized gains and losses | \$ 120,497,826 | \$ | 120,289,801 | \$ | (530,520) | \$ | (2,877,511) | |

(7) Weighted-Average Assumptions Used to Determine Net Periodic Benefit Cost as of December 31

Pension Benefits

| | 2019 | 2018 |
|--|--------------|--------------|
| a. Weighted-average discount rate | 4.5% | 3.8% |
| Expected long-term rate of return on plan assets | 6.5% | 6.5% |
| c. Rate of compensation increase | 3.50 - 8.00% | 3.50 - 8.00% |
| Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | 3.30 - 3.75% | 2.80 - 3.75% |
| Weighted-average assumptions used to determine projected benefit obligations as of December 31 | | |
| e. Weighted-average discount rate | 3.4% | 4.5% |
| f. Rate of compensation increase | 3.50 - 8.00% | 3.50 - 8.00% |
| Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | 2.25 - 3.00% | 3.30 - 3.75% |

Postretirement Benefits

| | | 2019 | 2018 |
|-----|--|------------|------------|
| a. | Weighted-average discount rate | 4.3% | 3.7% |
| b. | Expected long-term rate of return on plan assets | N/A | N/A |
| C. | Rate of compensation increase | 3.5 - 8.0% | 3.5 - 8.0% |
| d. | Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | N/A | N/A |
| Wei | ghted-average assumptions used to determine projected benefit obligations as of December 31 | | |
| e. | Weighted-average discount rate | 3.2% | 4.3% |
| f. | Rate of compensation increase | 3.5 - 8.0% | 3.5 - 8.0% |
| g. | Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | N/A | N/A |

(8) Accumulated Benefit Obligation for Defined Benefit Pension Plans

The amount of the accumulated benefit obligation for the defined benefit pension plan was \$301,265,632 for the current year and \$256,598,329 for the prior year.

(9) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)

For postretirement benefits other than pensions, for measurement purposes, 8.00% (pre-65) and 8.25% (post-65) annual rates of increase in the per capita cost of covered health care benefits were assumed for 2019. These rates grade down annually to 4.75% for 2028 and beyond.

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the year indicated:

Pension Benefits

| | Year(s) | An | nount |
|----|-------------------|----|-------------|
| a. | 2020 | \$ | 26,196,000 |
| b. | 2021 | \$ | 25,999,000 |
| C. | 2022 | \$ | 25,365,000 |
| d. | 2023 | \$ | 25,218,000 |
| e. | 2024 | \$ | 25,560,000 |
| f. | 2025 through 2029 | \$ | 123,724,000 |

Postretirement Benefits

| | Year(s) | Amount |
|----|-------------------|------------------|
| a. | 2020 | \$ 1,987,000 |
| b. | 2021 | \$ 2,126,000 |
| С. | 2022 | \$ 2,122,000 |
| d. | 2023 | \$ 2,202,000 |
| e. | 2024 | \$ 2,335,000 |
| f. | 2025 through 2029 | \$ 12,793,000 |

(11) Estimate of Contributions Expected to be Paid to the Plan

The Company does not have any regulatory contribution requirements for 2020. In addition, there are no current plans for the Company to make voluntary contributions to the defined benefit pension plan in 2020.

(12) Amounts and Types of Securities Included in Plan Assets

Not Applicable

(13) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses

Not Applicable

(14) Substantive Comment Used to Account for Benefit Obligation

Not Applicable

(15) Cost of Providing Special or Contractual Termination Benefits Recognized

(16) Reasons for Significant Gains/Losses Related to Changes in Defined Benefit Obligation and any Other Significant Change in the Benefit Obligations or Plan Assets Not Otherwise Apparent

No Significant Changes

(17) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans

The Company contributed \$60,000,000 to the pension plan in 2018, resulting in the pension plan being in an overfunded status at December 31, 2019 and 2018. As required by SSAP 102, overfunded plan assets are nonadmitted. The Company has not funded either the postretirement health care or life insurance plans. The impact to surplus to recognize the unfunded status of the Other Postretirement Benefit Plans was \$2,068,029 and \$290,098 at December 31, 2019 and 2018, respectively.

(18) Full Transition Surplus Impact of SSAP 102

Not Applicable

B. Investment Policies and Strategies

3.

The Company's pension plan assets are invested in the Trust. The investment program for the Trust is based on the precepts of capital market theory that are generally accepted and followed by institutional investors, who by definition are long-term oriented investors. This philosophy holds that:

- 1. Increasing risk is rewarded with compensating returns over time and therefore, prudent risk taking is justifiable for long term investors.
- 2. Risk can be controlled through diversification of asset classes and investment approaches as well as diversification of individual securities.
- 3. Risk is reduced by time, and over time the relative performance of different asset classes is reasonably consistent. Over the long-term, equity investments have provided and should continue to provide superior returns over other security types. Fixed-income securities can dampen volatility and provide liquidity in periods of depressed economic activity. Lengthening duration of fixed income securities may reduce surplus volatility.
 - 4. The strategic or long-term allocation of assets among various asset classes is an important driver of long term returns.
 - 5. Relative performance of various asset classes is unpredictable in the short-term and attempts to shift tactically between asset classes are unlikely to be rewarded.

Investments will be made for the sole interest of the participants of the pension plan participating in the Trust. Accordingly, the assets of the Trust shall be invested in accordance with these objectives:

- 1. To seek and maintain an adequate funded status with regard to current liabilities within a targeted range.
- 2. To manage overall costs of running the pension plan at levels favorable to industry benchmarks.
- 3. To ensure assets are available to meet current and future benefit and expense obligations when due.

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

| Description for each class of plan assets | (1 | Level 1) | (Level 2) | (Level 3) | Total |
|---|----|------------|-------------------|-----------|-------------------|
| Common/collective trusts | \$ | | \$ | \$ | \$ |
| Equity accounts | \$ | | \$ 118,106,746 | \$ | \$ 118,106,746 |
| Fixed account | \$ | | \$ 14,546,067 | \$ | \$ 14,546,067 |
| Pooled seperate accounts | \$ | | \$ | \$ | \$ |
| Fixed income account | \$ | | \$ 68,847,583 | \$ | \$ 68,847,583 |
| Short-term account | \$ | | \$ 1,833,473 | \$ | \$ 1,833,473 |
| Mutual funds | \$ | | \$ | \$ | \$ |
| Equity funds | \$ | 46,282,646 | \$ | \$ | \$ 46,282,646 |
| Fixed funds | \$ | 14,155,531 | \$ | \$ | \$ 14,155,531 |
| Total Plan Assets | \$ | 60,438,177 | \$ 203,333,869 | \$ | \$ 263,772,046 |

Pension plan assets also include \$83,064,960 of hedge funds where fair value is measured at net asset value per share as a practical expedient and \$15,622,536 of limited partnerships which are accounted for under the equity method.

(2) Valuation Technique(s) and Inputs Used to Measure Fair Value

Generally Level 1 financial instruments consist of U.S. domestic equity securities and mutual funds that are actively traded and have quoted prices available. Mutual funds are valued at the Net Asset Value (NAV) of shares held based on the latest quoted market price. Financial instruments included in Level 2 consist of common/collective trusts and pooled separate accounts that have direct or indirect price inputs that are observable in active markets or are measured at NAV. The fair value of the hedge funds is estimated using NAV as a practical expedient. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Limited partnership investments are initially recorded at cost. The carrying amounts are then increased or decreased to reflect the Company's share of the income or loss. Quoted market prices do not exist for the limited partnerships. The underlying net assets within each limited partnership are estimated at NAV as a practical expedient using the equity method.

The Company obtains prices and/or relevant inputs to fair value calculations from external investment managers or from the custodian of the pension assets, which uses a third party pricing service. For securities not actively traded, the investment manager and/or pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes. Additionally, for investments that do not have quoted market prices whereby fair value is measured using NAV per share as a practical expedient, inputs used in the valuation methodologies also include redemption frequency and redemption notice periods, to give consideration to liquidity constraints, if applicable.

D. Basis Used to Determine Expected Long-Term Rate-of-Return

The basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the Trust invests in and the Trust's target asset allocation.

The assumed target asset allocation for the program is as follows: 43% equity securities, 27% fixed income, 23% hedge funds, 6% private equity, and 1% cash and cash equivalents. Portfolio expectations were estimated through a combination of underlying asset assumptions including geometric returns, distributions, and correlations. Using these assumptions over a 20 year time horizon under the target asset allocation, 25th to 75th percentile range of annual rates of return is 5.6% - 7.2%.

The Company selected the expected return on asset assumption of 6.25% for 2019. This rate is net of both investment and other administrative expenses charged to the Trust.

E. Defined Contribution Plans

The Company sponsors a defined contribution plan, which is qualified under Section 401(k) of the Internal Revenue Code. The plan covers substantially all employees of the Company and subsidiaries. Employees can contribute up to 80% of their annual salary (up to the elective deferral limits set by the Commissioner of Internal Revenue) to the plan. The Company will contribute an amount equal to 100% of the first 4% of salary contributed by the employee. The plan also provides for additional employer contributions at the discretion of the Board of Directors. The Company's contribution for this plan was \$3,665,588 and \$3,639,574 for 2019 and 2018, respectively.

F. Multiemployer Plans

Not Applicable

G. Consolidated/Holding Company Plans

The Company is the plan sponsor of a pension program and a postretirement health and life benefit program which cover substantially all employees of the consolidated group.

H. Postemployment Benefits and Compensated Absences

Not Applicable

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

The Company plans to return any subsidy received to retirees in the form of higher postretirement welfare benefits. Therefore, the effects of the subsidy are not reflected in the measurement of the accumulated postretirement benefit obligation or the net periodic benefit cost.

Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

(1) Number of Shares and Par or Stated Value of Each Class

Not Applicable

(2) Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not Applicable

(3) Dividend Restrictions

Not Applicable

(4) Dates and Amounts of Dividends Paid

Not Applicable

(5) Profits that may be Paid as Ordinary Dividends to Stockholders

Not Applicable

(6) Restrictions Placed on Unassigned Funds (Surplus)

Not Applicable

(7) Amount of Advances to Surplus not Repaid

Not Applicable

(8) Amount of Stock Held for Special Purposes

Not Applicable

(9) Reasons for Changes in Balance of Special Surplus Funds from Prior Period

The balance in special surplus funds for the current year is due to the reclassification from unassigned surplus to special surplus funds, as required under SSAP 106, for the amount the Company anticipates it will pay for the 2020 health insurance provider fee. Nothing was reclassified from unassigned surplus to special surplus in the prior year due to the suspension of the fee for 2019.

(10) The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$596,919,224.

- (11) The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations
 - Not Applicable
- (12) The Impact of any Restatement Due to Prior Quasi-Reorganizations
 - Not Applicable
- (13) Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization

Not Applicable

Note 14 - Liabilities, Contingencies and Assessments

- A. Contingent Commitments
 - (1) The Company is required by licensure requirements of the Blue Cross Blue Shield Association (BCBSA) to execute parental guarantees for its licensed controlled affiliates, pursuant to which the Company guarantees to the full extent of its assets all contractual and financial obligations of WHPI, WSD, FAI, WSH and WVHP to their respective customers. Also, the Company, as the parent of WHPI is required by the Iowa Insurance Division to guarantee the obligations of WHPI to pay for services to enrollees up to \$1,100,000.

Through parental guarantees executed between the Company and its joint venture companies WSH and WVHP, the Company guarantees that WSH and WVHP are in compliance with the Iowa statutory minimum for HMO capital and surplus of \$1,000,000 or the statutory minimum for risk-based capital for health organizations, whichever is greater.

(2) Detail of Other Contingent Commitments

Not Applicable

(3) Guarantee Obligations

Not Applicable

B. Assessments

(1) Assessments Where Amount is Known or Unknown

The Company is subject to health related assessments by the Iowa Comprehensive Health Association and the Iowa Individual Health Benefit Reinsurance Association for high risk insurance pools. The Company accrued net admitted receivables of \$2,950,000 for estimated health related assessments to be returned to the Company at December 31, 2019.

The National Organization of Life & Health Insurance Guaranty Associations (NOLHGA) is an association consisting of the state life and health insurance guaranty organizations, working with NOLHGA, provide a safety net for their state's policyholders, ensuring that they continue to receive coverage even if their insurer is declared insolvent. On March 1, 2017, the Pennsylvania Insurance Commissioner filed an order to place long-term care insurance carrier Penn Treaty Network America Insurance Company and its subsidiary American Network Insurance Company, or collectively Penn Treaty, into liquidation. The Company and other insurers are required to pay a portion of their policyholder claims through state guaranty association assessments.

The Company's guaranty fund payable is \$6,284,360 and \$14,326,052 as of December 31, 2019 and 2018, respectively. The assessment will be recoverable through premium tax offsets.

(2) Assessments

Reconciliation of assets recognized from paid and accrued premium tax offsets and policy surcharges related to the Penn Treaty assessment:

| a. | Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end | \$ 23,270,000 |
|----|--|------------------|
| b. | Decreases current year: | |
| | Amortization of Prepaid Tax Asset | 1,051,606 |
| C. | Increases current year: | |
| | | |
| d. | Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end | \$ 22,218,394 |

(3) Guaranty Fund Liabilities and Assets Related to Assessments from Insolvencies for Long-Term Care Contracts

a. Discount rate applied for guaranty fund liability

Discount rate applied for related asset

b. The undiscounted and discounted amount of the guaranty fund assessments and related assets by insolvency:

| | | Guaranty Fund Assessment | | | | Related Assets | | | | |
|---|---------------------|--------------------------|----|------------|--------------|----------------|----|------------|--|--|
| Name of the Insolvency | Undiscounted Discou | | | Discounted | Undiscounted | | | Discounted | | |
| Penn Treaty Network America Insurance Company | \$ | 32,764,360 | \$ | 6,284,360 | \$ | 24,718,394 | \$ | 22,218,394 | | |

3.9%

3.5%

c. Number of jurisdictions, ranges of years used to discount and weighted average number of years of the discounting time period for payables and recoverables by insolvency:

| | | Payables | | Recoverables | | | | | |
|-----------------------------|----------------------------|-------------------|---|----------------------------|-------------------|---|--|--|--|
| Name of the Insolvency | Number of Jurisdictions | Range of Years | Weighted Average Number of Years | Number of Jurisdictions | Range of Years | Weighted Average Number of Years | | | |
| Penn Treaty Network America | | | | | | | | | |
| Insurance Company | 1 | 1 - 26 | 11 | 1 | 1 - 5 | 2 | | | |

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

The Company contracts with an unaffiliated company to handle data processing needs. Charges to the Company, after allocation of a portion of the costs to subsidiaries and affiliates, amounted to approximately \$7,040,000 in 2019. Future minimum payments through December 31, 2025, expiration date of the contract, total approximately \$20,520,000. In addition, such payments are subject to annual adjustments based upon policyholder count and other volume factors. The Company also contracts with another unaffiliated company for products and services. Charges to the Company, after allocation of a portion of the costs to subsidiaries and affiliates, amounted to approximately \$8,272,000 in 2019. Future minimum payments through December 31, 2032, the expiration date of this contract, total approximately \$101,738,000 for this contract.

The Company has agreements with various vendors for services and equipment in connection with the Company's disaster recovery site. Future minimum payments through October 23, 2022, expiration date of the longest agreement, total approximately \$2,058,000. Certain agreements have renewal options extending to the year 2032.

The Company along with the BCBSA and Blue Cross and/or Blue Shield licensees, or Blue Plans across the country, is a defendant in a single multi-district, consolidated lawsuit In re Blue Cross Blue Shield Antitrust Litigation that is pending in the United States District Court for the Northern District of Alabama. Generally, the litigation alleges that the BCBSA and Blue Plans have engaged in activities in violation of the Sherman Antitrust Act and related state laws through license agreements, best efforts rules that limit the percentage of non-Blue revenue of each plan, restrictions on acquisitions and other arrangements. The cases were brought by two putative nationwide classes of plaintiffs, health plan subscribers and providers. The case has been stayed while settlement negotiations are continuing. While a settlement has not yet been reached, the Company has made adequate provision for a settlement estimate. The ultimate outcome of settlement negotiations cannot be determined at this time.

In the ordinary course of business, the Company is involved in and subject to claims, contractual disputes and other uncertainties, which the Company defends vigorously. While the ultimate outcome of any other claims cannot be presently determined, in the opinion of management, adequate provision has been made for any potential losses which may result from these actions and the Company expects any liability that could result will not materially affect its financial position.

Note 15 – Leases

- A. Lessee Operating Lease
 - (1) Lessee's Leasing Arrangements
 - a. Rental Expense

The Company leases office space, parking facilities and equipment under various noncancelable operating lease agreements that expire through April 2024. Rental expense associated with these lease arrangements was approximately \$712,000 and \$468,000 for 2019 and 2018, respectively.

b. Basis on Which Contingent Rental Payments are Determined

Not Applicable

c. Existence and Terms of Renewal or Purchase Options and Escalation Clauses

Certain rental commitments have renewal options extending through the year 2033. Some of these renewals are subject to adjustments in future periods.

d. Restrictions Imposed by Lease Agreements

Not Applicable

e. Identification of Lease Agreements that have been Terminated Early

- (2) Leases with Initial or Remaining Noncancelable Lease Terms in Excess of One Year
 - a. At December 31, 2019 the minimum aggregate rental commitments are as follows:

| Yea | r Ending December 31 | Operating Leases |
|-----|----------------------|------------------|
| 1. | 2020 | \$ 700,608 |
| 2. | 2021 | \$ 669,024 |
| 3. | 2022 | \$ 574,793 |
| 4. | 2023 | \$ 531,863 |
| 5. | 2024 | \$ 49,222 |
| 6. | Total | \$ 2,525,510 |

Total of Minimum Rentals to be Received in the Future under Noncancelable Subleases b.

Not Applicable

(3) For Sale-Leaseback Transactions

Not Applicable

B. Lessor Leases

Not Applicable

Note 16 - Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

Not Applicable

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not Applicable

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

A ASO Plans

Not Applicable

Β. ASC Plans

> The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2019:

| | | ASC Uninsured Plans | Uninsured Portion of Partially Insured Plans | Total ASC |
|----|--|------------------------|---|---------------------|
| a. | Gross reimbursement for medical cost incurred | \$ 1,484,968,996 | \$ 1,475,106,794 | \$ 2,960,075,790 |
| b. | Gross administrative fees accrued | 46,115,010 | 86,477,128 | 132,592,138 |
| C. | Other income or expenses (including interest paid to or received from plans) | | | |
| d. | Gross expenses incurred (claims and administrative) | 1,554,162,009 | 1,578,399,154 | 3,132,561,163 |
| e. | Total net gain or loss from operations | \$ (23,078,003) | \$ (16,815,232) | \$ (39,893,235) |

C.

Medicare or Similarly Structured Cost Based Reimbursement Contract

Reimbursements from Centers for Medicare and Medicaid Services (CMS) for the Company's participation in the Medicare Part D program for the year ended December 31, 2019 were \$54,074,499. This amount represents pharmacy benefit cost reimbursements for the Reinsurance Subsidy and Low-Income Cost Sharing Subsidy elements of the Medicare Part D program.

At December 31, 2019, the Company has a receivable of \$1,335,231 from CMS for these reimbursements and has recorded a payable of \$4,078,208 for pre-funded amounts received from CMS not applied to benefit payments.

During the year, the Company returned a net amount of \$1,974,648 for prior year pre-funded amounts received from CMS not applied to benefit payments.

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

Note 20 – Fair Value Measurements

- A. Fair Value Measurements
 - (1) Fair Value Measurements at Reporting Date

| | | | | Net Asset Value | |
|---|-------------------|------------------|-----------------|-----------------|-------------------|
| Description for Each Type of Asset or Liability | (Level 1) | (Level 2) | (Level 3) | (NAV) | Total |
| Assets at Fair Value | | | | | |
| Cash Equivalents | \$ | \$ | \$ | \$ | \$ |
| Exempt MM Mutual Fund | \$ 23,896,085 | \$ | \$ | \$ | \$ 23,896,085 |
| Sweep Account | \$ | \$ 60,533,926 | \$ | \$ | \$ 60,533,926 |
| Bonds | \$ | \$ | \$ | \$ | \$ |
| Industrial & Miscellaneous | \$ | \$ 16,738,029 | \$ | \$ | \$ 16,738,029 |
| Bank Loans Unaffiliated | \$ | \$ 2,635,477 | \$ | \$ | \$ 2,635,477 |
| Preferred Stock | \$ | \$ | \$ | \$ | \$ |
| Industrial & Miscellaneous | \$ 1,631,286 | \$ | \$ | \$ | \$ 1,631,286 |
| Common Stock | \$ | \$ | \$ | \$ | \$ |
| Industrial & Miscellaneous | \$ 442,679,368 | \$ | \$ 2,811,894 | \$ | \$ 445,491,262 |
| Mutual Funds | \$ 98,167,314 | \$ | \$ | \$ | \$ 98,167,314 |
| Total | \$ 566,374,053 | \$ 79,907,432 | \$ 2,811,894 | \$ | \$ 649,093,379 |

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

| Description a. Assets | Beginning Balance at 1/1/2019 | Transfers Into Level 3 | Transfers Out of Level 3 | Total Gains and (Losses) Included in Net Income | Total Gains and (Losses) Included in Surplus | Purchases | Issuances | Sales | Settle- ments | Ending Balance at 12/31/2019 |
|--|-------------------------------------|---------------------------|-----------------------------|--|---|-----------|-----------|---------|------------------|---------------------------------|
| Common Stock - Industrial & Miscellaneous | \$ 4.355.435 | \$ | \$ (152,000) | \$ (704,986) | \$ (686,541) | \$ | \$ | \$ (14) | \$ | \$ 2,811,894 |
| Total | \$ 4,355,435 | \$ | \$ (152,000) | \$ (704,986) | \$ (686,541) | \$ | \$ | \$ (14) | \$ | \$ 2,811,894 |

The amount reported as a Transfer Out of Level 3 has been nonadmitted during the reporting period.

(3) Policies when Transfers Between Levels are Recognized

The Company recognizes transfers between fair value hierarchy levels at the end of the reporting period.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

Bonds, structured securities, and surplus notes (other invested assets) are reported within Level 2 of the fair value hierarchy; all of these securities have direct or indirect price inputs that are observable in active markets. Fair values of these fixed income instruments are based on quoted market prices where available. The Company obtains at least one price from a third party pricing service or its custodian, which also uses a pricing service. In most instances, the Company obtains more than one price and evaluates between the pricing sources for any outliers or stale prices. Assuming prices are not stale and are reasonable between sources, the Company uses a pre-established hierarchy to conclude on which pricing source to utilize.

The pricing services normally derive security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes.

Level 3 financial instruments include privately held stocks whose fair values have been determined analytically by the NAIC Securities Valuation Office or estimated by management utilizing information provided by the respective companies who have issued the stock in the absence of readily ascertainable fair market values.

(5) Fair Value Disclosures

Not Applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Statutory guidance requires the disclosure of fair values for certain other financial instruments for which it is practicable to estimate fair value, whether or not such values are recognized in the statements of assets, liabilities, capital and surplus. The carrying amounts for cash, receivable for securities, accrued investment income, premium receivables, other receivables, amounts due to/from affiliates, unearned premiums, accounts payable and accrued expenses, and certain other liabilities approximate fair value because of the short-term nature of these items.

C. Fair Value Level

| | Aggregate Fair | | | | | Net Asset Value | Not Practicable |
|------------------------------|----------------|-----------------|----------------|----------------|--------------|-----------------|------------------|
| Type of Financial Instrument | Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | (NAV) | (Carrying Value) |
| Cash Equivalents | \$ 87,753,594 | \$ 87,753,643 | \$ 23,896,085 | \$ 63,857,509 | \$ | \$ | \$ |
| Short-Term Investments | \$ 7,386,940 | \$ 7,386,854 | \$ | \$ 7,386,940 | \$ | \$ | \$ |
| Bonds | \$ 935,662,228 | \$ 895,699,597 | \$ | \$ 935,662,228 | \$ | \$ | \$ |
| Preferred Stock | \$ 1,631,286 | \$ 1,631,286 | \$ 1,631,286 | \$ | \$ | \$ | \$ |
| Common Stock | \$ 543,658,576 | \$ 543,658,576 | \$ 540,846,682 | \$ | \$ 2,811,894 | \$ | \$ |
| Other Invested Assets | \$ 922,964 | \$ 619,592 | \$ | \$ 922,964 | \$ | \$ | \$ |

D. Not Practicable to Estimate Fair Value

- E. NAV Practical Expedient Investments
 - Not Applicable
- Note 21 Other Items
- A. Unusual or Infrequent Items

Not Applicable

B. Troubled Debt Restructuring Debtors

Not Applicable

C. Other Disclosures

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) Description of the Subprime-Mortgage-Related Risk Exposure and Related Risk Management Practices

The Company's investment policy, approved by the Board of Directors, requires the use of high quality fixed income investments to cover its contractual liabilities. The investment policy requires that the Company's fixed income portfolio, excluding non-agency mortgage-backed securities, have a minimum average quality rating of BBB+ and the total of below investment grade securities, excluding non-agency mortgage-backed securities, is limited to 10% of the total portfolio. Further, no single issue, with the exception of US Government and Agency securities, can exceed 5% of an external investment manager's portfolio at time of purchase. The Company allows certain external investment managers to purchase non-agency mortgage-backed securities, and credit quality of those securities is at manager discretion with NAIC designation 1 or 2 preferred. The Company utilizes its strategic and tactical asset allocation to manage risk exposure, through allocations to various external investment managers with varying mandates.

The Company's exposure to subprime mortgages at December 31, 2019 is 1.8% of its total portfolio. The Company is receiving principal and interest payments on the subprime mortgage securities, and the Company does not require sale of these types of assets to meet future cash flow requirements. These securities are in gross unrealized gain and loss positions of \$3,988,768 and \$91,288, respectively, as of December 31, 2019. While no single definition exists for subprime, these securities are considered higher risk and carry higher than prime rates of interest. In addition to the interest rates, the Company considers the FICO scores below 660, level of documentation, evidence of delinquency, foreclosure, judgments or bankruptcy and other factors that limit the borrower's ability to service the debt when determining if a security should be classified as subprime.

(2) Direct Exposure Through Investments in Subprime Mortgage Loans

Not Applicable

(3) Direct Exposure Through Other Investments

| | | Actual Cost | Book/Adjusted Carrying Value (Excluding Interest) | Fair Value | Other-Than-Temporary Impairment Losses Recognized |
|----|--|---------------|---|---------------|---|
| a. | Residential mortgage-backed securities | \$ 38,538,906 | \$ 41,451,774 | \$ 45,358,287 | \$ |
| b. | Commercial mortgage-backed securities | | | | |
| C. | Collateralized debt obligations | | | | |
| d. | Structured securities | 837,546 | 825,548 | 827,151 | |
| e. | Equity investments in SCAs* | | | | |
| f. | Other assets | | | | |
| g. | Total | \$ 39,376,452 | \$ 42,277,322 | \$ 46,185,438 | \$ |

* These investments comprise % of the company's invested assets.

(4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

Not Applicable

G. Retained Assets

Not Applicable

H. Insurance-Linked Securities (ILS) Contracts

Not Applicable

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

Note 22 - Events Subsequent

Type I - Recognized Subsequent Events:

Subsequent events have been considered through February 17, 2020 for the statutory statement issued on February 28, 2020.

Type II - Nonrecognized Subsequent Events:

Subsequent events have been considered through February 17, 2020 for the statutory statement issued on February 28, 2020.

On January 1, 2020, the Company will be subject to an annual fee under section 9010 of the federal Affordable Care Act (ACA). This annual fee is allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for the calendar year beginning on or after January 1 of the year the fee is due. As of December 31, 2019, the Company has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2020, and estimates its portion of the health insurance industry fee payable on September 30, 2020 to be \$44,511,000. This amount is reflected in special surplus in 2019. The assessment is expected to impact risk based capital (RBC) by a decrease of approximately 25 points. Reporting the ACA assessment as of December 31, 2019 would not have triggered an RBC action level.

The annual health insurance fee was suspended for 2019 under the H.R. 195 Legislation signed by President Trump on January 22, 2018. Due to the suspension of the fee for 2019, no amount was reclassified from unassigned surplus to special surplus in 2018; no premiums written in 2018 were subject to the ACA section 9010 assessment, and no ACA assessment was paid in 2019.

A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010

| 7. | of the Federal Affordable Care Act (YES/NO)? | | | | Yes[X] | No[] |
|----|---|----------|---------------|----|--------|--------|
| | | | 2019 | | 2018 | |
| В. | ACA fee assessment payable for the upcoming year | \$ | 44,511,000 | \$ | | |
| С | ACA fee assessment paid | \$ | | \$ | 42,850 |),412 |
| D. | Premium written subject to ACA 9010 assessment | \$ | 1,879,243,316 | \$ | | |
| E. | Total adjusted capital before surplus adjustment (Five-Year Historical Line 14) | \$ | 1,853,666,963 | | | |
| F. | Total adjusted capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above) | \$ | 1,809,155,963 | | | |
| G. | Authorized control level (Five-Year Historical Line 15) | \$ | 165,681,780 | 1 | | |
| H. | Would reporting the ACA assessment as of December 31, 2019 have triggered an RBC action level (| YES/NO)? | ? | | Yes[] | No [X] |

Note 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% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? Yes [] No [X]
- (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% or controlled directly or indirectly by an insured, a beneficiary, a creditor 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.

Not Applicable

- (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

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Method Used to Estimate Accrued Retrospective Premium Adjustments

The Company's participation in the Medicare Part D program includes a risk sharing provision with CMS. The Company estimates accrued retrospective premium adjustments for its Medicare Part D products through a prescribed formula approach. CMS adjusts its payments to the Company based on how actual benefit costs varied from the costs anticipated in the Company's bid for the Medicare Part D products. At December 31, 2019, the Company had four prior years remaining to be settled with CMS for the Medicare Part D products. The risk sharing amounts relating to all other prior years have been settled with CMS.

The Company estimates accrued retrospective premium adjustments for individuals, small groups and large groups according to retrospective rating features pursuant to the medical loss ratio rebate requirements subject to the Public Health Service Act.

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

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

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

The amount of net premiums written by the Company at December 31, 2019 that are subject to retrospective rating features was \$1,861,474,792, which represented 72.7% of the total net premiums written for the Company. 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

The Company estimates no medical loss ratio rebates required pursuant to the Public Health Services Act at December 31, 2019.

E. Risk-Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions

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. Pe | rmanent ACA Risk Adjustment Program | | AMOUNT |
|------------|--|----------|------------|
| Assets | | | |
| 1. | Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments) | \$ | 15,446,000 |
| Liabilitie | S | | |
| 2. | Risk adjustment user fees payable for ACA Risk Adjustment | \$ | 90,573 |
| 3. | Premium adjustments payable due to ACA Risk Adjustment (including high-risk pool premium) | \$ | 1,263,994 |
| Operatio | ons (Revenue & Expenses) | | |
| 4. | Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk | | |
| | Adjustment | \$ | 17,233,698 |
| 5. | Reported in expenses as ACA Risk Adjustment user fees (incurred/paid) | \$ | 91,448 |
| | | | |
| | ansitional ACA Reinsurance Program | | AMOUNT |
| Assets | | | |
| 1. | Amounts recoverable for claims paid due to ACA Reinsurance | \$ | |
| 2. | Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability) | \$ | |
| 3. | Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance | \$ | |
| Liabilitie | | | |
| 4. | Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium | \$ | |
| 5. | Ceded reinsurance premiums payable due to ACA Reinsurance | \$ | |
| 6. | Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance | \$ | |
| | ons (Revenue & Expenses) | | |
| 7. | Ceded reinsurance premiums due to ACA Reinsurance | \$ | |
| 8. | Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments | \$ | 39,957 |
| 9. | ACA Reinsurance contributions – not reported as ceded premium | \$ | |
| | | | |
| | mporary ACA Risk Corridors Program | | AMOUNT |
| Assets | Accurate anter a string promitive due to ACA Disk Considers Liskilities | ¢ | |
| 1. | Accrued retrospective premium due to ACA Risk Corridors Liabilities | \$ \$ | |
| <u>2.</u> | Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors | Ф | |
| | nns (Revenue & Expenses) | ¢ | |
| 3. | Effect of ACA Risk Corridors on net premium income (paid/received) | \$ | |
| 4. | Effect of ACA Risk Corridors on change in reserves for rate credits | \$ | |

(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:

| | | | | | | | | | | | Unsettled | Balan | ces |
|----|--|---------------------------------|--|--|-------------------------------|--|--|---------------------------|---------------------------|-----|---|--------------|--|
| | | | | | | Differences | | Adjustments | | Ref | | | ting Date |
| | | Business Before the Prior | Year on Written Dec. 31 of Year | the Curren Business Before the Prio | Written Dec. 31 of Year | 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) | Bala Prie | mulative ince from or Years I. 2-4+8) |
| | | 1 Dessivable | 2 (Deveble) | 3 Dessivable | 4 (Deveble) | 5 Dessivable | 6 (Deveble) | 7 Dessivable | 8 (Deveble) | | 0 Dessivable | (D | 10 avable) |
| | Permanent ACA | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | Receivable | (Payable) | | Receivable | (P | ayable) |
| а. | Permanent ACA Risk Adjustment Program 1. Premium | | | [| | | | 1 | | r | | | |
| | adjustments receivable (including high-risk pool payments) | \$ 8,148,658 | \$ | \$ 12,285,341 | s | \$ (4,136,683) | \$ | \$ 4,136,683 | s | A | s | \$ | |
| | 2. Premium adjustments (payable) | | | | | | | . , | | | | | |
| | (including high-risk pool premium) 3. Subtotal ACA | | | | (1,084,991) | | 1,084,991 | | (1,229,985) | В | | | (144,994) |
| | Permanent Risk Adjustment Program | \$ 8,148,658 | \$ | \$ 12,285,341 | \$ (1,084,991) | \$ (4,136,683) | \$ 1,084,991 | \$ 4,136,683 | \$ (1,229,985) | | \$ | \$ | (144,994) |
| b. | Transitional ACA Reinsurance Program | | | | 1 | . , | 1 | | 1 | | | · 1 | |
| | 1. Amounts recoverable for claims paid | \$ 50,085 | \$ | \$ 50,085 | \$ | \$ | \$ | \$ | \$ | | \$ | \$ | |
| | Amounts recoverable for claims unpaid (contra liability) | | | | | | | | | | | | |
| | Amounts receivable relating to uninsured plans | | | | | | | | | | | | |
| | Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium | | | | | | | | | | | | |
| | Ceded reinsurance premiums payable Liability for amounts held under uninsured plans | | | | | | | | | | | | |
| | 7. Subtotal ACA Transitional Reinsurance Program | \$ 50,085 | \$ | \$ 50,085 | s | \$ | \$ | \$ | \$ | | \$ | \$ | |
| C. | Temporary ACA Risk Corridors Program | · · · · · | | · · · · | | | | · | | | | · | |
| | 1. Accrued retrospective premium | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ | |
| _ | 2. Reserve for rate credits or policy experience | | | | | | | | | | | | _ |
| | rating refunds 3. Subtotal ACA Risk Corridors Program | \$ | \$ | \$ | \$ | \$ | \$ | \$ | \$ | | \$ | \$ | |
| d. | Total for ACA Risk-Sharing Provisions | \$ 8,198,743 | \$ | \$ 12,335,426 | \$ (1,084,991) | | | \$ 4,136,683 | \$ (1,229,985) | | \$ | \$ | (144,994) |

Explanations of Adjustments

- A. Revised data received.
- B. Revised data received.

(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

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

The Company's December 31, 2018 reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years of \$354,087,478 have decreased \$36,053,932. Because unpaid losses are estimated based on past experience and accumulated statistical data, the Company's actual benefit payments have varied from the original estimates.

B. Information about Significant Changes in Methodologies and Assumptions

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

Note 26 – Intercompany Pooling Arrangements

Not Applicable

Note 27 - Structured Settlements

Not Applicable

Note 28 – Health Care Receivables

A. Pharmaceutical Rebate Receivables

| | Estimated Pharmacy | Pharmacy Rebates as | Actual Rebates | Actual Rebates | Actual Rebates |
|------------|------------------------|---------------------|--------------------|-----------------------|------------------------|
| | Rebates as Reported on | Billed or Otherwise | Received Within 90 | Received Within 91 to | Received More than |
| Quarter | Financial Statements | Confirmed | Days of Billing | 180 Days of Billing | 180 Days After Billing |
| 12/31/2019 | \$ 49,977,821 | \$ | \$ | \$ | \$ |
| 09/30/2019 | \$ 48,330,912 | \$ 54,398,234 | \$ | \$ | \$ |
| 06/30/2019 | \$ 48,934,388 | \$ 53,827,588 | \$ | \$ 39,689,129 | \$ |
| 03/31/2019 | \$ 45,259,334 | \$ 46,727,599 | \$ | \$ 35,286,669 | \$ 4,933,814 |
| 12/31/2018 | \$ 39,260,890 | \$ 31,678,253 | \$ | \$ 38,473,482 | \$ 7,411,500 |
| 09/30/2018 | \$ 34,289,296 | \$ 30,379,218 | \$ 3,758,947 | \$ 29,898,253 | \$ 8,372,752 |
| 06/30/2018 | \$ 33,860,184 | \$ 33,095,204 | \$ | \$ 32,529,562 | \$ 8,293,968 |
| 03/31/2018 | \$ 34,456,513 | \$ 33,705,583 | \$ | \$ 32,146,844 | \$ 7,987,055 |
| 12/31/2017 | \$ 36,163,417 | \$ 37,149,804 | \$ | \$ 36,557,799 | \$ 1,550,954 |
| 09/30/2017 | \$ 33,093,827 | \$ 33,516,461 | \$ | \$ 32,584,146 | \$ 595,370 |
| 06/30/2017 | \$ 33,789,257 | \$ 27,453,206 | \$ 4,445,399 | \$ 28,091,145 | \$ 341,848 |
| 03/31/2017 | \$ 29,629,338 | \$ 33,672,006 | \$ | \$ 30,345,037 | \$ 904,172 |

B. Risk-Sharing Receivables

Not Applicable

Note 29 – Participating Policies

Not Applicable

Note 30 – Premium Deficiency Reserves

| Note 31 - | - Anticipated Salvage and Subrogation | |
|-----------|--|------------------|
| 3. | Was anticipated investment income utilized in the calculation? | Yes[X] No[] |
| 2. | Date of most recent evaluation of this liability: | January 22, 2020 |
| 1. | Liability carried for premium deficiency reserve: <u>\$0</u> | |

PART 1 - COMMON INTERROGATORIES

GENERAL

| .1 | | porting entity a member of an Insurance Holding Company System consisting of two mplete Schedule Y, Parts 1, 1A and 2. | or more affiliated persons, one or more of which is an in | surer? | | Yes [X | (] No[] |
|--------|--|---|--|--------|------------------|-------------|---------------|
| .2 | If yes, dic official of similar to System F | a the reporting entity register and file with its domiciliary State Insurance Commission the state of domicile of the principal insurer in the Holding Company System, a regis the standards adopted by the National Association of Insurance Commissioners (NA Regulatory Act and model regulations pertaining thereto, or is the reporting entity sub ally similar to those required by such Act and regulations? | tration statement providing disclosure substantially AIC) in its Model Insurance Holding Company | Yes [| [X] | No [] | N/A [] |
| .3 | State reg | | | | | | |
| .4 | | porting entity publicly traded or a member of publicly traded group? | | | | Yes[] | No [X] |
| .5 | | ponse to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for | | _ | | | |
| .1 | reporting | | of incorporation, or deed of settlement of the | | | Yes[] | No [X] |
| 2 1 | - | te of change: | ing and | _ | | 12/31/20 | 10 |
| .1 | | of what date the latest financial examination of the reporting entity was made or is be as of date that the latest financial examination report became available from either t | | _ | | 2/31/20 | 10 |
| .3 | This date | e should be the date of the examined balance sheet and not the date the report was of what date the latest financial examination report became available to other states | completed or released. | _ | 1 | 12/31/20 | 16 |
| .5 | the repor | ting entity. This is the release date or completion date of the examination report and department or departments? | | _ | C | 06/29/20 | 18 |
| | lowa Insu | urance Division | and the factor of the second factor of the | | | | |
| 5 | | financial statement adjustments within the latest financial examination report been an t filed with departments? | ccounted for in a subsequent financial | Yes [| 1 | No[] | N/A [X] |
| 6 | | of the recommendations within the latest financial examination report been complied | with? | Yes [| | No[] | N/A [X] |
| 1 | During th thereof un (more that | e period covered by this statement, did any agent, broker, sales representative, non nder common control (other than salaried employees of the reporting entity) receive an 20 percent of any major line of business measured on direct premiums) of: | affiliated sales/service organization or any combination | | | | |
| | 4.11 | sales of new business? | | | | Yes[] | No [X] |
| | 4.12 | renewals? | | | | Yes[] | No [X] |
| .2 | receive c | e period covered by this statement, did any sales/service organization owned in who redit or commissions for or control a substantial part (more than 20 percent of any m | | | | | |
| | 4.21 | sales of new business? | | | | Yes[] | No [X] |
| | 4.22 | renewals? | | | | Yes[] | No [X] |
| 1 | | eporting entity been a party to a merger or consolidation during the period covered to swer is YES, complete and file the merger history data file with the NAIC. | y this statement? | | | Yes[] | No [X] |
| 2 | If yes, pro | ovide the name of entity, NAIC company code, and state of domicile (use two letter s the merger or consolidation. | tate abbreviation) for any entity that has ceased to exist | as a | | | |
| | | 1 | | | 2 NAI Comp | С | 3 State of |
| | | Name of Entity | | | Cod | | Domicile |
| | | | | | | | |
| 1 2 | by any go | eporting entity had any Certificates of Authority, licenses or registrations (including c overnmental entity during the reporting period? re full information: | orporate registration, if applicable) suspended or revoke | a | | Yes[] | No [X] |
| 1 2 | Does any If yes, | v foreign (non-United States) person or entity directly or indirectly control 10% or mor | e of the reporting entity? | | | Yes[] | No [X] |
| | 7.21 | State the percentage of foreign control | | | | | % |
| | 7.22 | State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutu attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, gover | | | | | |
| | | | 2 | | | | |
| | | Nationality | Type of En | ity | | | |
| | | L mpany a subsidiary of a bank holding company regulated with the Federal Reserve B | Board? | | | Yes[] | No [X] |
| 2 | If respons | se to 8.1 is yes, please identify the name of the bank holding company. | | | | | |
| 3 | | npany affiliated with one or more banks, thrifts or securities firms? | | | | Yes[] | No [X] |
| 4 | regulator | ponse to 8.3 is yes, please provide below the names and locations (city and state of y services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroll ion (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate | er of the Currency (OCC), the Federal Deposit Insuranc | | | | |
| | | 1 | 2 | 3 | 4 | 5 | 6 |
| | | Affiliate Name | Location (City, State) | FRB | 000 | FDIC | SEC |
| | | L he name and address of the independent certified public accountant or accounting fi | rm retained to conduct the annual audit? | | | | |
| .1 | | Young LLP, 801 Grand Avenue, Des Moines, IA 50309 nsurer been granted any exemptions to the prohibited non-audit services provided b | v the certified independent public accountant requirement | nts | | | |
| .1 | as allowe | ed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit R ponse to 10.1 is yes, provide information related to this exemption: | | | | Yes[] | No [X] |
| | | | | | | | |
| 3 | | | an sial Danastian Markel Development of the second | | | | |
| • | | nsurer been granted any exemptions related to other requirements of the Annual Fir tion 18A of the Model Regulation, or substantially similar state law or regulation? | ancial Reporting Model Regulation as allowed | | | Yes[] | No [X] |

| | | PART I-COMMON INTERR | UGATURIES | | | |
|--|--|---|---|--|--|---|
| 10.5 10.6 | | | urance laws? | Yes [X] | No [] | N/A [] |
| 11. | of the individual providing the statement of a | ctuarial opinion/certification? | Ç, | | | |
| 12.1 | - | | | | Yes[] | No [X] |
| | | pany | | | | |
| | · | e | | \$ | | 00 |
| 12.2 | If yes, provide explanation | 6 | | Ψ | | 0 |
| 13. | | | | | | |
| 13.1 | | | rustees of the reporting entity? | | | |
| 13.2 | | | Branch on risks wherever located? | | Yes[] | No [] |
| 13.3 13.4 | | | | Yes[] | Yes[] No[] | No [] N/A [] |
| 14.1 | Are the senior officers (principal executive of | ficer, principal financial officer, principal accounting offic | er or controller, or persons performing similar | 103[] | | |
| | | - | interact between nerconal and professional relationshi | nc: | Yes [X] | No [] |
| | | | | ps, | | |
| | (c) Compliance with applicable govern | mental laws, rules and regulations; | | | | |
| | | | the code; and | | | |
| 14.11 | () | | | | | |
| 44.0 | | | | | ., | |
| 14.2 14.21 | • | | | | Yes[] | No [X] |
| 14.2 | Lieve on unrevisions of the code of othics he | an waived for any of the analitical officers? | | | Vee [] | |
| 14.3 14.31 | 12.12 Number of parcels involved 12.13 Table bookledjused anymy stake see, provide organisation REVINTED STATES BRANCHES OF ALEN REPORTING ENTITIES ONLY: hat changes have been made during the year in the United States manager or the United States trustees of the reporting entity? see third statement contain all business transacted for the reporting entity fruncipal is exolution offices or controller, or persons performing similar matching of the control offices of principal esocutive offices, principal esocutive offices, principal esocutive of the reporting entity includes the following standards? If the sensor offices (principal esocutive offices, principal esocutive offices or controller, or persons performing similar matching of the disto to doe of entits, which in the periodic encycle required to be filed by the reporting entity; Compliance with applicately governmental laws, rules and regulations; Charginance with applicately governmental laws, rules and regulations; Compliance with applicately governmental laws, rules and regulations; Charginance with applicately convernmental laws, rules and regulations; Compliance with applicately convernmental laws, rules and regulations; Charginance with applicately convernmental laws, rules and regulations; Compliance with applicately convernmental laws, rules and regulations; Charginang entity the beneficiary of a Letter of Credit that is unrelated to reinsuance where the issu | | | | Yes[] | No [X] |
| | la dha an an d'an an d'fh dha han a fhilinn a far hai | | | | | |
| 15.1 | Bank List? | tter of Credit that is unrelated to reinsurance where the i | ssuing or confirming bank is not on the SVO | | Yes[] | No [X] |
| 15.2 | | | d the name of the issuing or confirming bank of | | | |
| | | 2 | • | | 4 | |
| | | Issuing or Confirming Bank Name | | | Amount | |
| | | | | \$ | | |
| | | BOARD OF DIRECT | | | | |
| 16. | | BOARD OF DIRECT | UK5 | | | |
| | Is the purchase or sale of all investments of | | | | Yes [X] | No [] |
| 17. | Does the reporting entity keep a complete po | the reporting entity passed upon either by the Board of ermanent record of the proceedings of its Board of Direc | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? | | Yes [X] Yes [X] | No [] No [] |
| 17. 18. | Does the reporting entity keep a complete portion of the reporting entity an established procession of the reporting entity and the reporting entity and the reporting entity and the report of the reporting entity and the report of the repor | the reporting entity passed upon either by the Board of ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part | | | |
| | Does the reporting entity keep a complete portion of the reporting entity an established procession of the reporting entity and the reporting entity and the reporting entity and the report of the reporting entity and the report of the repor | the reporting entity passed upon either by the Board of l ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to confl | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part | | Yes [X] | No [] |
| | Does the reporting entity keep a complete per Has the reporting entity an established proce of any of its officers, directors, trustees or res | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? | ? | Yes [X] | No [] |
| 18. | Does the reporting entity keep a complete process the reporting entity an established process of any of its officers, directors, trustees or resolution of the statement been prepared using a bornotal amount loaned during the year (inclusion). | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to confi FINANCIAL asis of accounting other than Statutory Accounting Princ | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? | | Yes [X] Yes [X] | No [] No [] No [X] |
| 18. 19. | Does the reporting entity keep a complete per Has the reporting entity an established proce of any of its officers, directors, trustees or res Has this statement been prepared using a be Total amount loaned during the year (inclusion 20.11 To directors or other officers | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to confi FINANCIAL asis of accounting other than Statutory Accounting Princ | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? | \$ | Yes [X] Yes [X] | No [] No [] No [X] |
| 18. 19. | Does the reporting entity keep a complete per Has the reporting entity an established proce of any of its officers, directors, trustees or res Has this statement been prepared using a be Total amount loaned during the year (inclusi 20.11 To directors or other officers 20.12 To stockholders not officers | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Princ ve of Separate Accounts, exclusive of policy loans): | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? | | Yes [X] Yes [X] | No [] No [] No [X] |
| 18. 19. | Does the reporting entity keep a complete process the reporting entity an established process of any of its officers, directors, trustees or reserved. Has this statement been prepared using a bornotal amount loaned during the year (inclusive 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (France). | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? | \$ \$ | Yes [X] Yes [X] | No [] No [] No [X] 0 0 |
| 18. 19. 20.1 | Does the reporting entity keep a complete process the reporting entity an established process of any of its officers, directors, trustees or resolved a statement been prepared using a bar Total amount loaned during the year (inclusive 20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Frant Total amount of loans outstanding at the end 20.21 To directors or other officers 20.21 To directors | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? | \$ \$ | Yes [X] Yes [X] | No [] No [] No [X] 0 0 0 |
| 18. 19. 20.1 | Does the reporting entity keep a complete per Has the reporting entity an established proce of any of its officers, directors, trustees or res Has this statement been prepared using a be Total amount loaned during the year (inclusi 20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Frai Total amount of loans outstanding at the end 20.21 To directors or other officers 20.22 To stockholders not officers | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc adure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print we of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? | \$ \$ | Yes [X] Yes [X] | No [] No [] No [X] 0 0 0 0 |
| 18. 19. 20.1 | Does the reporting entity keep a complete process the reporting entity an established process of any of its officers, directors, trustees or reserved. Has this statement been prepared using a bornotal amount loaned during the year (inclusive 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frail Total amount of loans outstanding at the end 20.21). To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frail 20.23). | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ | Yes [X] Yes [X] | No [] No [] No [X] 0 0 0 |
| 18. 19. 20.1 20.2 21.1 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved a statement been prepared using a bornotal amount loaned during the year (inclusived 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frail Total amount of loans outstanding at the end 20.21). To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frail Were any assets reported in this statement stoping reporting in the statement? | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ | Yes [X] Yes [X] | No [] No [] No [X] 0 0 0 0 |
| 18. 19. 20.1 20.2 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved and the reporting entity an established process of any of its officers, directors, trustees or reserved and the reported using a bar Total amount loaned during the year (inclusive 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frat Total amount of loans outstanding at the end 20.21. To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frat 20.23. Trustees, supreme or grand (Frat Were any assets reported in this statement steing reporting in the statement? If yes, state the amount thereof at December 20.23. | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ | Yes [X] Yes [X] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved and the reporting entity an established process of any of its officers, directors, trustees or reserved and the reported using a bar Total amount loaned during the year (inclusion 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frant Total amount of loans outstanding at the end 20.21). To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frant Total amount of loans outstanding at the end 20.21). To directors or other officers 20.23. Trustees, supreme or grand (Frant Were any assets reported in this statement subeing reporting in the statement? If yes, state the amount thereof at December 21.21. Rented from others | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ | Yes [X] Yes [X] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved and the reporting entity an established process of any of its officers, directors, trustees or reserved and the reported using a bar Total amount loaned during the year (inclusive 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frail Total amount of loans outstanding at the end 20.21. To stockholders not officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frail Were any assets reported in this statement seeing reporting in the statement? If yes, state the amount thereof at December 21.21. Rented from others 21.22. Borrowed from others 21.23. Leased from others 21.23. | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ | Yes [X] Yes [X] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved using a base of the statement been prepared using a base of the statement of the stateme | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Princ ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 22.1 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved and the reporting entity an established process of any of its officers, directors, trustees or reserved and the reported using a bar Total amount loaned during the year (inclusion 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frant Total amount of loans outstanding at the end 20.21). To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frant Were any assets reported in this statement subeing reporting in the statement? If yes, state the amount thereof at December 21.21. Rented from others 21.22. Borrowed from others 21.23. Leased from others 21.24. Other Does this statement include payments for assiguaranty association assessments? | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Direc edure for disclosure to its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Princ ve of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved and the reporting entity an established process of any of its officers, directors, trustees or reserved and the reported using a bar Total amount loaned during the year (inclusived 20.11). To directors or other officers 20.12. To stockholders not officers 20.13. Trustees, supreme or grand (Frat Total amount of loans outstanding at the end 20.21. To directors or other officers 20.22. To stockholders not officers 20.23. Trustees, supreme or grand (Frat 20.23. Trustees, supreme or grand (Frat 20.23. Trustees, supreme or grand (Frat Were any assets reported in this statement subeing reporting in the statement? If yes, state the amount thereof at December 21.21. Rented from others 21.22. Borrowed from others 21.23. Leased from others 21.24. Other Does this statement include payments for as | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print we of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 22.1 | Does the reporting entity keep a complete per Has the reporting entity an established proce of any of its officers, directors, trustees or res Has this statement been prepared using a be Total amount loaned during the year (inclusi 20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Frai Total amount of loans outstanding at the end 20.21 To directors or other officers 20.22 To stockholders not officers 20.23 Trustees, supreme or grand (Frai Were any assets reported in this statement s being reporting in the statement? If yes, state the amount thereof at December 21.21 Rented from others 21.22 Borrowed from others 21.23 Leased from others 21.24 Other Does this statement include payments for as guaranty association assessments? If answer is yes: | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print we of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 22.1 | Does the reporting entity keep a complete process of any of its officers, directors, trustees or reserved using a barrow of any of its officers, directors, trustees or reserved using a barrow of any of its officers, directors, trustees or reserved using a barrow of the trust of trust of the trust of | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print we of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |
| 18. 19. 20.1 20.2 21.1 21.2 22.1 | Does the reporting entity keep a complete proves of any of its officers, directors, trustees or resonance Has this statement been prepared using a bornotal amount loaned during the year (inclusion 20.11 To directors or other officers 20.12 To stockholders not officers 20.13 Trustees, supreme or grand (Frai Total amount of loans outstanding at the end 20.21 To directors or other officers 20.22 To stockholders not officers 20.23 Trustees, supreme or grand (Frai Were any assets reported in this statement subeing reporting in the statement? If yes, state the amount thereof at December 21.21 Rented from others 21.22 Borrowed from others 21.23 Leased from others 21.24 Other Does this statement include payments for as guaranty association assessments? If answer is yes: 22.21 Amount paid as losses or risk adj 22.22 Amount paid as expenses 22.23 Other amounts paid | the reporting entity passed upon either by the Board of I ermanent record of the proceedings of its Board of Directors or trustees sponsible employees that is in conflict or is likely to conf FINANCIAL asis of accounting other than Statutory Accounting Print we of Separate Accounts, exclusive of policy loans): ternal only) d of year (inclusive of Separate Accounts, exclusive of p ternal only) subject to a contractual obligation to transfer to another r 31 of the current year: | Directors or a subordinator committee thereof? ctors and all subordinate committees thereof? of any material interest or affiliation on the part lict with the official duties of such person? ciples (e.g., Generally Accepted Accounting Principles)? olicy loans): party without the liability for such obligation <i>actions</i> other than guaranty fund or | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | Yes [X] Yes [X] Yes [] Yes [] | No [] No [] No [X] 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 |

| | PART 1 - COMMON INTERROGATORIES | | | |
|----------------|--|--------------------------------------|----------------|--------------------|
| 23.2 | If yes, indicate any amounts receivable from parent included in the Page 2 amount: | \$ | | 0 |
| | INVESTMENT | | | |
| 24.01 24.02 | Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)? If no, give full and complete information, relating thereto: | | Yes [X] | No [] |
| 24.03 | For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided). The Company participates in a securities lending program through its custodian bank. Bank of New York Mellon (BNYM). On the day the loan is de BNYM obtains collateral equal in amount to 102% for securities of United States issuers and 105% for securities of non-United States issuers of the value of the securities loaned plus accrued interest. The collateralization of all loans is then reviewed daily during the term of the loan. Cash rece collateral will be held and maintained by BNYM in one of its collective investment vehicles in accordance with the investment guidelines provided securities lending agreement. Prior to the close of business for the calendar year, at the request of the Company, BNYM recalls all securities that are loan. As of December 31, 2019, no securities were on loan. | <u>market</u> ived as d in the | | |
| 24.04 | Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? | Yes [X] | No [] | N/A [] |
| 24.04 | If answer to 24.04 is yes, report amount of collateral for conforming programs. | s (* 1 | NO[] | 0 |
| 24.06 | If answer to 24.04 is no, report amount of collateral for other programs | φ\$ | | 0 |
| 24.07 | Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset | Ψ | | 0 |
| 24.07 | of the contract? | Yes [X] | No [] | N/A [] |
| 24.08 | Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? | Yes[] | No[] | N/A [X] |
| 24.09. | Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to | | | |
| | conduct securities lending? | Yes [X] | No[] | N/A [] |
| 24.10 | For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year: | | | |
| | 24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: | \$ | | 0 |
| | 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: | \$ | | 0 |
| 25.1 | 24.103 Total payable for securities lending reported on the liability page: Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude | <u>\$</u> | | 0 |
| 05.0 | securities subject to Interrogatory 21.1 and 24.03.) | | Yes[X] | No [] |
| 25.2 | If yes, state the amount thereof at December 31 of the current year: | • | 00.5 | |
| | 25.21 Subject to repurchase agreements | \$ | 60,5 | 33,926 |
| | 25.22 Subject to reverse repurchase agreements | \$ | | 0 |
| | 25.23 Subject to dollar repurchase agreements | \$ | | 0 |
| | 25.24 Subject to reverse dollar repurchase agreements | \$ | | 0 |
| | 25.25 Placed under option agreements | \$ | | 0 |
| | 25.26 Letter stock or securities restricted as sale – excluding FHLB Capital Stock | \$ | | 0 |
| | 25.27 FHLB Capital Stock | \$ | | 0 |
| | 25.28 On deposit with states | \$ | | 0 |
| | 25.29 On deposit with other regulatory bodies | \$ | | 0 |
| | 25.30 Pledged as collateral – excluding collateral pledged to an FHLB | \$ | | 0 |
| | 25.31 Pledged as collateral to FHLB – including assets backing funding agreements | \$ | | 0 |
| | 25.32 Other | \$ | | 0 |
| 25.3 | For category (25.26) provide the following: | | | |
| | 1 2 | | 3 | |
| | Nature of Restriction Description | \$ | Amount | |
| 26.1 | Does the reporting entity have any hedging transactions reported on Schedule DB? | | Yes[] | No [X] |
| 26.2 | If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement. | Yes[] | No [] | N/A [X] |
| | 26.3 through 26.5 are for Life/Fraternal reporting entities only. | | | |
| 26.3 | Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a results of interest rate sensitivity? | | Yes[] | No [] |
| 26.4 | If the response to 26.3 is yes. Does the reporting entity utilize: | | | No C. |
| | 26.41 Special accounting provisions of SSAP No. 108 | | Yes[] | No [|
| | 26.42 Permitted accounting practice 26.43 Other accounting guidance | | Yes[] | No [|
| 26.5 | 26.43 Other accounting guidance By responding yes to 26.41 regarding utilizing the special accounting provision of SSAP No. 108, does the reporting entity attest to the following: | | Yes[] Yes[] | No [_] No [_] |
| 20.5 | The reporting entity has obtained explicit approval from the domiciliary state. Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21. | | 163[] | NO[. |
| | Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guidance Conditional Tail Expectation Amount. Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined | | | |
| | Hedging Strategy within VM-21 and the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts. | | | |
| 27.1 | Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, | | Verti | N= TV |
| 07.0 | convertible into equity? | ۴ | Yes[] | No [X] |
| 27.2 | If yes, state the amount thereof at December 31 of the current year: | <u> </u> | | 0 |
| 28. | 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 <i>Financial Condition Examiners Handbook</i> ? | | Yes [X] | No [] |
| | or onlicer randions, customer or seleccepting Agreements of the IVAIC Financial contaiton Examiners francibook? | | 169[7] | |

| 28 | 8.01 | F <u>or agreeme</u> | nts that comply with the requireme | nts of the I | NAIC Financial Condition Examiners Han | ndbook, complete t | the foll | owing: | | | | | | |
|-------------|---------|--|--------------------------------------|----------------|--|----------------------|----------|--------------------|---|------------------|---------------------------|--|--|--|
| | | | Nome of | 1 Custodian | (0) | | | 2 Custodian | | | | | | |
| | | The Benk e | f New York Mellon | Custodian | (5) | BNY Mellon Cent | tor EO | Custodian | | |) | | | |
| | | | ust Company | | | 453 7th Street, D | | | | 911, FA 15250 |) | | | |
| 28 | | For all agreer | | requiremer | nts of the NAIC Financial Condition Exam | | | | <u>, </u> | | | | | |
| | | | 1 | | 2 | | | 3 | 3 | | | | | |
| | | - | Name(s) | | Location(s) | | | Complete Ex | cplanatic | anation(s) | | | | |
| 28 | 8.03 | Have there b | een anv changes including name | changes i | n the custodian(s) identified in 28.01 duri | ng the current vea | ur? | | | Yes [] No [X] | | | | |
| | | | Il and complete information relating | • | | | | | | | | | | |
| | | | 1 | 0 | 2 | | | 3 | | 4 | | | | |
| | | | Old Custodian | | New Custodian | | Date | of Change | | Reaso | า | | | |
| 28 | | | | | s, investment managers, broker/dealers, i ntity. For assets that are managed intern | | | | | | | | | |
| | | | ["that have access to the invest | | | | | | y , | | | | | |
| | | | | Na | 1 me of Firm or Individual | | | | | 2 Affiliatio | n | | | |
| | | NISA Inves | tment Advisors, LLC | | | | | | | U | | | | |
| | | Wellington | Management Company LLP | | | | | | | U | | | | |
| | | Fisher Inve | stments, Inc. | | | | | | | U | | | | |
| | | BlackRock | Financial Management, Inc. | | | | | | | U | | | | |
| | | Metropolita | n West Asset Management LLC | | | | | | | U | | | | |
| | | Pyrford Inte | rnational, Ltd. | | | | | | | U | | | | |
| | | | | | Question 28.05, do any firms/individuals u | | e repor | ting entity | | | es[X] No[] | | | |
| | | 28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does | | | | | | | | | | | | |
| 20 | 8.06 | | | | o more than 50% of the reporting entity's i vith an affiliation code of "A" (affiliated) or | | nrovid | o the informativ | | Ye | es[X] No[] | | | |
| 20 | | for the table t | | IUI 20.03 W | | 0 (unanniateu), | provide | | ווע | | | | | |
| | | | 1 | | 2 | | | 3 | | 4 | 5 | | | |
| | | | | | | | | | | | Investment | | | |
| | | | | | | | | | | Registered | Management Agreement | | | |
| | | Central F | Registration Depository Number | | Name of Firm or Individual | | Lega | I Entity Identifie | er (LEI) | With | (IMA) Filed | | | |
| | | 107313 | | NISA Inv | estment Advisors, LLC | | 54930 | 0L1IG2JOW7 | XNY28 | SEC | NO | | | |
| | | 106595 | | Wellingto | on Management Company LLP | | 54930 | 0YHP12TEZN | ILCX41 | SEC | NO | | | |
| | | 107342 | | Fisher In | vestments, Inc. | | 54930 | 00YOG7L5RID | RN993 | SEC | NO | | | |
| | | 107105 | | | ck Financial Management, Inc. | | 5493 | 00LVXYIVJKE | 13M84 | SEC | NO | | | |
| | | 104571 | | · · · | itan West Asset Management LLC | | | 04MDKGXC0 | | SEC | NO | | | |
| _ | | 105646 | | , | nternational, Ltd. | | | 00N5W87B2IS | AUG48 | SEC | NO | | | |
| E | xchange | e Commissior | (SEC) in the Investment Compar | | d in Schedule D-Part 2 (diversified accord 940 [Section 5 (b) (1)])? | ding to the Securiti | es and | 1 | | Ye | es[X] No[] | | | |
| .2 lf | yes, co | mplete the tol | lowing schedule: | | 2 | | | | | | 3 | | | |
| | C | USIP | | | Name of Mutual Fund | | | | | | sted Carrying alue | | | |
| | 693390 |) 60 1 | PIMCO Short-term Instl | | | | | | Ş | \$ | 1,756,466 | | | |
| | 72201 | = 49 0 | PIMCO Income Instl | | | | | | 5 | \$ | 90,534,727 | | | |
| 2 | 29.2999 | TOTAL | | | | | | | | \$ | 92,291,193 | | | |
| 3 <u>Fo</u> | or each | mutual fund l | isted in the table above, complete | the followi | ng schedule: | | | | | | | | | |
| | | | 1 | | 2 | | | 3 Amount of M | | nd'e | 4 | | | |
| | | | | | | | | Book/Adjust | | | | | | |
| | | 1 | Name of Mutual Fund | | Name of Significant Ho | • | | Value Attribu | | | a of Voluction | | | |
| D | | hort-term Ins | (from above table) | | of the Mutual Fun PIMCO Short Asset Portfolio | u | | Holo \$ | 124,7 | | e of Valuation)9/30/2019 | | | |
| | | hort-term Ins | | | Fannie Mae UMBS TBA 4.000% due 10 | 1/01/20/0-11/01/2 | 010 | \$ \$ | 124,7 | |)9/30/2019 | | | |
| | | hort-term Ins | | | U.S. TIPS 0.750% due 07/15/2028 | JIO 1/2043-1 1/0 1/2 | 045 | \$ | 38,6 | |)9/30/2019 | | | |
| | | hort-term Ins | | | Fannie Mae UMBS TBA 3.500% due 11 | 1/01/2049-12/01/2 | 049 | \$ | 29,8 | |)9/30/2019 | | | |
| | | hort-term Ins | | | Fannie Mae UMBS TBA 3.000% due 11 | | 5-15 | \$ \$ | 29,0 | |)9/30/2019 | | | |
| | | ncome Instl | - | | Fannie Mae UMBS TBA 3.000% due 11 | | | \$ | 4,961,3 | |)9/30/2019 | | | |
| | | ncome Instl | | | Fannie Mae UMBS 4.000% due 03/01/2 | | | \$ | 2,652,6 | |)9/30/2019 | | | |
| | | ncome Instl | | | Credit Suisse Mortgage Capital Trust 3. | | 2058 | \$ | 1,964,6 | |)9/30/2019 | | | |
| | | ncome Instl | | | PIMCO Short-Term Floating NAV Portfo | | | \$ | 1,439,5 | | 9/30/2019 | | | |
| PI | IMCO Ir | ncome Instl | | | Fannie Mae UMBS 4.000% due 10/01/2 | 2047 | | \$ | 1,385,1 | | 9/30/2019 | | | |
| | | | | | | | | | | | | | | |

|). | Provide | the following information for all short-term and long-term bonds ar | d all preferred stocks. Do not substit | | e for fair value. | |
|------------|----------------------------|---|---|---|-------------------|---|
| | | | 1 | 2 | | 3 Statement over Fai or Fair Value over |
| | | | Statement (Admitted) Value | Fair Value | | atement (+) |
| | 30.1 | Bonds | \$ 906,410,083 | \$ 946,372,751 | \$ | 39,962,668 |
| | 30.2 | Preferred Stocks | \$ 1,631,286 | \$ 1,631,286 | \$ | 0 |
| 4 | 30.3 | Totals | \$ 908,041,369 | \$ 948,004,037 | \$ | 39,962,668 |
|).4 | <u>The Cor</u> most ins | e the sources or methods utilized in determining the fair values: mpany obtains at least one price from a third party pricing service tances, the Company obtains more than one price and evalutes I d are reasonable between sources, the Company uses a pre-esta | between the pricing sources for any c | utliers or stale prices. Assuming price | | |
| .1 | Was the | rate used to calculate fair value determined by a broker or custod | ian for any of the securities in Schedu | lle D? | | Yes [X] No [|
| .2 | copy) fo | swer to 31.1 is yes, does the reporting entity have a copy of the br r all brokers or custodians used as a pricing source? | | | | Yes [X] No [|
| .3 | | swer to 31.2 is no, describe the reporting entity's process for deter re of fair value for Schedule D: | mining a reliable pricing source for pu | irposes of | | |
| 2.1 2.2 | | the filing requirements of the <i>Purposes and Procedures Manual of</i> exceptions: | f the NAIC Investment Analysis Office | e been followed? | | Yes [X] No [|
| 3. | By self-o a. b. | designating 5GI securities, the reporting entity is certifying the follo Documentation necessary to permit a full credit analysis of the se is not available. Issuer or obligor is current on all contracted interest and principal | curity does not exist or an NAIC CRF | | | |
| | С. | The insurer has an actual expectation of ultimate payment of all of | contracted interest and principal. | | | |
| | | reporting entity self-designated 5GI securities? | | | | Yes[] No[2 |
| • | - | designating PLGI securities, the reporting entity is certifying the foll | owing elements of each self-designat | ed PLGI security: | | |
| | a. h | The security was purchased prior to January 1, 2018. The reporting entity is holding capital commensurate with the NA | IC Designation reported for the easur | ÷. | | |
| | b. с. | The NAIC Designation was derived from the credit rating assigned | e 1 | , | | |
| | 0. | shown on a current private letter rating held by the insurer and as | | | | |
| | d. | The reporting entity is not permitted to share this credit rating of t | he PL security with the SVO. | - | | |
| | Has the | reporting entity self-designated PLGI securities? | | | | Yes [] No [] |
| - | By assig | ning FE to a Schedule BA non-registered private fund, the reporti | ng entity is certifying the following ele | ments of each self-designated FE fund | d: | |
| | a. | The shares were purchased prior to January 1, 2019. | | | | |
| | b. | The reporting entity is holding capital commensurate with the NA | 6 1 | , | | |
| | c. d. | The security had a public credit rating(s) with annual surveillance January 1, 2019. The fund only or predominantly holds bonds in its portfolio. | assigned by NAIC CRP in its legal ca | apacity as an NRSRO prior to | | |
| | с. е. | The current reported NAIC Designation was derived from the put in its legal capacity as an NRSRO. | blic credit rating(s) with annual surveil | ance assigned by an NAIC CRP | | |
| | f. | The public credit rating(s) with annual surveillance assigned by a | n NAIC CRP has not lapsed. | | | |
| | Has the | reporting entity assigned FE to Schedule BA non-registered privation | e funds that complied with the above | criteria? | | Yes [] No [] |
| | | | OTHER | | | |
| 6.1 | | t of payments to trade associations, service organizations and sta | • • | tal normanta ta | \$ | 2,169,13 |
| 6.2 | | name of the organization and the amount paid if any such payme ssociations, service organizations and statistical or rating bureaus | | | | |
| | | | Name | | | 2 Amount Paid |
| | Blue C | ross and Blue Shield Association | | | \$ | 1,245,66 |
| | | | | | | |
| 7.1 7.2 | List the | t of payments for legal expenses, if any? name of the firm and the amount paid if any such payment represes use during the period covered by this statement. | sented 25% or more of the total paym | ents for legal | <u>\$</u> | 1,346,18 |
| | | | . 1 | | | 2 |
| | | | Name | | | Amount Paid |
| | Nyema | ster Goode | | | \$ | 582,62 |
| ~ 4 | List the | t of payments for expenditures in connection with matters before l name of the firm and the amount paid if any such payment repres tion with matters before legislative bodies, officers or departments | sented 25% or more of the total paym | ent expenditures in | \$ | 146,41 |
| | connec | alon wan matters before registative boards, onicers of departmenta | of govornmont daming the pollod cov | | | |
| 8.1 8.2 | connec | | 1 | | | 2 Amount Paid |

PART 2 – HEALTH INTERROGATORIES

| | | | PARIZ | – HEALTH INTERRO | GATORIES | | | |
|------------|----------------|---|--------------------------|---|---------------------|-------------------------------|----|-------------|
| 1.1 | Does t | he reporting entity have any direct Medicar | e Supplement Insuran | ce in force? | | | | Yes[X] No[] |
| 1.2 | If yes, | indicate premium earned on U.S. business | only. | | | | \$ | 420,477,350 |
| 1.3 | What p | portion of Item (1.2) is not reported on the N | ledicare Supplement I | nsurance Experience Exhibit? | | | \$ | 0 |
| | 1.31 | Reason for excluding: | | | | | | |
| 1.4 | Indica | ate amount of earned premium attributable | to Canadian and/or Of | her Alien not included in Item (| 1.2) above. | | \$ | 0 |
| 1.5 | | ate total incurred claims on all Medicare Su | | | , | | \$ | 361,015,097 |
| 1.6 | | ual policies: | | | | | - | |
| | | urrent three years: | | | | | | |
| | 1.61 | Total premium earned | | | | | \$ | 70,700,198 |
| | 1.62 | Total incurred claims | | | | | \$ | 63,666,832 |
| | 1.63 | Number of covered lives | | | | | | 44,639 |
| | All yea | rs prior to most current three years: | | | | | | |
| | 1.64 | Total premium earned | | | | | \$ | 349,777,152 |
| | 1.65 | Total incurred claims | | | | | \$ | 297,348,265 |
| | 1.66 | Number of covered lives | | | | | | 130,881 |
| 1.7 | Group | policies: | | | | | | |
| | Most c | urrent three years: | | | | | | |
| | 1.71 | Total premium earned | | | | | \$ | 0 |
| | 1.72 | Total incurred claims | | | | | \$ | 0 |
| | 1.73 | Number of covered lives | | | | | | 0 |
| | All yea | rs prior to most current three years: | | | | | | |
| | 1.74 | Total premium earned | | | | | \$ | 0 |
| | 1.75 | Total incurred claims | | | | | \$ | 0 |
| | 1.76 | Number of covered lives | | | | | | 0 |
| 2. | Health | Test: | | | | | | |
| | | | | 1 Current Year | | 2 Prior Year | | |
| | 2.1 | Premium Numerator | \$ | 2,561,042,188 | \$ | 2,615,762,137 | | |
| | 2.2 | Premium Denominator | ÷\$ | 2,561,042,188 | \$ | 2,615,762,137 | | |
| | 2.3 | Premium Ratio (2.1/2.2) | | 100.0% | | 100.0% | | |
| | 2.4 | Reserve Numerator | \$ | 430,350,622 | \$ | 421,984,380 | | |
| | 2.5 | Reserve Denominator | \$ | 430,350,622 | \$ | 421,984,380 | | |
| | 2.6 | Reserve Ratio (2.4/2.5) | ÷ | 100.0% | <u>+</u> | 100.0% | | |
| 3.1 | | e reporting entity received any endowment | or gift from contracting | | s, or others that i | | 1. | |
| | | if the earnings of the reporting entity perm | | у ··· - р· ···· -, р· · у -· · ··· -, · · · · | , | | ., | Yes[] No[X] |
| 3.2 | lf yes, | give particulars: | | | | | | |
| 4.1 | Have | copies of all agreements stating the period | and nature of hospitals | s' physicians' and dentists' car | re offered to sub | scribers and dependents been | | |
| | | ith the appropriate regulatory agency? | | | 0 0110100 10 000 | | | Yes[X] No[] |
| 4.2 | lf not p | reviously filed, furnish herewith a copy(ies) | of such agreement(s) | . Do these agreements include | additional bene | fits offered? | | Yes[X] No[] |
| 5.1 | Does t | he reporting entity have stop-loss reinsurar | ice? | | | | | Yes[] No[X] |
| 5.2 | | explain: | | | | | | |
| F 0 | | ompany retains all risk. | | | | | | |
| 5.3 | 5.31 | um retained risk (see instructions) | | | | | \$ | 9,999,999 |
| | 5.31 | Comprehensive Medical Medical Only | | | | | \$ | 9,999,999 |
| | 5.33 | Medicare Supplement | | | | | \$ | 9,999,999 |
| | 5.34 | Dental and Vision | | | | | | |
| | | | | | | | \$ | 9,999,999 |
| | 5.35 5.36 | Other Limited Benefit Plan | | | | | \$ | 0 |
| 6 | 5.36 Deceri | Other | nou hours to and a l | hooriboro and the index and the | | of incolumn disclusion had be | \$ | 0 |
| 6. | | be arrangement which the reporting entity ass provisions, conversion privileges with o | | | | | | |
| | Reserv | ves exceed regulatory requirements. Memb | er of Iowa Life & Heal | th Insurance Guaranty Associa | tion under lowa | Code 508C. | | |
| | | | | | | | | |

PART 2 – HEALTH INTERROGATORIES

| 8. | Provide the following information regarding participating providers: | | |
|------|--|---------------------------------------|-------------|
| | 8.1 Number of providers at start of reporting year | | 9,204 |
| | 8.2 Number of providers at end of reporting year | · · · · · · · · · · · · · · · · · · · | 9,346 |
| 9.1 | Does the reporting entity have business subject to premium rate guarantees? | | Yes[] No[X] |
| 9.2 | If yes, direct premium earned: | | |
| | 9.21 Business with rate guarantees with rate guarantees between 15-36 months | \$ | 0 |
| | 9.22 Business with rate guarantees over 36 months | \$ | 0 |
| 10.1 | Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? | | Yes[X] No[] |
| 10.2 | If yes: | | |
| | 10.21 Maximum amount payable bonuses | | 20,154,120 |
| | 10.22 Amount actually paid for year bonuses | | 13,742,655 |
| | 10.23 Maximum amount payable withholds | | 0 |
| | 10.24 Amount actually paid for year withholds | | 0 |
| 11.1 | Is the reporting entity organized as: | | |
| | 11.12 A Medical Group/Staff Model, | | Yes[] No[X] |
| | 11.13 An Individual Practice Association (IPA), or, | | Yes[] No[X] |
| | 11.14 A Mixed Model (combination of above)? | | Yes[] No[X] |
| 11.2 | Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? | | Yes[X] No[] |
| | 11.3 If yes, show the name of the state requiring such minimum capital and surplus. lowa | | |
| | 11.4 If yes, show the amount required. | \$ | 5,000,000 |
| 11.5 | Is this amount included as part of a contingency reserve in stockholder's equity? | | Yes[] No[X] |
| 11.6 | If the amount is calculated, show the calculation | | |
| 12. | List service areas in which reporting entity is licensed to operate: | | |
| | Name of Service Area | | |
| | lowa | | |
| 13.1 | South Dakota Do you act as a custodian for health savings accounts? | | Yes[] No[X] |
| 13.2 | If yes, please provide the amount of custodial funds held as of the reporting date. | \$ | |
| 13.3 | Do you act as an administrator for health savings accounts? | Ψ | Yes[] No[X] |
| 13.4 | If yes, please provide the balance of the funds administered as of the reporting date. | \$ | |
| 10.7 | | Ψ | 0 |

- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?
- 14.2 If the answer to 14.1 is yes, please provide the following:

| | 1 | 2 | 3 | 4 | Asse | ts Supporting Reserve | Credit |
|---|---------|---------|--------------|---------|------------|-----------------------|--------|
| | | NAIC | | | 5 | 6 | 7 |
| | Company | Company | Domiciliary | Reserve | Letters of | Trust | |
| | Name | Code | Jurisdiction | Credit | Credit | Agreements | Other |
| ſ | | 0 | | \$ | \$ | \$ | \$ |
| F | | | | | | | |

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

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).

| | | | ······································ | | |
|-----|----------|--------------------------|---|---------|------|
| | 15.1 | Direct Premium Writte | en | \$ | 0 |
| | 15.2 | Total Incurred Claims | | \$ | 0 |
| | 15.3 | Number of Covered L | ives | | 0 |
| | | | *Ordinary Life Insurance Includes | | |
| | | | Term (whether full underwriting, limited underwriting, jet issue, "short form app") | | |
| | | | Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app") | | |
| | | | Variable Life (with or without secondary guarantee) | | |
| | | | Universal Life (with or without secondary guarantee) | | |
| | | | Variable Universal Life (with or without secondary guarantee) | | |
| 16. | Is the r | eporting entity licensed | or charted, registered, qualified, eligible or writing business in at least two states? | Yes [X] | No[] |

16.1 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 [X]

FIVE-YEAR HISTORICAL DATA

| I IVL-1 | | | | | |
|--|---------------|---------------|---------------|---------------|---------------|
| | 1 2019 | 2 2018 | 3 2017 | 4 2016 | 5 2015 |
| Balance Sheet (Pages 2 and 3) | | | | | |
| 1. Total admitted assets (Page 2, Line 28) | 2,762,240,921 | 2,438,665,980 | 2,423,522,882 | 2,129,480,667 | 2,043,927,418 |
| 2. Total liabilities (Page 3, Line 24) | | | | | |
| 3. Statutory minimum capital and surplus requirement | | 5,000,000 | 5,000,000 | 5,000,000 | 5,000,000 |
| 4. Total capital and surplus (Page 3, Line 33) | | | 1,524,119,468 | | |
| Income Statement (Page 4) | | | | | |
| 5. Total revenues (Line 8) | 2,560,232,134 | 2,625,888,455 | 2,646,943,303 | 2,656,267,827 | 2,535,836,243 |
| 6. Total medical and hospital expenses (Line 18) | 2,172,199,169 | 2,263,994,172 | 2,275,307,305 | 2,305,850,113 | 2,212,112,391 |
| 7. Claims adjustment expenses (Line 20) | | 91,852,920 | 97,845,527 | 92,200,746 | |
| 8. Total administrative expenses (Line 21) | 227,641,958 | 274,070,264 | | 311,879,974 | |
| 9. Net underwriting gain (loss) (Line 24) | 61,300,931 | (4,028,901) | 10,883,471 | (53,663,006) | (44,181,937) |
| 10. Net investment gain (loss) (Line 27) | 139,380,920 | 157,999,161 | 59,429,982 | 47,645,297 | 50,740,427 |
| 11. Total other income (Lines 28 plus 29) | (12,322,649) | (312,917) | (19,298,372) | (492,595) | (316,495) |
| 12. Net income or (loss) (Line 32) | 158,692,202 | 127,475,750 | 43,089,081 | (26,507,304) | (1,832,005) |
| Cash Flow (Page 6) | | | | | |
| 13. Net cash from operations (Line 11) | 75,420,966 | 11,906,851 | 46,705,072 | (818,390) | 9,876,191 |
| Risk-Based Capital Analysis | | | | | |
| 14. Total adjusted capital | 1,853,666,963 | 1,567,303,983 | 1,524,119,468 | 1,330,274,686 | 1,321,982,003 |
| 15. Authorized control level risk-based capital | 165,681,780 | 153,973,624 | 147,166,563 | 142,115,619 | 140,286,299 |
| Enrollment (Exhibit 1) | | | | | |
| 16. Total members at end of period (Column 5, Line 7) | 1,213,004 | 1,223,786 | 1,254,850 | 1,273,834 | 1,299,157 |
| 17. Total member months (Column 6, Line 7) | 14,689,144 | 14,804,430 | 15,050,662 | 15,216,983 | 15,535,137 |
| Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0 | | | | | |
| 18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5) | 100.0 | 100.0 | 100.0 | 100.0 | 100.0 |
| 19. Total hospital and medical plus other non-health (Line 18 plus Line 19). | 84.8 | | 86.0 | 86.8 | |
| 20. Cost containment expenses | 0.8 | 0.7 | 0.8 | 0.7 | 0.7 |
| 21. Other claims adjustment expenses | 3.1 | 2.8 | 2.9 | 2.8 | 2.4 |
| 22. Total underwriting deductions (Line 23) | 97.6 | 100.2 | | 102.0 | 101.7 |
| 23. Total underwriting gain (loss) (Line 24) | 2.4 | (0.2) | 0.4 | (2.0) | (1.7) |
| Unpaid Claims Analysis (U&I Exhibit, Part 2B) | | | | | |
| 24. Total claims incurred for prior years (Line 13, Col. 5) | | | 341,115,730 | 239,887,885 | 216,690,565 |
| 25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)] | | | | 227,765,081 | 223,935,080 |
| Investments in Parent, Subsidiaries and Affiliates | | | | | |
| 26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1) | | | | | |
| 27. Affiliated preferred stocks (Sch D. Summary, Line 18, Col. 1) | | | | | |
| 28. Affiliated common stocks (Sch D. Summary, Line 24, Col. 1) | 544,174,038 | 491,359,226 | | 414,739,140 | 403,191,015 |
| 29. Affiliated short-term investments (subtotal included in Sch. DA, Verification, Column 5, Line 10) | | | | | |
| 30. Affiliated mortgage loans on real estate | | | | | |
| 31. All other affiliated | | | | | |
| 32. Total of above Lines 26 to 31 | 544,174,038 | | | 414,739,140 | 403,191,015 |
| 33. Total investment in parent included in Lines 26 to 31 above | | | | | |

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes[] No[]

If no, please explain:

Statement as of December 31, 2019 of the Wellmark, Inc. **SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Allocated by States and Territories

| | | Active Status | Accident & Health | Medicare | Medicaid | Federal Employees Health Benefits Plan | Premiums and Other | Property/ Casualty | Total Columns | Deposit Type |
|------------|--|------------------|----------------------|-------------|---------------|--|-----------------------|-----------------------|--------------------|-----------------|
| | State, Etc. AlabamaAL | <u>(a)</u> N | Premiums | Title XVIII | Title XIX | Premiums | Considerations | Premiums | 2 Through 7 | Contract |
| 2 | AlaskaAK | N | | | | | | | | |
| | ArizonaAZ | N | | | | | | | 0 | |
| | ArkansasAR | N | | | | | | | 0 | |
| | CaliforniaCA | N | | | | | | | | |
| | ColoradoCO | N | | | | | | | 0 | |
| | ConnecticutCT | N | | | | | | | 0 | |
| }. | DelawareDE | N | | | | | | | | |
| | District of ColumbiaDC | N | | | | | | | 0 N | |
|). | FloridaFL | N | | ••••• | | | | | 0 0 | |
| | GeorgiaGA | N | | | | | | | 0 | |
| | HawaiiHI | N | | | ••••• | | | | 0 | |
| | IdahoID | N | | ••••• | | | | | 0 | |
| J. 1. | IllinoisIL | N | | ••••• | | | | | 0 | |
| | IndianaIN | N | | ••••• | | | | | 0 | |
|). j. | IndianaIN IowaIA | N | .2,259,674,787 | | | | | | 0 | |
| | KansasKS | L | .2,233,014,101 | | | 200,210,000 | | | 2,317,000,442 ^ | |
| | KentuckyKY | N | | | | | | | U | |
| | LouisianaLA | N | | | | | | | U | |
| | LouisianaLA MaineME | | | | | | | | U | |
| | | N | | | | | | | 0 | |
| | MarylandMD | N | | | | | | | 0 | |
| 2. | MassachusettsMA | N | | | | | | | 0 | |
| | MichiganMI | N | | | | | | | 0 | |
| l. | MinnesotaMN | N | | | | | | | 0 | |
| | MississippiMS | N | | | | | | | 0 | |
| | MissouriMO | N | | | | | | | 0 | |
| | MontanaMT | N | | | | | | | 0 | |
| 3. | NebraskaNE | N | | | | | | | 0 | |
| | NevadaNV | N | | | | | | | 0 | |
| | New HampshireNH | N | | | | | | | 0 | |
| | New JerseyNJ | N | | | | | | | 0 | |
| • | New MexicoNM | N | | | | | | | 0 | |
| | New YorkNY | N | | | | | | | 0 | |
| • | North CarolinaNC | N | | | | | | | 0 | |
| | North DakotaND | N | | | | | | | 0 | |
| 5. | OhioOH | N | | | | | | | 0 | |
| | OklahomaOK | N | | | | | | | 0 | |
| | OregonOR | N | | | | | | | 0 | |
| | PennsylvaniaPA | | | | | | | | 0 | |
| | Rhode IslandRI | | | | | | | | 0 | |
| | South CarolinaSC | N | | | | | | | 0 | |
| | South DakotaSD | L | 43,156,746 | | | | | | 43,156,746 | |
| 3. | TennesseeTN | | | | | | | | 0 | |
| I. | TexasTX | N | | | | | | | 0 | |
| 5 . | UtahUT | N | | | | | | | 0 | |
| | VermontVT | | | | | | | | 0 | |
| | VirginiaVA | | | | | | | | 0 | |
| | WashingtonWA | | | | | | | | 0 | |
| | West VirginiaWV | | | | | | | | 0 | |
| | WisconsinWI | | | | | | | | 0 | |
| | WyomingWY | N | | | | | | | 0 | |
| 2. | American SamoaAS | N | | | | | | | 0 | |
| 3. | GuamGU | N | | | | | | | 0 | |
| | Puerto RicoPR | | | | | | | | 0 | |
| 5. | U.S. Virgin IslandsVI | N | | | | | | | 0 | |
| | Northern Mariana IslandsMP | N | | | | | | | 0 | |
| 7. | CanadaCAN | N | | | | | | | 0 | |
| l. | Aggregate Other alienOT | XXX | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| | Subtotal | XXX | .2,302,831,533 | 0 | 0 | 258,210,655 | | 0 | 2,561,042,188 | |
| • | Reporting entity contributions for Employee Benefit Plans | | | | | | | | | |
| • | Total (Direct Business) | | .2,302,831,533 | 0 | 0 | 258,210,655 | 0 | 0 | 2,561,042,188 | |
| 1. | | | | DET | AILS OF WRITE | -INS | | | 0 | |
| 2. | | | | | | | | | 0 | |
| | | | | | | | | | 0 | |
| | Summary of remaining write-ins for li | | | | | 0 | 0 | 0 | 0 | |
| | Total (Lines 58001 through 58003 + | | | | | 0 | 0 | 0 | 0 | |
| | | | | | J | 0 | | | | |
| Ac | tive Status Counts: nsed or Chartered - Licensed insurance ca | | | | | | | | | |

(b) Explanation of basis of allocation by states, premiums by state, etc. Accident and Health premiums are allocated according to the location of the group or individual purchaser at the point of issue.

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

PART 1 – ORGANIZATIONAL CHART



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