



**ANNUAL STATEMENT**  
 FOR THE YEAR ENDED DECEMBER 31, 2025  
 OF THE CONDITION AND AFFAIRS OF THE  
**WELLMARK HEALTH PLAN OF IOWA, INC.**

NAIC Group Code 0770, 0770 (Current) (Prior) NAIC Company Code 95531 Employer's ID Number 42-1455449

Organized under the Laws of IA State of Domicile or Port of Entry IA  
 Country of Domicile US  
 Licensed as business type: Health Maintenance Organization Is HMO Federally Qualified? NO  
 Incorporated/Organized 03/13/1996 Commenced Business 01/01/1997  
 Statutory Home Office 1331 GRAND AVENUE DES MOINES, IA, US 50309-2901  
 Main Administrative Office 1331 GRAND AVENUE DES MOINES, IA, US 50309-2901 515-376-4500 (Telephone)  
 Mail Address 1331 GRAND AVENUE DES MOINES, IA, US 50309-2901  
 Primary Location of Books and Records 1331 GRAND AVENUE DES MOINES, IA, US 50309-2901 515-376-4500 (Telephone)  
 Internet Website Address WWW.WELLMARK.COM  
 Statutory Statement Contact ASHLEY ARIEL ARELLANO 515-376-6307 (Telephone)  
 ARELLANOAA@WELLMARK.COM 515-376-9054 (E-Mail) (Fax)

**OFFICERS**

DAVID SETH BROWN#, PRESIDENT & CHAIRMAN SCOTT ANDREW SUNDSTROM, SECRETARY  
 CHRISTA DANEEN KUENNEN#, TREASURER

**OTHER**

JOHN THOMAS CLENDENIN JASON RICHARD HUMPHREY#  
 PETER RIENHART KITUNDU# NAIM ANWAR MUNIR MD#

**DIRECTORS OR TRUSTEES**

BRUCE LYNN ANDERSON# DAVID SETH BROWN-CHAIRMAN#  
 RON JOSEPH CORBETT

State of IOWA  
 County of POLK SS

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

x  x  x   
 DAVID SETH BROWN SCOTT ANDREW SUNDSTROM CHRISTA DANEEN KUENNEN  
 PRESIDENT & CHAIRMAN SECRETARY TREASURER

Subscribed and sworn to before me  
 this 25th day of February, 2026

x 

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



**ASSETS**

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	256,880,518	-	256,880,518	242,272,864
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	-	-	-	-
2.2 Common stocks.....	138,423,916	-	138,423,916	122,871,669
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	-	-	-	-
3.2 Other than first liens.....	-	-	-	-
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$..... encumbrances).....	-	-	-	-
4.2 Properties held for the production of income (less \$..... encumbrances).....	-	-	-	-
4.3 Properties held for sale (less \$..... encumbrances).....	-	-	-	-
5. Cash (\$.....274,754, Schedule E - Part 1), cash equivalents (\$.....10,558,310, Schedule E - Part 2) and short-term investments (\$.....0, Schedule DA).....	10,833,064	-	10,833,064	8,378,316
6. Contract loans (including \$.....0 premium notes).....	-	-	-	-
7. Derivatives (Schedule DB).....	-	-	-	-
8. Other invested assets (Schedule BA).....	10,367,786	-	10,367,786	11,135,297
9. Receivables for securities.....	65,304	-	65,304	922,446
10. Securities lending reinvested collateral assets (Schedule DL).....	-	-	-	-
11. Aggregate write-ins for invested assets.....	-	-	-	-
12. Subtotals, cash and invested assets (Lines 1 to 11).....	416,570,588	-	416,570,588	385,580,592
13. Title plants less \$.....0 charged off (for Title insurers only).....	-	-	-	-
14. Investment income due and accrued.....	2,619,514	-	2,619,514	2,376,648
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,119,949	-	1,119,949	1,497,511
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	-	-	-	-
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....15,000).....	15,000	-	15,000	140,000
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.....	92,052,724	3,842,998	88,209,726	81,283,629
18.1 Current federal and foreign income tax recoverable and interest thereon.....	-	-	-	-
18.2 Net deferred tax asset.....	445,000	-	445,000	1,012,000
19. 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.....	39,440,205	-	39,440,205	9,932,882
24. Health care (\$.....37,008,049) and other amounts receivable.....	59,068,878	22,060,829	37,008,049	34,808,456
25. Aggregate write-ins for other-than-invested assets.....	6,015,438	6,015,438	-	-
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	617,347,296	31,919,265	585,428,031	516,631,718
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	-	-	-	-
28. Total (Lines 26 and 27).....	617,347,296	31,919,265	585,428,031	516,631,718
<b>Details of Write-Ins</b>				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....				
2501. PREPAID EXPENSES.....	6,015,438	6,015,438	-	-
2502.....				
2503.....				
2598. Summary of remaining write-ins for Line 25 from overflow page.....				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	6,015,438	6,015,438	-	-

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$..... reinsurance ceded).....	108,094,000	—	108,094,000	100,741,000
2. Accrued medical incentive pool and bonus amounts.....	2,996,637	—	2,996,637	1,574,669
3. Unpaid claims adjustment expenses.....	1,835,465	—	1,835,465	1,254,389
4. Aggregate health policy reserves, including the liability of \$..... for medical loss ratio rebate per the Public Health Service Act.....	34,720,459	—	34,720,459	28,681,954
5. Aggregate life policy reserves.....	—	—	—	—
6. Property/casualty unearned premium reserves.....	—	—	—	—
7. Aggregate health claim reserves.....	—	—	—	—
8. Premiums received in advance.....	24,604,699	—	24,604,699	24,770,185
9. General expenses due or accrued.....	1,546,462	—	1,546,462	2,186,177
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....1,454,000 on realized capital gains (losses)).....	9,972,188	—	9,972,188	21,174,193
10.2 Net deferred tax liability.....	—	—	—	—
11. Ceded reinsurance premiums payable.....	—	—	—	—
12. Amounts withheld or retained for the account of others.....	—	—	—	—
13. Remittances and items not allocated.....	—	—	—	—
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....	—	—	—	—
15. Amounts due to parent, subsidiaries and affiliates.....	—	—	—	—
16. Derivatives.....	—	—	—	—
17. Payable for securities.....	—	—	—	748,749
18. Payable for securities lending.....	—	—	—	—
19. Funds held under reinsurance treaties (with \$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers).....	—	—	—	—
20. Reinsurance in unauthorized and certified (\$.....0) companies.....	—	—	—	—
21. Net adjustments in assets and liabilities due to foreign exchange rates.....	—	—	—	—
22. Liability for amounts held under uninsured plans.....	61,986,410	—	61,986,410	38,086,299
23. Aggregate write-ins for other liabilities (including \$.....690,000 current).....	4,650,000	—	4,650,000	3,940,000
24. Total liabilities (Lines 1 to 23).....	250,406,320	—	250,406,320	223,157,615
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	—	—
26. Common capital stock.....	XXX	XXX	24,000,000	24,000,000
27. Preferred capital stock.....	XXX	XXX	—	—
28. Gross paid in and contributed surplus.....	XXX	XXX	—	—
29. Surplus notes.....	XXX	XXX	—	—
30. Aggregate write-ins for other-than-special surplus funds.....	XXX	XXX	—	—
31. Unassigned funds (surplus).....	XXX	XXX	311,021,711	269,474,103
32. Less treasury stock, at cost:				
32.1 0 shares common (value included in Line 26 \$.....0).....	XXX	XXX	—	—
32.2 0 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX	—	—
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	335,021,711	293,474,103
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	585,428,031	516,631,718
<b>Details of Write-Ins</b>				
2301. HEALTH ASSESSMENTS.....	4,650,000	—	4,650,000	3,940,000
2302.....				
2303.....				
2398. Summary of remaining write-ins for Line 23 from overflow page.....				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above).....	4,650,000	—	4,650,000	3,940,000
2501.....	XXX	XXX		
2502.....	XXX	XXX		
2503.....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	XXX	XXX		
3001.....	XXX	XXX		
3002.....	XXX	XXX		
3003.....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above).....	XXX	XXX		

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months	XXX	2,424,300	2,346,307
2. Net premium income (including \$.....0 non-health premium income)	XXX	1,244,939,011	1,216,284,210
3. Change in unearned premium reserves and reserve for rate credits	XXX	(2,505)	(123,353)
4. Fee-for-service (net of \$.....0 medical expenses)	XXX	-	-
5. Risk revenue	XXX	-	-
6. Aggregate write-ins for other health care related revenues	XXX	-	-
7. Aggregate write-ins for other non-health revenues	XXX	-	-
8. Total revenues (Lines 2 to 7)	XXX	1,244,936,506	1,216,160,857
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits	-	592,360,724	567,154,421
10. Other professional services	-	147,093,414	131,742,939
11. Outside referrals	-	54,006,832	43,206,097
12. Emergency room and out-of-area	-	37,296,845	33,898,612
13. Prescription drugs	-	202,716,341	184,714,746
14. Aggregate write-ins for other hospital and medical	-	-	-
15. Incentive pool, withhold adjustments and bonus amounts	-	9,371,566	6,569,412
16. Subtotal (Lines 9 to 15)	-	1,042,845,722	967,286,227
<b>Less:</b>			
17. Net reinsurance recoveries	-	-	-
18. Total hospital and medical (Lines 16 minus 17)	-	1,042,845,722	967,286,227
19. Non-health claims (net)	-	-	-
20. Claims adjustment expenses, including \$.....14,777,098 cost containment expenses	-	50,988,914	38,282,977
21. General administrative expenses	-	122,058,178	126,813,864
22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)	-	-	-
23. Total underwriting deductions (Lines 18 through 22)	-	1,215,892,814	1,132,383,068
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	29,043,692	83,777,789
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)	-	15,165,124	12,662,390
26. Net realized capital gains (losses) less capital gains tax of \$.....1,454,000	-	5,950,153	4,828,203
27. Net investment gains (losses) (Lines 25 plus 26)	-	21,115,277	17,490,593
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]	-	-	-
29. Aggregate write-ins for other income or expenses	-	-	-
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	50,158,969	101,268,382
31. Federal and foreign income taxes incurred	XXX	8,949,000	20,244,000
32. Net income (loss) (Lines 30 minus 31)	XXX	41,209,969	81,024,382
<b>Details of Write-Ins</b>			
0601.	XXX		
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX		
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX		
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX		
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page			
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)			

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

		1	2
CAPITAL & SURPLUS ACCOUNT		Current Year	Prior Year
33.	Capital and surplus prior reporting year.....	293,474,103	303,194,587
34.	Net income or (loss) from Line 32.....	41,209,969	81,024,382
35.	Change in valuation basis of aggregate policy and claim reserves.....	-	
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$..... 1,949,000.....	6,048,202	3,295,983
37.	Change in net unrealized foreign exchange capital gain or (loss).....	1,285,949	(1,239,744)
38.	Change in net deferred income tax.....	1,382,000	1,064,000
39.	Change in nonadmitted assets.....	(8,378,512)	(4,865,105)
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.....	-	(89,000,000)
47.	Aggregate write-ins for gains or (losses) in surplus.....		
48.	Net change in capital and surplus (Lines 34 to 47).....	41,547,608	(9,720,484)
49.	Capital and surplus end of reporting year (Line 33 plus 48).....	335,021,711	293,474,103
<b>Details of Write-Ins</b>			
4701.	.....		
4702.	.....		
4703.	.....		
4798.	Summary of remaining write-ins for Line 47 from overflow page.....		
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above).....		

**CASH FLOW**

	1	2
	Current Year	Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance.....	1,251,312,087	1,207,035,916
2. Net investment income.....	15,841,369	12,956,291
3. Miscellaneous income.....	-	-
4. Total (Lines 1 to 3).....	1,267,153,456	1,219,992,207
5. Benefit and loss related payments.....	1,046,025,292	970,101,500
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	-	-
7. Commissions, expenses paid and aggregate write-ins for deductions.....	153,441,963	159,963,391
8. Dividends paid to policyholders.....	-	-
9. Federal and foreign income taxes paid (recovered) net of \$.....1,234,000 tax on capital gains (losses).....	21,605,005	24,032,797
10. Total (Lines 5 through 9).....	1,221,072,260	1,154,097,688
11. Net cash from operations (Line 4 minus Line 10).....	46,081,196	65,894,519
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	74,729,185	128,845,585
12.2 Stocks.....	75,291,723	37,845,486
12.3 Mortgage loans.....	-	-
12.4 Real estate.....	-	-
12.5 Other invested assets.....	1,056,463	-
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	41	81
12.7 Miscellaneous proceeds.....	857,142	-
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	151,934,554	166,691,152
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds.....	90,662,614	178,777,728
13.2 Stocks.....	73,664,951	54,238,585
13.3 Mortgage loans.....	-	-
13.4 Real estate.....	-	-
13.5 Other invested assets.....	308,125	3,000,000
13.6 Miscellaneous applications.....	820,147	4,965,905
13.7 Total investments acquired (Lines 13.1 to 13.6).....	165,455,837	240,982,218
14. Net increase / (decrease) in contract loans and premium notes.....	-	-
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14).....	(13,521,283)	(74,291,066)
<b>Cash from Financing and Miscellaneous Sources</b>		
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).....	(30,105,165)	9,904,123
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(30,105,165)	9,904,123
<b>Reconciliation of Cash, Cash Equivalents and Short-Term Investments</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	2,454,748	1,507,576
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	8,378,316	6,870,740
19.2 End of year (Line 18 plus Line 19.1).....	10,833,064	8,378,316

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

20.0001.NON-CASH DIVIDEND TO PARENT.....	-	89,000,000
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**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS**

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Net premium income	1,244,939,011	551,352,720	693,586,291	-	-	-	-	-	-	-	-	-	-	-
2. Change in unearned premium reserves and reserve for rate credit	(2,505)	(81)	(2,424)	-	-	-	-	-	-	-	-	-	-	-
3. Fee-for-service (net of \$.....0 medical expenses)	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
4. Risk revenue	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
5. Aggregate write-ins for other health care related revenues	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
6. Aggregate write-ins for other non-health care related revenues	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
7. Total revenues (Lines 1 to 6)	1,244,936,506	551,352,639	693,583,867	-	-	-	-	-	-	-	-	-	-	-
8. Hospital/medical benefits	592,360,724	286,677,561	305,683,163	-	-	-	-	-	-	-	-	-	-	XXX
9. Other professional services	147,093,414	73,031,809	74,061,605	-	-	-	-	-	-	-	-	-	-	XXX
10. Outside referrals	54,006,832	26,137,025	27,869,807	-	-	-	-	-	-	-	-	-	-	XXX
11. Emergency room and out-of-area	37,296,845	18,050,097	19,246,748	-	-	-	-	-	-	-	-	-	-	XXX
12. Prescription drugs	202,716,341	104,889,021	97,827,320	-	-	-	-	-	-	-	-	-	-	XXX
13. Aggregate write-ins for other hospital and medical	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
14. Incentive pool, withhold adjustments and bonus amounts	9,371,566	4,217,384	5,154,182	-	-	-	-	-	-	-	-	-	-	XXX
15. Subtotal (Lines 8 to 14)	1,042,845,722	513,002,897	529,842,825	-	-	-	-	-	-	-	-	-	-	XXX
16. Net reinsurance recoveries	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
17. Total hospital and medical (Lines 15 minus 16)	1,042,845,722	513,002,897	529,842,825	-	-	-	-	-	-	-	-	-	-	XXX
18. Non-health claims (net)	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-
19. Claims adjustment expenses including \$.....14,777,098 cost containment expenses	50,988,914	15,300,417	20,155,785	-	-	-	-	-	-	-	-	-	15,532,712	-
20. General administrative expenses	122,058,178	45,996,700	55,156,096	-	-	-	-	-	-	-	-	-	20,905,382	-
21. Increase in reserves for accident and health contracts	-	-	-	-	-	-	-	-	-	-	-	-	-	XXX
22. Increase in reserves for life contracts	-	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	-
23. Total underwriting deductions (Lines 17 to 22)	1,215,892,814	574,300,014	605,154,706	-	-	-	-	-	-	-	-	-	36,438,094	-
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	29,043,692	(22,947,375)	88,429,161	-	-	-	-	-	-	-	-	-	(36,438,094)	-
<b>Details of Write-Ins</b>														
0501.														XXX
0502.														XXX
0503.														XXX
0598. Summary of remaining write-ins for Line 5 from overflow page														XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)														XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0698. Summary of remaining write-ins for Line 6 from overflow page		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1301.														XXX
1302.														XXX
1303.														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page														XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)														XXX

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 1 – PREMIUMS

Line of Business		1	2	3	4
		Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1+2-3)
1.	Comprehensive (hospital and medical) individual.....	551,699,164	-	346,444	551,352,720
2.	Comprehensive (hospital and medical) group.....	694,548,415	-	962,124	693,586,291
3.	Medicare supplement.....	-	-	-	-
4.	Vision only.....	-	-	-	-
5.	Dental only.....	-	-	-	-
6.	Federal employees health benefits plan.....	-	-	-	-
7.	Title XVIII – Medicare.....	-	-	-	-
8.	Title XIX – Medicaid.....	-	-	-	-
9.	Credit A&H.....	-	-	-	-
10.	Disability income.....	-	-	-	-
11.	Long-term care.....	-	-	-	-
12.	Other health.....	-	-	-	-
13.	Health subtotal (Lines 1 through 12).....	1,246,247,579	-	1,308,568	1,244,939,011
14.	Life.....	-	-	-	-
15.	Property/casualty.....	-	-	-	-
16.	Totals (Lines 13 to 15).....	1,246,247,579	-	1,308,568	1,244,939,011

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2 – CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	1,038,075,694	513,059,216	525,016,478	-	-	-	-	-	-	-	-	-	-	-
1.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.4 Net	1,038,075,694	513,059,216	525,016,478	-	-	-	-	-	-	-	-	-	-	-
2. Paid medical incentive pools and bonuses	7,949,598	3,651,168	4,298,430	-	-	-	-	-	-	-	-	-	-	-
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	108,094,000	52,707,000	55,387,000	-	-	-	-	-	-	-	-	-	-	-
3.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.4 Net	108,094,000	52,707,000	55,387,000	-	-	-	-	-	-	-	-	-	-	-
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.4 Net	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5. Accrued medical incentive pools and bonuses, current year	2,996,637	1,071,298	1,925,339	-	-	-	-	-	-	-	-	-	-	-
6. Net health care receivables (a)	11,954,538	6,934,703	5,019,835	-	-	-	-	-	-	-	-	-	-	-
7. Amounts recoverable from reinsurers December 31, current year	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	100,741,000	50,046,000	50,695,000	-	-	-	-	-	-	-	-	-	-	-
8.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8.4 Net	100,741,000	50,046,000	50,695,000	-	-	-	-	-	-	-	-	-	-	-
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9.4 Net	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Accrued medical incentive pools and bonuses, prior year	1,574,669	505,082	1,069,587	-	-	-	-	-	-	-	-	-	-	-
11. Amounts recoverable from reinsurers December 31, prior year	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. Incurred benefits:														
12.1 Direct	1,033,474,156	508,785,513	524,688,643	-	-	-	-	-	-	-	-	-	-	-
12.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12.4 Net	1,033,474,156	508,785,513	524,688,643	-	-	-	-	-	-	-	-	-	-	-
13. Incurred medical incentive pools and bonuses	9,371,566	4,217,384	5,154,182	-	-	-	-	-	-	-	-	-	-	-

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

**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 2A – CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	47,248,938	22,746,492	24,502,446	-	-	-	-	-	-	-	-	-	-	-
1.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.4 Net	47,248,938	22,746,492	24,502,446	-	-	-	-	-	-	-	-	-	-	-
2. Incurred but Unreported:														
2.1 Direct	59,845,062	28,960,508	30,884,554	-	-	-	-	-	-	-	-	-	-	-
2.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.4 Net	59,845,062	28,960,508	30,884,554	-	-	-	-	-	-	-	-	-	-	-
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	1,000,000	1,000,000	-	-	-	-	-	-	-	-	-	-	-	-
3.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.4 Net	1,000,000	1,000,000	-	-	-	-	-	-	-	-	-	-	-	-
4. TOTALS:														
4.1 Direct	108,094,000	52,707,000	55,387,000	-	-	-	-	-	-	-	-	-	-	-
4.2 Reinsurance assumed	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.3 Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4.4 Net	108,094,000	52,707,000	55,387,000	-	-	-	-	-	-	-	-	-	-	-

**UNDERWRITING AND INVESTMENT EXHIBIT**

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

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	42,334,404	470,724,812	550,329	52,156,671	42,884,733	50,046,000
2. Comprehensive (hospital and medical) group	42,995,000	482,021,478	712,204	54,674,796	43,707,204	50,695,000
3. Medicare supplement	—	—	—	—	—	—
4. Vision only	—	—	—	—	—	—
5. Dental only	—	—	—	—	—	—
6. Federal employees health benefits plan	—	—	—	—	—	—
7. Title XVIII – Medicare	—	—	—	—	—	—
8. Title XIX – Medicaid	—	—	—	—	—	—
9. Credit A&H	—	—	—	—	—	—
10. Disability income	—	—	—	—	—	—
11. Long-term care	—	—	—	—	—	—
12. Other health	—	—	—	—	—	—
13. Health subtotal (Lines 1 to 12)	85,329,404	952,746,290	1,262,533	106,831,467	86,591,937	100,741,000
14. Health care receivables (a)	5,728,336	53,090,695	7,575	242,272	5,735,911	47,114,340
15. Other non-health	—	—	—	—	—	—
16. Medical incentive pools and bonus amounts	871,761	7,077,837	—	2,996,637	871,761	1,574,669
17. Totals (Lines 13 - 14 + 15 + 16)	80,472,829	906,733,432	1,254,958	109,585,832	81,727,787	55,201,329

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

**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**GRAND TOTAL**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	41,016	40,955	40,955	40,955	40,955
2. 2021.....	578,510	642,764	642,887	642,887	642,739
3. 2022.....	XXX	630,941	692,758	692,826	692,685
4. 2023.....	XXX	XXX	715,086	776,908	777,479
5. 2024.....	XXX	XXX	XXX	908,211	994,130
6. 2025.....	XXX	XXX	XXX	XXX	959,824

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....	41,048	40,955	40,955	40,955	40,955
2. 2021.....	648,309	642,854	642,892	642,887	642,739
3. 2022.....	XXX	707,917	693,089	692,832	692,696
4. 2023.....	XXX	XXX	803,317	777,267	777,587
5. 2024.....	XXX	XXX	XXX	1,010,162	995,275
6. 2025.....	XXX	XXX	XXX	XXX	1,069,652

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....	785,183	642,739	12,063	1.877	654,802	83.395	–	–	654,802	83.395
2. 2022.....	915,879	692,685	13,412	1.936	706,097	77.095	11	–	706,108	77.096
3. 2023.....	1,035,513	777,479	20,459	2.631	797,938	77.057	108	2	798,048	77.068
4. 2024.....	1,216,161	994,130	25,594	2.575	1,019,724	83.848	1,145	19	1,020,888	83.943
5. 2025.....	1,244,937	959,824	33,642	3.505	993,466	79.801	109,828	1,814	1,105,108	88.768

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**HOSPITAL & MEDICAL**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	41,016	40,955	40,955	40,955	40,955
2. 2021	578,510	642,764	642,887	642,887	642,739
3. 2022	XXX	630,941	692,758	692,826	692,685
4. 2023	XXX	XXX	715,086	776,908	777,479
5. 2024	XXX	XXX	XXX	908,211	994,130
6. 2025	XXX	XXX	XXX	XXX	959,824

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	41,048	40,955	40,955	40,955	40,955
2. 2021	648,309	642,854	642,892	642,887	642,739
3. 2022	XXX	707,917	693,089	692,832	692,696
4. 2023	XXX	XXX	803,317	777,267	777,587
5. 2024	XXX	XXX	XXX	1,010,162	995,275
6. 2025	XXX	XXX	XXX	XXX	1,069,652

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	785,183	642,739	12,063	1.877	654,802	83.395	–	–	654,802	83.395
2. 2022	915,879	692,685	13,412	1.936	706,097	77.095	11	–	706,108	77.096
3. 2023	1,035,513	777,479	20,459	2.631	797,938	77.057	108	2	798,048	77.068
4. 2024	1,216,161	994,130	25,594	2.575	1,019,724	83.848	1,145	19	1,020,888	83.943
5. 2025	1,244,937	959,824	33,642	3.505	993,466	79.801	109,828	1,814	1,105,108	88.768

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**MEDICARE SUPPLEMENT**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**DENTAL ONLY**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**VISION ONLY**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**FEDERAL EMPLOYEES HEALTH BENEFITS PLAN**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**TITLE XVIII MEDICARE**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**TITLE XIX MEDICAID**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**  
 PART 2C – DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS  
 (\$000 Omitted)  
**OTHER HEALTH**

**Section A – Paid Health Claims**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section B – Incurred Health Claims**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior.....					
2. 2021.....					
3. 2022.....	XXX				
4. 2023.....	XXX	XXX			
5. 2024.....	XXX	XXX	XXX		
6. 2025.....	XXX	XXX	XXX	XXX	

**Section C – Incurred Year Health Claims and Claims Adjustment Expense Ratio**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021.....										
2. 2022.....										
3. 2023.....										
4. 2024.....										
5. 2025.....										

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**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2D – AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY**

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
		Total	Individual										
1. Unearned premium reserves	186,459	4,698	181,761	-	-	-	-	-	-	-	-	-	-
2. Additional policy reserves (a)	-	-	-	-	-	-	-	-	-	-	-	-	-
3. Reserve for future contingent benefits	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Reserve for rate credits or experience rating refunds (including \$.....0 for investment income)	-	-	-	-	-	-	-	-	-	-	-	-	-
5. Aggregate write-ins for other policy reserves	34,534,000	7,589,000	26,945,000	-	-	-	-	-	-	-	-	-	-
6. Totals (gross)	34,720,459	7,593,698	27,126,761	-	-	-	-	-	-	-	-	-	-
7. Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-
8. Totals (Net) (Page 3, Line 4)	34,720,459	7,593,698	27,126,761	-	-	-	-	-	-	-	-	-	-
9. Present value of amounts not yet due on claims	-	-	-	-	-	-	-	-	-	-	-	-	-
10. Reserve for future contingent benefits	-	-	-	-	-	-	-	-	-	-	-	-	-
11. Aggregate write-ins for other claim reserves	-	-	-	-	-	-	-	-	-	-	-	-	-
12. Totals (gross)	-	-	-	-	-	-	-	-	-	-	-	-	-
13. Reinsurance ceded	-	-	-	-	-	-	-	-	-	-	-	-	-
14. Totals (Net) (Page 3, Line 7)	-	-	-	-	-	-	-	-	-	-	-	-	-
<b>Details of Write-Ins</b>													
0501. ACA RISK ADJUSTMENT PAYABLE	34,534,000	7,589,000	26,945,000	-	-	-	-	-	-	-	-	-	-
0502.	-	-	-	-	-	-	-	-	-	-	-	-	-
0503.	-	-	-	-	-	-	-	-	-	-	-	-	-
0598. Summary of remaining write-ins for Line 5 from overflow page	-	-	-	-	-	-	-	-	-	-	-	-	-
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	34,534,000	7,589,000	26,945,000	-	-	-	-	-	-	-	-	-	-
1101.	-	-	-	-	-	-	-	-	-	-	-	-	-
1102.	-	-	-	-	-	-	-	-	-	-	-	-	-
1103.	-	-	-	-	-	-	-	-	-	-	-	-	-
1198. Summary of remaining write-ins for Line 11 from overflow page	-	-	-	-	-	-	-	-	-	-	-	-	-
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	-	-	-	-	-	-	-	-	-	-	-	-	-

(a) Includes \$ – premium deficiency reserve.

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 3 – ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$.....0 for occupancy of own building).....	136,053	235,376	1,473,475	—	1,844,904
2. Salaries, wages and other benefits.....	11,175,675	19,572,251	66,016,559	23,473	96,787,958
3. Commissions (less \$.....0 ceded plus \$.....0 assumed).....	—	—	26,278,239	—	26,278,239
4. Legal fees and expenses.....	—	—	1,707,136	—	1,707,136
5. Certifications and accreditation fees.....	—	—	—	—	—
6. Auditing, actuarial and other consulting services.....	—	7,309	245,411	—	252,720
7. Traveling expenses.....	43,717	53,748	1,253,124	—	1,350,589
8. Marketing and advertising.....	75,509	106	1,466,600	—	1,542,215
9. Postage, express and telephone.....	110,324	1,283,539	1,319,618	—	2,713,481
10. Printing and office supplies.....	85,659	277,113	594,410	—	957,182
11. Occupancy, depreciation and amortization.....	301,183	508,774	1,379,166	—	2,189,123
12. Equipment.....	13,214	22,920	311,645	—	347,779
13. Cost or depreciation of EDP equipment and software.....	2,146,607	930,102	16,322,200	—	19,398,909
14. Outsourced services including EDP, claims, and other services.....	5,881,311	25,173,609	22,554,631	—	53,609,551
15. Boards, bureaus and association fees.....	16,905	2,404	868,808	29,430	917,547
16. Insurance, except on real estate.....	95,694	159,785	1,022,543	—	1,278,022
17. Collection and bank service charges.....	—	—	—	3,750	3,750
18. Group service and administration fees.....	804,717	536,478	—	—	1,341,195
19. Reimbursements by uninsured plans.....	(7,911,582)	(15,200,273)	(43,562,707)	—	(66,674,562)
20. Reimbursements from fiscal intermediaries.....	—	—	—	—	—
21. Real estate expenses.....	34,495	59,415	235,667	—	329,577
22. Real estate taxes.....	129,914	216,896	645,884	—	992,694
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes.....	—	—	—	—	—
23.2 State premium taxes.....	—	—	9,273,301	—	9,273,301
23.3 Regulatory authority licenses and fees.....	—	—	154,955	—	154,955
23.4 Payroll taxes.....	557,414	910,402	2,870,012	47	4,337,875
23.5 Other (excluding federal income and real estate taxes).....	—	—	9,401,940	—	9,401,940
24. Investment expenses not included elsewhere.....	—	—	—	1,357,047	1,357,047
25. Aggregate write-ins for expenses.....	1,080,289	1,461,862	225,561	—	2,767,712
26. Total expenses incurred (Lines 1 to 25).....	14,777,098	36,211,816	122,058,178	1,413,747	(a) 174,460,839
27. Less expenses unpaid December 31, current year.....	531,936	1,303,529	1,320,863	225,599	3,381,927
28. Add expenses unpaid December 31, prior year.....	397,851	856,538	1,955,099	231,078	3,440,566
29. Amounts receivable relating to uninsured plans, prior year.....	—	—	87,810,902	—	87,810,902
30. Amounts receivable relating to uninsured plans, current year.....	—	—	92,052,724	—	92,052,724
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).....	14,643,013	35,764,825	126,934,236	1,419,226	178,761,300
<b>Details of Write-Ins</b>					
2501. BLUECARD HOME ACCESS FEES.....	1,066,948	711,298	—	—	1,778,246
2502. MISCELLANEOUS EXPENSES AND REIMBURSEMENTS.....	13,341	750,564	225,561	—	989,466
2503.....	—	—	—	—	—
2598. Summary of remaining write-ins for Line 25 from overflow page.....	—	—	—	—	—
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	1,080,289	1,461,862	225,561	—	2,767,712

(a) Includes management fees of \$ 191,119,748 to affiliates and \$ — to non-affiliates.

**EXHIBIT OF NET INVESTMENT INCOME**

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) 492,880	531,841
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 11,097,667	11,295,386
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	3,552,452	3,558,164
2.21	Common stocks of affiliates		
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans		
6.	Cash, cash equivalents and short-term investments	(e) 316,821	328,983
7.	Derivative instruments	(f)	
8.	Other invested assets	714,672	701,672
9.	Aggregate write-ins for investment income	180,600	180,600
10.	Total gross investment income	16,355,092	16,596,646
11.	Investment expenses		(g) 1,413,700
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 47
13.	Interest expense		(h) 17,775
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		1,431,522
17.	Net investment income (Line 10 minus Line 16)		15,165,124
<b>Details of Write-Ins</b>			
0901.	Miscellaneous Investment Income	180,600	180,600
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page		
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	180,600	180,600
1501.			
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

- (a) Includes \$674,184 accrual of discount less \$1,584,851 amortization of premium and less \$422,722 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$28,482 accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	(21,831)		(21,831)		
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	(508,334)	(78,922)	(587,256)	193,979	
1.3	Bonds of affiliates					
2.1	Preferred stocks (unaffiliated)					
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)	7,331,345	789,834	8,121,179	7,771,891	1,285,950
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments	41	(71,398)	(71,357)		
7.	Derivative instruments					
8.	Other invested assets	(36,582)		(36,582)	31,332	
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	6,764,639	639,514	7,404,153	7,997,202	1,285,950
<b>Details of Write-Ins</b>						
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page					
0999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

**EXHIBIT OF NONADMITTED ASSETS**

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 – Col. 1)
1. Bonds (Schedule D).....	-		-
2. Stocks (Schedule D):			
2.1 Preferred stocks.....	-		-
2.2 Common stocks.....	-		-
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....	-		-
3.2 Other than first liens.....	-		-
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....	-		-
4.2 Properties held for the production of income.....	-		-
4.3 Properties held for sale.....	-		-
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....	-		-
6. Contract loans.....	-		-
7. Derivatives (Schedule DB).....	-		-
8. Other invested assets (Schedule BA).....	-		-
9. Receivables for securities.....	-		-
10. Securities lending reinvested collateral assets (Schedule DL).....	-		-
11. Aggregate write-ins for invested assets.....	-		-
12. Subtotals, cash and invested assets (Lines 1 to 11).....	-		-
13. Title plants (for Title insurers only).....	-		-
14. Investment income due and accrued.....	-		-
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	-		-
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	-		-
15.3 Accrued retrospective premiums and contracts subject to redetermination.....	-		-
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.....	3,842,998	6,527,273	2,684,275
18.1 Current federal and foreign income tax recoverable and interest thereon.....	-		-
18.2 Net deferred tax asset.....	-		-
19. Guaranty funds receivable or on deposit.....	-		-
20. Electronic data processing equipment and software.....	-		-
21. Furniture and equipment, including health care delivery assets.....	-		-
22. Net adjustment in assets and liabilities due to foreign exchange rates.....	-		-
23. Receivables from parent, subsidiaries and affiliates.....	-		-
24. Health care and other amounts receivable.....	22,060,829	12,307,264	(9,753,565)
25. Aggregate write-ins for other-than-invested assets.....	6,015,438	4,706,216	(1,309,222)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	31,919,265	23,540,753	(8,378,512)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	-		-
28. Total (Lines 26 and 27).....	31,919,265	23,540,753	(8,378,512)
<b>Details of Write-Ins</b>			
1101.....			
1102.....			
1103.....			
1198. Summary of remaining write-ins for Line 11 from overflow page.....			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....			
2501. PREPAID EXPENSES.....	6,015,438	4,706,216	(1,309,222)
2502.....			
2503.....			
2598. Summary of remaining write-ins for Line 25 from overflow page.....			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	6,015,438	4,706,216	(1,309,222)

**EXHIBIT 1 – ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY**

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations.....	154,989	153,368	154,416	153,336	151,015	1,841,263
2. Provider Service Organizations.....						
3. Preferred Provider Organizations.....						
4. Point of Service.....	46,845	47,470	47,676	49,415	49,999	583,037
5. Indemnity Only.....						
6. Aggregate write-ins for other lines of business.....						
7. Total.....	201,834	200,838	202,092	202,751	201,014	2,424,300
<b>Details of Write-Ins</b>						
0601.....						
0602.....						
0603.....						
0698. Summary of remaining write-ins for Line 6 from overflow page.....						
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....						

**Notes to the Financial Statements**

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

**A. Accounting Practices**

The financial statements of Wellmark Health Plan of Iowa, 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 #	2025	2024
<b>Net Income</b>					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 41,209,969	\$ 81,024,382
(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	<u>\$ 41,209,969</u>	<u>\$ 81,024,382</u>
<b>Surplus</b>					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 335,021,711	\$ 293,474,103
(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	<u>\$ 335,021,711</u>	<u>\$ 293,474,103</u>

**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.

In addition, the Company uses the following accounting policies:

(1) 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 constant yield method. Short-term investments that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value.

(2) Bonds, mandatory convertible securities, and SVO-identified investments per SSAP No. 26

Bonds that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the constant yield 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 Revenue and Expenses.

(3) Common stocks

Common stocks are reported at fair value. When a decline in the fair value of a common stock is considered to be other than temporary, the book value of the stock is reduced to fair value and a loss is realized on the Statement of Revenue and Expenses.

(4) Preferred stocks - Not Applicable

(5) Mortgage loans - Not Applicable

(6) Asset-backed securities

Asset-backed securities that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the constant yield method. Amortization of premiums and accretion of discounts on asset-backed securities is adjusted quarterly using current estimated future cash flows, including any new prepayment assumptions, using the prospective adjustment method. Asset-backed securities are stated at the lower of amortized cost or fair value if they are NAIC designation 3 through 6.

(7) Investments in subsidiaries, controlled and affiliated entities - Not Applicable

(8) Investments in joint ventures, partnerships and limited liability companies

**Notes to the Financial Statements**

**1. Summary of Significant Accounting Policies and Going Concern (Continued)**

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) Derivatives - Not Applicable

(10) Investment income as a factor in the 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) No. 54, Individual and Group Accident and Health Contracts.

(11) 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 capitalization policy - Not Applicable

(13) 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.

**2. Accounting Changes and Corrections of Errors - Not Applicable**

**3. Business Combinations and Goodwill - Not Applicable**

**4. Discontinued Operations - Not Applicable**

**5. Investments**

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

B. Debt Restructuring - Not Applicable

C. Reverse Mortgages - Not Applicable

D. Asset-Backed Securities

(1) Prepayment assumptions

For 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 asset-backed 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 Refinitiv is used, which utilizes the median prepayment speed from contributors' models.

(2) Asset-backed securities with a recognized other-than-temporary impairment (OTTI) - Not Applicable

(3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities

(1)	(2)	(3)	(4)	(5)	(6)	(7)
CUSIP	Book / Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognized OTTI	Amortized Cost After OTTI	Fair Value at Time of OTTI	Date of Financial Statement Where Reported
59023L-AC-6	\$ 74,110	\$ 36,927	\$ 37,183	\$ 36,927	\$ 36,835	12/01/2025
12530M-AA-3	262,207	220,468	41,739	220,468	220,468	12/31/2025
Total	XXX	XXX	<u>\$ 78,922</u>	XXX	XXX	XXX

(4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss

a. Aggregate amount of unrealized losses

- 1. Less than 12 months ..... \$ 109,451
- 2. 12 months or longer ..... 1,161,199

b. The aggregate related fair value of securities with unrealized losses

- 1. Less than 12 months ..... \$ 13,041,958
- 2. 12 months or longer ..... 13,768,860

**Notes to the Financial Statements**

**5. Investments (Continued)**

(5) Support for concluding impairments are not other-than-temporary

The unrealized losses on the Company's investments in asset-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.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - Not Applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable
- 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. Investments in Tax Credit Structures (tax credit investments) - 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

	General Account
(1) Number of CUSIPs.....	6
(2) Aggregate amount of investment income.....	\$..... (34,080)

- R. Reporting Entity's Share of Cash Pool by Asset Type - Not Applicable
- S. Aggregate Collateral Loans by Qualifying Investment Collateral - Not Applicable

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

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

As of December 31, 2025, the Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. Impaired Investments in 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 2025 or 2024.

**7. Investment Income**

- A. Due and Accrued Income Excluded from Surplus - Not Applicable
- B. Total Amount Excluded - Not Applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

Interest Income Due and Accrued	Amount
1. Gross.....	\$..... 2,619,514
2. Nonadmitted.....	\$.....
3. Admitted.....	\$..... 2,619,514

- D. The aggregate deferred interest - Not Applicable
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance  
PIK interest is not material.

**8. Derivative Instruments - Not Applicable**

**9. Income Taxes**

On July 4, 2025, the President signed into law the One Big Beautiful Bill Act (OBBBA), which included significant amendments to the U.S. Internal Revenue Code. Key provisions of the legislation that impacted the Company included changes to the bonus depreciation rules and the allowance of immediate expensing of domestic research and experimental expenditures. The Company recognized these changes in the third quarter as it was the period of enactment in accordance with SSAP No. 101. The provisions had an immaterial impact on the Company's current tax expense and deferred taxes.

**Notes to the Financial Statements**

**9. Income Taxes (Continued)**

A. Components of the net deferred tax asset/(liability)

(1) Change between years by tax character

	2025			2024			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets	\$ 9,733,000	\$ 821,000	\$ 10,554,000	\$ 8,345,000	\$ 760,000	\$ 9,105,000	\$ 1,388,000	\$ 61,000	\$ 1,449,000
(b) Statutory valuation allowance adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (1a - 1b)	9,733,000	821,000	10,554,000	8,345,000	760,000	9,105,000	1,388,000	61,000	1,449,000
(d) Deferred tax assets nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal net admitted deferred tax asset (1c - 1d)	\$ 9,733,000	\$ 821,000	\$ 10,554,000	\$ 8,345,000	\$ 760,000	\$ 9,105,000	\$ 1,388,000	\$ 61,000	\$ 1,449,000
(f) Deferred tax liabilities	160,000	9,949,000	10,109,000	93,000	8,000,000	8,093,000	67,000	1,949,000	2,016,000
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 9,573,000	\$ (9,128,000)	\$ 445,000	\$ 8,252,000	\$ (7,240,000)	\$ 1,012,000	\$ 1,321,000	\$ (1,888,000)	\$ (567,000)

(2) Admission calculation components SSAP No. 101

	2025			2024			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 9,047,000	\$ 599,000	\$ 9,646,000	\$ 7,969,000	\$ 523,000	\$ 8,492,000	\$ 1,078,000	\$ 76,000	\$ 1,154,000
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below)	270,000		270,000	150,000		150,000	120,000		120,000
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date	270,000		270,000	150,000		150,000	120,000		120,000
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	50,186,507	XXX	XXX	43,869,315	XXX	XXX	6,317,192
(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	416,000	222,000	638,000	226,000	237,000	463,000	190,000	(15,000)	175,000
(d) Deferred tax assets admitted as the result of application of SSAP No. 101									
Total (2(a) + 2(b) + 2(c))	\$ 9,733,000	\$ 821,000	\$ 10,554,000	\$ 8,345,000	\$ 760,000	\$ 9,105,000	\$ 1,388,000	\$ 61,000	\$ 1,449,000

(3) Ratio used as basis of admissibility

	2025	2024
(a) Ratio percentage used to determine recovery period and threshold limitation amount	740.782 %	709.978 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 334,576,711	\$ 292,462,103

(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

	2025		2024		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	Ordinary (Col 1-3)	Capital (Col 2-4)
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 9,733,000	\$ 821,000	\$ 8,345,000	\$ 760,000	\$ 1,388,000	\$ 61,000
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	- %	- %	%	%	- %	- %
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 9,733,000	\$ 821,000	\$ 8,345,000	\$ 760,000	\$ 1,388,000	\$ 61,000
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	- %	- %	%	%	- %	- %

(b) Use of reinsurance-related tax-planning strategies

Does the company's tax-planning strategies include the use of reinsurance? **NO**

B. Regarding deferred tax liabilities that are not recognized - Not Applicable

## Notes to the Financial Statements

## 9. Income Taxes (Continued)

## C. Major components of current income taxes incurred

	(1)	(2)	(3)
	2025	2024	Change (Col 1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal	\$ 8,949,000	\$ 20,244,000	\$ (11,295,000)
(b) Foreign	-	-	-
(c) Subtotal (1a+1b)	\$ 8,949,000	\$ 20,244,000	\$ (11,295,000)
(d) Federal income tax on net capital gains	1,454,000	1,234,000	220,000
(e) Utilization of capital loss carry-forwards	-	-	-
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 10,403,000	\$ 21,478,000	\$ (11,075,000)
	(1)	(2)	(3)
	2025	2024	Change (Col 1-2)
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 1,989,000	\$ 1,952,000	\$ 37,000
(2) Unearned premium reserve	1,041,000	1,048,000	(7,000)
(3) Policyholder reserves	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	-	-	-
(8) Compensation and benefits accrual	-	-	-
(9) Pension accrual	-	-	-
(10) Receivables - nonadmitted	5,440,000	3,955,000	1,485,000
(11) Net operating loss carry-forward	-	-	-
(12) Tax credit carry-forward	-	-	-
(13) Other	1,263,000	1,390,000	(127,000)
(99) Subtotal (Sum of 2a1 through 2a13)	\$ 9,733,000	\$ 8,345,000	\$ 1,388,000
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 9,733,000	\$ 8,345,000	\$ 1,388,000
(e) Capital			
(1) Investments	\$ 821,000	\$ 760,000	\$ 61,000
(2) Net capital loss carry-forward	-	-	-
(3) Real estate	-	-	-
(4) Other	-	-	-
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 821,000	\$ 760,000	\$ 61,000
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	-	-	-
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	821,000	760,000	61,000
(i) Admitted deferred tax assets (2d + 2h)	\$ 10,554,000	\$ 9,105,000	\$ 1,449,000
	(1)	(2)	(3)
	2025	2024	Change (Col 1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$ 160,000	\$ 93,000	\$ 67,000
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other	-	-	-
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 160,000	\$ 93,000	\$ 67,000
(b) Capital			
(1) Investments	\$ 9,949,000	\$ 8,000,000	\$ 1,949,000
(2) Real estate	-	-	-
(3) Other	-	-	-
(99) Subtotal (3b1+3b2+3b3)	\$ 9,949,000	\$ 8,000,000	\$ 1,949,000
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 10,109,000	\$ 8,093,000	\$ 2,016,000
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 445,000	\$ 1,012,000	\$ (567,000)

## Notes to the Financial Statements

### 9. Income Taxes (Continued)

The change in 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 the surplus section of the Annual Statement):

	(1)	(2)	(3)
	2025	2024	Change (Col 1-2)
Adjusted gross deferred tax assets .....	\$ 10,554,000	\$ 9,105,000	\$ 1,449,000
Total deferred tax liabilities .....	10,109,000	8,093,000	2,016,000
Net deferred tax assets (liabilities) .....	\$ 445,000	\$ 1,012,000	\$ (567,000)
Statutory valuation allowance adjustment .....			
Net deferred tax assets (liabilities) after statutory valuation allowance .....	\$ 445,000	\$ 1,012,000	\$ (567,000)
Tax effect of unrealized gains (losses) .....			1,949,000
Change in net deferred income tax .....			<u>\$ 1,382,000</u>

#### D. Among the more significant book to tax adjustments

	2025	Effective Tax Rate
Provision computed at statutory rate .....	\$ 10,839,000	21.000 %
Change in nonadmitted assets .....	(1,759,000)	-3.408 ...
Tax exempt interest deduction, net .....	(38,000)	-0.074 ...
Dividends received deduction, net .....	(84,000)	-0.163 ...
Nondeductible lobbying expenses .....	13,000	0.025 ...
Other permanent differences .....	44,000	0.085 ...
Credits generated in current year .....	(58,000)	-0.112 ...
Adjustment of prior year's tax .....	64,000	0.124 ...
Total .....	<u>\$ 9,021,000</u>	<u>17.478 %</u>

	2025	Effective Tax Rate
Federal and foreign income taxes incurred .....	\$ 8,949,000	17.338 %
Realized capital gains (losses) tax .....	1,454,000	2.817 ...
Change in net deferred income taxes .....	(1,382,000)	-2.678 ...
Total statutory income taxes .....	<u>\$ 9,021,000</u>	<u>17.478 %</u>

#### E. Operating loss and tax credit carryforwards

- (1) At December 31, 2025, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.
- (2) Income tax expense available for recoupment

The following are income taxes in the current and prior years that will be available for recoupment in the event of future net losses:

	Ordinary	Capital	Total
2023 .....	\$ .....	\$ 186,000	\$ 186,000
2024 .....	20,289,000	1,315,000	21,604,000
2025 .....	8,885,000	1,454,000	10,339,000

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

#### F. Consolidated federal income tax return

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

- Wellmark, Inc. (Wellmark) - Parent
- Wellmark of South Dakota, Inc.
- Wellmark Synergy Health, Inc.
- Wellmark Value Health Plan, Inc.
- First Administrators, LLC
- Midwest Benefit Consultants, LLC
- Wellmark Holdings, LLC

- (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, 2025, the Company's tax related balance due to Wellmark was \$9,972,188.

## Notes to the Financial Statements

### 9. Income Taxes (Continued)

G. Federal or foreign income tax loss contingencies

At December 31, 2025, 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) - Not Applicable

I. Alternative Minimum Tax (AMT) Credit - Not Applicable

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

A. Nature of Relationships

The Company is wholly owned by its parent company, Wellmark, a mutual insurance company domiciled in the state of Iowa (NAIC Company #88848).

B. Detail of Related Party Transactions

The Company issued a dividend to Wellmark during 2024 in the amount of \$89,000,000. No dividends were issued in 2025.

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

D. Amounts Due To or From Related Parties

At December 31, 2025 and 2024, the Company reported amounts due from Wellmark of \$39,440,205 and \$9,932,882, respectively. The terms of the agreement require that these amounts are settled within 30 days.

E. Management Service Contracts and Cost Sharing Arrangements

The Company has a management agreement with Wellmark whereby Wellmark provides certain management and administrative services. The costs for these services are computed on a monthly basis. The Company agrees to pay Wellmark for costs related to services outlined in the agreement. For 2025 and 2024, these costs were \$191,119,748 and \$166,198,164, respectively.

F. Guarantees or Contingencies - Not Applicable

G. Nature of Relationships that Could Affect Operations

All outstanding shares of the Company are owned by Wellmark.

H. Amount Deducted for Investment in Upstream Company - Not Applicable

I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - Not Applicable

J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - Not Applicable

K. Foreign Subsidiary Value Using CARVM - Not Applicable

L. Downstream Holding Company Value Using Look-Through Method - Not Applicable

M. All SCA Investments - Not Applicable

N. Investment in Insurance SCAs - Not Applicable

O. SCA and SSAP No. 48 Entity Loss Tracking - Not Applicable

### 11. Debt - Not Applicable

### 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - Not Applicable

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

A. Outstanding Shares

The Company has 100,000,000 shares authorized; 2,400,000 shares issued; and 2,400,000 shares outstanding.

B. Dividend Rate of Preferred Stock - Not Applicable

C. Dividend Restrictions

Without prior approval of its domiciliary commissioner, dividends to shareholders are limited to the greater of ten percent of surplus at December 31 of the prior year or net gain from operations for the twelve month period ending December 31 of the prior year.

D. Ordinary Dividends - Not Applicable

E. Company Profits Paid as Ordinary Dividends

Within the limitations of (C) above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

F. Surplus Restrictions - Not Applicable

G. Surplus Advances - Not Applicable

H. Stock Held for Special Purposes - Not Applicable

**Notes to the Financial Statements**

**13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (Continued)**

- I. Changes in Special Surplus Funds - Not Applicable
- J. Unassigned Funds (Surplus)  
The Portion of Unassigned Funds (Surplus) Represented or Reduced by Cumulative Unrealized Gains and Losses is \$47,376,097.
- K. Company-Issued Surplus Debentures or Similar Obligations - Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - Not Applicable

**14. Liabilities, Contingencies and Assessments**

- A. Contingent Commitments
  - (1) Commitments or contingent commitment(s) to an SCA entity, joint venture, partnership, or limited liability company  
The Company, as a wholly owned subsidiary of Wellmark, is required by licensure requirements of the Blue Cross and Blue Shield Association to execute parental guarantees pursuant to which the parent guarantees to the full extent of its assets all contractual and financial obligations of the Company to its respective customers. Wellmark is also required by the Iowa Insurance Division to guarantee the obligations of the Company for services up to \$1,100,000.
  - (2) Nature and circumstances of guarantee - Not Applicable
  - (3) Aggregate compilation of guarantee obligations - Not Applicable
- B. Assessments
  - (1) 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 liabilities of \$4,650,000 and \$3,940,000 for estimated health related assessments at December 31, 2025 and December 31, 2024, respectively.
  - (2) Assets (Liabilities) recognized from paid and accrued premium tax offsets and policy surcharges - Not Applicable
  - (3) Guaranty fund liabilities and assets related to long-term care insolvencies - Not Applicable
- C. Gain Contingencies - Not Applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - Not Applicable
- E. Joint and Several Liabilities - Not Applicable
- F. All Other Contingencies

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.

**15. Leases - Not Applicable**

**16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - Not Applicable**

**17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - Not Applicable**

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

- A. ASO Plans - Not Applicable
- B. ASC Plans

The gain (loss) from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans were as follows during 2025:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred	\$ 500,398,479	\$ 975,516,041	\$ 1,475,914,520
b. Gross administrative fees accrued	21,000,476	41,679,835	62,680,311
c. Other income or expenses (including interest paid to or received from plans)			
d. Gross expenses incurred (claims and administrative) (a+b+c)	521,398,955	1,017,195,876	1,538,594,831
e. Total net gain or loss from operations	<u>\$ (12,604,925)</u>	<u>\$ (23,833,169)</u>	<u>\$ (36,438,094)</u>

- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract - Not Applicable

**19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - Not Applicable**

## Notes to the Financial Statements

### 20. Fair Value Measurements

#### A. Fair Value Measurement

##### (1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
<b>a. Assets at fair value</b>					
Bonds: Issuer Credit Obligations	\$	\$ 1,302,721	\$	\$	\$ 1,302,721
Bonds: Asset-Backed Securities		3,799,014			3,799,014
Cash Equivalents: Exempt MM Mutual Funds	10,558,310				10,558,310
Common Stock: Industrial & Miscellaneous	107,384,034				107,384,034
Common Stock: Mutual Funds	31,039,882				31,039,882
<b>Total assets at fair value/NAV</b>	<b>\$ 148,982,226</b>	<b>\$ 5,101,735</b>	<b>\$</b>	<b>\$</b>	<b>\$ 154,083,961</b>
<b>b. Liabilities at fair value</b>					
<b>Total liabilities at fair value</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

##### (2) Fair value measurements in Level 3 of the fair value hierarchy - Not Applicable

##### (3) Policy on transfers into and out of Level 3

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

##### (4) Inputs and techniques used for Level 2 and Level 3 fair values

Issuer credit obligations, asset-backed securities, and residual tranches 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 follows 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 market 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.

##### (5) Derivatives - Not Applicable

#### B. Other Fair Value Disclosures

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 Values or NAV for All Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Issuer Credit Obligations	\$ 162,729,322	\$ 162,460,932	\$	\$ 162,729,322	\$	\$	\$
Asset-Backed Securities	95,295,705	94,419,586		95,295,705			
Cash Equivalents	10,558,310	10,558,310	10,558,310				
Common Stock	138,423,916	138,423,916	138,423,916				
Other Invested Assets	302,989	310,385		302,989			

#### D. Not Practicable to Estimate Fair Value - Not Applicable

#### E. Nature and Risk of Investments Reported at NAV - Not Applicable

### 21. Other Items

#### A. Unusual or Infrequent Items - Not Applicable

#### B. Troubled Debt Restructuring - Not Applicable

#### C. Other Disclosures

Revisions to SSAP No. 26, "Bonds," SSAP No. 43, "Asset-Backed Securities," and SSAP No. 21, "Other Admitted Assets," collectively known as the "Principles-Based Bond Definition Project" (PBB), were effective January 1, 2025. Upon adoption of PBB, no investment securities required reclassification. One residual tranche investment required remeasurement as of January 1, 2025.

#### D. Business Interruption Insurance Recoveries - Not Applicable

#### E. State and Federal Tax Credits - Not Applicable

#### F. Subprime-Mortgage-Related Risk Exposure

##### (1) Subprime mortgage exposure

**Notes to the Financial Statements**

**21. Other Items (Continued)**

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, 2025 is 0.8% 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 \$88,347 and \$104,217, respectively, as of December 31, 2025. 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. Asset-backed securities	\$ 3,750,391	\$ 3,502,137	\$ 3,575,012	\$ 37,183
b. Collateralized loan obligations				
c. Equity investment in SCAs				
d. Other assets				
e. Total (a+b+c+d)	<u>\$ 3,750,391</u>	<u>\$ 3,502,137</u>	<u>\$ 3,575,012</u>	<u>\$ 37,183</u>

- (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 - Not Applicable

**22. Events Subsequent**

Type I – Recognized Subsequent Events

Subsequent events have been considered through February 25, 2026 for the statutory statement issued on March 1, 2026.

Type II – Nonrecognized Subsequent Events

Subsequent events have been considered through February 25, 2026 for the statutory statement issued on March 1, 2026.

**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)

**Notes to the Financial Statements**

**23. Reinsurance (Continued)**

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

Yes ( ) No (X)

- B. Uncollectible Reinsurance - Not Applicable
- C. Commutation of Ceded Reinsurance - Not Applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - Not Applicable
- E. Reinsurance Credit - Not Applicable

**24. Retrospectively Rated Contracts & Contracts Subject to Redetermination**

A. Method Used to Estimate

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. Method Used to Record

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

C. Amount and Percent of Net Retrospective Premiums

The amount of net premiums written by the Company at December 31, 2025 that are subject to retrospective rating features was \$1,244,939,011, which represented 100% of the total net premiums written by the Company.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - Not Applicable

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

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

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

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year

Amount

a. Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to the ACA risk adjustment (including high-risk pool payments)..... \$..... 15,000

Liabilities

2. Risk adjustment user fees payable for ACA risk adjustment..... \$..... 266,196

3. Premium adjustments payable due to ACA risk adjustment (including high-risk pool premium)..... 34,534,000

Operations (Revenue & Expense)

4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment..... \$..... (40,771,615)

5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)..... 272,070

- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance

	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	(1)	(2)	(3)	(4)	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)

a. Permanent ACA Risk Adjustment Program

1. Premium adjustments receivable (including high-risk pool payments).....	\$..... 140,000	\$.....	\$..... 341,639	\$.....	\$..... (201,639)	\$.....	\$..... 201,639	\$.....	A	\$..... -	\$.....
2. Premium adjustments payable (including high-risk pool premium).....		(28,498,000)		(34,952,254)		6,454,254		(6,454,254)	B		-
3. Subtotal ACA Permanent Risk Adjustment Program.....	\$..... 140,000	\$..... (28,498,000)	\$..... 341,639	\$..... (34,952,254)	\$..... (201,639)	\$..... 6,454,254	\$..... 201,639	\$..... (6,454,254)		\$..... -	\$..... -

Explanations of Adjustments

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

**Notes to the Financial Statements**

**25. Change in Incurred Claims and Claim Adjustment Expenses**

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

The Company's reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years have decreased \$14,190,529 from \$101,995,389 in 2024. 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. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses - Not Applicable

**26. Intercompany Pooling Arrangements** - Not Applicable

**27. Structured Settlements** - Not Applicable

**28. Health Care Receivables**

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2025	\$ 74,457,200	\$	\$	\$	\$
09/30/2025	71,777,705	71,814,086	71,814,086		
06/30/2025	72,792,187	80,469,402	80,469,402		
03/31/2025	74,469,004	75,552,501	75,552,501		
12/31/2024	62,750,779	63,904,245	63,904,245		
09/30/2024	60,534,400	62,611,573	62,611,573		
06/30/2024	51,762,300	62,019,695	59,439,536	2,580,159	
03/31/2024	51,762,300	61,148,940	55,287,060	2,380,797	3,481,083
12/31/2023	44,840,073	50,888,600	50,888,600		
09/30/2023	48,090,000	50,808,566	50,808,566		
06/30/2023	51,600,000	51,262,004	51,262,004		
03/31/2023	45,400,000	48,246,272	48,246,272		

B. Risk-Sharing Receivables - Not Applicable

C. Medicare Prescription Payment Plan Receivables - Not Applicable

**29. Participating Policies** - Not Applicable

**30. Premium Deficiency Reserves**

- Liability carried for premium deficiency reserves: \$ -
- Date of the most recent evaluation of this liability: 12/31/2025
- Was anticipated investment income utilized in the calculation? YES

**31. Anticipated Salvage and Subrogation** - Not Applicable

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

**GENERAL**

- 1.1. Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?..... YES.....  
If yes, complete Schedule Y, Parts 1, 1A, 2, and 3.
- 1.2. If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?..... YES.....
- 1.3. State Regulating?..... IOWA.....
- 1.4. Is the reporting entity publicly traded or a member of a publicly traded group?..... NO.....
- 1.5. If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.....
- 2.1. Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?..... NO.....
- 2.2. If yes, date of change:.....
- 3.1. State as of what date the latest financial examination of the reporting entity was made or is being made..... 12/31/2021.....
- 3.2. State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released..... 12/31/2021.....
- 3.3. State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date)..... 03/20/2023.....
- 3.4. By what department or departments?  
IOWA INSURANCE DIVISION
- 3.5. Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?..... N/A.....
- 3.6. Have all of the recommendations within the latest financial examination report been complied with?..... N/A.....
- 4.1. During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.11. sales of new business?..... NO.....
- 4.12. renewals?..... NO.....
- 4.2. During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.21. sales of new business?..... NO.....
- 4.22. renewals?..... NO.....
- 5.1. Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO.....  
If yes, complete and file the merger history data file with the NAIC.
- 5.2. If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.
- | 1              | 2                 | 3                 |
|----------------|-------------------|-------------------|
| Name of Entity | NAIC Company Code | State of Domicile |
|                |                   |                   |
- 6.1. Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?..... NO.....
- 6.2. If yes, give full information
- 7.1. Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?..... NO.....
- 7.2. If yes,
- 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 mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).
- | 1           | 2              |
|-------------|----------------|
| Nationality | Type of Entity |
|             |                |
- 8.1. Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?..... NO.....
- 8.2. If response to 8.1 is yes, please identify the name of the DIHC.....
- 8.3. Is the company affiliated with one or more banks, thrifts or securities firms?..... NO.....
- 8.4. If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

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

- 8.5. Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?..... NO.....
- 8.6. If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?..... NO.....
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
KPMG, 666 GRAND AVENUE, #2500, DES MOINES, IA 50309
- 10.1. Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?..... NO.....
- 10.2. If the response to 10.1 is yes, provide information related to this exemption:
- 10.3. Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?..... NO.....
- 10.4. If the response to 10.3 is yes, provide information related to this exemption:
- 10.5. Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?..... YES.....
- 10.6. If the response to 10.5 is no or n/a, please explain.
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
DANIEL J. CALLAHAN, SENIOR ACTUARY, FSA, MAAA (EMPLOYEE), 1331 GRAND AVENUE, DES MOINES, IA 50309-2901
- 12.1. Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?..... NO.....
- 12.11 Name of real estate holding company
- 12.12 Number of parcels involved.....
- 12.13 Total book / adjusted carrying value..... \$.....
- 12.2. If yes, provide explanation
13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1. What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?.....
- 13.2. Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?.....
- 13.3. Have there been any changes made to any of the trust indentures during the year?.....
- 13.4. If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?.....
- 14.1. Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... YES.....
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.
- 14.11. If the response to 14.1 is no, please explain:
- 14.2. Has the code of ethics for senior managers been amended?..... NO.....
- 14.21. If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3. Have any provisions of the code of ethics been waived for any of the specified officers?..... NO.....
- 14.31. If the response to 14.3 is yes, provide the nature of any waiver(s).
- 15.1. Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?..... NO.....
- 15.2. If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
			\$

**BOARD OF DIRECTORS**

- 16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... YES
- 17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... YES
- 18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? ..... YES

**FINANCIAL**

- 19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... NO
- 20.1. Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
  - 20.11 To directors or other officers ..... \$ -
  - 20.12 To stockholders not officers ..... \$ -
  - 20.13 Trustees, supreme or grand (Fraternal only) ..... \$ -
- 20.2. Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
  - 20.21 To directors or other officers ..... \$ -
  - 20.22 To stockholders not officers ..... \$ -
  - 20.23 Trustees, supreme or grand (Fraternal only) ..... \$ -
- 21.1. Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... NO
- 21.2. If yes, state the amount thereof at December 31 of the current year:
  - 21.21 Rented from others ..... \$ -
  - 21.22 Borrowed from others ..... \$ -
  - 21.23 Leased from others ..... \$ -
  - 21.24 Other ..... \$ -
- 22.1. Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments? ..... YES
- 22.2. If answer is yes:
  - 22.21 Amount paid as losses or risk adjustment ..... \$ 2,958,803
  - 22.22 Amount paid as expenses ..... \$ -
  - 22.23 Other amounts paid ..... \$ -
- 23.1. Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... YES
- 23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ 39,440,205
- 24.1. Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? ..... NO
- 24.2. If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1	2
Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

**INVESTMENT**

- 25.01. 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 25.03) ..... YES
- 25.02. If no, give full and complete information, relating thereto
- 25.03. For securities 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)
- 25.04. For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions ..... \$ -
- 25.05. For the reporting entity's securities lending program, report amount of collateral for other programs ..... \$ -
- 25.06. Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... N/A
- 25.07. Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... N/A
- 25.08. Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? ..... N/A

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

25.09. For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:  
 25.091. Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$  
 25.092. Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$  
 25.093. Total payable for securities lending reported on the liability page ..... \$ -

26.1. 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 currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03)..... NO

26.2. If yes, state the amount thereof at December 31 of the current year:  
 26.21. Subject to repurchase agreements ..... \$  
 26.22. Subject to reverse repurchase agreements ..... \$  
 26.23. Subject to dollar repurchase agreements ..... \$  
 26.24. Subject to reverse dollar repurchase agreements ..... \$  
 26.25. Placed under option agreements ..... \$  
 26.26. Letter stock or securities restricted as to sale - excluding FHLB Capital Stock ..... \$  
 26.27. FHLB Capital Stock ..... \$  
 26.28. On deposit with states ..... \$  
 26.29. On deposit with other regulatory bodies ..... \$  
 26.30. Pledged as collateral - excluding collateral pledged to an FHLB ..... \$  
 26.31. Pledged as collateral to FHLB - including assets backing funding agreements ..... \$  
 26.32. Other ..... \$

26.3. For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

27.1. Does the reporting entity have any hedging transactions reported on Schedule DB?..... NO

27.2. 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..... N/A

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3. Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?.....

27.4. If the response to 27.3 is YES, does the reporting entity utilize:  
 27.41 Special accounting provision of SSAP No. 108.....  
 27.42 Permitted accounting practice.....  
 27.43 Other accounting guidance.....

27.5. By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:  
 • 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.  
 • 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 Guideline 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 that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1. 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, convertible into equity?..... NO

28.2. If yes, state the amount thereof at December 31 of the current year..... \$

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

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

1 Name of Custodian(s)	2 Custodian's Address
BNY.....	BNY MELLON CENTER, 500 GRANT STREET, PITTSBURGH, PA 15258.....

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

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

29.03. Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... NO

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

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

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

29.05. Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

1 Name of Firm or Individual	2 Affiliation
NISA INVESTMENT ADVISORS, LLC.....	U.....
METROPOLITAN WEST ASSET MANAGEMENT, LLC.....	U.....
MFS INSTITUTIONAL ADVISORS, INC.....	U.....
WELLINGTON MANAGEMENT COMPANY LLP.....	U.....
BROADRIDGE BUSINESS PROCESS OUTSOURCING, LLC.....	U.....
MERCER INVESTMENTS LLC.....	U.....
WELLMARK, INC.....	I.....

29.0597. For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity’s invested assets?..... YES.....

29.0598. For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity’s invested assets?..... YES.....

29.06. For those firms or individuals listed in the table for 29.05 with an affiliation code of “A” (affiliated) or “U” (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Registered With	4 Investment Management Agreement (IMA) Filed
107313.....	NISA INVESTMENT ADVISORS, LLC.....	SEC.....	NO.....
104571.....	METROPOLITAN WEST ASSET MANAGEMENT, LLC.....	SEC.....	NO.....
107144.....	MFS INSTITUTIONAL ADVISORS, INC.....	SEC.....	NO.....
106595.....	WELLINGTON MANAGEMENT COMPANY LLP.....	SEC.....	NO.....
114212.....	BROADRIDGE BUSINESS PROCESS OUTSOURCING, LLC.....	SEC.....	NO.....
133449.....	MERCER INVESTMENTS LLC.....	SEC.....	NO.....

30.1. Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?..... YES.....

30.2. If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
72201F490.....	PIMCO INCOME INSTL.....	\$..... 31,039,882
30.2999 TOTAL		\$..... 31,039,882

30.3. For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund’s Book / Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
PIMCO INCOME INSTL.....	Uniform MBS TBA 6.000% due 10/01/2055 - 12/01/2055.....	\$..... 3,055,570.....	09/30/2025.....
PIMCO INCOME INSTL.....	Uniform MBS TBA 6.500% due 10/01/2055 - 12/01/2055.....	2,859,749.....	09/30/2025.....
PIMCO INCOME INSTL.....	PIMCO Short-Term Floating NAV Portfolio III.....	2,232,537.....	09/30/2025.....
PIMCO INCOME INSTL.....	Uniform MBS TBA 5.500% due 11/01/2055 - 12/01/2055.....	1,610,257.....	09/30/2025.....
PIMCO INCOME INSTL.....	Uniform MBS TBA 5.000% due 10/01/2055 - 12/01/2055.....	1,553,113.....	09/30/2025.....

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1. Issuer Credit Obligations.....	\$..... 162,460,932	\$..... 162,729,322	\$..... 268,390
31.2. Asset-Backed Securities.....	94,419,586	95,295,704	876,118
31.3. Preferred Stocks.....			
31.4. Totals.....	\$..... 256,880,518	\$..... 258,025,026	\$..... 1,144,508

31.5. Describe the sources or methods utilized in determining the fair values:

The Company obtains one or more prices from a third party pricing service or its custodian and evaluates between the sources for any outliers or stale prices. Assuming prices are not stale and are reasonable, the Company follows a pre-established hierarchy to determine which source to utilize.

32.1. Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?..... YES.....

32.2. If the answer to 32.1 is yes, does the reporting entity have a copy of the broker’s or custodian’s pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?..... YES.....

32.3. If the answer to 32.2 is no, describe the reporting entity’s process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

**GENERAL INTERROGATORIES**  
PART 1 - COMMON INTERROGATORIES

- 33.1. Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?..... YES.....
- 33.2. If no, list exceptions:
34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
  - b. Issuer or obligor is current on all contracted interest and principal payments.
  - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities?..... NO.....
35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
- a. The security was either:
    - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
    - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
  - b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
  - c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
  - d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
- Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?..... NO.....
36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
  - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
  - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
  - d. The fund only or predominantly holds bonds in its portfolio.
  - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
  - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?..... NO.....
37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
  - b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
  - c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
  - d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
- Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?..... N/A.....
- 38.1. Does the reporting entity directly hold cryptocurrencies?..... NO.....
- 38.2. If the response to 38.1 is yes, on what schedule are they reported?.....
- 39.1. Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?..... NO.....
- 39.2. If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
- 39.21 Held directly.....
- 39.22 Immediately converted to U.S. dollars.....
- 39.3. If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums

**OTHER**

- 40.1. Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?..... \$..... 830,804
- 40.2. List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
BLUE CROSS AND BLUE SHIELD ASSOCIATION.....	\$..... 639,015

- 41.1. Amount of payments for legal expenses, if any?..... \$..... 1,707,136

**GENERAL INTERROGATORIES**

PART 1 - COMMON INTERROGATORIES

41.2. List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
	\$

42.1. Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any?..... \$

42.2. List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
	\$

**GENERAL INTERROGATORIES**  
PART 2 - HEALTH INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force?..... NO
- 1.2 If yes, indicate premium earned on U.S. business only..... \$
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?..... \$
  - 1.31 Reason for excluding:
- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above..... \$
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance..... \$
- 1.6 Individual policies:
  - Most current three years:
    - 1.61 Total premium earned..... \$
    - 1.62 Total incurred claims..... \$
    - 1.63 Number of covered lives.....
  - All years prior to most current three years:
    - 1.64 Total premium earned..... \$
    - 1.65 Total incurred claims..... \$
    - 1.66 Number of covered lives.....
- 1.7 Group policies:
  - Most current three years:
    - 1.71 Total premium earned..... \$
    - 1.72 Total incurred claims..... \$
    - 1.73 Number of covered lives.....
  - All years prior to most current three years:
    - 1.74 Total premium earned..... \$
    - 1.75 Total incurred claims..... \$
    - 1.76 Number of covered lives.....

2. Health Test:

	1	2
	Current Year	Prior Year
2.1 Premium Numerator.....	\$ 1,244,936,506	\$ 1,216,160,857
2.2 Premium Denominator.....	\$ 1,244,936,506	\$ 1,216,160,857
2.3 Premium Ratio (2.1/2.2).....	100.000 %	100.000 %
2.4 Reserve Numerator.....	\$ 145,811,096	\$ 130,997,623
2.5 Reserve Denominator.....	\$ 145,811,096	\$ 130,997,623
2.6 Reserve Ratio (2.4/2.5).....	100.000 %	100.000 %

- 3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?..... NO
- 3.2 If yes, give particulars:
- 4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?..... YES
- 4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?..... YES
- 5.1 Does the reporting entity have stop-loss reinsurance?..... NO
- 5.2 If no, explain:  
THE COMPANY RETAINS ALL RISK.
- 5.3 Maximum retained risk (see instructions)
  - 5.31 Comprehensive Medical..... \$ 9,999,999
  - 5.32 Medical Only..... \$
  - 5.33 Medicare Supplement..... \$
  - 5.34 Dental and Vision..... \$
  - 5.35 Other Limited Benefit Plan..... \$
  - 5.36 Other..... \$
- 6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:  
RESERVES EXCEED ALL REGULATORY REQUIREMENTS AND PROVIDER CONTRACTS HAVE HOLD HARMLESS PROVISIONS. THE COMPANY PARTICIPATES AS A MEMBER OF THE IOWA LIFE & HEALTH INSURANCE GUARANTY ASSOCIATION UNDER THE IOWA CODE 508C.
- 7.1 Does the reporting entity set up its claim liability for provider services on a service date basis?..... YES
- 7.2 If no, give details
- 8. Provide the following information regarding participating providers:
  - 8.1 Number of providers at start of reporting year..... 12,845
  - 8.2 Number of providers at end of reporting year..... 13,712
- 9.1 Does the reporting entity have business subject to premium rate guarantees?..... NO
- 9.2 If yes, direct premium earned:
  - 9.21 Business with rate guarantees between 15-36 months..... \$
  - 9.22 Business with rate guarantees over 36 months..... \$

**GENERAL INTERROGATORIES**  
PART 2 - HEALTH INTERROGATORIES

- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?..... YES.....
- 10.2 If yes:
- 10.21 Maximum amount payable bonuses..... \$ 9,346,770
- 10.22 Amount actually paid for year bonuses..... \$ 7,881,814
- 10.23 Maximum amount payable withholds..... \$ 4,730,702
- 10.24 Amount actually paid for year withholds..... \$ 3,600,166
- 11.1 Is the reporting entity organized as:
- 11.12 A Medical Group/Staff Model,..... NO.....
- 11.13 An Individual Practice Association (IPA), or,..... NO.....
- 11.14 A Mixed Model (combination of above)?..... NO.....
- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?..... YES.....
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus..... IOWA.....
- 11.4 If yes, show the amount required..... \$ 1,000,000
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity?..... NO.....
- 11.6 If the amount is calculated, show the calculation

12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
IOWA.....

- 13.1 Do you act as a custodian for health savings accounts?..... NO.....
- 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?..... NO.....
- 13.4 If yes, please provide the balance of the funds administered as of the reporting date..... \$ -
- 14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?..... N/A.....
- 14.2. If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

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 Written..... \$ -
- 15.2 Total Incurred Claims..... \$ -
- 15.3 Number of Covered Lives..... -

*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 reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?..... 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?..... NO.....

**FIVE-YEAR HISTORICAL DATA**

	1	2	3	4	5
	2025	2024	2023	2022	2021
<b>Balance Sheet (Pages 2 and 3)</b>					
1. Total admitted assets (Page 2, Line 28)	585,428,031	516,631,718	545,278,691	501,108,324	447,433,626
2. Total liabilities (Page 3, Line 24)	250,406,320	223,157,615	242,084,104	207,317,446	179,832,817
3. Statutory minimum capital and surplus requirement	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
4. Total capital and surplus (Page 3, Line 33)	335,021,711	293,474,103	303,194,587	293,790,878	267,600,809
<b>Income Statement (Page 4)</b>					
5. Total revenues (Line 8)	1,244,936,506	1,216,160,857	1,035,512,614	915,879,108	785,182,568
6. Total medical and hospital expenses (Line 18)	1,042,845,722	967,286,227	792,291,643	692,746,799	630,007,280
7. Claims adjustment expenses (Line 20)	50,988,914	38,282,977	31,702,783	20,353,096	19,531,031
8. Total administrative expenses (Line 21)	122,058,178	126,813,864	109,015,858	93,411,002	93,479,354
9. Net underwriting gain (loss) (Line 24)	29,043,692	83,777,789	102,502,330	109,368,211	42,164,903
10. Net investment gain (loss) (Line 27)	21,115,277	17,490,593	11,464,158	4,007,436	11,858,715
11. Total other income (Lines 28 plus 29)	-	-	-	-	-
12. Net income or (loss) (Line 32)	41,209,969	81,024,382	89,914,488	89,573,647	43,524,618
<b>Cash Flow (Page 6)</b>					
13. Net cash from operations (Line 11)	46,081,196	65,894,519	84,891,909	102,988,877	63,215,412
<b>Risk-Based Capital Analysis</b>					
14. Total adjusted capital	335,021,711	293,474,103	303,194,587	293,790,878	267,600,809
15. Authorized control level risk-based capital	45,165,337	41,193,130	34,144,575	31,687,687	30,014,472
<b>Enrollment (Exhibit 1)</b>					
16. Total members at end of period (Column 5, Line 7)	201,014	201,834	174,232	153,170	146,392
17. Total members months (Column 6, Line 7)	2,424,300	2,346,307	2,002,254	1,820,631	1,682,118
<b>Operating Percentage (Page 4)</b> <b>(Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0</b>					
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 (Lines 18 plus Line 19)	83.8	79.5	76.5	75.6	80.2
20. Cost containment expenses	1.2	1.0	1.1	0.7	0.8
21. Other claims adjustment expenses	2.9	2.1	2.0	1.5	1.7
22. Total underwriting deductions (Line 23)	97.7	93.1	90.1	88.1	94.6
23. Total underwriting gain (loss) (Line 24)	2.3	6.9	9.9	11.9	5.4
<b>Unpaid Claims Analysis</b> <b>(U&amp;I Exhibit, Part 2B)</b>					
24. Total claims incurred for prior years (Line 17, Col. 5)	81,727,787	56,096,434	54,619,030	61,070,502	40,714,283
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	55,201,329	58,016,602	42,750,946	45,137,960	34,656,400
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
26. Affiliated bonds (Sch. D Summary, Line 9 + 15, Col. 1)					
27. Affiliated preferred stocks (Sch. D Summary, Line 22, Col. 1)					
28. Affiliated common stocks (Sch. D Summary, Line 28, Col. 1)					
29. Affiliated mortgage loans on real estate					
30. All other affiliated					
31. Total of above lines 26 to 30					
32. Total investment in parent included in Lines 26 to 30 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 Corrections of Errors? If no, please explain

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**  
Allocated by States and Territories

States, Etc.	1	Direct Business Only								
		2	3	4	5	6	7	8	9	10
	Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property / Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1. Alabama	AL	N								
2. Alaska	AK	N								
3. Arizona	AZ	N								
4. Arkansas	AR	N								
5. California	CA	N								
6. Colorado	CO	N								
7. Connecticut	CT	N								
8. Delaware	DE	N								
9. District of Columbia	DC	N								
10. Florida	FL	N								
11. Georgia	GA	N								
12. Hawaii	HI	N								
13. Idaho	ID	N								
14. Illinois	IL	N								
15. Indiana	IN	N								
16. Iowa	IA	L	1,246,247,579						1,246,247,579	
17. Kansas	KS	N								
18. Kentucky	KY	N								
19. Louisiana	LA	N								
20. Maine	ME	N								
21. Maryland	MD	N								
22. Massachusetts	MA	N								
23. Michigan	MI	N								
24. Minnesota	MN	N								
25. Mississippi	MS	N								
26. Missouri	MO	N								
27. Montana	MT	N								
28. Nebraska	NE	N								
29. Nevada	NV	N								
30. New Hampshire	NH	N								
31. New Jersey	NJ	N								
32. New Mexico	NM	N								
33. New York	NY	N								
34. North Carolina	NC	N								
35. North Dakota	ND	N								
36. Ohio	OH	N								
37. Oklahoma	OK	N								
38. Oregon	OR	N								
39. Pennsylvania	PA	N								
40. Rhode Island	RI	N								
41. South Carolina	SC	N								
42. South Dakota	SD	N								
43. Tennessee	TN	N								
44. Texas	TX	N								
45. Utah	UT	N								
46. Vermont	VT	N								
47. Virginia	VA	N								
48. Washington	WA	N								
49. West Virginia	WV	N								
50. Wisconsin	WI	N								
51. Wyoming	WY	N								
52. American Samoa	AS	N								
53. Guam	GU	N								
54. Puerto Rico	PR	N								
55. U.S. Virgin Islands	VI	N								
56. Northern Mariana Islands	MP	N								
57. Canada	CAN	N								
58. Aggregate other alien	OT	XXX								
59. Subtotal	XXX		1,246,247,579						1,246,247,579	
60. Reporting entity contributions for employee benefit plans	XXX									
61. Total (direct business)	XXX		1,246,247,579						1,246,247,579	
<b>Details of Write-Ins</b>										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX									

(a) Active Status Counts

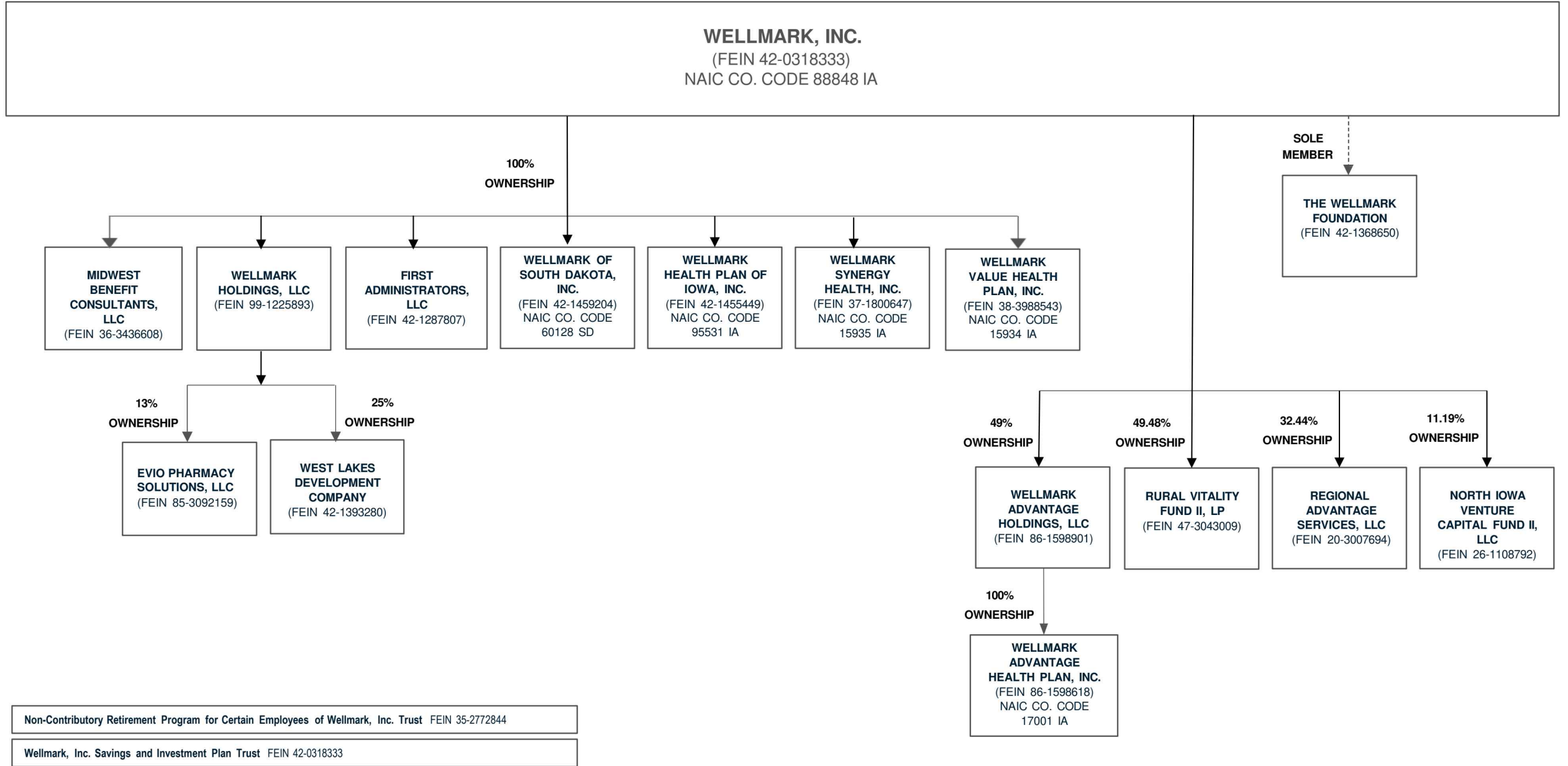
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	1	4. Q - Qualified - Qualified or accredited reinsurer	-
2. R - Registered - Non-domiciled RRGs	-	5. N - None of the above - Not allowed to write business in the state	56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	-		

(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



40

Non-Contributory Retirement Program for Certain Employees of Wellmark, Inc. Trust FEIN 35-2772844

Wellmark, Inc. Savings and Investment Plan Trust FEIN 42-0318333