QUARTERLY STATEMENT

OF THE

AMERIGROUP Tennessee, Inc.

of

Nashville

in the state of

Tennessee

TO THE

Insurance Department

OF THE STATE OF

Tennessee

FOR THE YEAR ENDED JUNE 30, 2020

HEALTH



STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE

Financial Affairs Section / Analytical Unit 0576 500 James Robertson Parkway, 10th Floor Nashville, Tennessee 37243-1132 (615) 741-1670

HEALTH ENTITIES

COMPANY NAME:		NAIC Company Code:	
Contact:		Telephone:	
REQUIRED FILINGS IN THE STATE OF:	TENNESSEE	Filings Made During the Year 2020	

(1)	(2)	(3)		(4)		(5)	(6)	(7)
(1)	(2)	(3)		BER OF C	OPIES*	(3)	FORM	APPLICABLE
Checklist	Line # REQUIRED FILINGS FOR THE ABOVE STATE		Dom	estic	Foreign	DUE DATE	SOURCE**	NOTES
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS		1	ı	1	1	1
	1	Annual Statement (8 ½"X14")	2	ЕО	Jurat Only – Note L	3/1	NAIC	A-C, E-P
	1.1	Printed Investment Schedule detail (Pages E01- E29)	2	ЕО	XXX	3/1	NAIC	A, B
	2	Quarterly Financial Statement (8 ½" x 14")	2	ЕО	xxx	5/15, 8/15, 11/15	NAIC	A, B, E-O, Q
		II. NAIC SUPPLEMENTS						
	11	Accident & Health Policy Experience Exhibit	2	EO	XXX	4/1	NAIC	V
	12	Actuarial Opinion	2	EO	XXX	3/1	Company	A, B, E-G, P
	13	Life Supplemental Data due March 1	2	EO	XXX	3/1	NAIC	11, 5, 5 0, 1
	14	Life Supplemental Data due April 1	2	EO	XXX	4/1	NAIC	
	15	Life Supp Statement non-guaranteed elements – Exh 5, Int. #3	2	EO	XXX	3/1	Company	
	16	Life Supp Statement on par/non-par policies – Exh 5 Int. 1&2	2	ЕО	XXX	3/1	Company	
	17	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit	2	ЕО	XXX	4/1	NAIC	
	18	Life, Health & Annuity Guaranty Assessment Base Reconciliation Exhibit Adjustment Form	2	ЕО	xxx	4/1	NAIC	
	19	Long-Term Care Experience Reporting Forms	2	ЕО	XXX	4/1	NAIC	
	20	Management Discussion & Analysis	2	EO	XXX	4/1	Company	A, B
	21	Medicare Part D Coverage Supplement	2	ЕО	XXX	3/1, 5/15, 8/15, 11/15	NAIC	
	22	Medicare Supplement Insurance Experience Exhibit	2	ЕО	XXX	3/1	NAIC	
	23	Risk-Based Capital Report	2	EO	XXX	3/1	NAIC	
	24	Schedule SIS	2	N/A	N/A	3/1	NAIC	
	25	Supplemental Compensation Exhibit	2	N/A	N/A	3/1	NAIC	
	26	Supplemental Health Care Exhibit (Parts 1, 2 and 3)	2	ЕО	XXX	4/1	NAIC	
	27	Supplemental Health Care Exhibit's Allocation Report	2	ЕО	XXX	4/1	NAIC	
	28	Supplemental Investment Risk Interrogatories	2	ЕО	XXX	4/1	NAIC	
		III. ELECTRONIC FILING REQUIREMENTS		1				
	61	Annual Statement Electronic Filing	1	EO	XXX	3/1	NAIC	
	62	March .PDF Filing	1	EO	XXX	3/1	NAIC	
	63	Risk-Based Capital Electronic Filing	1	EO	N/A	3/1	NAIC	
	64	Risk-Based Capital .PDF Filing	1	EO	N/A	3/1	NAIC	
	65	Supplemental Electronic Filing	1	EO	XXX	4/1	NAIC	
	66	Supplemental .PDF Filing	1	EO	XXX	4/1	NAIC	
	67	Quarterly Statement Electronic Filing	1	ЕО	XXX	5/15, 8/15, 11/15	NAIC	
	68	Quarterly .PDF Filing	1	ЕО	xxx	5/15, 8/15, 11/15	NAIC	
	69	June .PDF Filing	1	EO	XXX	6/1	NAIC	

***ALL HMOs licensed in Tennessee must follow the "Domestic" column filing requirements.

(1)	(2)	(3)		(4) IBER OF C	OPIES*	(5)	(6) FORM	(7) APPLICABLE
Checklist	Line#	REQUIRED FILINGS FOR THE ABOVE STATE		Domestic		DUE DATE	SOURCE**	NOTES
			State	NAIC	State			
		IV. AUDIT/INTERNAL CONTROL RELATED REPORTS						
	81	Accountant's Letter of Qualifications	1	EO	N/A	6/1	Company	A, B
	82	Audited Financial Reports	1	EO	XXX	6/1	Company	A, B
	83	Audited Financial Reports Exemption Affidavit	1	N/A	N/A	6/1	Company	A, B
	84	Communication of Internal Control Related Matters Noted in Audit	1	ЕО	N/A	8/1	Company	A, B
	85	Independent CPA (change)	1	N/A	N/A	Within 5 Days	Company	A, B
	86	Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A	8/1	Company	A, B
	87	Notification of Adverse Financial Condition	1	N/A	N/A	Within 10 days of CPA Discovery	Company	A, B
	88	Relief from the five-year rotation requirement for lead audit partner	1	ЕО	XXX	3/1	Company	A, B
	89	Relief from the one-year cooling off period for independent CPA	1	ЕО	XXX	3/1	Company	A, B
	90	Relief from the Requirements for Audit Committees	1	ЕО	XXX	3/1	Company	A, B
	91	Request for Exemption to File Management's Report of Internal Control Over Financial Reporting	1	N/A	N/A		Company	A, B
		V. STATE REQUIRED FILINGS			ı	1	1	1
	101	Corporate Governance Annual Disclosure***	1	0	0	6/1	Company	A, B
	102	Filings Checklist (with Column 1 completed)	0	0	0		State	
	103	Form B-Holding Company Registration Statement and Form C-Summary of Registration	2	0	XXX	4/30	Company	A, B, U
	104	Form F-Enterprise Risk Report ****	2	0	XXX	4/30	Company	A, B, U
	105	ORSA *****	2		N/A	Case-by-		
				0		Case	Company	
	106	Premium Tax	1	0	1	3/1, 6/1, 8/20, 12/1	State	A, C, D, T
	107	State Filing Fees	1	0	1	3/1	State	A, C, D
	108	Signed Jurat	2	0	Annual Stmnt Only	3/1, 5/15, 8/15, 11/15 = Domestics; 3/1=Foreigns	NAIC	A, B, F-I, L, Q
	109	Certificate of Compliance for Life, A&H Advertising	2	0	1	3/1	State	R
	110	Certificate of Compliance	0	0	0	3/1	State	В
	111	Certificate of Deposit	0	0	0	3/1	State	В

^{*}If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state. EO (electronic only filing).

^{**}If Form Source is NAIC, the form should be obtained from the appropriate vendor.

^{***}For those states that have adopted the NAIC Corporate Governance Annual Disclosure Model Act, an annual disclosure is required of all insurers or insurance groups by June 1. The Corporate Governance Annual Disclosure is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm.

^{****}For those states that have adopted the NAIC updated Holding Company Model Act, a Form F filing is required annually by holding company groups. Consistent with the Form B filing requirements, the Form F is a state filing only and should <u>not</u> be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

^{******}For those states that have adopted the NAIC Risk Management and Own Risk and Solvency Assessment Model Act, a summary report is required annually by insurers and insurance groups above a specified premium threshold. The ORSA Summary Report is a state filing only and should not be submitted by the company to the NAIC. Note however that this filing is intended to be submitted to the lead state if filed at the insurance group level. For more information on lead states, see the following NAIC URL: http://www.naic.org/public_lead_state_report.htm

	NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
A	Required Filings Contact Person:	
	Domestic Hospital, Medical, Dental, & Indemnity Corp., HMO, Vision and Dental Contact Person:	Hui Wattanaskolpant, (615) 253-2958 <u>Hui.Wattanaskolpant@tn.gov</u>
	Annual Fees, Tax, & Penalty Questions:	Kim Blaylock, (615) 532-7567 <u>Kim.Blaylock@tn.gov</u>
В	Mailing Address:	State of Tennessee Department of Commerce and Insurance Financial Affairs Section / Analytical Unit 0576 500 James Robertson Parkway, 10 [™] Floor Nashville, Tennessee 37243-1132 (615) 741-1670
С	Mailing Address for Filing Fees:	
	TCA 56-32-119 provides for a \$195.00 + \$445.00 HMO Annual Statement filing fee.	This fee is included on the premium tax return and should be submitted through <u>OPTins</u> .
	TCA 56-29-119 provides for a \$515.00 Annual Statement filing fee for Hospital and Medical Service Corporation.	
	TCA 56-30-117 provides for a \$50 Dental Service Plan Annual Statement filing fee and 56-31-116 provides for a \$15 Vision Service Plan Annual Statement filing fee.	
	Please <u>DO NOT</u> enclose this fee with Annual Statement.	
D	Mailing Address for Premium Tax Payments:	OPTins is mandatory with electronic tax filings Click Here to Participate.
Е	Delivery Instructions:	
	E1. Premium tax delivery instructions A tax return with payment must be submitted via OPTins on or before March 1 st to be considered a timely filing. Please note the statues do not allow a waiver of a late payment of penalty.	
	E2. Annual statement delivery instructions An Annual Statement filing must be postmarked on or before March 1 st to be considered a timely filing. The document will be considered a prompt filing provided such document bears a postmark, or comparable marking, no later than the due date and is transmitted by the United States Postal Service, FedEx, United Parcel Services, or other carrier recognized by the	
	Commissioner.	
F	Late Filings:	Late or incomplete filings are assessed a
	Timely filings must be received on or before March 1 st . Tennessee DOES NOT recognize filing extensions for Annual Statements.	\$100.00 per day late or incomplete filing penal pursuant to TCA §56-1-502.
	An example of an <i>incomplete</i> filing is one that does not adhere to the requirements in <u>one or more</u> of the following sections: G, H, L, M, O, P.	See Note E above regarding proper postmarks
	In addition, electronic filings must be made with the NAIC by March 1 to be considered timely per Tenn. R. & Reg. Ch. 0780-01-3708.	
l l		ODICINIAL HIDATE NOTADIV AND
G	Original Signatures: Please use blue ink.	ORIGINAL JURAT, NOTARY, AND ACTUARY SIGNATURES ARE REQUIRE

I	Amended Filings:	An explanation of the amendment is required.
		The amended financial statement filing
		requires a jurat page with original signatures and notary.
J	Exceptions from normal filings:	NONE
		NAIC Bar Code Instructions
K L	Bar Codes (State or NAIC):	TCA §56-1-501 requires the financial statement
L	Signed Jurat:	be subscribed and sworn to by the President and
		Secretary, or in their absence, two (2) principal
		officers. If the statement is signed by anyone
		other than the President and Secretary, an
		affidavit must be included and stated that such
		person is a principal officer elected by the board
M	NONE ET	of directors. NAIC Annual Statement Instructions, Blank
M	NONE Filings:	exhibits or schedules without the word "NONE"
		will result in an interpretation that an incomplete
		filing was submitted, and will be subject to filing
		penalties, pursuant to Note "F" above.
N	Filings new, discontinued or modified materially since last year:	None
О	Size, printing standards, numbering, & binding:	The NAIC Annual Statement Instructions
		provide guidance on printing standards,
		statement layout, and required binding. Annual
		Statements are properly bound if they are stapled
		in the CENTER seam or professionally bound by
P	A strong Origina	adhesive. The opinion must bear an original signature,
Р	Actuarial Opinion: The Actuarial Opinion or Domiciliary State exemption letter must be	and must be completed by a Qualified Actuary.
	on or attached to page 1 of the Annual Statement.	If an Actuarial Opinion does not contain an
	on or accence to page 1 of the Annual Statement.	original signature, the filing will be subject to the
		penalties noted in Note "F"
Q	Quarterly Financial Statement (8 ½" x 14")	Foreign: File with NAIC only
		Domestic & HMOs: Required to file
R	Certificate of Compliance A&H advertising	An affidavit from the company regarding
		compliance with the rule is acceptable. Pursuant
S	Exemptions	to Tenn. Comp. R. & Regs., Ch. 0780-1-817 • Annual Statements—Not Allowed.
3	Exemptions	 Annual Statements—Not Allowed. Audited Statements— Must file by June 1
		Actuarial Opinion—Must file by December 1
Т	Late payment of Premium Taxes	Premium taxes will be assessed in addition to the
-	Zate payment of Fremium Taxes	amount of taxes; five percent (5%) for the first
	All delinquencies shall bear interest of ten percent (10%) per annum	month or fractional part thereof, additional five
	from the date the amount was due and paid, pursuant to TCA 56-4-	percent (5%) for the second month or fractional
	216	part thereof, and penalty thereafter at one half of
T.T.		one percent (0.5%) per month.
U	Holding Company Registration Statement	Foreign companies & foreign HMOs are NOT required to file if domiciliary state laws are
	Tennessee's Holding Company Registration Deadline is April 30 th	substantially similar to Tennessee's Title 56,
		Chapter 11.
V	A&H Policy Experience Exhibit	State of Tennessee
'	The A&H Policy Experience Exhibit must be mailed under separate	Department of Commerce & Insurance
	cover	10 th Floor, Actuarial Section
		500 James Robertson Parkway
		Nashville, TN 37243-1130
		ATTN: Brian Hoffmeister

General Instructions For Companies to Use Checklist

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC

will not be sending its own checklist this year.

Electronic Filing is intended to be filing(s) submitted to the NAIC via the NAIC Internet Filing Site which eliminates the need for a company to submit diskettes or CD-ROM to the NAIC. Companies are not required to file hard copy filings with the NAIC.

Column (1) Checklist

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when submitting information to the state.

Column (2) Line

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) Required Filings

Name of item or form to be filed.

The Annual Statement Electronic Filing includes the annual statement data and all supplements due March 1, per the Annual Statement Instructions. This includes all detail investment schedules and other supplements for which the Annual Statement Instructions exempt printed detail.

The *March.PDF Filing* is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The Risk-Based Capital Electronic Filing includes all risk-based capital data.

The *Risk-Based Capital.PDF Filing* is the .pdf file for risk-based capital data.

The Supplemental Electronic Filing includes all supplements due April 1, per the Annual Statement Instructions.

The Supplemental.PDF Filing is the .pdf file for all supplemental schedules and exhibits due April 1.

The Quarterly Electronic Filing includes the complete quarterly filing and the PDF files for all quarterly data.

The Quarterly.PDF Filing is the .pdf file for quarterly statement data.

The June.PDF Filing is the .pdf file for the Audited Financial Statements and Accountants Letter of Qualifications.

Column (4) Number of Copies

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (EX) Task Force modified the 1999 Annual Statement Instructions to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and have chosen to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.

,

Column (5) Due Date

Indicates the date on which the company must file the form.

Column (6) Form Source

This column contains one of three words: "NAIC," "State," or "Company," If this column contains "NAIC," the company must obtain the forms from the appropriate vendor. If this column contains "State," the state will provide the forms with the filing instructions (generally, on the state web site). If this column contains "Company," the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC Annual Statement Instructions.

Column (7) Applicable Notes

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes <u>before</u> submitting a filing.

 $w:\qa\blanks\checklists\2018\ filings\ made\ in\ 2019\2\ hlthcklist_2018_filings\ made\2019.docx$



Amerigroup Tennessee, Inc.

Statement of Actuarial Opinion

Table of Key Indicators:

This Opinion is	× U	nqualified	o Qualif	ied		o Adverse		0	Inconclusive
Identification Sect	ion	o Prescrib	ed Wording	×	Prescribed	l Wording with Addition	al Wording	0	Revised Wording
Scope Section		× Prescrib	ed Wording	0	Prescribed	Wording with Additiona	al Wording	0	Revised Wording
Reliance Section		o Prescrib	ed Wording	0	Prescribed	Wording with Additiona	al Wording	×	Revised Wording
Opinion Section		o Prescribe Only	ed Wording	0	Prescribed	Wording with Additiona	al Wording	×	Revised Wording
Relevant Commer	nts							×R	levised Wording
O The Actuar Practice	ial Memo	orandum includ	es "Deviation	fron	n Standard"	wording regarding conf	ormity with an Act	uaria	Standard of

Identification

I, Kecia Rockoff, Director & Actuary III, am an employee of Anthem Inc., and a member of the American Academy of Actuaries. I was appointed on November 01, 2017 in accordance with the requirements of the annual statement instructions for Amerigroup Tennessee, Inc., a subsidiary of Anthem, Inc. I meet the Academy qualification standards for rendering the opinion.

Scope

I have examined the assumptions and methods used in determining loss reserves, actuarial liabilities and related items listed below, as shown in the quarterly statement of the organization as prepared for filing with state regulatory officials, as of June 30, 2020:

A. Claims unpaid (Page 3, Line 1)	\$158,960,155
B. Accrued medical incentive pool and bonus payments (Page 3, Line 2)	\$7,432,733
C. Unpaid claims adjustment expenses (Page 3, Line 3)	\$3,616,732
D. Aggregate health policy reserves (Page 3, Line 4) including unearned	
premium reserves, premium deficiency reserves and additional policy	
reserves from the Underwriting and Investment Exhibit – Part 2D	\$42,573,885
E. Aggregate life policy reserves (Page 3, Line 5)	\$0
F. Property/casualty unearned premium reserves (Page 3, Line 6)	\$0
G. Aggregate health claim reserves (Page 3, Line 7)	\$0

H. Any other loss reserves, actuarial liabilities, or related items presented
as liabilities in the quarterly statement

I. Specified actuarial items presented as assets in the quarterly statement
1. Actuarial Portion of Rx Rebate Receivables (part of Page 2; Line 24, Column 1)
2. Actuarial Portion of AR CMS - Medicare Final Sweep (part of Page 2; Line 15.3)
\$3,067,617

\$2,346,967

Reliance

In forming my opinion on Unearned Premium Reserves (part of Aggregate Health Policy Reserves) and Legal Claim Reserves (part of Unpaid Claims), I relied upon data prepared by Vincent Scher, Staff VP Investment Programs & Treasurer, and Michelle M. Rothenberg-Williams, Managing Associate General Counsel Senior, Anthem Inc. as certified in the attached statements. I evaluated that data for reasonableness and consistency.

In other respects, my examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary. I also reconciled the underlying basic liability records to the Underwriting and Investment Exhibit, Analysis of Claims Unpaid of the company's current quarterly statement.

Opinion

In my opinion, the amounts carried in the balance sheet on account of the items identified above:

3. Actuarial Portion of AR CMS - Medicare MidYear Sweep (part of Page 2; Line 15.3)

- A. Are in accordance with accepted actuarial standards consistently a pplied and are fairly stated in accordance with sound actuarial principles;
- B. Are based on actuarial assumptions relevant to contract provisions and appropriate to the purpose for which the statement was prepared;
- C. Meet the requirements of the Insurance Laws and regulations of the state of Tennessee, and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed;
- D. Make a good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization under the terms of its contracts and agreements;
- E. Are computed on the basis of assumptions and methods consistent with those used in computing the corresponding items in the annual statement of the preceding year-end; and
- F. Include appropriate provision for all actuarial items that ought to be established.

The Underwriting and Investment Exhibit, Analysis of Claims Unpaid was reviewed for reasonableness and consistency with the applicable Actuarial Standards of Practice.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the relevant Standards of Practice as promulgated from time to time by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

Relevant Comments

The liabilities being valued are mainly short term in nature, have no investment income or interest component, are not discounted for interest, and do not fluctuate with changes in the interest rate environment. As a result, no asset adequacy analysis was performed.

My review also included consideration of incentive contracts with service providers and the effect on the reserves. I have not reviewed the financial position of any party related by contract to the Company, including those under a capitation agreement with the Company. I have relied on the opinion of the Company that such parties are in a financial position to meet all liabilities resulting from such contracts.

This opinion has been prepared solely for the Board and management of the Company for filing with insurance regulatory agencies of states in which the Company is licensed.

Kecia Rockoff, FSA, MAAA

Keria Rockeff

Anthem, Inc.

4170 Ashford Dunwoody Road NE, Suite 100

Atlanta, GA 30319

(678) 587-7145

Kecia.Rockoff@anthem.com

August 13, 2020



Reliance Statement **AMERIGROUP Tennessee, Inc.**For 2020 Actuarial Opinion

I, Michelle M. Rothenberg-Williams, Managing Associate General Counsel Senior of Anthem Inc., the ultimate parent company of **AMERIGROUP Tennessee**, **Inc.**, hereby affirm that the listings, summaries and analyses relating to the Legal Claim Reserve balance, prepared for and submitted to **Kecia Rockoff**, **Director & Actuary III**, in support of the actuarial opinion for **AMERIGROUP Tennessee**, **Inc.**, as of June 30, 2020, were prepared in accordance with generally accepted accounting principles and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the period ended June 30, 2020.

Michelle M. Rothenberg-Williams

Managing Associate General Counsel Senior

July 10, 2020

Anthem, Inc. 233 S. Wacker Dr., Suite 3700 Chicago, IL 60606 312-234-7402



Reliance Statement

AMERIGROUP Tennessee, Inc.

For 2020 Actuarial Opinion

I, Michael Smith, Director, Actuarial Cost of Care & Analytics of Anthem, Inc., the ultimate parent company of AMERIGROUP Tennessee, Inc., hereby affirm that the actuarial analyses relating to the shared savings estimate of the Enhanced Personal Health Care balances prepared for and submitted to Kecia Rockoff, Director & Actuary III, in support of the actuarial opinion for AMERIGROUP Tennessee, Inc., as of June 30, 2020, were prepared under my direction in accordance with statutory accounting principles and, to the best of my knowledge and belief, are substantially accurate and complete.

Michael Smith, FSA, MAAA

Michel V. South

Director, Actuarial Cost of Care & Analytics July 10, 2020

Anthem, Inc. 108 Leigus Road Wallingford, CT 06492 <u>Michael.V.Smith@anthem.com</u> (860) 305-8335



Investment Assumption Reliance Statement **AMERIGROUP Tennessee, Inc.**For 2020 Actuarial Opinion

I, Vincent E. Scher, Treasurer of **AMERIGROUP Tennessee, Inc.,** hereby affirm that the listings, summaries and analyses relating to the Unearned Premium Reserve balance, prepared for and submitted to **Mojisola Esho, Actuarial Director**, in support of the actuarial opinion for **AMERIGROUP Tennessee, Inc.,** as of June 30, 2020, were prepared in accordance with statutory accounting principles and, to the best of my knowledge and belief, are substantially accurate and complete and are the same as, or derived from, the records and other data which form the basis of the quarterly statement for the period ended June 30, 2020.

DocuSigned by:

Vincent E. Scher

Staff VP Investment Programs & Treasurer

July 10, 2020

Anthem, Inc. 220 Virginia Ave Indianapolis, IN 46204 (317) 488-6004



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2020 OF THE CONDITION AND AFFAIRS OF THE

AMERIGROUP Tennessee, Inc.

NAIC	Group Code 0671 067 (Current) (Pri		Code <u>12941</u> Employer's II	O Number20-4776597
Organized under the Laws of	Tenness	,	, State of Domicile or Port of E	ntryTN
Country of Domicile		United State	s of America	
Licensed as business type:		Health Maintena	nce Organization	
Is HMO Federally Qualified? Ye	es[]No[X]			
Incorporated/Organized	04/26/2006		Commenced Business	04/01/2007
Statutory Home Office	22 Century Boulevard,	Suite 220	,	Nashville, TN, US 37214
	(Street and Num	per)	(City or	Town, State, Country and Zip Code)
Main Administrative Office		4425 Corpo	ration Lane	
Vir	ginia Beach, VA, US 23462	(Street and	d Number)	757-490-6900
	own, State, Country and Zip Coo	e)	,(Ar	ea Code) (Telephone Number)
Mail Address	4425 Corporation Lane		. V	irginia Beach, VA, US 23462
	(Street and Number or P.O.		1 1	Town, State, Country and Zip Code)
Primary Location of Books and F	Records		oration Lane	
Vir	ginia Beach, VA, US 23462	(Street and	d Number)	757-490-6900
	own, State, Country and Zip Coo	e)	,(Ar	ea Code) (Telephone Number)
Internet Website Address		www.amer	igroup.com	
Statutory Statement Contact	Bette Lou	Gronseth		757-518-3638
-	(Na	ame)	,,	(Area Code) (Telephone Number)
Bette	e.Gronseth@amerigroup.com (E-mail Address)		,	757-557-6742 (FAX Number)
Chairperson	Kristen Louise N		CERS Vice President/Assistant Secretary	Jack Louis Young
President/CEO	Robert Thomas	Sarnett	Secretary	Kathleen Susan Kiefer
Vincent Edward S	cher, Treasurer		HER oble, Assistant Treasurer	
Kristen Louis	e Metzger		DR TRUSTEES nis Young #	Robert Thomas Garnett
State of	Tennessee	_ ee.		
County of	Nashville	_		
all of the herein described asses statement, together with related condition and affairs of the said in accordance with the NAIC Ar rules or regulations require dif respectively. Furthermore, the	ts were the absolute property of exhibits, schedules and explana reporting entity as of the reporting unual Statement Instructions and ferences in reporting not relate scope of this attestation by the	f the said reporting entity tions therein contained, a g period stated above, a l Accounting Practices ar d to accounting practic described officers also inc	y, free and clear from any liens annexed or referred to, is a full ar nd of its income and deductions to de Procedures manual except to es and procedures, according cludes the related corresponding ement. The electronic filing may lead to the second of the second of the second of the entry of the second of the second of the second of the the second of the second of the second of the second of the the second of the second o	rting entity, and that on the reporting period stated above, or claims thereon, except as herein stated, and that this did true statement of all the assets and liabilities and of the herefrom for the period ended, and have been completed the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief, electronic filing with the NAIC, when required, that is an per requested by various regulators in lieu of or in addition DocuSigned by:
15/4th		— A85A33722D4143E	*	tathy tuper
Robert Thomas G		Vincent Ed	ward Scher surer	Kathleen Susan Kiefer Secretary
Subscribed and sworn to before day of			a. Is this an original filing b. If no, 1. State the amendme 2. Date filed	?Yes [X] No [] nt number

ASSETS

1. R		1	2	3	December 31
1. R		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
	Bonds	508,045,713		508,045,713	442,667,163
	Stocks:				
2	2.1 Preferred stocks			0	
2	2.2 Common stocks	48,147,527		48 , 147 ,527	50,295,825
3. N	Mortgage loans on real estate:				
3	3.1 First liens			0	
3	3.2 Other than first liens			0	
4. R	Real estate:				
4	.1 Properties occupied by the company (less \$				
	encumbrances)			0	
4	1.2 Properties held for the production of income (less				
	\$ encumbrances)			0	
4	.3 Properties held for sale (less \$				
	encumbrances)			0	
5. C	Cash (\$(8,366,243)), cash equivalents				
	(\$14,599,509) and short-term				
	investments (\$)	6.233.266		6,233,266	14.836.507
	Contract loans (including \$ premium notes)			0	, , ,
	Derivatives			0	
	Other invested assets			_	
	Receivables for securities			2,034,093	
	Securities lending reinvested collateral assets			31,987,102	
	Aggregate write-ins for invested assets			0	0
	Subtotals, cash and invested assets (Lines 1 to 11)			596,447,701	517,763,657
	itle plants less \$ charged off (for Title insurers				
О	only)			0	
14. Ir	nvestment income due and accrued	4,425,231		4,425,231	4,398,281
15. P	Premiums and considerations:				
1	5.1 Uncollected premiums and agents' balances in the course of collection	31,012,496		31,012,496	84,280,514
	5.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	
1	5.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$4,957,560)	4,957,560		4,957,560	5,060,369
16. R	Reinsurance:				
1	6.1 Amounts recoverable from reinsurers			0	
1	6.2 Funds held by or deposited with reinsured companies			0	
1	6.3 Other amounts receivable under reinsurance contracts			0	
17. A	Amounts receivable relating to uninsured plans	8,112,745		8,112,745	8,802,137
	Current federal and foreign income tax recoverable and interest thereon			0	
18.2 N	Net deferred tax asset	5,425,673			2,495,400
19. G	Guaranty funds receivable or on deposit			0	
20. E	Electronic data processing equipment and software			0	
21. F	Furniture and equipment, including health care delivery assets				
	(\$)				0
	Net adjustment in assets and liabilities due to foreign exchange rates			0	
	Receivables from parent, subsidiaries and affiliates			0	
	Health care (\$532,974) and other amounts receivable			532,974	
	Aggregate write-ins for other than invested assets	338,567	338,342	225	26
26. T	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	656 N27 110	5 010 257	650,117,853	623 013 601
	From Separate Accounts, Segregated Accounts and Protected Cell		5,919,201	, 117,000	023,013,091
	Accounts			0	
	Total (Lines 26 and 27)	656,037,110	5,919,257	650,117,853	623,013,691
	DETAILS OF WRITE-INS				
1101.					
1102.					
	Summary of remaining write-ins for Line 11 from overflow page		0	0	0
	Fotals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
	State Income Tax Receivable	225		225	26
	Prepaid Expenses			0	0
	Topara Expenses		000,042		
	Summary of remaining write-ins for Line 25 from overflow page		0	0	.0
	Fotals (Lines 2501 through 2503 plus 2598)(Line 25 above)	338,567	338,342	225	26

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP	, /	Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)				
2.	Accrued medical incentive pool and bonus amounts				740,445
3.	Unpaid claims adjustment expenses	3,616,732		3,616,732	3,886,025
4.	Aggregate health policy reserves, including the liability of				
	\$ for medical loss ratio rebate per the Public	40 E70 00E		40 E70 00E	75 000 004
_	Health Service Act			, ,	, , , , , , , , , , , , , , , , , , ,
5. e	Aggregate life policy reserves				
6. 7.	Property/casualty unearned premium reserve Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued				
10.1		10,402,100		10,402,100	
10.1	(including \$ on realized gains (losses))	27 623 208		27 623 208	9 536 519
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others.				358
13.	Remittances and items not allocated				
14.	Borrowed money (including \$ current) and				, , , , , , , , , , , , , , , , ,
	interest thereon \$ (including				
	\$ current)			0	
15.	Amounts due to parent, subsidiaries and affiliates				50.590.395
16.	Derivatives				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	
21.	Net adjustments in assets and liabilities due to foreign exchange rates	•		0	
22.	Liability for amounts held under uninsured plans				28,988,307
23.	Aggregate write-ins for other liabilities (including \$51,867,741				
	current)		0		
24.	Total liabilities (Lines 1 to 23)	384,426,134	0	384,426,134	391,426,499
25.	Aggregate write-ins for special surplus funds				25,336,213
26.	Common capital stock				1,000
27.	Preferred capital stock				
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	154,881,287	95,440,547
32.	Less treasury stock, at cost:				
	32.1 shares common (value included in Line 26				
	\$	XXX	XXX		
	32.2 shares preferred (value included in Line 27				
	\$				
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	650,117,853	623,013,691
	DETAILS OF WRITE-INS				
2301.	Accrued Premium Tax				39,728,257
2302.	Other Premium Liability			10,204,457	8,950,906
2303.	Escheat Liability		0		1,325,380
2398.	Summary of remaining write-ins for Line 23 from overflow page		0		103,544
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	53,750,669		53,750,669	50,108,087
2501.	Estimated ACA Health Insurer fee		XXX		
2502.					
2503.	Summary of remaining write-ins for Line 25 from overflow page				
2598. 2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	25,336,213
	Totals (Lines 2501 through 2503 plus 2596)(Line 25 above)				
3001. 3002.					
3002.					
3098.	Summary of remaining write-ins for Line 30 from overflow page				0
3098.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0
5055.	Totalo (Ellies 500 Filliough 5000 plus 5030)(Ellie 30 above)	^^^	^^^	U	U

STATEMENT OF REVENUE AND EXPENSES

		Current To D	ate	Prior Year To Date	Prior Year Ended December 31	
		1 Uncovered	2 Total	3 Total	4 Total	
1.	Member Months	xxx	2,538,740	2,375,833	4,860,280	
2.	Net premium income (including \$ non-health					
	premium income)	XXX	967,091,269	832,574,071	1,830,210,537	
3.	Change in unearned premium reserves and reserve for rate credits	xxx	32,606,400	12,635,187	(25,017,893)	
4.	Fee-for-service (net of \$ medical expenses)	XXX				
5.	Risk revenue					
6.	Aggregate write-ins for other health care related revenues			0	0	
7.	Aggregate write-ins for other non-health revenues			0		
8.	Total revenues (Lines 2 to 7)	XXX	999,697,669	845,209,258	1,805,192,644	
	Hospital and Medical:					
9.	Hospital/medical benefits					
10.	Other professional services			79,065,795	· · ·	
11.	Outside referrals					
12.	Emergency room and out-of-area			79,522,484		
13.	Prescription drugs		, , , ,	, , ,	······································	
14.	Aggregate write-ins for other hospital and medical			, ,	7.864.473	
15.	Incentive pool, withhold adjustments and bonus amounts				1,517,185,301	
16.	Subtotal (Lines 9 to 15)				1,517,105,501	
17.	Net reinsurance recoveries					
18.	Total hospital and medical (Lines 16 minus 17)			748,471,483	1 517 185 301	
19.	Non-health claims (net)					
20.	Claims adjustment expenses, including \$					
	containment expenses		54,511,642	50.745.959	105.627.827	
21.					155,804,308	
22.	Increase in reserves for life and accident and health contracts		, , ,	,,	, , , , , , , , , , , , , , , , , , , ,	
	(including \$ increase in reserves for life only)					
23.	Total underwriting deductions (Lines 18 through 22)	0	952,413,571	874,377,144	1,778,617,436	
24.	Net underwriting gain or (loss) (Lines 8 minus 23)		47,284,098	(29, 167, 886)	26,575,208	
25.	Net investment income earned		9,330,055	8,429,692	18,624,568	
26.	Net realized capital gains (losses) less capital gains tax of					
	\$					
27.	Net investment gains (losses) (Lines 25 plus 26)	0	7,458,342	8,345,237	20,720,304	
28.	Net gain or (loss) from agents' or premium balances charged off [(amount					
	recovered \$)					
	(amount charged off \$(1,212))]				(4,774)	
29.	Aggregate write-ins for other income or expenses	0	0	0	0	
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	54 741 228	(20,826,662)	47 290 738	
31.	Federal and foreign income taxes incurred			(4,097,970)		
32.	Net income (loss) (Lines 30 minus 31)	XXX	36,728,465	(16,728,692)	38,091,456	
	DETAILS OF WRITE-INS	7001	33,123,133	(10,120,002)	33,331,133	
0601.		XXX				
0602.						
0603.						
0698.	Summary of remaining write-ins for Line 6 from overflow page			.0	0	
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0	
0701.	- Totals (Ellies 6661 allough 6666 plus 6656)(Ellie 6 above)		-	-		
0702.						
0703.						
0703. 0798.	Summary of remaining write-ins for Line 7 from overflow page					
0798.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	٥	
1401.				-	0	
1401.	Other professional services			, ,		
1403	Cumman of remaining units in far Line 44 from everylaw page		0		^	
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0	
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	U	U	4,486,271	U	
2901.						
2902.						
2903	Summary of remaining write-ins for Line 29 from overflow page					
2998.			n	0	0	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES (Continued)								
		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31					
	CAPITAL AND SURPLUS ACCOUNT								
33.	Capital and surplus prior reporting year	231,587,192	187, 159, 719	187, 159,719					
34.	Net income or (loss) from Line 32	36,728,465	(16,728,692)	38,091,456					
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, 176, 420)	(4,425,580)	4,435,984	3,957,177					
37.	Change in net unrealized foreign exchange capital gain or (loss)								
38.	Change in net deferred income tax	1,306,482	(26,256)	(288,268)					
39.	Change in nonadmitted assets	495,160	1,643,175	2,667,108					
40	Change in unauthorized and certified reinsurance	0							
41.	Change in treasury stock	0							
42.	Change in surplus notes	0							
43.	Cumulative effect of changes in accounting principles								
44.	Capital Changes:								
	44.1 Paid in								
	44.2 Transferred from surplus (Stock Dividend)	0							
	44.3 Transferred to surplus.								
45.	Surplus adjustments:								
	45.1 Paid in	0							
	45.2 Transferred to capital (Stock Dividend)								
	45.3 Transferred from capital								
46.	Dividends to stockholders								
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0					
48.	Net change in capital & surplus (Lines 34 to 47)	34,104,527	(10,675,789)	44,427,473					
49.	Capital and surplus end of reporting period (Line 33 plus 48)	265,691,719	176,483,930	231,587,192					
	DETAILS OF WRITE-INS								
4701.				0					
4702.									
4703.									
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0					
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0					

CASH FLOW

	OASII LOW			
		1 Current Year	2 Prior Year	3 Prior Year Ended
	Cash from Operations	To Date	To Date	December 31
1.	Premiums collected net of reinsurance	1.020.359.287	830,379,716	1,753,502,641
2.	Net investment income		9,452,501	
3.	Miscellaneous income	0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4.	Total (Lines 1 to 3)	1,031,182,039	839,832,217	1,774,387,603
5.	Benefit and loss related payments			
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions			
8.	Dividends paid to policyholders			210,100,070
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
Э.		0	324,332	347,959
40	gains (losses)			
10.	Total (Lines 5 through 9)	919,100,654	743,061,774	1,703,790,507
11.	Net cash from operations (Line 4 minus Line 10)	112,081,385	96,770,443	70,597,096
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	57,140,460	65,438,043	196,549,033
	12.2 Stocks	3,000		50,237,615
	12.3 Mortgage loans	0		
	12.4 Real estate	0		
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		(3,900)	9,933
	12.7 Miscellaneous proceeds	0	19,846,704	28,473,761
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	57.187.548		275,270,342
13.	Cost of investments acquired (long-term only):	,,	,,	
	13.1 Bonds	128 219 037	75 741 226	190 480 519
	13.2 Stocks	, ,		
	13.3 Mortgage loans			
	13.4 Real estate	_		
	13.5 Other invested assets	0		
	13.6 Miscellaneous applications	24,057,033	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	153,508,168	75,741,226	292,060,910
11	, , ,	0	10,141,220	202,000,010
14.	Net increase (or decrease) in contract loans and premium notes		0 520 621	(16.700.560
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(96,320,620)	9,539,621	(16,790,568
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0		
	16.2 Capital and paid in surplus, less treasury stock	0		
	16.3 Borrowed funds	0		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0		
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(24,364,006)	(75,621,704)	(34,670,325
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5			
	plus Line 16.6)	(24,364,006)	(75,621,704)	(34,670,325
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.		(8,603,241)	30,688,359	19 , 136 , 203
19.	Cash, cash equivalents and short-term investments:			
	•	14,836,507	(4,299,696)	(4,299.696
	19.2 End of period (Line 18 plus Line 19.1)	6,233,266	26,388,663	14,836,507
		-,-30,100	,,	,200,001
	upplemental disclosures of cash flow information for non-cash transactions:	.337.309	368,031	736,473
∠0.00	υι. μοριονιατισιι	500, 100		

Note: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0001. Depreciation	.337.309	368.031	736.473
	,	, .	, ,

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehe (Hospital &	ensive Medical)	4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	404,536	0	0	0	0	0	0	0	404,536	
2. First Quarter	399,338	0	0	0	0	0	0	0	399,338	
3. Second Quarter	420,722								420,722	
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	2,538,740								2,538,740	
Total Member Ambulatory Encounters for Period:										
7 Physician	836,456								836,456	
8. Non-Physician	1,999,478								1,999,478	
9. Total	2,835,934	0	0	0	0	0	0	0	2,835,934	
10. Hospital Patient Days Incurred	190,953								190,953	
11. Number of Inpatient Admissions	27,541								27,541	
12. Health Premiums Written (a)	967,091,269							192,169	966,899,100	
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	999,697,669							89,360	999,608,309	
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	777,987,095							2,427,789	775,559,306	
18. Amount Incurred for Provision of Health Care Services	783,669,359							1,839,337	781,830,022	

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

Aging Analysis of Unpa	id Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
						,
0299999 Aggregate accounts not individually listed-uncovered	00.570.010	455.040	70 500	20.010	0.400.404	0 00 000
0399999 Aggregate accounts not individually listed-covered	26,572,242		79,562			29,370,727
0499999 Subtotals	26,572,242	455,813	79,562	99,616	2, 163, 494	29,370,727
0599999 Unreported claims and other claim reserves						129,589,428
0699999 Total amounts withheld						450.000 155
0799999 Total claims unpaid						158,960,155
0899999 Accrued medical incentive pool and bonus amounts						7,432,733

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALTSIS OF CLAIMS UNPAID	- PRIOR YEAR - NET OF REINSU					
		Claims Paid Liability Year to Date End of Current Quarter		5	6	
	Year to			nt Quarter		
	1 On	2	3 On	4		Estimated Claim Reserve and
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical)		. 9		. J	0	0
To complete (necessary)						
Medicare Supplement					0	0
3. Dental Only					0	0
4. Vision Only					0	0
Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare	2,071,341	7,579	(215, 102)		1,856,239	22,514
7 Title XIX - Medicaid	151,419,283	627,771,100	7,703,647	151,471,610	159 , 122 , 930	159,947,664
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)		627,778,679	7,488,545	151,471,610	160,979,169	159,970,178
10. Healthcare receivables (a)	1,589,172	2, 105,500			1,589,172	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts	412,463		522,413	6,910,320	934,876	740,445
13. Totals (Lines 9-10+11+12)	152,313,915	625,673,179	8,010,958	158,381,930	160,324,873	160,710,623

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

STATEMENT AS OF JUNE 30, 2020 OF THE AMERIGROUP Tennessee, Inc. NOTES TO FINANCIAL STATEMENTS

For the purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2019. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of AMERIGROUP Tennessee, Inc. (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* ("NAIC SAP"), subject to any deviations prescribed or permitted by the Tennessee Department of Commerce and Insurance (the "TDCI").

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

		SSAP#	F/S Page	F/S Line #	June 30, 2020	December 31, 2019
Net	Income					
(1)	AMERIGROUP Tennessee, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 36,728,465	\$ 38,091,456
(2)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(3)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 36,728,465	\$ 38,091,456
Sur	plus					
(5)	AMERIGROUP Tennessee, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 265,691,719	\$ 231,587,192
(6)	State Prescribed Practices that is an increase/(decrease) from NAIC SAP:					
(7)	State Permitted Practices that is an increase/(decrease) from NAIC SAP:					
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 265,691,719	\$ 231,587,192

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

No significant change.

C. Accounting Policies

(1) No significant change.

STATEMENT AS OF JUNE 30, 2020 OF THE AMERIGROUP Tennessee, Inc. NOTES TO FINANCIAL STATEMENTS

has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

Fair values of common stock are generally designated as Level 1 and are based on quoted market prices. For certain common stock, quoted market prices for the identical security are not always available and the fair value is estimated by reference to similar securities for which quoted prices are available. These securities are designated as Level 2.

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable.

C. 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)
Bonds	\$ 527,117,520	\$ 508,045,713	\$ 73,128,569	\$ 453,988,951	s —	\$ - 5	S —
Unaffiliated Common Stock	48,147,527	48,147,527	_	48,147,527	_	_	_
Cash equivalents	14,599,509	14,599,509	_	14,599,509	_	_	_
Securities Lending Collateral	31,986,251	31,987,104	_	31,986,251	_	_	_

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value.

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

21. Other Items

A. Unusual or Infrequent Items

The spread of the COVID-19 virus caused significant financial market volatility, economic uncertainty, and interruptions to normal business activities. The ultimate impact to the Company is unknown, but management expects continued interruptions to day-to-day business activities, impacts to claim and premium activity, investment values, as well as possible impacts to liquidity.

B. - I.

No significant change.

22. Events Subsequent

Subsequent events have been considered through August 13, 2020 for the statutory statement issued on August 14, 2020. There were no events occurring subsequent to June 30, 2020 requiring recognition or disclosure.

STATEMENT AS OF JUNE 30, 2020 OF THE AMERIGROUP Tennessee, Inc. NOTES TO FINANCIAL STATEMENTS

23. Reinsurance

Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D.

No significant change.

- E. Risk Sharing Provisions of the Affordable Care Act ("ACA")
 - (1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

No

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

Not applicable.

(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.

Not applicable.

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

Not applicable.

(5) ACA Risk Corridors Receivable as of Reporting Date.

Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

- **A.** The estimated cost of claims and claim adjustment expense attributable to insured events of prior years increased by \$6,568,990 during 2020. This is approximately 4.0% of unpaid claims and claim adjustment expenses of \$164,596,648 as of December 31, 2019. The deficiency reflects the increases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2020. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- **B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable.

27. Structured Settlements

Not applicable.

STATEMENT AS OF JUNE 30, 2020 OF THE AMERIGROUP Tennessee, Inc. NOTES TO FINANCIAL STATEMENTS

28. Health Care Receivables

No significant change.

29. Participating Policies

Not applicable.

30. Premium Deficiency Reserves

The Company did not record any premium deficiency reserves at June 30, 2020.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or reporting entity? 2.2 If yes, date of change: 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated is an insurer? If yes, complete Schedule Y, Parts 1 and 1A. 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? 3.3 If the response to 3.2 is yes, provide a brief description of those changes. N/A 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? 	Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?					
reporting entity? If yes, date of change: 1. Is the reporting entity a member of an insurance Holding Company System consisting of two or more affiliated is an insure? If yes, complete Schedule Y, Parts 1 and 1A. 2. Have there been any substantial changes in the organizational chart since the prior quarter end? 3.3 If the response to 3.2 is yes, provide a brief description of those changes. NIA 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbrevic ceased to exist as a result of the merger or consolidation. 1. NAIC Company Code 1. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing or in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or if yes, attach an explanation. 3. State as of what date the latest financial examination of the reporting entity was made or is being made. 3. State as of what date the latest financial examination report became available from either the state of domic date should be the date of the examined balance sheet and not the date the report was completed or released. 3. State as of what date the latest financial examination report became available from either the state of the date). 4. By what department or departments? 5. State of Tennessee Department of Commerce and Insurance, TennCare Division 4. Have all of the recommendations within the latest financial examination report been accounted for in a statement filed with Departments? 5. State of Tennessee Department of Commerce and Insurance, TennCare Division 6.	If yes, has the report been filed with the domiciliary state?					
3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated is an insurer? If yes, complete Schedule Y, Parts 1 and 1A. 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? 3.3 If the response to 3.2 is yes, provide a brief description of those changes. NIA 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviceased to exist as a result of the merger or consolidation. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviceased to exist as a result of the merger or consolidation. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviceased to exist as a result of the merger or consolidation. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviceased to exist as a result of the merger or consolidation. 4.3 If the reporting entity is subject to a management agreement, including third-party administrator(s), managing g in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement of If yes, attach an explanation. 4.2 State as of what date the latest financial examination report became available from either the state of domic date should be the date of the examined balance sheet and not the date the report was completed or released the proving entity. This is the release date or completion date of the examination report been accounted for in	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?					
is an insurer? If yes, complete Schedule Y, Parts 1 and 1A. 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? 3.3 If the response to 3.2 is yes, provide a brief description of those changes. N/A 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviceased to exist as a result of the merger or consolidation. 1		·				
3.3 If the response to 3.2 is yes, provide a brief description of those changes. N/A 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbrevic ceased to exist as a result of the merger or consolidation. 1	is an insurer?					
If the reporting entity publicly traded or a member of a publicly traded group?		Yes [] No [X]				
1.5. If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 1.6. Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 1.6. If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbrevia ceased to exist as a result of the merger or consolidation. 1. Name of Entity 1. NAIC Company Code 2. NAIC Company Code 3. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement of if yes, attach an explanation. 3. State as of what date the latest financial examination of the reporting entity was made or is being made. 3. State as of what date the latest financial examination report became available from either the state of domic date should be the date of the examined balance sheet and not the date the report was completed or released 3. State as of what date the latest financial examination report became available to other states or the public from the reporting entity. This is the release date or completion date of the examination report and not the date of the date). 3. State as of what date the latest financial examination at the examination report and not the date of the date). 4. By what department or departments? 5. State of Tennessee Department of Commerce and Insurance, TennCare Division 4. By what department or departments within the latest financial examination report been accounted for in a statement dijustments within the latest financial examination report been complied with? 4. Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrat revoked by any governmental entity during the reporting period? 4. If yes, give full information: 4. If response						
4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? If yes, complete and file the merger history data file with the NAIC. 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbrevia ceased to exist as a result of the merger or consolidation. 4.2 Name of Entity 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing of in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement of if yes, attach an explanation. 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 6.2 State the as of date that the latest financial examination report became available from either the state of domic date should be the date of the examined balance sheet and not the date the report was completed or released. 6.3 State as of what date the latest financial examination report became available to other states or the public from the reporting entity. This is the release date or completion date of the examination report and not the date of the date). 6.4 By what department or departments? 6.5 State of Tennessee Department of Commerce and Insurance, TennCare Division 6.6 Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? 6.6 Have all of the recommendations within the latest financial examination report been complied with? 6.7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registra revoked by any governmental entity during the reporting period? 7.1 If yes, give full information: 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below		Yes [X] No []				
If yes, complete and file the merger history data file with the NAIC. If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbrevia ceased to exist as a result of the merger or consolidation. Name of Entity	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.					
1 Name of Entity 1 NAIC Company Code 1 Name of Entity 2 NAIC Company Code 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing of in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement of if yes, attach an explanation. 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made	??	Yes [] No [X]				
Name of Entity NAIC Company Code 1. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing of in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or if yes, attach an explanation. 1. State as of what date the latest financial examination of the reporting entity was made or is being made	viation) for any entity that has					
 in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement of If yes, attach an explanation. 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made	3 State of Domicile					
 State the as of date that the latest financial examination report became available from either the state of domic date should be the date of the examined balance sheet and not the date the report was completed or released State as of what date the latest financial examination report became available to other states or the public from the reporting entity. This is the release date or completion date of the examination report and not the date of the date). By what department or departments? State of Tennessee Department of Commerce and Insurance, TennCare Division Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? Have all of the recommendations within the latest financial examination report been complied with? Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registra revoked by any governmental entity during the reporting period? If yes, give full information: Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? If response to 8.1 is yes, please identify the name of the bank holding company. If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence 	general agent(s), attorney- or principals involved? Yes	[] No [X] N/A [
 date should be the date of the examined balance sheet and not the date the report was completed or released State as of what date the latest financial examination report became available to other states or the public from the reporting entity. This is the release date or completion date of the examination report and not the date of the date). By what department or departments? State of Tennessee Department of Commerce and Insurance, TennCare Division Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? Have all of the recommendations within the latest financial examination report been complied with? Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrat revoked by any governmental entity during the reporting period? If yes, give full information: Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? If response to 8.1 is yes, please identify the name of the bank holding company. If the company affiliated with one or more banks, thrifts or securities firms? If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence		12/31/2018				
the reporting entity. This is the release date or completion date of the examination report and not the date of the date). 6.4 By what department or departments? State of Tennessee Department of Commerce and Insurance, TennCare Division 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? 6.6 Have all of the recommendations within the latest financial examination report been complied with? 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrar revoked by any governmental entity during the reporting period? 7.2 If yes, give full information: 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence		12/31/2018				
State of Tennessee Department of Commerce and Insurance, TennCare Division Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? 6.6 Have all of the recommendations within the latest financial examination report been complied with? 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrat revoked by any governmental entity during the reporting period? 7.2 If yes, give full information: 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence.	the examination (balance sheet	12/19/2019				
 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a statement filed with Departments? 6.6 Have all of the recommendations within the latest financial examination report been complied with? 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrat revoked by any governmental entity during the reporting period? 7.2 If yes, give full information: 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence 						
 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registrat revoked by any governmental entity during the reporting period? 7.2 If yes, give full information: 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence 	a subsequent financial Yes	[] No [] N/A [X				
revoked by any governmental entity during the reporting period? 7.2 If yes, give full information: 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence	Yes	[X] No [] N/A [
 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?						
 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence 						
 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence 		Yes [] No [X]				
8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currence						
regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currenc		Yes [] No [X]				
	cy (OCC), the Federal Deposit					
1 2 Affiliate Name Location (City, State)	3 4 5 FRB OCC FD					

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or person similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	d professional	Yes [X] No []	
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and				
	(e) Accountability for adherence to the code.				
9.11	If the response to 9.1 is No, please explain:				
9.2	Has the code of ethics for senior managers been amended?		Yes [] No [X]	
9.21	If the response to 9.2 is Yes, provide information related to amendment(s).				
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?		Yes [] No [X]	
	FINANCIAL				
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?		Yes [] No [X]	
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:	\$ <u></u> .		0	
	INVESTMENT				
11.1			V [1 N- F V 1	
11.2	use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:		res [] No [X]	
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:				
13.	Amount of real estate and mortgages held in short-term investments:				
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?		Yes [
	Pri	1 or Year-End	Cu	2 rrent Quarter	
		ok/Adjusted		ok/Adjusted	
1/ 21	Bonds \$	rrying Value		rrying Value	_
	Preferred Stock \$				
	Common Stock \$				
	Short-Term Investments \$				
	Mortgage Loans on Real Estate\$				
	All Other \$				
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)\$		\$)
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above\$		\$		
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [1 No [X]	
	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?]
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date:				
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2				
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 an				
	16.3 Total payable for securities lending reported on the liability page.	\$,	31,987,102	

GENERAL INTERROGATORIES

	offices, vaults or safet custodial agreement v Outsourcing of Critical	y deposit boxes, v vith a qualified bar I Functions, Custo	Special Deposits, real estate, movere all stocks, bonds and other sonk or trust company in accordance dial or Safekeeping Agreements or requirements of the NAIC Finance	ecurities, owner e with Section of the NAIC Fi	ed throughout t 1, III - Genera nancial Conditi	the current year I Examination C ion Examiners H	held pursuant to a onsiderations, F. landbook?	Yes	[X] No []
		1 Name of Cust	todian(s)			2 Custodian Addr	ess			
	JP Morgan Chase Bank	k, N.A		383 Madison	Ave, New York	, NY 10179				
17.2	For all agreements that location and a comple		vith the requirements of the NAIC	Financial Con	dition Examine	ers Handbook, p	rovide the name,			
	1 Name((s)	2 Location(s)			3 Complete Expla	nation(s)			
17.3 17.4	Have there been any of the second of the sec	•	g name changes, in the custodian	(s) identified in	17.1 during th	ne current quarte	er?	Yes] No [X]	
	1 Old Custo		2 New Custodian	i	3 of Change		4 Reason			
17.5	make investment deci	isions on behalf of	ovestment advisors, investment m the reporting entity. For assets th tment accounts"; "handle secur	nat are manage rities"]	ed internally by	uding individual employees of t	s that have the authority to he reporting entity, note as			
		Name of Firm	1 n or Individual	2 Affilia	ation					
	Loomis, Sayles & Com	npany, LP		U						
			y							
	17.5097 For those firm	ns/individuals liste	ed in the table for Question 17.5, demore than 10% of the reporting e	do any firms/ind	dividuals unaffi	liated with the re	eporting entity (i.e.	Yes	[X] No [1
	17.5098 For firms/indi	viduals unaffiliate	d with the reporting entity (i.e. des at aggregate to more than 50% of	signated with a	"U") listed in t	he table for Que	estion 17.5, does the			
17.6	For those firms or inditable below.	viduals listed in th	e table for 17.5 with an affiliation	code of "A" (af	filiated) or "U"	(unaffiliated), pr	ovide the information for th	ie		
	1		2			3	4		5 Investment	
	Central Registration								Management Agreement	
	Depository Number		Name of Firm or Individual			Identifier (LEI)	Securities Exchange		(IMA) Filed	
	105377	Loomis, Sayles 8	& Company, LP				Commission Securities Exchange		NO	
			ent Management Company			XGMYYN38	Commission Securities Exchange		NO	
			anagement							
			urposes and Procedures Manual				•]
19.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	n necessary to per available. or is current on all s an actual expect	eporting entity is certifying the follo mit a full credit analysis of the sec contracted interest and principal p ation of ultimate payment of all co 5GI securities?	curity does not payments.	exist or an NA	IC CRP credit ra	ating for an FE or PL	Yes	[] No [X]
20.	a. The security wa b. The reporting er c. The NAIC Designon a current privity. d. The reporting er	s purchased prior ntity is holding cap gnation was derive vate letter rating ho ntity is not permitte	reporting entity is certifying the fo to January 1, 2018. iital commensurate with the NAIC and from the credit rating assigned eld by the insurer and available foed to share this credit rating of the PLGI securities?	Designation roby an NAIC Clor examination PL security w	eported for the RP in its legal of by state insura ith the SVO.	security. capacity as a NF ance regulators.	RSRO which is shown	Yes	[] No [X]
21.	FE fund: a. The shares were b. The reporting er	e purchased prior ntity is holding cap d a public credit ra	registered private fund, the report to January 1, 2019. bital commensurate with the NAIC ting(s) with annual surveillance as	Designation re	eported for the	security.				

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent		82.9 %
	1.2 A&H cost containment percent		4.5 %
	1.3 A&H expense percent excluding cost containment expenses		12.4 %
2.1	Do you act as a custodian for health savings accounts?		Yes [] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$	
2.3	Do you act as an administrator for health savings accounts?		Yes [] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date	.\$	
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [] No [X]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [] No [X]

Showing All N	law Paineurance	Treaties - Currer	at Vear to Date

1 2 3 4 5 6 7 8 9 10 Effective NAIC Type of T			Showing All New Reinsural	nce Treaties	- Current Yea	ar to Date			
NAIC Company Date Name of Reinsurer Domiciliary Reinsurance Ceded Type of Reinsurer Rating Reinsurance Rating Re	1	2		5	6		8		Effective
	Company	ID	Effective	Domiciliary	Reinsurance	Business	T (0)	Reinsurer Rating	Certified Reinsurer
NONE	Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Ceded	Type of Reinsurer	(1 through 6)	Rating
NONE		·····							
NONE		· · · · · · · · · · · · · · · · · · ·							
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories Direct Business Only Federal Employees Life and Health Annuity Premiums & Other Property/ Casualty Active Accident and **Benefits** Total Status Health Columns 2 Medicaid Program Deposit-Type Premiums States, etc (a) Title XVIII Title XIX Premiums Consideration Premiums Through 7 Contracts 1. Alabama ALN. Alaska 2. ΑK N 0 3. Arizona ΑZ N. .0 4. Arkansas AR N 0 California 5. CA N 0 6. Colorado 0 CO N 7. Connecticut CT N 0 8. Delaware 0 DE N. District of Columbia . DC 9. N 0 10. Florida . 0 FL N. Georgia 11. GΑ N 0 12. Hawaii .. ΗΙ Ν. .0 13. Idaho .. ID N 0 Illinois 14. Ш N 0 15. Indiana . IN N 0 16. lowa .. IΑ N 0 17. Kansas KS N. 0 Kentucky. 18. ΚY N 0 Louisiana 19. LA N. 0 20. Maine. MF N 0 21. Maryland . MD N. .0 22. Massachusetts ... MA N 0 23. Michigan . MI N 0 24. Minnesota 0 MN N Mississippi 25. MS N 0 26. Missouri . 0 MO N. 27. Montana MT N 0 28. Nebraska. 0 NE .N. 29. Nevada .. NV N 0 30. New Hampshire NH N 0 31. New Jersey NJ N 0 32. New Mexico 0 NM N 33. New York . NY N. 0 North Carolina ... 34. NC N 0 35. North Dakota ND N. 0 36. Ohio. ОН N 0 Oklahoma 37. OK .N. .0 38. Oregon .. OR N 0 39. Pennsylvania .. PA N 0 Rhode Island 40. 0 RI N South Carolina 41. SC N 0 South Dakota .. 42. 0 SD N. 192.169 967.091.269 43. Tennessee 966.899.100 TN L 44. Texas 0 TX .N. 45. Utah ... UT N 0 46. Vermont. VT Ν. .0 47. Virginia .. VA N 0 48. Washington. WA N 0 West Virginia .. 49. . WV N 0 Wisconsin 50. WI N 0 51. Wyoming. WY N. 0 American Samoa AS 52. N 0 53. Guam .. GU N. .0 Puerto Rico .. 54. PR N 0 U.S. Virgin Islands ... VI 55. N 0 Northern Mariana 56. N 0 Islands MP 57. Canada CAN N 0 Aggregate Other Aliens 58. 0 0 0 0 OT XXX 0 0 0 0 59. 192 169 966.899.100 967 091 269 Subtotal XXX 0 0 0 0 0 Reporting Entity 60. Contributions for Employee Benefit Plans XXX 61. Totals (Direct Business) 0 192,169 0 0 967,091,269 0 966,899,100 XXX **DETAILS OF WRITE-INS** 58001. XXX 58002. XXX 58003 58998. Summary of remaining write-ins for Line 58 from overflow page ..0 ..0 ..0 .0 .0 .0 ..0 .0 XXX Totals (Lines 58001 through 58003 plus 58998)(Line 58 58999 0 0 0 0 0 0 0 0 above) XXX

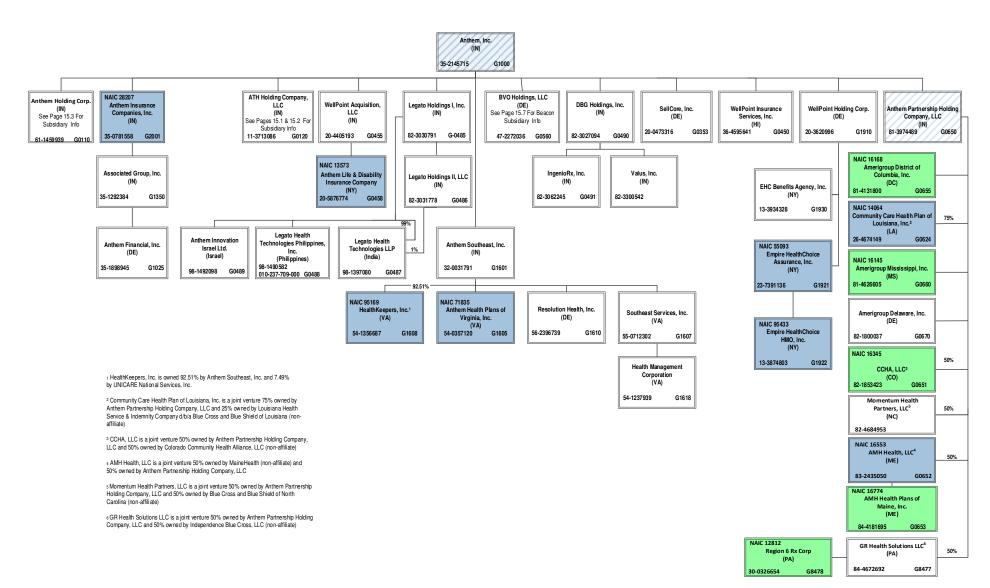
(a) Active Status Counts:	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG1	R - Registered - Non-domiciled RRGs0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer0
N - None of the above - Not allowed to write business in the state56	

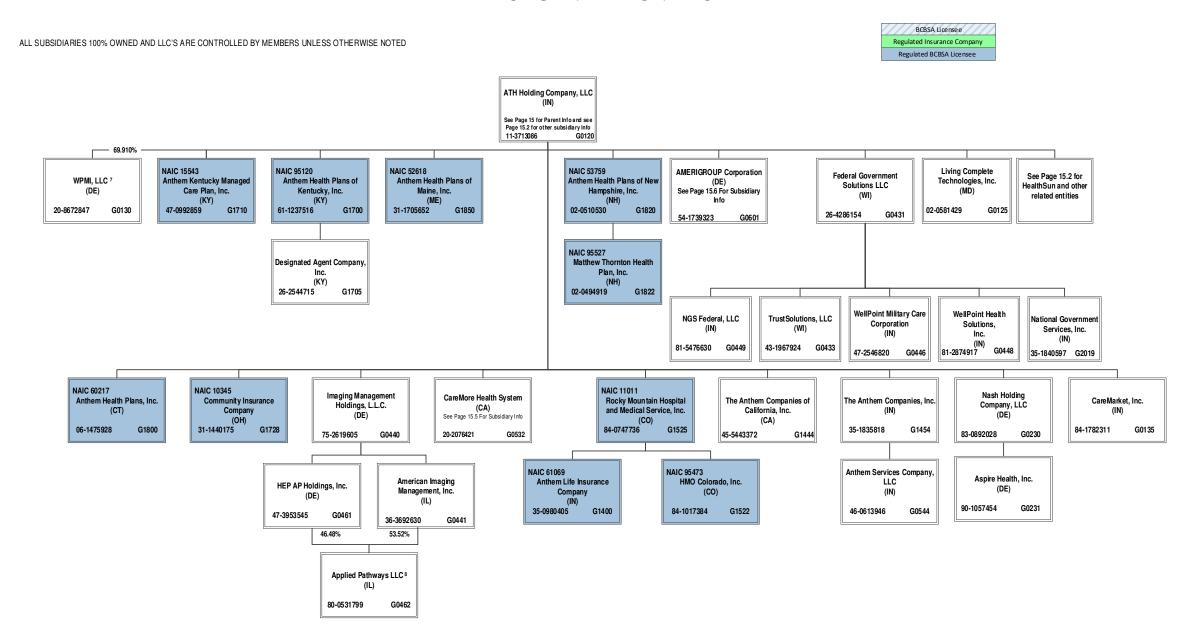
BCB5A Licensee

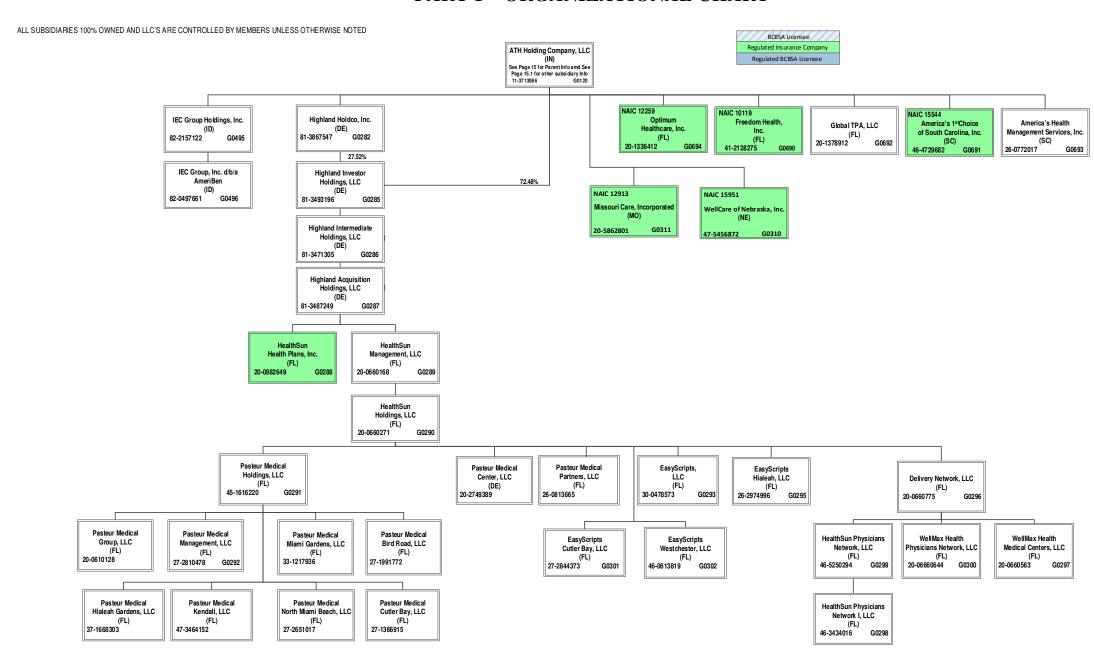
Regulated Insurance Company

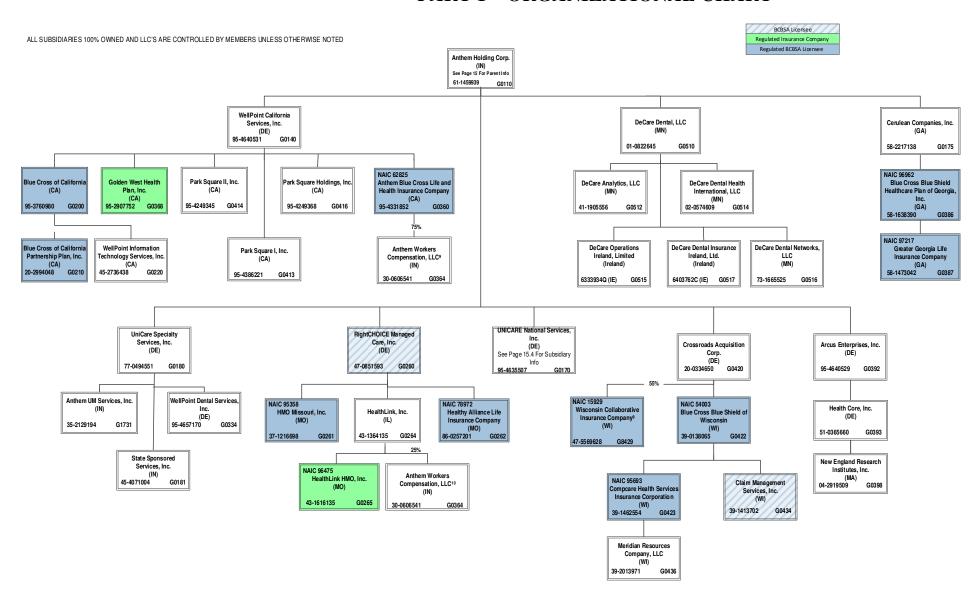
Regulated BCBSA Licensee

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED





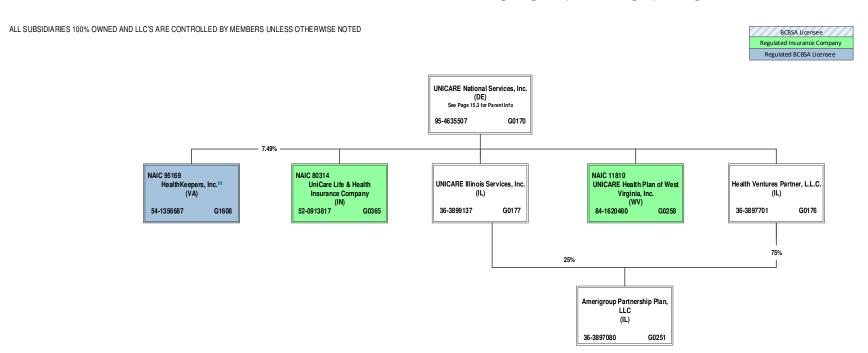




⁹ 45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate). Not consolidated for accounting purposes.

¹⁰ Anthem Workers' Compensation LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.

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



 $^{^{11}}$ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by UNICARE National Services, Inc.

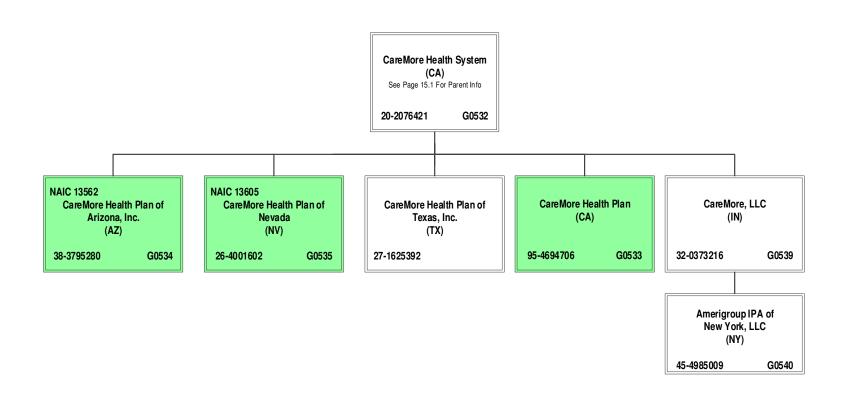
SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART

BCBSA Licensee

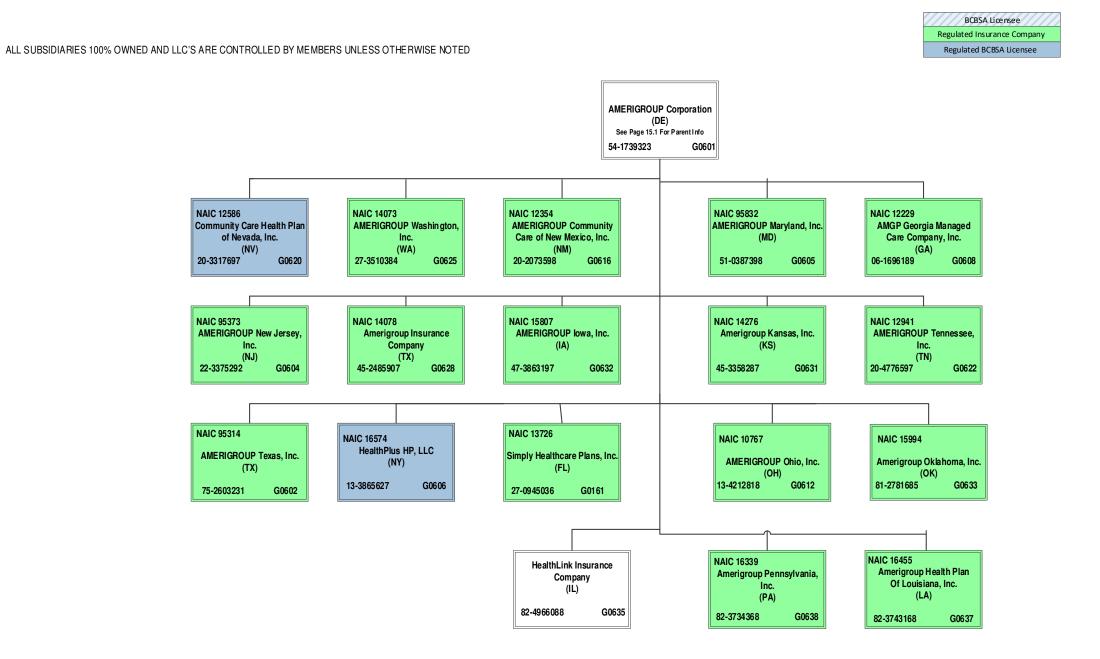
Regulated Insurance Company

Regulated BCBSA Licensee

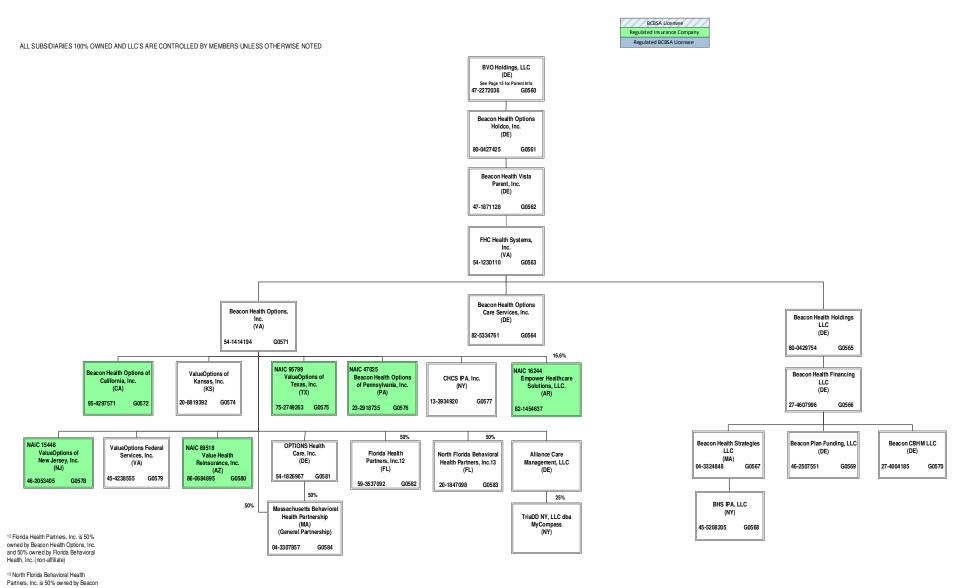
ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



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



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



Health Options, Inc. and 50% owned by North Florida Behavioral Health Network, Inc. (non-affiliate)

¹⁴ Empower Healthcare Solutions, LLC is 16.6% owned by Beacon Health Options, Inc. and 83.4% owned by a non-affiliate

SCHEDULE Y

	PART IA - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	a	10	11	12	13	14	15	16
	<u>-</u>	Ŭ				,			10	' '	Type	If		'	"
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.				0001156039	torridaeriary	Alliance Care Management, LLC	DE	NIA	Beacon Health Options, Inc.	Ownership.	100.000	Anthem, Inc.	N N	+ -
0671	Anthem. Inc.		36-3692630		0001156039		American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C.	Owner ship.	100.000	Anthem. Inc.	N	
0071	Arthon, mo.		. 00 0032000		0001100000		America's 1st Choice of South Carolina, Inc.	16		I magning management nordings, E.E.O.	owner simp.		. Arthem, me.		
0671	Anthem. Inc.	15544	46-4729682		0001156039		America 3 131 onorec or could carorina, me.	SC	IA	ATH Holding Company, LLC	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		26-0308991		0001156039		America's Health Management Services, Inc.	SC	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N.	
0071	Anthon, me.		20 00000001		0001100000		AMERIGROUP Community Care of New Mexico, Inc.	00		Ann nording company, LEC	owner strip		. Antilon, The.		
0671	Anthem. Inc.	12354	20-2073598		0001156039		AMERITATION COMMUNITELY CATE OF NEW MICKIEG, THE.	NM	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	12001	. 54-1739323		0001156039		AMERIGROUP Corporation	DE	UDP	ATH Holding Company, LLC	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		82-1800037		0001156039		AMERIGROUP Delaware. Inc.	DE	NIA	Anthem Partnership Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N N	
0671	Anthem, Inc.	16168	81-4131800		0001156039		Amerigroup District of Columbia, Inc.	DC	IA	Anthem Partnership Holding Company, LLC	Owner ship.	100.000	Anthem. Inc.		
0671	Anthem, Inc.	16455	82-3743168		0001156039		Amerigroup Health Plan of Louisiana, Inc	LA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.	14078	45-2485907		0001156039		Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Owner ship.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.	15807	47-3863197		0001156039		AMERIGROUP lowa, Inc.	IA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.		
0671	Anthem. Inc.		45-4985009		0001156039		Ameriaroup IPA of New York, LLC	NY	NIA	CareMore, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	14276	45-3358287		0001156039		Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.	95832	51-0387398		0001156039		AMERIGROUP Maryland, Inc.	MD	IA	AMERIGROUP Corporation	Owner ship.	100.000	Anthem. Inc.		
0671	Anthem. Inc.	16145	81-4626605		0001156039		Amerigroup Mississippi, Inc.	MS	IA	Anthem Partnership Holding Company, LLC	Ownership.	100.000	Anthem. Inc.		
0671	Anthem, Inc.	95373	22-3375292	***************************************	0001156039		AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	10767	13-4212818		0001156039		AMERIGROUP Ohio. Inc.	0H	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.		
0671	Anthem. Inc.	15994	81-2781685		0001156039		AMERIGROUP Oklahoma, Inc.	0K	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	10004	. 36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL.	NIA	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem Inc	NN	
0671	Anthem, Inc.		36-3897080		0001156039		Amerigroup Partnership Plan, LLC	IL	NIA	UNICARE Illinois Services, Inc.	Owner ship.	25.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16339	82-3734368		0001156039		Amerigroup Pennsylvania, Inc.	PA	IA	AMERIGROUP Corporation	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	12941	20-4776597		0001156039		AMERIGROUP Tennessee. Inc.	TN	RE.	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95314	75-2603231		0001156039		AMERIGROUP Texas. Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	14073	27-3510384		0001156039		AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
0671	Anthem. Inc.	12229	06-1696189		0001156039		AMGP Georgia Managed Care Company, Inc.	GA	IA	AMERIGROUP Corporation	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.	16553	83-2435050		0001156039		AMH Health, LLC	ME	IA	Anthem Partnership Holding Company, LLC	Owner ship.	50.000	Anthem. Inc.	N	0102
0671	Anthem. Inc.	16774	84-4181695		0001156039		AMH Health Plans of Maine, Inc.	ME	IA	AMH Health, LLC	Ownership.	100.000	Anthem. Inc.		20102
	Anthon, mo.				0001100000		Anthem Blue Cross Life and Health Insurance			Awii i icai tii, LEO	owner arrip.		. Arthon, me.		
0671	Anthem. Inc.	62825	95-4331852		0001156039		Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		35-1898945		0001156039		Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.	95120	61-1237516		0001156039		Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.		
0671	Anthem. Inc.	52618	31-1705652		0001156039		Anthem Health Plans of Maine, Inc.	ME	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	53759	02-0510530		0001156039		Anthem Health Plans of New Hampshire, Inc	NH	IA	ATH Holding Company, LLC	Owner ship.	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.	71835	54-0357120	40003317	0001156039		Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	100.000	Anthem. Inc.	N N	1
0671	Anthem. Inc.	60217	06-1475928		0001156039		Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	Owner ship.	100.000	Anthem. Inc.		1
0671	Anthem. Inc.		61-1459939		0001156039		Anthem Holding Corp.	IN	NIA	Anthem. Inc.	Owner ship.	100.000	Anthem. Inc.	N	1
	,		1		1	New York Stock Exchange						70.000	,		
0671	Anthem. Inc.		. 35-2145715		0001156039	(NYSE)	Anthem. Inc.	IN	UIP				Anthem. Inc.	N	
0671	Anthem. Inc.		98-1492098		0001156039	····/	Anthem Innovation Israel Ltd	ISR	NIA	Legato Holdings I. Inc.	Owner ship.	100.000	Anthem. Inc.	N.]
0671	Anthem. Inc.	28207	35-0781558		0001156039		Anthem Insurance Companies, Inc.	IN	IA	Anthem. Inc.	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	15543	47-0992859		0001156039		Anthem Kentucky Managed Care Plan, Inc.	KY	IA	ATH Holding Company, LLC	Owner ship.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.	13573	20-5876774		0001156039		Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Owner ship.	100.000	Anthem. Inc.	N	
	,		1				and the state of t			Rocky Mountain Hospital and Medical			1		
0671	Anthem, Inc.	61069	35-0980405		0001156039		Anthem Life Insurance Company	IN	I A	Service, Inc.	Ownership	100.000	Anthem, Inc.	N	.]
0671	Anthem, Inc.		81-3974489		0001156039		Anthem Partnership Holding Company, LLC	DE	NIA	Anthem, Inc.	Ownership.	100.000	Anthem, Inc.	N	1
0671	Anthem, Inc.		. 46-0613946		0001156039		Anthem Services Company, LLC	IN	NIA	The Anthem Companies, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		32-0031791	1	0001156039		Anthem Southeast, Inc.	IN	NIA	Anthem, Inc.	Ownership.	100.000	Anthem, Inc.		
0671	Anthem, Inc.		. 35-2129194		0001156039		Anthem UM Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership.	100.000	Anthem, Inc.	N	
			1		1		,			Anthem Blue Cross Life and Health Insurance					
0671	Anthem, Inc.		. 30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NIA	Company	Ownership	75.000	Anthem, Inc.	N	0109
0671	Anthem, Inc.		30-0606541		0001156039		Anthem Workers' Compensation, LLC	IN	NIA	HealthLink, Inc.	Ownership.	25.000	Anthem, Inc.		0109
0671	Anthem. Inc.	1	80-0531799	1	0001156039	l	Applied Pathways, LLC	IL	NIA	American Imaging Management, Inc.	Ownership	53.520	Anthem. Inc.	N	0108

SCHEDULE Y

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
							-				Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC					Names of	-	- 1						
0		NAIC	I.D.	F		if Publicly Traded	Names of	ciliary	to	Discoult Controlled to	Attorney-in-Fact,	Provide	LUC t - O t - U'	Re-	
Group		Company	, ID	Federal	0114	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.		. 80-0531799		0001156039		Applied Pathways, LLC	IL	NIA	HEP AP Holdings, Inc.	Ownership.	46.480	Anthem, Inc.	N	0108
0671	Anthem, Inc.		. 95-4640529		0001156039		Arcus Enterprises, Inc.	DE	NI A	Anthem Holding Corp.	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 90-1057454		0001156039		Aspire Health, Inc.	DE	NIA	Nash Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 35-1292384		0001156039		Associated Group, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 11-3713086		0001156039		ATH Holding Company, LLC	IN	UIP	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 27-4004185		0001156039		Beacon CBHM LLC	DE	NIA	Beacon Health Financing LLC	Ownership	100.000	Anthem, Inc.	N	
0671 0671	Anthem, Inc.		. 27-4607996 80-0427425		0001156039 0001156039		Beacon Health Financing LLC	DE	NIANIA	Beacon Health Holdings, LLC	Ownership	100.000	Anthem, Inc.	N N	
			82-5334761				Beacon Health Ostione Core Corvince Inc	DE	NIA	FHC Health Systems, Inc.	Ownership	100.000	Anthem. Inc.		
0671	Anthem, Inc.		. 82-5334761 . 95-4297571		0001156039 0001156039		Beacon Health Options Care Services, Inc Beacon Health Options of California, Inc	DE CA	IA	FHC Health Systems, Inc. Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	NN	· · · · · · · · · · · · · · · · · · ·
0671	Anthem, Inc.	47025	23-2918735		0001156039		Beacon Health Options of California, Inc		IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	NN.	
0671	Anthem. Inc.	4/020	. 80-0427425		0001156039		Beacon Health Options of Pennsylvania, Inc.	PA DE	NIA	BVO Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 54-1414194		0001156039		Beacon Health Options, Inc.	VA	NIA	FHC Health Systems. Inc.	Ownership	100.000	Anthem. Inc.	NN.	
0671	Anthem. Inc.	-	. 04-3324848		0001156039		Beacon Health Strategies LLC	WA	NIA	Beacon Health Financing LLC	Ownership	100.000	Anthem Inc	NN.	1
0671	Anthem. Inc.		47-1871128		0001156039		Beacon Health Vista Parent, Inc.	MA	NIA	Beacon Health Options Holdco, Inc.	Owner ship	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.		46-2507551		0001156039		Beacon Plan Funding, LLC	DE	NIA	Beacon Health Financing LLC	Ownership.	100.000	Anthem, Inc.	NN.	
0671	Anthem. Inc.		45-5208205		0001156039		BHS IPA. LLC	NY	NIA	Beacon Health Strategies LLC	Owner ship	100.000	Anthem. Inc.	N	
1 100	AITHEII, IIIC.		. 45-5200205		0001130033		Blue Cross Blue Shield Healthcare Plan of			Deacon nearth otrategres LLC	Owner Sirip	100.000	Airtheil, Inc.		
0671	Anthem. Inc.	96962	58-1638390		0001156039		Georgia, Inc.	GA	IA.	Cerulean Companies, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem, Inc.	54003	39-0138065		0001156039		Blue Cross Blue Shield of Wisconsin	WI	IA.	Crossroads Acquisition Corp.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		95-3760980		0001156039		Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem Inc	N	0101
	ATTRICII, THE		. 33 0700300		0001100000		Blue Cross of California Partnership Plan,	on		licinonit carrionna cervices, inc.	- Office Strip.		Airtholl, mo.		0101
0671	Anthem, Inc.		20-2994048		0001156039		Inc.	CA	IA	Blue Cross of California	Ownership	100.000	Anthem. Inc.	N	0101
0671	Anthem. Inc.		47-2272036		0001156039		BVO Holdings, LLC	DE	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	N.	1
0671	Anthem. Inc.		84-1782311		0001156039		CareMarket Inc.	IN	NIA	ATH Holding Company, LLC	Ownership.	100.000	Anthem. Inc.	N	1
.0671	Anthem. Inc.		95-4694706		0001156039		CareMore Health Plan	CA	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N.	0101
0671	Anthem, Inc.	13562	38-3795280		0001156039		CareMore Health Plan of Arizona, Inc.	AZ	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	13605	26-4001602		0001156039		CareMore Health Plan of Nevada	NV	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 27-1625392		0001156039		CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		32-0373216		0001156039		CareMore, LLC	IN	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 20-2076421		0001156039		CareMore Health System	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		58-2217138		0001156039		Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 39-1413702		0001156039		Claim Management Services, Inc.	W1	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16345	82-1853423		0001156039		CCHA, LLC	CO	IA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.				0001156039		CHCS IPA, Inc.	NY	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem, Inc.	N	
1			1				Community Care Health Plan of Louisiana, Inc	1 .	1			I			1 1
0671	Anthem, Inc.	14064	26-4674149		0001156039			LA	IA	Anthem Partnership Holding Company, LLC	. Ownership	75.000	Anthem, Inc.	N	0104
0671	Anthem, Inc.	12586	20-3317697		0001156039		Community Care Health Plan of Nevada, Inc	NV	IA	AMERIGROUP Corporation	. Ownership	100.000	Anthem, Inc.	N	4
0671	Anthem, Inc.	10345	31-1440175		0001156039		Community Insurance Company	H	IA	ATH Holding Company, LLC	. Ownership	100.000	Anthem, Inc.	N	
		05					Compcare Health Services Insurance	I	l		l	40	l		
0671	Anthem, Inc.	95693	39-1462554		0001156039		Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 20-0334650		0001156039		Crossroads Acquisition Corp.	DE	NIA	Anthem Holding Corp.	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 82-3027094		0001156039		DBG Holdings, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	-	. 41-1905556		0001156039		DeCare Analytics, LLC	MN	NIA	DeCare Dental, LLC	. Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		. 02-0574609		0001156039 0001156039		DeCare Dental Health International, LLC	MN	NIA NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	NN	
0671		-	73–1665525		0001156039		DeCare Dental Insurance Ireland, Ltd	IRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.	-	. 73-1665525		0001156039		DeCare Dental Networks, LLC	MN	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	NN	
0671	Anthem, Inc.	-	01-0022040		0001156039		DeCare Operations Ireland, Limited	. IMN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	NN.	
0671	Anthem, Inc.		. 20-0660775		0001156039		Delivery Network, LLC	IKL FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	NN.	
0671	Anthem. Inc.		. 26-2544715		0001156039		Designated Agent Company, Inc.	FL KY	NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	Anthem. Inc.	NN.	
0671	Anthem. Inc.		. 27-2844373		0001156039		EasyScripts Cutler Bay, LLC	FL	NIA	HealthSun Holdings, LLC	Owner ship	100.000	Anthem Inc	NN.	1
0671	Anthem, Inc.		26-2974996		0001156039		EasyScripts Gutter Bay, LLC	FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N.	1
0671	Anthem. Inc.		. 30-0478573		0001156039		EasyScripts LLC	FL	NIA	HealthSun Holdings, LLC	Ownership.	100.000	Anthem, Inc.	N N	1
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SCHEDULE Y

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANT STSTEM														
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											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of		to		Attorney-in-Fact,				
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Group		Company	. ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	l .
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
0671	Anthem, Inc.		46-0613819		0001156039		EasyScripts Westchester, LLC	FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	55093	13-3934328		0001156039		EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		23-7391136		0001156039		Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95433	13-3874803		0001156039		Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16244	82-1454637		0001156039		Empower Healthcare Solutions, LLC	AR	IA	Beacon Health Options, Inc.	Ownership	16.600	Anthem, Inc.	N	0115
0671	Anthem, Inc.		26-4286154		0001156039		Federal Government Solutions, LLC	WI	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1230110		0001156039		FHC Health Systems, Inc.	VA	NIA	Beacon Health Vista Parent, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		59-3537092		0001156039		Florida Health Partners, Inc.	FL	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0112
0671	Anthem, Inc.	10119	41-2128275	-	0001156039		Freedom Health, Inc.	FL	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		33-0884790		0001156039		GeriNet Physician Services, Inc.	CA	NIA	CareMore Health System	Ownership	50.000	Anthem, Inc.	N	0102
0671	Anthem, Inc.		20-1378912		0001156039		Global TPA, LLC	FL	NIA	ATH Holding Company, LLC	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		95-2907752		0001156039		Golden West Health Plan, Inc.	CA	IA	WellPoint California Services, Inc	Ownership	100.000	Anthem, Inc.	N	0101
0671	Anthem, Inc.		84-4672692	.	0001156039		GR Health Solutions LLC	PA	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem, Inc.	N	0102
										Blue Cross Blue Shield Healthcare Plan of					
0671	Anthem, Inc.	97217	58-1473042		0001156039		Greater Georgia Life Insurance Company	GA	IA	Georgia, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		51-0365660		0001156039		Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1237939		0001156039		Health Management Corporation	VA	NIA	Southeast Services, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-3897701		0001156039		Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.	N	
0671	Anthem, Inc.	95169	54-1356687		0001156039		HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.		
0671	Anthem, Inc	96475	43-1616135		0001156039		HealthLink HMO, Inc.	MO	IA	HealthLink, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		43-1364135		0001156039		HealthLink, Inc.	IL	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	16574	82-4966088		0001156039		HealthLink Insurance Company	IL	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.	16574	13-3865627		0001156039		HealthPlus HP, LLC	NY	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	N	0100
0671	Anthem, Inc	10122	20-0982649		0001156039		HealthSun Health Plans, Inc.	FL	IA	Highland Acquisition Holdings, LLC	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0660271		0001156039		HealthSun Holdings, LLC	FL	NIA	HealthSun Management, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-0660168		0001156039		HealthSun Management, LLC	FL	NIA	Highland Acquisition Holdings, LLC	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		46-5250294		0001156039		HealthSun Physicians Network, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		46-3434016		0001156039		HealthSun Physicians Network I, LLC	FL	NIA	HealthSun Physicians Network, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	78972	86-0257201		0001156039		Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.		
0671	Anthem, Inc.		47-3953545		0001156039		HEP AP Holdings, Inc.	DE	NIA	Imaging Management Holdings, L.L.C	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3867547		0001156039		Highland Holdco, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3487249		0001156039		Highland Acquisition Holdings, LLC	DE	NIA	Highland Intermediate Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3471305		0001156039		Highland Intermediate Holdings, LLC	DE	NIA	Highland Investor Holdings, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	72.480	Anthem, Inc.	N	0107
0671	Anthem, Inc.		81-3493196		0001156039		Highland Investor Holdings, LLC	DE	NIA	Highland Holdco, Inc.	Ownership	27.520	Anthem, Inc.	N	0107
										Rocky Mountain Hospital and Medical	L		l		
0671	Anthem, Inc.	95473	84-1017384		0001156039		HMO Colorado, Inc.	CO	IA	Service, Inc.	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.	95358	37-1216698		0001156039		HMO Missouri, Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-2157122		0001156039		IEC Group Holdings, Inc.	ID	NIA	ATH Holding Company, LLC	Owner ship	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-0497661		0001156039		IEC Group, Inc. d/b/a AmeriBen	ID	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		75-2619605		0001156039		Imaging Management Holdings, L.L.C.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3062245		0001156039		IngenioRX, Inc.	IN	NIA	DBG Holdings, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		98-1397080		0001156039		Legato Health Technologies LLP	IN	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	0105
							Legato Health Technologies Philippines, Inc.	1		L	L		l		1
0671	Anthem, Inc.		98-1490582		0001156039			PHL	NIA	Legato Holdings I, Inc.	Owner ship	100.000	Anthem, Inc.	N	0106
0671	Anthem, Inc.		82-3030791		0001156039		Legato Holdings I, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		82-3031178		0001156039		Legato Holdings II, LLC	IN	NIA	Legato Holdings I, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		02-0581429		0001156039		Living Complete Technologies, Inc.	MD	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership		NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0111
0671	Anthem, Inc.		04-3307857		0001156039		Massachusetts Behavioral Health Partnership	MA	NIA	OPTIONS Health Care, Inc.	Ownership	50.000	Anthem, Inc.	N	0111
1			l					1		Anthem Health Plans of New Hampshire, Inc.	I		l		1
0671	Anthem, Inc.	95527	02-0494919	.	0001156039		Matthew Thornton Health Plan, Inc.	NH	IA		Owner ship	100.000	Anthem, Inc.	JN	

SCHEDULE Y

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
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						Name of Constition			Dalatian			-			
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
						,			Ĭ	Compcare Health Services Insurance	<u> </u>	Ĭ	, , , , , ,	` ′	
0671	Anthem. Inc.		39-2013971		0001156039		Meridian Resource Company, LLC	. IWI	NIA	Corporation	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.	12913	20-5862801		0001156039		Missouri Care, Incorporated	MO	IA.	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		82-4684953		0001156039		Momentum Health Partners, LLC	NC	NIA	Anthem Partnership Holding Company, LLC	Ownership	50.000	Anthem. Inc.	N	0102
0671	Anthem. Inc.		83-0892028		0001156039		Nash Holding Company, LLC	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		35-1840597		0001156039		National Government Services, Inc.	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem. Inc.	N	.]
0671	Anthem, Inc.		04-2919509		0001156039		New England Research Institute, Inc.	MA	NIA	Health Core, Inc.	Ownership.	100.000	Anthem, Inc.	N	
0671	Anthem. Inc.		81-5476630		0001156039		NGS Federal, LLC	IN	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem. Inc.	N	.]
	,						North Florida Behavioral Health Partners,			, , , , , , , , , , , , , , , , , , , ,			,		
0671	Anthem, Inc.		20-1847098		0001156039		Inc.	FL	NIA	Beacon Health Options, Inc.	Ownership	50.000	Anthem, Inc.	N	0113
0671	Anthem, Inc.	12259	20-1336412		0001156039		Optimum Healthcare, Inc.	FL	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		54-1826967		0001156039		OPTIONS Health Care, Inc.	DE	NIA	Beacon Health Options, Inc.	Ownership.	100.000	Anthem, Inc.	N]
0671	Anthem. Inc.		95-4249368		0001156039		Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc.	Owner ship.	100.000	Anthem. Inc.	N]
0671	Anthem. Inc.		95-4386221		0001156039		Park Square I. Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership.	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		95-4249345		0001156039		Park Square II. Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		27-1991772		0001156039		Pasteur Medical Birds Road, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		20-2749389		0001156039		Pasteur Medical Center, LLC	DE	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		27-1366915		0001156039		Pasteur Medical Cutler Bay, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		20-0610128		0001156039		Pasteur Medical Group, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		37-1668303	1	0001156039		Pasteur Medical Hialeah Gardens, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		45-1616220		0001156039		Pasteur Medical Holdings, LLC	FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem Inc	N	1
0671	Anthem. Inc.		47-3464152		0001156039		Pasteur Medical Kendall, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		27-2810478		0001156039		Pasteur Medical Management, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		33-1217936		0001156039		Pasteur Medical Miami Gardens, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership	100.000	Anthem. Inc.	N.	1
0671	Anthem. Inc.		27-2651017		0001156039		Pasteur Medical North Miami Beach, LLC	FL	NIA	Pasteur Medical Holdings, LLC	Ownership.	100.000	Anthem. Inc.	N	1
.0671	Anthem. Inc.		26-0813665		0001156039		Pasteur Medical Partners, LLC	FL	NIA	HealthSun Holdings, LLC	Ownership	100.000	Anthem, Inc.	N.	1
0671	Anthem. Inc.	12812	30-0326654		0001156039		Region 6 Rx Corp	PA	IA	GR Health Solutions LLC	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		56-2396739		0001156039		Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem. Inc.	N.	1
0671	Anthem. Inc.		47-0851593		0001156039		RightCHOICE Managed Care, Inc.	DE	NIA	Anthem Holding Corp.	Owner ship.	100.000	Anthem. Inc.	N	1
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0671	Anthem. Inc.	11011	84-0747736		0001156039		Inc.	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		20-0473316		0001156039		SellCore. Inc.	DE	NIA	Anthem. Inc.	Ownership	100.000	Anthem. Inc.	N.	1
0671	Anthem. Inc.	13726	27-0945036		0001156039		Simply Healthcare Plans, Inc.	FL	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		55-0712302		0001156039		Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		45-4071004		0001156039		State Sponsored Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Owner ship.	100.000	Anthem. Inc.	N]
0671	Anthem, Inc.		35-1835818		0001156039		The Anthem Companies, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		45-5443372		0001156039		The Anthem Companies of California, Inc	CA	NIA	ATH Holding Company, LLC	Owner ship.	100.000	Anthem. Inc.	N]
0671	Anthem. Inc.				0001156039		TriaDD NY, LLC dba MyCompass	NY	NIA	Alliance Care Management, LLC	Ownership	25.000	Anthem. Inc.	N	0114
0671	Anthem. Inc.		43-1967924		0001156039		TrustSolutions. LLC	WI	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem. Inc.	N]
0671	Anthem. Inc.	11810	84-1620480		0001156039		UNICARE Health Plan of West Virginia, Inc	WV	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem. Inc.	N	
0671	Anthem. Inc.		36-3899137		0001156039		UNICARE Illinois Services, Inc.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.	80314	52-0913817		0001156039		UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		95-4635507		0001156039		UNICARE National Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		77-0494551		0001156039		UNICARE Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.	89518	86-0684895		0001156039		Value Health Reinsurance, Inc.	AZ	IA	Beacon Health Options, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.		45-4238555		0001156039		ValueOptions Federal Services. Inc.	VA	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		20-8819392		0001156039		ValueOptions of Kansas, Inc.	KS	NIA	Beacon Health Options, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.	15448	46-2053405		0001156039		ValueOptions of New Jersey, Inc.	NJ	IA.	Beacon Health Options, Inc.	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.	95799	75-2749263		0001156039		ValueOptions of Texas. Inc.	TX	IA	Beacon Health Options, Inc.	Owner ship	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.		82-3300542		0001156039		Valus, Inc.	IN	NIA	DBG Holdings, Inc.	Ownership.	100.000	Anthem. Inc.	N	1
0671	Anthem, Inc.	15951	47-5456872		0001156039		WellCare of Nebraska, Inc.	NE	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem. Inc.	N	1
0671	Anthem. Inc.	10001	20-0660563		0001156039		WellMax Health Medical Centers, LLC	FL	NIA	Delivery Network, LLC	Ownership	100.000	Anthem Inc	N	1
0671	Anthem, Inc.		20-0660644		0001156039		WellMax Health Physicians Network, LLC		NIA	Delivery Network, LLC	Ownership	100.000	Anthem, Inc.	N	1
0671	Anthem, Inc.		20-4405193		0001156039		WellPoint Acquisition, LLC	IN	NIA	Anthem, Inc.	Ownership.	100.000	Anthem, Inc.	N	1
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SCHEDULE Y

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						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Š. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	Anthem, Inc.		95-4640531		0001156039		WellPoint California Services, Inc	DE		Anthem Holding Corp.	Ownership		Anthem, Inc.	N	
	Anthem, Inc.		95-4657170		0001156039		WellPoint Dental Services, Inc	DE		UNICARE Specialty Services, Inc	Ownership		Anthem, Inc.	N	
0671	Anthem, Inc.		81-2874917		0001156039		WellPoint Health Solutions, Inc	DE	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		20-3620996		0001156039		WellPoint Holding Corp	DE	NIA	Anthem, Inc.	Ownership	100 . 000	Anthem, Inc.	N	
							WellPoint Information Technology Services,								
0671	Anthem, Inc.		45-2736438		0001156039		Inc	CA		Blue Cross of California	Ownership	100 . 000	Anthem, Inc.	N	
0671	Anthem, Inc.		36-4595641		0001156039		WellPoint Insurance Services, Inc.	HI	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	N	
0671	Anthem, Inc.		47-2546820		0001156039		WellPoint Military Care Corporation	IN	NIA	Federal Government Solutions, LLC	Ownership		Anthem, Inc.	N	
0671	Anthem, Inc.	15929	47-5569628		0001156039		Wisconsin Collaborative Insurance Company	WI	IA	Crossroads Acquisition Corp.	Owner ship.	55.000	Anthem, Inc.	N	0110
0671	Anthem, Inc.		20-8672847		0001156039		WPMI, LLC	DE	NIA	ATH Holding Company, LLC	Ownership.	69.910	Anthem, Inc.	N	0103

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10 and has an NAIC Company Code in column 3. However, it does not file an NAIC statutory statement because it is regulated by the New York State Department of Health.
0101	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	50% owned by unaffiliated investors
0103	30.09% owned by unaffiliated investors
0104	25% owned by an unaffiliated investor
0105	Legato Health Technologies LLP is a Limited Liability Partnership formed under the laws of India, and is 99% owned by Legato Holdings I, Inc. an Indiana corporation, and 1% owned by Legato Holdings II, LLC, an Indiana Limited Liability Company.
0106	Legato Health Technologies Philippines, Inc. was incorporated under with the Republic of the Philippines, and is 100% owned by Legato Holdings I, Inc. an Indiana corporation.
	Highland Investor Holding LLC is a Limited Liability Company formed under the laws of Delaware, and is 72.48% owned by Anthem Holding Company, LLC. an Indiana limited liability company, and 27.52% owned by Highland Holdco, Inc., a Delaware corporation.
	Applied Pathways, LLC is a Limited Liability Company formed under the laws of Illinois, and is 53.52% owned by American Imaging Management, Inc. an Illinois limited liability company, and 46.48% owned by HEP AP Holdings, Inc., a Delaware corporation.
	Anthem Worker's Compensation, LLC is owned 75% by Anthem Blue Cross Life and Health Insurance Company and 25% by HealthLink, Inc.
	45% of WCIC is owned by Aurora Health Care, Inc. (non-affiliate) and 55% by Crossroads Acquisition Corp
	Massachusetts Behavioral Health Partnership is a General Partnership formed under the laws of Massachusetts, and is 50% owned by Beacon Health Options, Inc., a Virginia corporation, and 50% owned by OPTIONS Health Care, Inc., a Delaware corporation.
	Florida Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by Florida Behavioral Health, Inc. (non-affiliate)
0113	North Florida Behavioral Health Partners, Inc. is 50% owned by Beacon Health Options, Inc. and 50% owned by North Florida Behavioral Health Network, Inc. (non-affiliate)
0114	75% owned by an unaffiliated investor
0115	83.4% owned by an unaffiliated investor

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

		Response
1.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	N0
	Explanation:	
1.		
1.	Bar Code: Medicare Part D Coverage Supplement [Document Identifier 365]	

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 23

Addition	al Write-ins for Liabilities Line 23								
			Current Period						
		1	2	3	4				
		Covered	Uncovered	Total	Total				
2304.	Other Liabilities	45,784		45,784	46,036				
2305.	Discrepant Members	57,508		57,508	57,508				
2397.	Summary of remaining write-ins for Line 23 from overflow page	103,292	0	103,292	103,544				

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Cutof Long Tolli Ilifodod 7600to	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		·	Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	492,962,988	442,564,363
2.	Cost of bonds and stocks acquired	129,451,135	292,060,910
3.	Accrual of discount	159,004	261,095
4.	Unrealized valuation increase (decrease)	(5,603,200)	5,010,292
5.	Total gain (loss) on disposals	284,598	2,332,044
6.	Deduct consideration for bonds and stocks disposed of	57,244,494	247,090,612
7.	Deduct amortization of premium	1,792,553	2,415,368
8.	Total foreign exchange change in book/adjusted carrying value	[0
9.	Deduct current year's other than temporary impairment recognized	2,125,272	63,700
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	101,034	303,964
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	556, 193, 240	492,962,988
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	556, 193, 240	492,962,988

SCHEDULE D - PART 1B

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

	During the Current Quarter to	2	3	4	5	6	7	8
	Book/Adjusted		6		Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
BUNDS								
							_	
1. NAIC 1 (a)		186,394,413	128,623,058	, , , , ,	252,374,498	306,087,277	0	251,250,470
2. NAIC 2 (a)		34,375,495	15,398,146	` ' ' '	82,610,513	97,374,891	0	85,243,730
3. NAIC 3 (a)	89,902,922	15,642,895	11, 179, 714	2,559,012	89,902,922	96,925,115	0	94,835,160
4. NAIC 4 (a)	14,286,232	0	464,922	8,293,529	14,286,232	22,114,839	0	14,466,755
5. NAIC 5 (a)	123,312	0	350,501	370,289	123,312	143,100	0	264,900
6. NAIC 6 (a)					0	0		0
7. Total Bonds	439,297,477	236,412,803	156,016,341	2,951,283	439,297,477	522,645,222	0	446,061,015
	, ,		, ,		, ,	, ,		, ,
PREFERRED STOCK								
8. NAIC 1	0				0	0		0
9. NAIC 2	0				0	0		0
10. NAIC 3	0				0	0		0
11. NAIC 4					0	0		0
12. NAIC 5					0	0		0
13. NAIC 6					0	0		0
		0	0	0	0	0	^	0
14. Total Preferred Stock	0	-	3	-	400 007 :	500.045.000	0	440.00: 2:7
15. Total Bonds and Preferred Stock	439,297,477	236,412,803	156,016,341	2,951,283	439,297,477	522,645,222	0	446,061,015

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals		XXX			

SCHEDULE DA - VERIFICATION

Short-Term Investments

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of short-term investments acquired	2,390,387	4,504,043
3.	Accrual of discount	5,335	0
4.	Unrealized valuation increase (decrease)		0
5.	Total gain (loss) on disposals	264	586
6.	Deduct consideration received on disposals	2,395,986	4,501,934
7.	Deduct amortization of premium		2,695
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	0	0

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	21,948,137	1,396,592
2.	Cost of cash equivalents acquired	1,081,906,241	1, 107, 650, 838
3.	Accrual of discount	5,038	10,484
4.	Unrealized valuation increase (decrease)	1,200	(1,200)
5.	Total gain (loss) on disposals	42,624	10,559
6.	Deduct consideration received on disposals	1,089,303,731	1,087,119,136
7.	Deduct amortization of premium		0
8.	Total foreign exchange change in book/adjusted carrying value		0
9.	Deduct current year's other than temporary impairment recognized		0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	14,599,509	21,948,137
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)	14,599,509	21,948,137

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

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

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made NONE

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

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE**

SCHEDULE D - PART 3

		Show All I	ong-Term Bonds and Stock Acquired During the Current Quarter					
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation
								and
				Number of			Paid for Accrued	Admini-
CUSIP		Date		Shares of			Interest and	strative
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
912810-SL-3 US TREASURY N B 2.000% 02/15/50		04/20/2020	Various		3,457,293	2,900,000	10,516	1
0599999. Subtotal - Bonds - U.S. Governments					3,457,293	2,900,000	10,516	XXX
31418D-MJ-8 FNMA POOL MA3960 3.000% 02/01/50		04/28/2020	Citigroup Global Markets		939,461		891	
3199999. Subtotal - Bonds - U.S. Special Revenues					939,461	891,343	891	XXX
00206R-KB-7 AT&T INC 3.850% 06/01/60		05/21/2020	Mizuho Securities USA		2,588,924	2,600,000		2FE
037411-AW-5 APACHE CORP 5.100% 09/01/40		06/05/2020 04/29/2020	Various				3,392	3FE
097023-CU-7 B0EING CO 5.040% 05/01/27		04/29/2020	Wachovia Securities		530.000	530,000		2FE
097023-CY-9 B0EING CO 5.150% 05/01/30		04/30/2020	J P Morgan		530,000	530,000		2FE
12513G-BE-8 CDW LLC CDW FINNACE 4.125% 05/01/25		04/16/2020	J P Morgan			440,000	0	3FE
126307-BB-2 CSC HOLDINGS LLC SERIES 144A 4.125% 12/01/30		06/02/2020	J P Morgan		1,140,000	1,140,000		3FE
15135B-AR-2 CENTENE CORP SERIES WI 4.250% 12/15/27		05/06/2020	Tax Free Exchange		297,593	300,000	5,313	
15135B-AT-8 CENTENE CORP SERIES WI 4.625% 12/15/29		05/06/2020	Tax Free Exchange				13, 104	
181396-AE-2 CLARK EQUIPMENT CO SERIES 144A 5.875% 06/01/25		05/00/2020	J P Morgan		200,000	200,000		3FE
212015-AN-1 CONTINENTAL RESOURCES INC SERIES WI 3.800% 06/01/24		04/28/2020	CS First Boston		117,000	150,000	2,359	3FE
212015-AS-0 CONTINENTAL RESOURCES SERIES WI 4.375% 01/15/28		04/14/2020	CS First Boston		605,900	830,000	9, 179	
247361-ZX-9 DELTA AIR LINES INC SERIES 144A 7.000% 05/01/25		04/27/2020	Various		450,038	450,000		2FE
247361-ZZ-4 DELTA AIR LINES INC 7.375% 01/15/26 25525P-AA-5 DIVERSIFIED HEALTHCARE T 9.750% 06/15/25		06/10/2020 05/28/2020	Morgan Stanley Wachovia Securities					3FE
20020F-AA-0 UIVERSIFIED HEALINGARE 1 9.70% 00/10/20 26884L-AF-6 EQT CORP 3.900% 10/01/27		05/28/2020	Piper Jeffries & Co			490,000	1,433	
26884L-AH-2 EQT CORP 6.125% 02/01/25		06/02/2020	J P Morgan		501,900	490,000	11,088	
26885B-AC-4 EQM MIDSTREAM PARTNERS L SERIES 10Y 5.500% 07/15/28		05/20/2020	Various		553,800	610,000	11, 179	
26885B-AE-0 EQM MIDSTREAM PARTNERS L SERIES 30Y 6.500% 07/15/48		05/20/2020	J P Morgan		169,000	200,000	4,586	
26885B-AF-7 EQN MIDSTREAM PARTNERS L SERIES 144A 6.000% 07/01/25		06/16/2020	J P Morgan		180,000	180,000	0	3FE
26885B-AH-3 EQM MIDSTREAM PARTNERS L SERIES 144A 6.500% 07/01/27		06/16/2020 06/02/2020	J P Morgan			170,000	U	3FE
345370-CV-0 FORD MOTOR COMPANY 8.500% 04/21/23		04/17/2020	Goldman Sachs & Co			550.000	00	3FE
345370-CW-8 FORD MOTOR COMPANY 9.000% 04/22/25		04/17/2020	Goldman Sachs & Co		590,000	590,000		3FE
345397-A2-9 FORD MOTOR CREDIT CO LLC 3.087% 01/09/23		04/02/2020	Merrill Lynch Pierce Fenner		822,500	940,000	7,013	
345397-A6-0 FORD MOTOR CREDIT CO LLC 5.125% 06/16/25 GENERAL MOTORS CO 6.125% 10/01/25		06/16/2020	Morgan Stanley		350,000	350,000		3FE
37045V-AV-2		05/07/2020	Citigroup Global Markets					2FE 2FE
410345-AN-2 HANESBRANDS INC SERIES 144A 5.375% 05/15/25		04/30/2020	J P Morgan		130,375			3FE
432833-AG-6 HILTON DOMESTIC OPERATIN SERIES 144A 5.375% 05/01/25		04/16/2020	Various			290,000	0	3FE
432833-AH-4 HILTON DOMESTIC OPERATIN SERIES 144A 5.750% 05/01/28		04/16/2020	Bank of America		200,250	200,000		3FE
50077L-AM-8 KRAFT HEINZ FOODS CO 5.200% 07/15/45		05/01/2020	Goldman Sachs & Co		1,135,750	1,100,000	17,478	
50077L-BA-3 KRAFT HEINZ FOODS CO SERIES 144A 3.875% 05/15/27		05/04/2020 05/04/2020	J P Morgan				U	3FE
50077L-BG-0 KRAFT HEINZ FOODS CO SERIES 144A 5.500% 06/01/50		05/04/2020	J P Morgan		370,000		0	3FE
501797-AS-3 L BRANDS INC SERIES 144A 6.875% 07/01/25		06/04/2020	J P Morgan		200,000	200,000	0	3FE
513272-AC-8 LAMB WESTON HLD SERIES 144A 4.875% 05/15/28		05/07/2020	Goldman Sachs & Co		240,000	240,000		3FE
52736R-BH-4 LEVI STRAUSS & CO SERIES 144A 5.000% 05/01/25		04/14/2020 05/20/2020	Bank of America		351,750		8,069	3FE 2FE
55336V-BM-1 MPLX LP SERIES WI		05/20/2020	Tax Free Exchange		630,473	630,000	404	
57665R-AN-6 MATCH GROUP INC SERIES 144A 4.625% 06/01/28		05/12/2020	Goldman Sachs & Co		470,000	470,000		3FE
629209-AA-5 NMI HOLDINGS SERIES 144A 7.375% 06/01/25		06/05/2020	J P Morgan		500,000	500,000	0	3FE
651229-BB-1 NEWELL BRANDS INC 4.875% 06/01/25		05/20/2020	Various		249,350	250,000		3FE
674599-CE-3 OCCIDENTAL PETROLEUM COR 2.700% 02/15/23		06/02/2020	Goldman Sachs & Co		62,300	70,000		3FE
674599-CQ-6 OCCIDENTAL PETROLEUM COR 1.842% 08/15/22 680665-AK-2 OL IN CORP 5.000% 02/01/30		04/02/2020	Bony/Barclays Capital Inc				545	3FE
85172F-AS-8 SPRINGLEAF FINANCE CORP 8.875% 06/01/25		05/12/2020	Bony/Barclays Capital Inc			340,000		3FE
958254-AB-0 WESTERN GAS PARTNERS 4.000% 07/01/22		04/07/2020	Stifel Nicolaus & Co		319,375	350,000	3,811	3FE
958667-AB-3 WESTERN MIDSTREAM OPERAT 3.100% 02/01/25		04/07/2020	Stifel Nicolaus & Co		611,250	750,000	5,554	
958667-AC-1 WESTERN MIDSTREAM OPERAT 4.050% 02/01/30		04/23/2020	Bank of America			850,000	9,945	
96926J-AE-7 WILLIAM CARTER SERIES 144A 5.500% 05/15/25		05/08/2020 05/21/2020	Various			270,000 	1/	3FE
15135U-AF-6 CENOVUS ENERGY INC 6.750% 11/15/39	Α	05/21/2020	Piper Jeffries & Co				4,866	
15135U-AG-4 CENOVUS ENERGY INC 3.000% 08/15/22	A	05/08/2020	RBC			310,000	2,248	3FE
15135U-AR-0 CENOVUS ENERGY INC SERIES WI 5.400% 06/15/47	A	05/06/2020	Piper Jeffries & Co		42,900	60,000	1,287	3FE
68245X-AK-5 1011778 BC NEW RED FIN SERIES 144A 5.750% 04/15/25	A	04/02/2020	J P Morgan		150,000		0	3FE

SCHEDULE D - PART 3

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

			Show All I	ong-Term Bonds and Stock Acquired During the Current Quarte.	: F				
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation
									and
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
	CAN CAPITAL SERIES 144A 4.125% 09/27/22	n	05/13/2020	Merrill Lynch Pierce Fenner	Stock	421,824	410,000	2,255	
	IL GAME TECH SERIES 144A	n		Bony/Barclays Capital Inc		570.000	570.000	2,233	3FF
	A SERIES 144A 5.459% 06/30/35	D		Citigroup Global Markets		710,000	710.000	0	3FE
	ls - Industrial and Miscellaneous (Unaffiliated)			011191000 010001 111011010		24.268.562	25,260,000	141.562	
	X INV GRD CORP BON		05/29/2020	WallachBeth	0.000	2,500,083	23,200,000	141,302	2
	XLAYS MBS BOND FUND		05/29/2020	WallachBeth	0.000	2,499,945	0	0	1
	XLAYS MBS BOND FUND		05/29/2020	WallachBeth	0.000	8.749.800	0	0	1
	T TERM CORPORATE B		05/29/2020	WallachBeth			0	0	2
	CLAYS 3-7 YEAR		05/29/2020	WallachBeth	0.000	2,499,661	0	0	1
	RA-SHORT INCOME		05/29/2020	WallachBeth	0.000	6,749,872	0	0	1
	ED SHORT MATURITY			WallachBeth	0.000	4,499,869	0	0	2
	RG BARCLAYS INTERM		05/29/2020	WallachBeth	0.000	3,000,008	0	0	2
78464A-64-9 SPDR BLOOMBE	RG BARCLAYS AGGREG		05/29/2020	WallachBeth	0.000	3,000,037	0	0	1
	BUARD GROUP INTERM		05/29/2020	WallachBeth	0.000	2,999,996	0	0	2
	ERMEDIATE TERM T ETF		05/29/2020	WallachBeth	0.000	5,999,995	0	0	1
	ITGAGE-BACKED SEC ETF		05/29/2020	WallachBeth	0.000	14,999,963	0	0	1
	SUARD GROUP INTERM		05/29/2020	WallachBeth	0.000	8,999,913	0	0	2
	(EXEMPT BOND ETF ETF		05/29/2020	WallachBeth	0.000	2,499,866	0	0	1
8099999. Subtotal - Bond						72,748,968	0	0	XXX
8399997. Total - Bonds -						101,414,284	29,051,343	152,969	
8399998. Total - Bonds -	Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds						101,414,284	29,051,343	152,969	XXX
8999997. Total - Preferre						0	XXX	0	XXX
8999998. Total - Preferre	d Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferre						0	XXX	0	XXX
880208-77-2 TEMPLETON GL			06/15/2020	Direct	54,283.650	(1,804,489)		0	
	mon Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly	/ Traded				(1,804,489)	XXX	0	XXX
9799997. Total - Commo						(1,804,489)	XXX	0	XXX
9799998. Total - Commo						XXX	XXX	XXX	XXX
9799999. Total - Commo						(1,804,489)	XXX	0	XXX
9899999. Total - Preferre	d and Common Stocks					(1,804,489)	XXX	0	XXX
9999999 - Totals						99 609 795	XXX	152 969	XXX

SCHEDULE D - PART 4

				:	Show All Lo	ng-Term Bo	nds and Sto	ck Sold, Red	deemed or C	Otherwise I	Disposed	of During t	he Current	Quarter							
1	2	3	4	5	6	7	8	9	10	Ch	nange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
•	_	_		-	-	•	-			11	12	13	14	15							
													Total	Total							
												Current	Change in	Foreign					Bond		NAIC
															Book/				Interest/		Desig-
									D-i V		0	Year's	Book/	Exchange						04-4-4	
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign	D. III . I		Stock	Stated	nation
									Book/	Unrealized	Year's	Temporary		Book	Carrying	Exchange			Dividends	Con-	and
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairmen	t Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
36179R-BW-8	GNMA 11 POOL MA2753 3.000% 04/20/45		06/01/2020	Paydown		77,954	77,954	79,513	79,437	0	(1,483	0	(1,483)	0	77,954	0	0	0	993	04/20/2045	1
36179R-D7-1	GNMA II POOL MA2826 3.500% 05/20/45		06/01/2020	Paydown		136,662	136,662	142,043	141,817	0	(5, 154)	(5, 154)	0	136,662	0	0	0	2,021	05/20/2045	1
	GNMA II POOL MA3105 3.500% 09/20/45		06/01/2020	Paydown		51,016	51,016	53,248	53, 158	0	(2, 141		(2, 141)	0	51,016	0	0	0		09/20/2045	1
36179S-GK-7	GNMA II POOL MA3802 3.000% 07/20/46		06/01/2020	Paydown		116,117	116, 117	118,422	118,352	0	(2,234	0	(2,234)	0	116,117	0	0	0	1,472	07/20/2046	1
				Citigroup Global Markets						_						_					
	GNMA II POOL MA6156 4.500% 09/20/49		04/28/2020	D 4		911,640	855,373	900,413	900,348	0	(102		(102)	0	900,246	0	11,395	11,395	14,862	09/20/2049	1
	GNMA II POOL MA6156		05/01/2020	Paydown		83,599			87,995		(4,396		(4,396)	0		0	0		4,681	09/20/2049	1
	GNMA POOL AD7257 3.500% 03/20/43		06/01/2020 06/01/2020	Paydown		5,456 4,151	4, 151		5,867 4.447		(411		(411)	0	5,456 4,151		0		79 61	03/20/2043 03/15/2043	1
	GNMA POOL 726262 5.000% 09/15/39		06/01/2020	Paydown		8,096	8,096	8,905	8,831	n	(296		(296)	n	8,096	0	n	n	160	09/15/2039	1
	GNMA POOL 710695 5.500% 07/15/39			Paydown		8.710	8.710	9,951	9,855	0	(1, 145		(1, 145)	0	8.710	0	0	n	200	07/15/2039	1
	Subtotal - Bonds - U.S. Governments	,	,, 2020 .,			1.403.401	1.347.134	1.410.869	1.410.107	0	(18.097				1.392.007	0	11.395	11.395	25.285	XXX	XXX
	FHLMC POOL G05769 5.000% 12/01/39		06/01/2020	Paydown		21,966	21,966	24,276	24,094	0	(2, 128	,	(2, 128)	0	21,966	0	11,030	11,000	494	12/01/2039	1
	FHLMC GOLD POOL G07213 3.500% 11/01/42		06/01/2020	Paydown		52,938		56, 193	55,806	n	(2, 120		(2, 867)	0		o	0	n	773	11/01/2042	1
	FHLMC GOLD POOL G07295 3.500% 05/01/42		06/01/2020	Paydown		116,729	116,729	119, 182	119,129	0	(2,400		(2,400)	0	116,729		0		1,847	05/01/2042	1
	FHLMC GOLD POOL G08564 4.500% 12/01/43		06/01/2020	Paydown		41,792	41,792	44,228	44,087	0	(2,295		(2,295)	0	41,792	0	0	0		12/01/2043	1
312943-ZY-2	FGLMC POOL A95259 4.000% 12/01/40		06/01/2020	Paydown		27, 297	27,297	29,011	28,882	0	(1,585)0	(1,585)	0	27,297	0	0	0	<u>4</u> 74	12/01/2040	1
	FHLMC POOL V82515 3.500% 06/01/46		06/01/2020	Paydown		94,045	94,045	99,511	99,277	0	(5,233		(5,233)	0	94,045	0	0	0	1,403	06/01/2046	1
	FHLMC GOLD POOL Q24192 4.000% 01/01/44		06/01/2020	Paydown		113,894	113,894	121,244	120,806	0	(6,912		(6,912)	0	113,894	0	0	0	1,929	01/01/2044	1
			06/01/2020	Paydown		159, 146	159, 146	168,223	167,913	0	(8,767		(8,767)	0	159, 146	0	0	0	2,652	08/01/2046	1
31335A-HN-1	FHLMC GOLD POOL G60237 4.500% 06/01/42		06/01/2020	Paydown		39,768	39,768	42,840	42,705	0	(2,938		(2,938)	0	39,768	0	0	0	767	06/01/2042	1
31335A-YK-8 31368H-M4-2	FHLMC GOLD POOL G60714		06/01/2020	Paydown		121, 130	121, 130	128,076	127,834	0	(6,704		(6,704)	0	121,130	0	0		2,023	01/01/2046	1
31308П-114-2	FNMA SERIES 2013-45 CLASS CB 4.000%		06/01/2020	Paydown		57,792					(6,306)	(6,306)	0					1,290	05/01/2037	1
3136AD-3F-4			06/01/2020	Paydown		61,901	61,901	68,226	66,116	0	(4,215) 0	(4,215)	0	61,901	0	0	0	975	12/25/2042	1
0100/10 01 4	FHLMC MULTIFAMILY STRUCTURED SERIES 4182		00/01/2020	1 4/40****							(4,210	,	(4,210)							12/ 20/ 2012	
3137B0-XC-3			06/01/2020	Pavdown		43,729	43,729	47,330	45,703	0	(1,974) 0	(1,974)	0	43.729	0	0	0	666	05/15/2041	1
	FNMA POOL AJ6091 4.000% 12/01/41		06/01/2020	Paydown		34, 154	34, 154		36,323	0	(2, 169		(2, 169)	0	34, 154	0	0	0	587	12/01/2041	1
	FNMA POOL AJ8345 4.000% 12/01/41		06/01/2020	Paydown		85,026	85,026	90,951	90,454	0	(5,428		(5, 428)	0	85,026	0	0	0	1,508	12/01/2041	1
	FNMA POOL AK6544 3.000% 04/01/27		06/01/2020	Paydown		28,407	28,407	30 , 178	29,496	0	(1,089		(1,089)	0	28,407	0	0	0	347	04/01/2027	1
			06/01/2020	Paydown		14,064	14,064	15 , 108	14,984	0	(920		(920)	0	14,064	0	0	0	225	04/01/2041	1
3138EK-AR-6			06/01/2020	Paydown		137 , 483	137 , 483	140,286	140,225	0	(2,742		(2,742)	0	137,483	0	0	0	1,875	11/01/2042	1
3138EK-NK-7	FNMA POOL AL3093 3.500% 02/01/43		06/01/2020 06/01/2020	Paydown		18, 184 3,871	18, 184	19,264	19, 155 4, 251	0	(971		(971)	0	18, 184	0	0	0	248 90	02/01/2043	L
	FNMA POOL AL3186 5.500% 03/01/39		06/01/2020 06/01/2020	Paydown		3,8/1	3,871 35,481	4,294		0	(381		(381)	0	3,871		0	······		03/01/2039 11/01/2042	1
	FNMA POOL AL3307 4.000% 11/01/42 FNMA POOL AL3344 4.500% 10/01/42		06/01/2020	Paydown							(1,299		(1,299)	0		U				10/01/2042	1
	FNMA POOL AL3647 4.300% 10/01/42		06/01/2020	Paydown		15, 178	15, 178	16,198	16,109	n	(1, 163		(1, 163)	o	15, 178	n	n	n		12/01/2042	1
	FNMA POOL AL6397 3.500% 01/01/30		06/01/2020	Paydown		126,511	126,511	133,528	131,867	0	(5,356		(5, 356)	0	126,511	0	0	0	1,641	01/01/2030	1
	FNMA POOL AL9243 4.500% 06/01/44		06/01/2020	Paydown		143,306	143,306	154,882	154,419	0	(11,113		(11, 113)		143,306	0	0	0	2,707	06/01/2044	1
3138ET-DS-2			06/01/2020	Paydown		163,094	163,094	170 , 178	170,051	0	(6,957		(6,957)	0	163,094	0	0	0	2,823	01/01/2043	1
			06/01/2020	Paydown		190,983	190,983	203,427	202,532	0	(11,549		(11,549)	0	190,983	0	0	0	3,060	09/01/2043	1
3138WC-TN-3			06/01/2020	Paydown		95,682	95,682	102,118	101,776	0	(6,094		(6,094)	0	95,682	0	0	0	1,685	09/01/2044	1
3138WD-2D-2			06/01/2020	Paydown		28,970	28,970	29,735	29,698	0	(728		(728)	0	28,970	J0	0	ļ0	421	02/01/2045	1
			06/01/2020	Paydown		46,905	46,905	51,346	51,033	0	(4, 129		(4, 129)			}ō	0	ļ	879	12/01/2044	1
	FNMA POOL AS4989 3.500% 05/01/45 FNMA POOL AS8299 3.000% 11/01/46		06/01/2020	Paydown		176,758 126,108	176,758	181,785	181,593 125,511	0	(4,835		(4,835)	0	176,758	0	0	0	2,706 1,593	05/01/2045 11/01/2046	1
	FNMA POOL AS8299 3.000% 11/01/46FNMA POOL AX2169 4.000% 11/01/44		06/01/2020 06/01/2020	Paydown				7,807	7,781				(454)	0	7,327	0	0		1,593	11/01/2046	1
	FNMA POOL 735288 5.000% 03/01/35		06/01/2020	Paydown		9.351	9,351	10 . 154		n	(434		(677)	n	9.351	0	n	n	195	03/01/2035	1
	FNMA POOL 745418 5.500% 04/01/36		06/01/2020	Paydown		9,822	9,822	10 , 134	10,587	n	(765		(765)	0	9,822	0	0	n	228	04/01/2036	1
	FNMA POOL BC1509 3.000% 08/01/46	1	06/01/2020	Paydown		99,840	99,840	104,208	103,975	0	(4, 136		(4, 136)	0	99,840	0	0		1,277	08/01/2046	1
	FNMA POOL BJ7399 4.500% 11/01/48		06/01/2020	Paydown		138, 166	138,166	142,332	142,254	0	(4,088		(4,088)	0	138,166	0	0	0	2,527	11/01/2048	1
3140HB-FH-6	FNMA POOL BJ9167 4.000% 05/01/48		06/01/2020	Paydown		182,916	182,916	186,710	186,651	0	(3,735		(3,735)	0	182,916	0	0	0	3,231	05/01/2048	1
3140J9-D4-0			06/01/2020	Paydown		247,500	247,500	247 , 172	247 , 164	0	336		336	0	247,500	0	0	0	4,271	09/01/2048	1
			06/01/2020	Paydown		64,477	64,477	65,772	65,698	0	(1,221		(1,221)	0	64,477	0	0	0	1, 100	10/01/2033	1
	FNMA POOL BM5089 5.500% 02/01/30		06/01/2020	Paydown		51,830	51,830	55,491	55,235	0	(3,405		(3,405)	0	51,830	0	0		1, 189	02/01/2030	1
	FNMA POOL 932389 4.500% 01/01/40		06/01/2020	Paydown		61,372	61,372	66,877		0	(5, 142		(5, 142)	0	61,372	ļ0	0	ļ0		01/01/2040	1
31416B-1A-6	FNMA POOL 995245 5.000% 01/01/39		06/01/2020	Paydown		17,638	17,638	19,292	19, 117	0	(1,478) 0	(1,478)	J0	17,638	0	0	0	383	01/01/2039	<u> </u>

SCHEDULE D - PART 4

					Show All Lo	ng-Term Bo	onds and Stoo	ck Sold, Red	leemed or C	Otherwise	Disposed of	of During th	he Current	Quarter							
1	2	3	4	5	6	7	8	9	10				Carrying Value		16	17	18	19	20	21	22
										11	12	13	14	15							
													Total	Total							
												Current	Change in	Foreign					Bond		NAIC
												Year's	Book/	Exchange	Book/				Interest/		Desig-
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	nation
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	and
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
31416C-D3-7	FNMA POOL 995722 5.000% 05/01/38		06/01/2020	Paydown		15,575	15,575	16,904	16,747	0	(1, 172)		(1, 172)	0	15,575	0	0	0	323	05/01/2038	. 1
31416Y-XY-9 31417G-CE-4	FNMA POOL AB3394 4.500% 08/01/41		06/01/2020	Paydown		58, 131	58,131 30,505	63,172		0	(4,629)		(4,629)	0		0	0		1,011 473	08/01/2041 04/01/2043	- 1
31417G-CE-1	FNMA POOL AB9069 3.500% 04/01/43		06/01/2020	Paydown		43.531	43.531	46.343	46.058	0	(2.527)		(2,527)	0	43.531	0	0	0	719	04/01/2043	1
31418A-6G-8	FNMA POOL MA1770 4.500% 02/01/44		06/01/2020	Paydown		31, 114	31,114			0	(2, 134)		(2, 134)	0	31,114	0	0	0		02/01/2044	1
31418A-JL-3	FNMA POOL MA1166 3.500% 09/01/32		06/01/2020	Paydown		32,968	32,968	34,966	34,524	0	(1,557)		(1,557)	0	32,968	0	0	0	487	09/01/2032	. 1
	FNMA POOL MA3960 3.000% 02/01/50		06/01/2020 06/01/2020	Paydown		9,820 20,222	9,820 20,222	10,350 21,745	0 21,605	0	(530)		(530)	0	9,820 20,222	0	0	0	25	02/01/2050	. 1
			06/01/2020	Paydown		3.572.462				0							0	0		03/01/2041	XXX
3 199999.	Subtotal - Bonds - U.S. Special Reven	iues		Citigroup Global Markets		3,3/2,462	3,572,462	3,750,269	3,724,013	0	(161,905)	0	(161,905)	0	3,572,462	0	0	0	59,300	XXX	
00101J-AH-9	ADT CORP 4.125% 06/15/23		06/15/2020	group Grobal markets		334, 125	330,000	326,288	327,940	0	257	0	257	0	328, 197	0	5,928	5,928	6,882	06/15/2023	3FE
00165A-AH-1	AMC ENTERTAINMENT INC 5.750% 06/15/25		06/04/2020	Stifel Nicolaus & Co		75,400	260,000	260,000	240,500	19,500	0	0	19,500	0	260,000	0	(184,600)	(184,600)	7, 184	06/15/2025	5FE
	1707 ING 0 000% 00 (47 (04		05 (04 (0055	Bony/Barclays Capital		4 000 0	4 050 055	4 047 7		_			,	_	4 040	_	10.6==	40.00-	az /	00 (47 (005)	055
00206R-CR-1 00206R-DN-9	AT&T INC 2.800% 02/17/21		05/21/2020 05/21/2020	Margan Ctanlay		1,266,625	1,250,000 . 1,330,000 .	1,247,788	1,249,477	0	185	0	185	0	1,249,662	0	16,963	16,96346,447	27 , 125	02/17/2021 03/01/2022	2FE 2FE
00200H=DN=9	AIR LEASE CORP 3.000% 09/15/23		06/30/2020	. Morgan Stanley BONY/TORONTO DOMINION		2,015,859	2,045,000	2,017,984	2,030,045	0	1,928	0	1,928		2,031,973	0	(16,114)	(16, 114)	48,910	09/15/2023	
	ALLISON TRANSMISSION INC SERIES 144A 5.000%			Citigroup Global Markets																	
019736-AD-9	10/01/24		05/13/2020			196,876	200,000	202,250	200,942	0	(194)	0	(194)	0	200,748	0	(3,872)	(3,872)	6,222	10/01/2024 .	3FE
03966V-AB-3	ARCONIC CORP SERIES 144A 6.000% 05/15/25		05/06/2020	. Goldman Sachs & Co		274,050	270,000	270,000	0	0	0	0	0	0	270,000	0	4,050	4,050	Ω	05/15/2025	. 3FE
06051G-GR-4	BANK OF AMERICA CORP SERIES GMTN 3.593% 07/21/28		05/04/2020	Bank of America		635,672	590,000	590,000	590,000	٥	١ ،	0	0	0	590,000	0	45,672	45,672	16,782	07/21/2028	1FE
000310 011 4	07/21/20		90/04/2020	Merrill Lynch Pierce															10,702	9172172020	. "
097023-CU-7	BOEING CO 5.040% 05/01/27		05/13/2020	Fenner		533,048	530,000	530,000	0	0	0	0	0	0	530,000	0	3,048	3,048		05/01/2027	2FE
11135F-AA-9	BROADCOM INC SERIES 144A 3.125% 04/15/21		04/23/2020	. Corporate Action		712,530	702,000	701,172	701,471	0	126	0	126	0	701,596	0	10,934	10,934	11,456	04/15/2021	2FE
1248EP-BX-0	CCO HLDGS LLC CAP CORP SERIES 144A 5.000% 02/01/28		05/13/2020	Citigroup Global Markets		260,625	250,000	234,063	235,780		520	0	520	0	236,299	0	24,326	24,326	9,861	.02/01/2028	3FE
1240LF-DA-0	02/01/20			Citigroup Global Markets		200,023	230,000	204,000	205,760		520		520		230,233		24,020	24,020			. U L
12508E-AG-6	CDK GLOBAL INC 5.875% 06/15/26		06/17/2020			327,050	310,000	313,250	312,515	0	(235)	0	(235)	0	312,280	0	14,770	14,770	9,309	06/15/2026	3FE
				Merrill Lynch Pierce						_	_		_	_		_					
12621E-AK-9 126458-AD-0	CNO FINANCIAL GROUP INC 5.250% 05/30/25 CTR PARTNERSHIP CARETRST 5.250% 06/01/25		06/17/2020 06/02/2020	. Fenner		265,373 816,000	240,000 L	240,000	240,000	0	(1,780)	0	(1,780)	0	240,000 813.684	0	25,373	25,373	6,965 21,233	05/30/2025 06/01/2025	2FE
120438-AD-U	CAPITAL ONE NA 2.250% 09/13/21		06/02/2020	Corporate Action		1,351,466	1,330,000	1,327,939	1,329,273	0	(1,780)	0		0	1,329,459	0	2,316	2,316	21,233	09/13/2021	2FE
14042R-HC-8	CAPITAL ONE NA 2.650% 08/08/22		06/05/2020	Corporate Action		413,404	400,000	399,088	399,510	0	81	0	81	0	399,591	0	13,813	13,813	8,892	08/08/2022	
	CARMAX AUTO OWNER TRUST SERIES 2017-3 CLASS											1									1
14314W-AD-3	A3 1.970% 04/15/22		06/15/2020	Paydown		140,830	140,830	140,802	140,820	0	9	0	9	0	140,830	0	0	0	1, 151	04/15/2022	1FE
14912L-6N-6	CATERPILLAR FINANCE SE SERIES MTN 2.500% 11/13/20		05/08/2020	Wachovia Securities		1,512,795	1,500,000	1,514,985	1,503,750	n	(1,565)	0	(1,565)	n	1,502,186	n	10,609	10,609		11/13/2020	1FE
15135B-AQ-4	CENTENE CORP SERIES 144A 4.250% 12/15/27		05/06/2020	Tax Free Exchange		297,593	300,000	297,480	297,496	0		0	97	0	297,593	0	0	0	5,313	12/15/2027	3FE
15135B-AS-0	CENTENE CORP SERIES 144A 4.625% 12/15/29		05/06/2020	. Tax Free Exchange		680,000	680,000	680,000	680,000	0	0	0	0	0	680,000	0	0	0	13, 104	12/15/2029	3FE
15135B-AT-8	CENTENE CORP SERIES WI 4.625% 12/15/29		06/09/2020	J P Morgan		238, 150	220,000	220,000	0	0	0	0	0	0	220,000	0	18,150	18,150	5,229	12/15/2029	3FE
15135B-AU-5	CENTENE CORP SERIES 144A 3.375% 02/15/30 CENTURYTEL INC SERIES 144A 4.000% 02/15/27		05/06/2020	. Tax Free Exchange		250,000	250,000	250,000	u	0	0	0	0	0	250,000	0	0		1,945	02/15/2030	3FE
156700-BC-9			05/13/2020	J P Morgan	<u> </u>	294,375	300,000	300,000	0	0	0	0	0	0	300,000	0	(5,625)	(5,625)	3,700	02/15/2027	3FE
	CFX ESCROW CORP SERIES 144A 6.000% 02/15/24			Bony/Barclays Capital											,		, , ,		,		
15723R-AA-2	CUARTER COMMUNICATION OF A COMMUNICATION		06/17/2020	. Inc		145,208	140,000	140,000	140,000	0	0	0	0	0	140,000	0	5,208	5,208	7,093	02/15/2024	3FE
161175-AX-2	CHARTER COMM OPT LLC CAP SERIES WI 3.579% 07/23/20		06/23/2020	Call 100.0000		185.000	185.000	185.000	185.000			0	0	0	185.000	0	0	0	6.069	07/23/2020	2FE
1611/5-AX-2	CONAGRA BRANDS INC 4.300% 05/01/24		06/23/2020 06/02/2020	. Cari 100.0000		1, 195,862	1,080,000	1,079,460	1,079,576	 N		0	38	 N	1,079,614	0	116,248	116,248		05/01/2024	2FE
	DELL EQUIPMENT FINANCE TRUST SERIES 2018-1																				
24704A-AC-0	CLASS A2B 144A 0.490% 10/22/20		04/22/2020	Paydown		32, 108	32,108	32,108	32, 108	0	0	0	0	0	32, 108	0	0	0	194	10/22/2020	. 1FE
050704 411 7	DIAMOND 1 FIN DIAMOND 2 SERIES 144A 5.875%		OF /40 /0000	Washania Cas 141		011 10:	044 000	040,000	044 450	_	(400)		(400)	•	044 000	_	400	400	E 401	00 /45 /0004	255
25272K-AU-7 26884L-AF-6	06/15/21 EQT_CORP 3.900% 10/01/27		05/12/2020 06/02/2020	. Wachovia Securities J P Morgan		211,464	211,000 . 490,000 .	212,200	211, 150	0 n	(122)	0	(122)	0 n	211,028	0 n	436	436	5, 131	06/15/2021 10/01/2027	3FE
2000+L AI =0	FAIR ISAAC CORP SERIES 144A 4.000% 06/15/28			. o i moi gaii							009			0						10/01/2021	_ L
303250-AF-1			05/08/2020	Various		515,495	520,000	520,000	520,000	0	0	0	0	0	520,000	0	(4,505)	(4,505)	8,891	06/15/2028	. 3FE
045700 10 -	FIDELITY & GUARANTY LIFE SERIES 144A 5.500%	6	00 (47 (0000	Citigroup Global Markets		071 005	050 005	010 755	212 244	_		_	75	_	040.000	_	05.005	05 000	2 72-	05 (04 (0005	055
315786-AC-7	05/01/25	1	06/17/2020	.1		274.993	250.000	248.750	249.014	L0	75	L0	75	0	249.089	. 0	25.903	25.903	8.708	05/01/2025	. 3FE

SCHEDULE D - PART 4

				Show All Lo	ong-Term Bo	onds and Sto	ck Sold, Re	deemed or (Otherwise I	Disposed (of During t	he Current	t Quarter							
1	2	3 4	5	6	7	8	9	10	Cl	nange In Bo	ok/Adjusted	Carrying Va	alue	16	17	18	19	20	21	22
	_				•	Ů	Ů		11	12	13	14	15					_0		
									11	12	13								i	
											0	Total	Total					Daniel	i	NIAIO
											Current	Change in	Foreign					Bond	i	NAIC
											Year's	Book/	Exchange	Book/				Interest/	ı	Desig-
								Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	nation
								Book/	Unrealized	Year's	Temporary		Book	Carrying	Exchange	Realized		Dividends	Con-	and
CUSIP				Number of				Adjusted	Valuation	(Amor-	Impairmen		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
		F D:	Name -		0:-		A -41			`										
Ident-		For- Dispo		Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on		(Loss) on	During	Maturity	strative
ification	Description	eign Dat		Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
37045X-BY-1	GENERAL MOTORS FINL CO 3.150% 06/30/22		20 Morgan Stanley		650,813	650,000	656,032	653,259	0	(556)	0	(556)	0	652,703	0	(1,891)	(1,891)	8,759	06/30/2022	2FE
			Citigroup Global Markets																ı	
404119-BN-8	HCA INC 5.000% 03/15/24		20			300,000	316,500	308,509	0	(636)	0	(636)	0	307,872	0	18,033	18,033	9,542	03/15/2024	2FE
			Citigroup Global Markets																ı	
436440-AK-7	HOLOGIC INC SERIES 144A 4.375% 10/15/25					360,000	360,000	360,000	0	0	0	0	0	360,000	0	3,600	3,600	9, 188	10/15/2025	3FE
	INTERPUBLIC GROUP COS INC SERIES 3YR 3.750%				,	,	,	,						,		,	,	,	1	
460690-BN-9	10/01/21		20 Southwest Securities		2,642,565	2,550,000	2,548,241	2,548,975	0	264	0	264	0	2,549,239	0	93,326	93,326	68,000	10/01/2021	2FE
46284P-AQ-7	IRON MOUNTAIN INC 6.000% 08/15/23	06/29/2			408,000	400,000	412,000	406,507	0	(1,990)	0	(1.990)	0	404.517	0	(4,517)	(4,517)		08/15/2023	
	IRON MOUNTAIN INC SERIES 144A 4.375%				,	,	,	,		, , , ,		, , , ,		, .		, , ,		,	1	
46284V-AB-7	06/01/21		20 Mitsubishi Securities		500 . 448	500,000	500,000	500,000	0	0	0	0	0	500.000	0	448	448	9.631	06/01/2021	3FE
	L BRANDS INC 5.250% 02/01/28				334,000	400,000	351,000	356,206	0	1,919	0	1,919	0	358 , 125	0	(24, 125)	(24, 125)			
	MPLX LP SERIES 144A 6.375% 05/01/24				120,000	120,000	120,000	120,000	0	0	0	0	0	120,000	0	0	0	4,229	.05/01/2024	
	MPLX LP SERIES 144A 5.250% 01/15/25				630,473	630,000	630,572	630,536	0	(63)	0	(63)	0	630,473	0	0	0	28,114	01/15/2025	
	MASTR ASSET BACKED SECURITIES SERIES 2005-			[[(30)		(00)		, 470	Γ		Γ		,,	1
57643L-G7-3	WMC1 CLASS M4 1.130% 03/25/35		20 Paydown		71,299	71,299	71,355	0	0	(56)	0	(56)) 0	71,299	0	0	l n	516	03/25/2035	1FM
	MATCH GROUP INC SERIES WI 6.375% 06/01/24.				484,984	470,000	495,500	481,578	0	(2, 145)		(2, 145)		479,433	0	(9, 433)	(9,433)	30,797		
	OCCIDENTAL PETROLEUM COR 6.950% 07/01/24	04/24/2			238,500	300,000	172,500	0	0	53	0	53	,	172,553	0	65.947	65.947	6.776	07/01/2024	
014000 00 0	QUICKEN LOANS INC SERIES 144A 5.750%		20 Ottiel Micolaus a co		200,000			υ												. 01 L
74840L-AA-0			20 Various		1,696,838	1,760,000	1,761,975	1,760,807	0	(81)		(81)		1,760,725	0	(63,888)	(63, 888)	47,059	05/01/2025	SEE
/4040L-AA-0	QUICKEN LOANS INC SERIES 144A 5.250%		Citigroup Global Markets		1,050,000	1,700,000		1,700,007		(01)		(01)	,	1,700,723		(03,000)	(03,000)			. JI L
74840L-AB-8		04/06/2			136,500	150,000	148,541	148,789	0	33	0	33	0	148,822	0	(12,322)	(12,322)	5,753	01/15/2028	3FE
/484UL-AB-8	ROCKIES EXPRESS PIPELINE SERIES 144A 6.875%		Merrill Lynch Pierce			130,000	148, 341	148,789				33		140,822		(12,322)	(12,322)		VI/15/2028	JFE
77340R-AM-9	04/15/40	04/06/2			189.000	280.000	266.700	267,732		70		70		267.804	0	(78,804)	(78,804)	9.251	04/15/2040	2FE
									0	72	0	72	0		0					
/9046V-AL-U	SALLY HOLDINGS/SALLY CAP 5.625% 12/01/25				197,500	200,000	200,000	200,000	0	0		0	0	200,000		(2,500)	(2,500)	6,094	12/01/2025	3FE
0500011 11 0	SPRINT SPECTRUM SPEC I SERIES A-1 3.360%	00 (00 (0	Redemption 100.0000		00 405	00.405	00.405	00.400						00.400				470	00 (00 (0004	055
85208N-AA-8	09/20/21		20		28 , 125	28, 125	28 , 125	28,122	0	0		0		28, 122		3	3	473	09/20/2021	2FE
050400 40 0	STANDARD INDUSTRIES INC SERIES 144A 5.500%	00/40/0	00 0 11 404 0750		05 455	04.000	04 000	04.000						04.000				5.044	00/45/0000	055
	02/15/23				85, 155	84,000	84,000	84,000	0	0	0	0	0	84,000	0	0	0	5,044	02/15/2023	
	STEEL DYNAMICS INC 5.000% 12/15/26				329, 160	323,000	323,000	323,000	0	0	0	0	0	323,000	0	6,160	6, 160	6,236	12/15/2026	2FE
	T-MOBILE USA INC 6.500% 01/15/24	04/03/2			20,725	2,000,000	0	0	0	0	0	0	0	0	0	20 , 725	20,725	Ω		
8/299A-1W-4	T-MOBILE USA INC 4.750% 02/01/28		20 Corporate Action		1,455	380,000	0	0	0	0	0	0	0	0	0	1,455	1,455	0	02/01/2028	3FE
	TOWD POINT MORTGAGE TRUST SERIES 2019-HY2							_	_		_				_		_			
	CLASS A1 144A 1.185% 05/25/58				244,240	244,240	246 , 110	0	0	(1,870)	0	(1,870)	0	244,240	0	0	0	1,729	05/25/2058	1FM
90184L-AG-7	TWITTER INC SERIES 144A 3.875% 12/15/27		20 J P Morgan		148,500	150,000	150,000	149,922	78	0	0	78	0	150,000	0	(1,500)	(1,500)	2,357	12/15/2027	3FE
	UPSTART SECURITIZATION TRUST SERIES 2020-1																		i	
91679U-AA-0	CLASS A 2.322% 04/22/30				378, 174	378, 174	378 , 174	0	0	0	0	0	0	378, 174	0	0	0	2,085	04/22/2030	1FE
			Citigroup Global Markets			1									1				1	1
966387-AH-5	WHITING PETROLEUM CORP 5.750% 03/15/21	04/01/2	20		11,550	210,000	90,501	198,660	8,910	486	117,555	(108, 159)	0	90,501	0	(78,951)	(78,951)	6,038	03/15/2021	5FE
	VALEANT PHARMACEUTICALS SERIES 144A 5.500%					1									1				1	1
91911K-AN-2		A05/26/2	20 RBC		300,875	290,000	290,000	290,000	0	0	0	0	0	290,000	0	10,875	10,875	9, 171	11/01/2025	3FE
	ALCOA NEDERLAND HOLDING SERIES 144A 6.125%					1									1				1	1
013822-AC-5		D06/03/2			788,850	800,000	804,875	803,593	0	(233)	00	(233)	0	803,360	0	(14,510)	(14,510)	25,305	05/15/2028	3FE
	ARCELORMITTAL 7.000% 10/15/39	D			135,281	130,000	102,700	102,700	0	0	0	0	0	102,700	0	32,581	32,581	5,056		
06738E-BK-0	BARCLAYS PLC 5.088% 06/20/30	D05/04/2	20 Piper Jeffries & Co		786,210	730,000	730,000	730,000	0	0	0	0	0	730,000	0	56,210	56,210	13,825	06/20/2030	2FE
23636A-AT-8	DANSKE BANK SERIES 144A 5.375% 01/12/24	D05/04/2	20 Goldman Sachs & Co		216,418	200,000	199,596	199,664	0	26	0	26	0	199,690	0	16,728	16,728	8,719	01/12/2024	2FE
	DELPHI JERSEY HOLDINGS SERIES 144A 5.000%		Bony/Barclays Capital																ı	
24718P-AA-5	10/01/25	D06/08/2	20 Inc		220,500	210,000	208,950	194,250	14,956	53	0	15,009	0	209,259	0	11,241	11,241	7,263	10/01/2025	3FE
	SENSATA TECH UK FIN CO SERIES 144A 6.250%	1	Merrill Lynch Pierce				, , , , , , , , , , , , , , , , , , , ,		,,,,,,							,				
81727T-AA-6	02/15/26	D06/17/2	20 Fenner		240.104	230,000	230,000	230,000	0	0	0	0	0	230,000	0	10 , 104	10 . 104	12, 139	02/15/2026	3FE
	ZIGGO SECURED FINANCE BV SERIES 144A 5.500%				,	,	,	,						,		,		,	1	
98954N-AA-7		D06/17/2	20 J P Morgan		484,021	467,000	464,000	464,801	0	120	0	120	0	464,924	0	19, 105	19, 105	23,830	01/15/2027	4FE
	Subtotal - Bonds - Industrial and Misce	ellaneous (I In	affiliated)		30,667,804	33, 131, 776	30,383,693	27,582,999	43.444	(4,059)	117,555		0	30,352,119	0		291,551	771,617	XXX	XXX
		a. 10003 (OII	annacou)											· · · · · · · · · · · · · · · · · · ·						_
	Total - Bonds - Part 4				35,643,667	38,051,372	35,544,831	32,717,119	43,444	(184,061)				35,316,588	0		302,946	856,202	XXX	XXX
	Total - Bonds - Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999. 7	Total - Bonds				35,643,667	38,051,372	35,544,831	32,717,119	43,444	(184,061)	117,555	(258, 172)) 0	35,316,588	0	302,946	302,946	856,202	XXX	XXX
8999997	Total - Preferred Stocks - Part 4				n	XXX	n	n	n	0		n	n	n	0		0	n	XXX	XXX
0000001.	otal Frommod otooks Full T					, , , , , , , , , , , , , , , , , , ,			. 0	. 0		. 0			. 0	U	U U	U	////	////

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Ch	ange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							
													Total	Total							
												Current	Change in	Foreign					Bond		NAIC
												Year's	Book/	Exchange	Book/				Interest/		Desig-
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Stock	Stated	nation
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Dividends	Con-	and
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
8999998.	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999.	Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	SPRINT NEXTEL CORP			Corporate Action	3,000,000.000	3,000		0	0	0	0	0	0	0	0	0	3,000	3,000	0		
9099999.	Subtotal - Common Stocks - Industria	ıl and I	Miscellaneo	us (Unaffiliated) Publi	icly Traded	3,000	XXX	0	0	0	0	0	0	0	0	0	3,000	3,000	0	XXX	XXX
9799997.	Total - Common Stocks - Part 4					3,000	XXX	0	0	0	0	0	0	0	0	0	3,000	3,000	0	XXX	XXX
9799998.	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999.	Total - Common Stocks					3,000	XXX	0	0	0	0	0	0	0	0	0	3,000	3,000	0	XXX	XXX
9899999.	Total - Preferred and Common Stock	s				3,000	XXX	0	0	0	0	0	0	0	0	0	3,000	3,000	0	XXX	XXX
9999999 -	Totals					35,646,667	XXX	35,544,831	32,717,119	43,444	(184,061)	117,555	(258, 172)	0	35,316,588	0	305,946	305,946	856,202	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE**

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date (Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E)

CUSIP	Z	3 Code	4 NAIC Designation and Administrative	5	6 Book/Adjusted	/
Identification 912810-FD-5	Description CREDIT SUISSE GROUP	Code	Symbol 1.	Fair Value19,665	Carrying Value	Maturity Date04/15/2028
912810-FH-6	CREDIT SUISSE GROUP		1	96,315	96,315	04/15/2029
912810-PT-9 912810-PU-6	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1			02/15/203705/15/2037
912810-QK-7	CREDIT SUISSE GROUP			2,073	2,073	08/15/2040
912810-QT-8 912810-RA-8	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		11.			11/15/2041 02/15/2043
912810-RC-4	CREDIT SUISSE GROUP		1	17,629	17,629	08/15/2043
912810-RE-0 912810-RG-5	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1	21,600 21,001		02/15/2044
912810-RH-3	CREDIT SUISSE GROUP			1,296	1,296	08/15/2044
912810-RN-0 912810-SL-3	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1			08/15/2045
912828-2D-1	CREDIT SUISSE GROUP		1	21,931	21,931	08/31/2023
912828-2F-6 912828-2L-3	CREDIT SUISSE GROUP		1	6, 125 6, 381	6, 125 6, 381	08/31/202107/15/2027
912828-2P-4	CREDIT SUISSE GROUP		1	19,040	19,040	07/31/2022
912828-2Y-5 912828-3D-0	CREDIT SUISSE GROUP		111		17,278	09/30/2024
912828-3F-5	CREDIT SUISSE GROUP		1	5, 172	5, 172	11/15/2027
912828-3J-7 912828-3P-3	CREDIT SUISSE GROUP		11	59,541 947	59,541	11/30/2024
12828-3R-9	CREDIT SUISSE GROUP			6,804	6,804	01/15/2028
)12828-4F-4)12828-4H-0	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1			03/31/2025
12828-4M-9	CREDIT SUISSE GROUP		11	4,378	4,378	04/30/2025
12828-4S-6 12828-4Z-0	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		11			05/31/2023
12828-5D-8	CREDIT SUISSE GROUP		1	43,774	43,774	09/30/2023
12828-5F-312828-5V-8	CREDIT SUISSE GROUP DEUTSCHE BANK		11		37,829	10/15/2021
12828-6B-1	CREDIT SUISSE GROUP		1	5,415		02/15/2029
12828-60-9	CREDIT SUISSE GROUP		ļ1	73,798	73,798	02/15/2022
12828-6L-9 12828-6N-5	CREDIT SUISSE GROUP		11.	1,630 50,558	1,630	03/31/2026 04/15/2024
12828-6T-2	CREDIT SUISSE GROUP		1	11,818	11,818	05/15/2029
12828-7D-6 12828-B2-5	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		11	28,100 1,701	28,100	07/15/2029
12828-D5-6	JP MORGAN			1,705,786	1,705,786	08/15/2024
2828-G3-8 2828-G5-3	CREDIT SUISSE GROUP		1	14,305 10,423	14,305 10,423	11/15/2024
12828-H4-5	CREDIT SUISSE GROUP			6,396	6,396	01/15/2025
12828-K7-41 12828-K7-4	UP MORGAN CREDIT SUISSE GROUP		1	2,072,774 26,822	2,072,774 26,822	08/15/2025
12828-M5-6	CREDIT SUISSE GROUP		1	13, 147	13, 147	11/15/2025
12828-N3-0 12828-N7-1	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1			12/31/2022
12828-R3-6	CREDIT SUISSE GROUP		1			05/15/2026
12828-R6-9 12828-RC-6	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1	6,831 28.279	6,831	05/31/2023
12828-S5-0	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1	3,436		08/15/2021
12828-SA-9	CREDIT SUISSE GROUP		1	18,549	18,549	01/15/2022
12828-SV-3 12828-T2-6	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		1	27,390 11.163		05/15/2022
12828-T3-4	CREDIT SUISSE GROUP		1	27,874	27,874	09/30/2021
)12828-TJ-9)12828-TY-6	CREDIT SUISSE GROUP CREDIT SUISSE GROUP		11	47,468 .11,581		08/15/202211/15/2022
912828-U6-5	CREDIT SUISSE GROUP			2,995	2,995	11/30/2021
912828-U8-1 912828-UN-8	CREDIT SUISSE GROUP CREDIT SUISSE GROUP			12,41467,062		12/31/2021
12828-V7-2	CREDIT SUISSE GROUP		11	16,115	16, 115	01/31/2022
)12828-V8-0)12828-V9-8	CREDIT SUISSE GROUP CREDIT SUISSE GROUP				36, 169	01/31/2024
12828-VB-3	CREDIT SUISSE GROUP		11	75,747	75,747	05/15/2023
12828-VM-9 12828-VS-6	DEUTSCHE BANK CREDIT SUISSE GROUP					07/15/2023
12828-W8-9	CREDIT SUISSE GROUP		1	17,988	17,988	03/31/2022
12828-WY-2 12828-X3-9	CREDIT SUISSE GROUP					07/31/2021 04/15/2022
12828-X4-7	CREDIT SUISSE GROUP		1		16,909	04/13/2022
12828-XB-1 12828-XL-9	CREDIT SUISSE GROUP				38,590	05/15/2025
12828-XL-9 12828-XR-6	CREDIT SUISSE GROUP CREDIT SUISSE GROUP					05/31/2022
12828-XW-5	CREDIT SUISSE GROUP		1	186,686	186,686	06/30/2022
12828-XX-3 12828-Y3-8	CREDIT SUISSE GROUP DEUTSCHE BANK			7,841 983,812	7,841 983,812	06/30/2024
12828-Y6-1	CREDIT SUISSE GROUP		11	21, 122	21, 122	07/31/2023
12828-YB-0 12828-YD-6	CREDIT SUISSE GROUP				35, 193	08/15/2029 08/31/2026
12828-YG-9	CREDIT SUISSE GROUP		11	2,557	2,557	
12828-YJ-3 12828-YU-8	CREDIT SUISSE GROUP CREDIT SUISSE GROUP				18,530 19,715	09/30/2021
12828-YX-2	DEUTSCHE BANK		1	971,251	971,251	12/31/2026
2828-Z4-5 2828-ZJ-2	CREDIT SUISSE GROUP DEUTSCHE BANK		11.	12,242 1,158,583	12,242	01/31/2022 04/15/2025
12833-Z5-2	DEUTSCHE BANK		1	54,012	54,012	08/15/2037
	otal - Bonds - U.S. Governments - Issuer Obligations			10,148,120	10,148,120	XXX
	I - U.S. Government Bonds I - All Other Government Bonds			10,148,120	10,148,120	XXX
	I - All Other Government Bonds I - U.S. States, Territories and Possessions Bonds			0	0	XXX
	I - U.S. Political Subdivisions Bonds			0	0	XXX
	I - U.S. Special Revenues Bonds			0	0	XXX
	I - Industrial and Miscellaneous (Unaffiliated) Bonds			0	0	XXX
	I - Hybrid Securities			0	0	XXX
	I - Parent, Subsidiaries and Affiliates Bonds otal - SVO Identified Funds			0	0	XXX
	otal - SVO identified Funds otal - Unaffiliated Bank Loans			0	0	XXX
	I - Issuer Obligations			10,148,120	10,148,120	XXX
6499999. Tota	I - Residential Mortgage-Backed Securities			0	0	XXX
	I - Commercial Mortgage-Backed Securities			0	0	XXX
	I - Other Loan-Backed and Structured Securities			0	0	XXX
	I - SVO Identified Funds			0	0	XXX
	I - Affiliated Bank Loans I - Unaffiliated Bank Loans			0	0	XXX
70999999. Tota				10,148,120	10,148,120	XXX
	I - Preferred Stocks (Schedule D, Part 2, Section 1 type)			0	10, 148, 120	XXX
7999999. Tota	I - Common Stocks (Schedule D, Part 2, Section 2 type)			0	0	XXX
	I - Preferred and Common Stocks			0	0	XXX
	LIMA AMERICAS LLC LIMA AMERICAS LLC	ļ		23,284		10/06/2020
			l	,		
00000-00-0 00000-00-0	LMA AMERICAS LLC UNITED STATES OF AMERICA BILL ZERO CPN 25/MAR/2021 USD 100			8,534 20,113	8,493 20,113	10/06/2020

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date

(Securitie	Reinvested Collateral Asset es lending collateral assets reported in aggregate on Line 10	of the	- J	I not included on Sch	, , , ,	DB and E)
1	2	3	4 NAIC	5	6	7
OLIOID			Designation and		Daala/Adiocatad	
CUSIP Identification	Description	Code	Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date
000000-00-0 000000-00-0	UNITED STATES OF AMERICA BILL ZERO CPN 10/DEC/2020 USD 100 UNITED STATES OF AMERICA BILL ZERO CPN 17/DEC/2020 USD 100					12/10/2020
000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 1.75% 15/NOV/2020 USD 100			20,491		11/15/2020
000000-00-0 000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 2.375% 15/MAR/2021 USD 100			9,362 1,289	9,362 1,289	03/15/2021
000000-00-0 000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 2.125% 31/MAY/2021 USD 100			5,599 13,394	5,599 13,394	05/31/2021
000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 1.625% 30/NOV/2020 USD 100					11/30/2020
000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 1.125% 15/JAN/2021 USD 100			16,664	16,664	01/15/2021
000000-00-0 000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 3.125% 15/MAY/2021 USD 100 UNITED STATES OF AMERICA NOTES FIXED 1.375% 31/MAY/2021 USD 100			2,356 2,492	2,356 2,492	05/15/2021 05/31/2021
000000-00-0	UNITED STATES OF AMERICA NOTES FIXED 2% 31/MAY/2021 USD 100			15,906 307,406		05/31/2021 XXX
000000-00-0	AGRIC BK OF CHINA LTD - NY BRANCH			77,687		09/01/2020
000000-00-0 000000-00-0	AGRIC BK OF CHINA LTD - NY BRANCH AGRIC BK OF CHINA LTD - NY BRANCH					09/01/2020 09/01/2020
000000-00-0 000000-00-0	MUFG Bank Ltd, New York Branch MUFG Bank Ltd. New York Branch			31,217 45,102	31,321 45,253	10/15/2020 10/15/2020
000000-00-0 000000-00-0	MUFG Bank Ltd, New York Branch MUFG Bank Ltd, New York Branch			11,441 15,549		10/15/2020 08/03/2020
000000-00-0 000000-00-0	MUFG Bank Ltd, New York Branch MUFG Bank Ltd. New York Branch				22,446 5,694	08/03/2020 08/03/2020
000000-00-0	NATIXIS NY			15,555	15,536	09/09/2020
000000-00-0 000000-00-0	NATIXIS NY			22,474 5,701		09/09/2020
000000-00-0 000000-00-0	National Westminster Bank PLC National Westminster Bank PLC				194, 199	09/04/2020
000000-00-0 000000-00-0 000000-00-0	National Westminster Bank PLC			71, 173	71, 175	09/04/2020
000000-00-0	THE CHIBA BANK LTD NEW YORK BRANCH THE CHIBA BANK LTD NEW YORK BRANCH			194, 189 280, 563		08/04/2020 08/04/2020
000000-00-0 000000-00-0	THE CHIBA BANK LTD NEW YORK BRANCH BNP PARIBAS, NY			71, 171 75,528	71, 175 15, 536	08/04/2020
000000-00-0	BNP PARIBAS, NY BNP PARIBAS, NY					02/11/2021
000000-00-0	BNP PARIBAS, NY			15,527	15,536	02/12/2021
000000-00-0 000000-00-0	BNP PARIBAS, NY BNP PARIBAS, NY				22,446 5,694	02/12/2021 02/12/2021
000000-00-0 000000-00-0	BANK OF MONTREAL CHICAGO			54,390 78,582		09/09/2020
000000-00-0 000000-00-0	BANK OF MONTPEAL CHICAGO BANK OF MONTPEAL CHICAGO			, , , , , , , , , , , , , , , , , , , ,	19,929 15,536	09/09/2020
000000-00-0	BANK OF MONTREAL CHICAGO			22,454	22,446	07/10/2020
000000-00-0 000000-00-0	BANK OF MONTREAL CHICAGO			5,696 	5,694 38,840	07/10/2020 08/06/2020
000000-00-0 000000-00-0	BANK OF MONTREAL CHICAGO BANK OF MONTREAL CHICAGO			56, 122 14, 237		08/06/2020
000000-00-0	BANK OF NOVA SCOTIA HOUSTON BANK OF NOVA SCOTIA HOUSTON					09/08/2020
000000-00-0	BANK OF NOVA SCOTIA HOUSTON			14,239	14,235	09/08/2020
000000-00-0 000000-00-0	CIBC NY			54,393 78,587	54,376 78,562	08/06/2020
000000-00-0 000000-00-0	CIBC NY			19,935 38,790		08/06/2020
000000-00-0	CIBC NY					02/26/2021
000000-00-0	CIBC NY					02/26/2021
000000-00-0 000000-00-0	CIC NY			56,055 14,220	56, 115 14, 235	02/12/2021
000000-00-0 000000-00-0	GOLDMAN SACHS BANK USA GOLDMAN SACHS BANK USA			19,372 27,988	19,420 28.058	02/22/2021
000000-00-0	GOLDMAN SACHS BANK USA				7 , 117 19 , 420	02/22/2021
000000-00-0	GOLDMAN SACHS BANK USA			27,990	28,058	02/22/2021
000000-00-0 000000-00-0	GOLDMAN SACHS BANK USA			7, 100 77, 677	7, 117 77, 679	02/22/2021
000000-00-0 000000-00-0	ROYAL BANK OF CANADA NY ROYAL BANK OF CANADA NY			112,228 28,469	112,231	07/08/2020
000000-00-0 000000-00-0	SOCIETE GENERALE NEW YORK SOCIETE GENERALE NEW YORK					08/14/2020
000000-00-0	SOCIETE GENERALE NEW YORK			14,232	56, 115 14, 235	08/14/2020
000000-00-0 000000-00-0	SVENSKA NY SVENSKA NY			38,851 56,131		12/03/2020 12/03/2020
000000-00-0 000000-00-0	SVENSKA NY			14,239 38,840	14,235 38,840	12/03/2020 08/20/2020
000000-00-0	WELLS FARGO BANK SAN FRANCISCO N.A. WELLS FARGO BANK SAN FRANCISCO N.A.					08/20/2020
000000-00-0	WESTPAC BKG CORP, NEW YORK					10/28/2020
000000-00-0 000000-00-0	WESTPAC BKG CORP, NEW YORK					10/28/2020 10/28/2020
000000-00-0 000000-00-0	RABOBANK LONDON			19,371 27,987		01/08/2021
000000-00-0 000000-00-0	RABOBANK LONDON BNP PARIBAS, NY				7 , 117 15 , 536	01/08/2021
000000-00-0	BNP PARIBAS, NY			22,458	22,446	10/09/2020
000000-00-0 000000-00-0	BNP PARIBAS, NY BANCO DEL ESTADO DE CHILE NY			5,697 38,847		10/09/2020 07/08/2020
000000-00-0 000000-00-0	BANCO DEL ESTADO DE CHILE NY					07/08/2020
000000-00-0	BANCO DEL ESTADO DE CHILE NY BANCO DEL ESTADO DE CHILE NY			23,290		08/28/2020
000000-00-0	BANCO DEL ESTADO DE CHILE NY			8,536	8,541	08/28/2020
000000-00-0 000000-00-0	BANK OF MONTREAL CHICAGO			23,301 33,664	23,304 33,669	11/13/2020
000000-00-0 000000-00-0	BANK OF MONTREAL CHICAGO BANK OF NOVA SCOTIA HOUSTON			8,540 15,536		11/13/2020 07/10/2020
000000-00-0 000000-00-0	BANK OF NOVA SCOTIA HOUSTON BANK OF NOVA SCOTIA HOUSTON			22,447 	22,440 5,692	07/10/2020 07/10/2020 07/10/2020
000000-00-0	RABOBANK NEW YORK			23,298	23,304	09/04/2020
000000-00-0 000000-00-0	RABOBANK NEW YORK RABOBANK NEW YORK			33,660 8,539	33,669	09/04/2020 09/04/2020
000000-00-0 000000-00-0	CREDIT AGRICOLE CIB, NY					01/29/2021
000000-00-0	CREDIT AGRICOLE CIB, NY			15,658	15,658	01/29/2021
000000-00-0 000000-00-0	SKANDI NEW YORK			56, 123		10/02/2020
000000-00-0 000000-00-0	SKANDI NEW YORK			14,237 15,530	14,218 15,536	10/02/2020 12/31/2020
000000-00-0 000000-00-0	SOCIETE GENERALE NEW YORK SOCIETE GENERALE NEW YORK					12/31/2020
000000-00-0	STANDARD CHARTERED NY					08/07/2020
000000-00-0 000000-00-0	STANDARD CHARTERED NY STANDARD CHARTERED NY				56, 115 14, 235	08/07/2020 08/07/2020
000000-00-0 000000-00-0	STANDARD CHARTERED NY			38,818 56,084		08/26/2020
000000-00-0	STANDARD CHARTERED NY			14,227	14,235	08/26/2020

SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

1	es lending collateral assets reported in aggregate on Line 2	3	4 NAIC	5	6	7
CUSIP entification	Description	Code	Designation and Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Da
	SUMITOMO MITSUI TRUST BANK LTD,NY					12/02/2020 12/02/2020
00-00-0	SUMITOMO MITSUI TRUST BANK LTD,NY			71,166	71, 175	12/02/2020
	SUMITOMO BK NY SUMITOMO BK NY			23,306	23,305 33.671	08/03/2020
	SUMITOMO BK NY			8,542		08/03/2020
0-00-0	SUMITOMO BK NY			15,538	15,537	08/03/2020
	SUMITOMO BK NY SUMITOMO BK NY			22,449 5.695	22,447	08/03/2020
	SVENSKA NY					11/30/2020
0-00-0	SVENSKA NY			33,665	33,616	11/30/2020
	SVENSKA NY UNION BANK OF SWITZERLAND, STAMFORD				8,528 54.376	11/30/2020
	UNION BANK OF SWITZERLAND, STAMFORD					12/04/2020
0-00-0	UNION BANK OF SWITZERLAND, STAMFORD			19,922	19,929	12/04/2020
	DBS BANK LIMITED, SINGAPORE DBS BANK LIMITED, SINGAPORE			31,072	31,072 44.892	08/11/2020
0-00-0	DBS BANK LIMITED, SINGAPORE			11,388	11,388	08/11/2020
	DBS BANK LIMITED, SINGAPORE				38,840	08/03/2020
	DBS BANK LIMITED, SINGAPORE DBS BANK LIMITED, SINGAPORE			56 , 115		08/03/2020
0-00-0	ROYAL BANK OF CANADA			155,359	155,359	07/01/2020
	ROYAL BANK OF CANADA ROYAL BANK OF CANADA					07/01/2020
	HUYAL BANK OF CANADA SHINKIN CENTRAL BANK					07/01/2020
0-00-0	SUMITOMO MITSUI BANK CORP SYD OBU			31,072	31,072	07/24/2020
	SHINKIN CENTRAL BANK SUMITOMO MITSUI BANK CORP SYD OBU					09/04/2020
0-00-0	SHINKIN CENTRAL BANK			85,410	85,410	09/04/2020
0-00-0	SUMITOMO MITSUI BANK CORP SYD OBU			11,388	11,388	07/24/2020
	Mitsubishi UFJ Trust & Bank Co Mitsubishi UFJ Trust & Bank Co					09/09/2020
0-00-0	Mitsubishi UFJ Trust & Bank Co			28,452	28,444	09/09/2020
9999. Total	- Cash (Schedule E Part 1 type)			6,529,063	6,530,219	XXX
	UNITED OF OMAHA LIFE INSURANCE				38,840	07/15/2020
	UNITED OF OMAHA LIFE INSURANCE					07/15/2020
	UNITED OF OMAHA LIFE INSURANCE			15,536	15,536	07/30/2020
	UNITED OF OMAHA LIFE INSURANCE			22,446 5.694	22,446	07/30/2020
	UNITED OF OMAHA LIFE INSURANCE			5,694	5,694	07/30/2020
	NATIXIS FINANCIAL PRODUCTS LLC			157, 123	157 , 123	07/01/2020
	NATIXIS FINANCIAL PRODUCTS LLC					07/01/2020
U-70-0	TFDXX LEX BLACKROCK FED FUND				224,462	07/01/2020
	TFDXX LEX BLACKROCK FED FUND				56,940 314,602	07/01/2020
	DREYFUS TREASURY & AGENCY LEX					07/01/2020 07/01/2020
8-10-7	DREYFUS TREASURY & AGENCY LEX			115,303	115,303	07/01/2020
'A-70-3' 'A-70-3	FIDELITY INST GOVT LEX			77,679 112,231		07/01/2020 07/01/2020
A-70-3A-70-3	FIDELITY INST GOVT LEX			28,470	28,470	07/01/2020
W-27-3	Goldman Sachs Fin Square Govt Fd				776,795	07/01/2020
	Goldman Sachs Fin Square Govt Fd Goldman Sachs Fin Square Govt Fd			1, 122, 310 284, 699	1, 122, 310 284, 699	07/01/2020 07/01/2020
V-48-0	HSBC US GOVT FUND LEX			411,701	411,701	07/01/2020
V-48-0 V-48-0	HSBC US GOVT FUND LEX					07/01/2020
	HSBC US GOVT FUND LEX			150,890		07/01/2020 07/01/2020
C-70-7	MS GOVT US LEX				280,577	07/01/2020
	MS GOVT US LEX INVESCO GOVT AND AGCY LEX			71, 175	71, 175 208, 785	07/01/2020
2-88-5	INVESCO GOVT AND AGCY LEX			301,651	301,651	07/01/2020
	INVESCO GOVT AND AGCY LEX				76,521	07/01/2020
	STATE STREET INST US GOVT FUND			310,718448,924	310,718 348,924	07/01/2020
2–70–6	STATE STREET INST US GOVT FUND			113,879	113,879	07/01/2020
	WELLS FARGO GOVT FD LEX					07/01/2020
	WELLS FARGO GOVT FD LEX			56,940	56,940	07/01/2020
	DEUTSCHE BANK SECURITIES INC.				660,275	07/01/2020
	DEUTSCHE BANK SECURITIES INC. DEUTSCHE BANK SECURITIES INC.			953,963 241,994	953, 963 241, 994	07/01/2020 07/01/2020
	DEUTSCHE BANK SECURITIES INC.			529,748	529,748	07/01/2020
	DEUTSCHE BANK SECURITIES INC. DEUTSCHE BANK SECURITIES INC.					07/01/2020 07/01/2020
	BMO CAPITAL MKTS			194, 199	194, 155	07/01/2020
	BMO CAPITAL MKTS			280,577	280,577	07/01/2020
	BMO CAPITAL MKTS			71, 175 77,679	71, 175 77, 679	07/01/2020
	CITIGROUP GLOBAL MARKETS INC			155,359	155,359	08/04/2020
	CITIGROUP GLOBAL MARKETS INC				77,679	08/04/2020
	CITIGROUP GLOBAL MARKETS INC CITIGROUP GLOBAL MARKETS INC				77,679 310,718	08/04/2020
	CITIGROUP GLOBAL MARKETS INC			112,229	112,231	08/04/2020
	CITIGROUP GLOBAL MARKETS INC					08/04/2020
	CITIGROUP GLOBAL MARKETS INC			112,229	112,231	08/04/2020
	CITIGROUP GLOBAL MARKETS INC			448,919	448,924	08/04/2020
	CITIGROUP GLOBAL MARKETS INC CITIGROUP GLOBAL MARKETS INC					08/04/2020
	CITIGROUP GLOBAL MARKETS INC			28,470	28,470	08/04/2020
	CITIGROUP GLOBAL MARKETS INC					08/04/2020
	CITIGROUP GLOBAL MARKETS INC				113,879 271,878	08/04/2020
	CS LLC Repo BONY				392,808	09/03/2020
	CS_LLC_Repo_BONY			99,645	99,645	09/03/2020
	UNITED STATES OF AMERICA BILL ZERO CPN 10/SEP/2020 USD 100			31,754 484,211	31,754 484,211	09/10/2020
	UNITED STATES OF AMERICA BOND FIXED 8.75% 15/AUG/2020 USD 100			34,387	34,387	08/15/2020
	UNITED STATES OF AMERICA NOTES FIXED 2.125% 31/AUG/2020 USD 100			47,516	47,514	08/31/2020
<u> පපපප. 10tal</u>	- Cash Equivalents (Schedule E Part 2 type) Is			15,001,662 31,986,251	15,001,671 31,987,102	XXX

2.	Average balance for the year	Fair Value \$	34,665,098 Book/Adjus	sted Carrying Value \$	34,664,639	
3.	Reinvested securities lending	collateral assets book/adju	isted carrying value include	ed in this schedule by NAIC de	signation:	
	NAIC 1 \$28,095,251	NAIC 2 \$3,891,851	NAIC 3 \$. NAIC 4 \$	NAIC 5 \$	NAIC 6 \$

SCHEDULE DL - PART 2 SECURITIES LENDING COLLATERAL ASSETS Reinvested Collateral Assets Owned Current Statement Date

1 CUSIP	2	3	4 NAIC Designation and Administrative	5	6 Book/Adjusted	7
dentification	Description	Code	Symbol	Fair Value	Carrying Value	Maturity Date
			·····			
			• • • • • • • • • • • • • • • • • • • •			•
				••••••		
						†
		·				
						
						
999999 - Tota	s					XXX

1.	Total activity for the year	Fair Value \$	Book/Adjusted Carrying Value \$
2.	Average balance for the year	Fair Value \$	Book/Adjusted Carrying Value \$

SCHEDULE E - PART 1 - CASH

Month	Fnd	Depository	Balances
IVIOLILI	LIIU		Dalalices

	_		Life Depository					_
1	2	3	4	5		ance at End of Ead		9
						uring Current Quart		
			Amount of	Amount of	6	7	8	
		Doto of	Interest Received					
Denository	Cada	Rate of Interest		at Current Statement Date	Cinnt Manuth	On a seed Mareth	Thind Mandle	*
Depository 101 0 T 101 1 101	Code	merest	Quarter	Statement Date	First Month	Second Month	Third Month	
101 S. Tryon Street, 19th								
Floor, Charlotte, NC 28255					(0.540.050)	(0.000.700)	/ /= .=	
Bank of America	ļ	0.000	0	0	(3,549,353)	(9,606,590)	(15,650,320)	XXX
150 E. 42nd Street, 39th								
Wells Fargo Floor, New York, NY 10017		0.000	0	0	584,881	584,350	584,266	XXX.
4 New York Plaza, 13th								
JP Morgan Chase Floor, New York, NY 10004		0.000	0	0	4, 151, 170	32,418,877	6,699,811	xxx
0199998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	1,186,698	23,396,637	(8,366,243)	XXX
0299998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	1,186,698	23,396,637	(8,366,243)	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
	·····							
	}	·····						
	····							
	ļ	ļ						ļ
0599999. Total - Cash	XXX	XXX	0	0	1,186,698	23,396,637	(8,366,243)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

	1101110	whea Ena of Curren			ń.		
1 2	3	4	5	6	7	8	9
					Book/Adjusted	Amount of Interest	Amount Received
CUSIP Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
US TREASURY BOND REPURCHASE AGREEMENT		06/30/2020	0.000	07/01/2020	10,200,000	0	(
0199999. Subtotal - Bonds - U.S. Governments - Issuer Obligations					10,200,000	0	(
0599999. Total - U.S. Government Bonds					10,200,000	0	
1099999. Total - All Other Government Bonds					0	0	
1799999. Total - U.S. States, Territories and Possessions Bonds					0	0	
2499999. Total - U.S. Political Subdivisions Bonds					0	0	
2493999. Total = 0.5. Political subdivisions Borids FED Hole In Discount NT FED Hole In Disc		05/20/2020	0.125	08/19/2020	2,399,592	0	
FEB HOME LIN DISCOUNT NT		05/11/2020	0.100	07/16/2020	1,999,917	0	
2599999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations					4.399.509	0	633
3199999. Total - U.S. Special Revenues Bonds					4,399,509	0	633
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds					4,399,309	0	030
4899999. Total - Hybrid Securities					0	0	
5599999. Total - Parent, Subsidiaries and Affiliates Bonds					0	0	
					0	0	
6099999. Subtotal - SVO Identified Funds					0	0	(
6599999. Subtotal - Unaffiliated Bank Loans					0	0	(
7699999. Total - Issuer Obligations					14,599,509	0	630
7799999. Total - Residential Mortgage-Backed Securities					0	0	(
7899999. Total - Commercial Mortgage-Backed Securities					0	0	(
7999999. Total - Other Loan-Backed and Structured Securities					0	0	(
8099999. Total - SVO Identified Funds					0	0	(
8199999. Total - Affiliated Bank Loans					0	0	(
8299999. Total - Unaffiliated Bank Loans					0	0	(
8399999. Total Bonds					14.599.509	0	633
					14,000,000	·	000
8899999 - Total Cash Equivalents					14,599,509	0	633



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2020 OF THE Amerigroup Tennessee, Inc.

MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

	(INEL OF F	keinsurance)			
NAIC Group Code 0671	·	,		NAIC Comp	pany Code 1294
·	Individual Co	overage	Group Cov	verage	5
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	Total Cash
1. Premiums Collected		XXX		XXX	
2. Earned Premiums		XXX		XXX	xxx
3. Claims Paid		XXX		XXX	
4. Claims Incurred		XXX		XXX	xxx
Reinsurance Coverage and Low Income Cost Sharing - Claims Paid Net of Reimbursements Applied (a)	xxx		xxx		
6. Aggregate Policy Reserves - Change		XXX		XXX	XXX
7. Expenses Paid		XXX		XXX	
8. Expenses Incurred		XXX		XXX	XXX
9. Underwriting Gain or Loss	0	XXX	0	XXX	XXX
10. Cash Flow Result	XXX	XXX	XXX	XXX	

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

		3	1	F	6	7
Name of Debtor	2 1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
0199999 Total individuals	. co zujo	o. oo bayo	o. oo bayo	010. 00 Bujo		7101111100
Group Subscribers:						
0299997. Group subscriber subtotal	0	0	0	0	0	0
0299998. Premiums due and unpaid not individually listed						
0299999. Total group	0	0	0	0	0	0
0399999. Premiums due and unpaid from Medicare entities	17,830		2,035	55,130		74,995
0499999. Premiums due and unpaid from Medicaid entities	30,937,501					30,937,501
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	30,955,331	0	2,035	55,130	0	31,012,496

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Express Scripts, Inc.				1,548	1,548	
Ingenio RX	532,974					532,974
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed						
0199999. Total Pharmaceutical Rebate Receivables	532,974	0	0	1,548	1,548	532,974
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	3, 160, 150				3,160,150	
0299999. Total Claim Overpayment Receivables	3, 160, 150	0	0	0	3,160,150	0
0399998. Aggregate Loans and Advances to Providers Not Individually Listed						
0399999. Total Loans and Advances to Providers	0	0	0	0	0	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed						
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed						
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Receivables Not Individually Listed						
0699999. Total Other Receivables	0	0	0	0	0	0
0799999 Gross health care receivables	3,693,124	0	0	1,548	3,161,698	532,974

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1		2	3	4	5	6	Adm	nitted
Name of Affiliate							7	8
Name of Affiliate		1 - 30 Days	31 - 60 Days	61 -90 Days	Over 90 Days	Nonadmitted	Current	Non-Current
							0	
0199999 Total - Individually listed receivables	N						0	
0299999 Receivables not individually listed	\						0	
0399999 Total gross amounts receivable		9					0	

AMERIGROUP Tennessee, Inc. - East Region Report 2A

•			
For the	Period	Ending	06/30/2020

Member Months	Current Period 419,168	Year-To-Date Total 824,589	Previous Year Total 1,547,084
Revenues:	474 000 770 40	227 004 004 54	005 047 000
ГеnnCare Capitation nvestment	174,823,770.48 706,446	337,884,981.51 2,591,457	605,917,803 6,670,995
Other Revenues	3,465,104	5,904,547	(91,214
Total Revenues	178,995,320	346,380,986	612,497,584
Estimated Expenses: lospital and Medical (w/o Mental Health)			
Capitated Physician Services			-
ee-for Service Physician Services	29,361,379	66,115,518	117,743,978
patient Hospital Services	23,317,749	42,985,201	73,153,790
outpatient Hospital Services	6,143,881	11,765,903	24,399,157
mergency Room Services ental Services	4,647,323	11,933,153	27,660,657
ision Services	473,402	962,559	860,963
harmacy Services			
ome Health Services hiropractic Services	1,434,886	2,513,935	3,571,630
adiology Services	2,925,316	6,748,827	14,008,283
aboratory Services	1,206,366	3,230,679	7,223,159
urable Medical Equipment Services	874,671	1,836,729	3,393,423
ransportation Services utside Referrals	2,503,066	4,659,480	8,354,154
ccupancy, Depreciation and Amortization	-	-	
ther Medical and Hospital Services - Write-Ins	-	-	
Subtotal Medical and Hospital	72,888,040	152,751,985	280,369,195
ental Health and Substance Abuse Services			
patient Psychiatric Facility Services	2,669,755	5,139,405	11,809,107
patient Substance Abuse Treatment and Detox	667,438	1,284,851	2,952,277
utpatient Mental Health Services	4,627,321	8,377,114	20,232,562
utpatient Substance Abuse Treatment and Detox ousing/Residential Treatment	415,917 420,400	482,444 467,752	458,965 542,998
ousing/Residential Treatment pecialized Crisis Services	420,400 479,439	467,752 906,985	542,998 1,677,605
sychiatric Rehab and Support Services	927,407	1,762,462	4,325,630
ase Management	473,217	635,707	1,606,450
prensics	-	-	
ther Judicial harmacy	-	-	
ab Services	-	-	-
ransportation	-	-	-
ccupancy, Depreciation and Amortization	-	-	-
ther Mental Health and Substance Abuse Services CP and Specialist Services	-	-	
ennessee Health Link	2,005,351	4,968,543	8,733,528
ther Mental Health Services - Write-Ins		<u> </u>	
Subtotal MH&SAS	12,686,246	24,025,264	52,339,122
HOICES			-
ursing Facility Care	41,125,869	80,732,083	143,916,824
CBS Services	7,605,072	12,400,344	19,583,391
Subtotal CHOICES	48,730,941	93,132,427	163,500,215
alue Based Payouts			-
alue Based Recoveries			
ther Medical Incentive Pool and Withhold Adjustments			-
Subtatal Hagnital Madical MHSSAS CHOICES	124 205 229	260,000,677	406 209 524
Subtotal Hospital, Medical, MH&SAS, CHOICES	134,305,228	269,909,677	496,208,531
ESS:			
et Reinsurance Recoveries Incurred			-
opayments			-
ubrogation and Coordination of Benefits Subtotal Reinsurance, Copay, Subrogation			
Total Hospital, Medical, MH&SAS	134,305,228	269,909,677	496,208,531
dministration:		· ·	, ,
ompensation	9,213,334	18,078,386	33,807,952
irect and Allocated Admin expenses	400 440	297,549	946 400
arketing terest Expense	183,413	297,549	846,489 -
remium Tax Expense	10,057,226	19,479,802	34,708,718
ccupancy, Depreciation, and Amortization	800,944	1,632,708	2,667,173
ther Administration - Write-Ins	4,243,077	16,555,361	11,088,493
Total Administration Expenses Total Expenses	24,497,994 158,803,221	56,043,806 325,953,483	83,118,824 579,327,356
xtraordinary Item	130,003,221	-	<u> </u>
rovision for Income Tax	4,083,657	5,832,136	1,869,900
Net Income (Loss)	16,108,442	14,595,367	31,300,328
Irita Inc for Other Payanus			
rite-Ins for Other Revenues HIF Reimbursement	2,530,658	5,061,316	-
ASO for ECF	934,446	843,231	- (91,214
Total Other Revenues	3,465,104	5,904,547	(91,214
rite-Ins for Other Medical and Hospital			
			-
Total Other Medical and Hospital	-		
rite-Ins for Other MH & SS			
			-
		<u>-</u>	
Total Other MH & SS	-	-	
rite-Ins for Other Administration	E04.004	0.400.074	-
ACA Health Insurer Fee Outsourced Services	561,634 1,335,697	9,482,274 2,747,057	- 5,309,834
Postage, Express, and Telephone	172,146	389,112	965,804
Administrative Service Fee	1,972,539	1,972,539	-
Legal Fees	93,408	164,262	300,601
Travel	17,733 731,584	151,664 1,619,255	672,689 3 560 417
Auditing, Actuarial, and Other consulting Other Administration < \$175,000 YTD	731,584 (641,663)	1,619,255 29,198	3,560,417 279,148
	(041,003)		11,088,493
Total Other Administration	4,243,077	16,555,361	77 1122 711

For the Period E	Ending 06/30/2020

For the Period Ending 06/30/2020	Current Beried	Voor To Data Total	Provious Voer Total
Member Months	Current Period 498,463	Year-To-Date Total 980,328	Previous Year Total 1,899,649
Revenues: TennCare Capitation	185,812,509.09	366,929,360.34	688,812,106
Investment	755,397	2,826,480	8,387,589
Other Revenues Total Revenues	7,480,917 194,048,823	8,353,629 378,109,469	(2,294,390) 694,905,305
Estimated Expenses:	101,010,020	070,100,400	001,000,000
Hospital and Medical (w/o Mental Health) Capitated Physician Services	_	_	_
Fee-for Service Physician Services	27,572,609	68,928,544	154,687,007
Inpatient Hospital Services Outpatient Hospital Services	30,279,288 7,587,643	56,326,720 15,121,640	106,472,830 32,482,414
Emergency Room Services	4,430,528	12,005,716	31,145,765
Dental Services Vision Services	- 515,276	- 1,084,681	- 1,081,900
Pharmacy Services	-	-	-
Home Health Services Chiropractic Services	2,448,263	5,423,447	11,720,353
Radiology Services	2,324,640	5,940,354	14,015,473
Laboratory Services Durable Medical Equipment Services	1,309,241 1,340,711	3,806,983 2,674,817	10,017,789 5,442,824
Transportation Services	4,259,054	8,240,247	17,138,553
Outside Referrals Occupancy, Depreciation and Amortization	-	-	-
Other Medical and Hospital Services - Write-Ins		- -	
Subtotal Medical and Hospital	82,067,255	179,553,151	384,204,908
Mental Health and Substance Abuse Services			
Inpatient Psychiatric Facility Services	3,088,169	6,162,716 1,540,679	13,256,584
Inpatient Substance Abuse Treatment and Detox Outpatient Mental Health Services	772,042 6,009,078	1,540,679 10,676,922	3,314,146 22,337,204
Outpatient Substance Abuse Treatment and Detox	554,951	620,276	631,856
Housing/Residential Treatment Specialized Crisis Services	713,588 853,270	1,012,704 1,598,850	1,316,264 3,263,399
Psychiatric Rehab and Support Services	1,472,069	2,464,008	5,026,783
Case Management Forensics	766,276 -	1,125,023 -	1,905,911 -
Other Judicial	-	-	-
Pharmacy Lab Services	-	-	
Transportation	-	-	-
Occupancy, Depreciation and Amortization Other Mental Health and Substance Abuse Services	-	-	-
PCP and Specialist Services	-	-	-
Tennessee Health Link Other Mental Health Services - Write-Ins	2,124,991 -	6,489,113 -	16,231,633
Subtotal MH&SAS	16,354,434	31,690,291	67,283,780
CHOICES			
Nursing Facility Care	28,552,240	53,657,017	107,820,934
HCBS Services Subtotal CHOICES	9,293,434 37,845,674	16,233,939 69,890,956	28,809,713 136,630,648
			-
Value Based Payouts Value Based Recoveries			
Other Medical Incentive Pool and Withhold Adjustments			-
Subtotal Hospital, Medical, MH&SAS, CHOICES	136,267,362	281,134,397	588,119,336
LESS:			
Net Reinsurance Recoveries Incurred			-
Copayments Subrogation and Coordination of Benefits			-
Subtotal Reinsurance, Copay, Subrogation		-	
Total Hospital, Medical, MH&SAS Administration:	136,267,362	281,134,397	588,119,336
Compensation	10,956,228	21,492,826	41,512,446
Direct and Allocated Admin expenses	240,000	252.746	4 020 205
Marketing Interest Expense	218,089	353,746	1,039,395
Premium Tax Expense	11,959,680	23,158,926	42,618,488
Occupancy, Depreciation, and Amortization Other Administration - Write-Ins	952,479 5,048,327	1,941,075 19,682,150	3,274,996 13,615,450
Total Administration Expenses	29,134,802	66,628,723	102,060,775
Total Expenses Extraordinary Item	165,402,165	347,763,121	690,180,111
Provision for Income Tax	5,267,868 23,378,790	7,497,434 22,848,914	6,729,723
Net Income (Loss)	23,376,790	22,040,914	(2,004,528)
Write-Ins for Other Revenues	A :-:	0.001.000	
HIF Reimbursement ASO for ECF	3,167,101 4,313,816	6,334,203 2,019,426	- (2,294,390)
Total Other Revenues	7,480,917	8,353,629	(2,294,390)
Write-Ins for Other Medical and Hospital			-
Total Other Medical and Hospital Write-Ins for Other MH & SS	-	-	
mo to. other mit a oo			- -
Total Other MH & SS	-	<u>-</u>	
Write-Ins for Other Administration			
ACA Health Insurer Fee	670,510	11,273,178	0.542.222
Outsourced Services Postage, Express, and Telephone	1,588,411 204,727	3,265,890 462,603	6,519,892 1,185,901
Administrative Service Fee	2,345,090	2,345,090	-
Legal Fees Travel	111,072 21,124	195,286 180,309	369,105 825,988
Auditing, Actuarial, and Other consulting	870,036	1,925,082	4,371,800
Other Administration < \$175,000 YTD Total Other Administration	(762,643) 5,048,327	34,712 19,682,150	342,763 13,615,450
. Star Strict Administration	5,040,327	13,002,100	10,010,400

For the Period Ending 06/30/2020

For the Period Ending 06/30/2020 Member Months	Current Period 369,472	Year-To-Date Total 733,823	Previous Year Total
Revenues:		700,020	1,410,04
ennCare Capitation	142,766,144.58	275,552,051	509,749,519
nvestment	549,959	2,114,332	5,495,87
Other Revenues Total Revenues	410,988 143,727,092	4,983,741 282,650,124	2,385,60 517,631,00
stimated Expenses:	110,727,002	202,000,121	011,001,00
lospital and Medical (w/o Mental Health)			
Capitated Physician Services	24.940.246	EC 224 240	108,524,319
Fee-for Service Physician Services npatient Hospital Services	24,810,246 20,520,691	56,334,310 39,943,479	69,081,74
Dutpatient Hospital Services	4,679,541	8,670,385	20,798,12
Emergency Room Services	3,886,833	10,392,892	26,253,54
Dental Services	-	-	
/ision Services	321,156	764,018	854,12
Pharmacy Services Home Health Services	- 1,558,250	- 2,931,166	5,650,81
Chiropractic Services	1,338,230	2,931,100	3,030,01
Radiology Services	1,880,979	4,439,007	10,588,65
Laboratory Services	1,083,708	2,835,881	6,600,50
Durable Medical Equipment Services	611,539	1,276,544	2,709,00
ransportation Services Outside Referrals	3,029,799	6,288,543	12,082,27
Occupancy, Depreciation and Amortization	-	-	
Other Medical and Hospital Services - Write-Ins	-	-	
Subtotal Medical and Hospital	62,382,741	133,876,224	263,143,10
Accept Health and Only stones About Occident			
Mental Health and Substance Abuse Services	2 219 055	7 227 746	16 559 25
npatient Psychiatric Facility Services npatient Substance Abuse Treatment and Detox	3,218,055 804,513	7,237,746 1,809,436	16,558,25 4,139,56
Outpatient Mental Health Services	3,401,475	5,558,375	10,566,87
Dutpatient Substance Abuse Treatment and Detox	352,598	404,259	353,28
Housing/Residential Treatment	647,972	912,321	1,567,98
Specialized Crisis Services Psychiatric Rehab and Support Services	349,615 824,675	664,862 1,341,508	1,308,61 2,582,22
Case Management	462,150	620,025	2,562,22 1,142,73
Forensics	-	-	.,,
Other Judicial	-	-	
Pharmacy	-	-	
Lab Services	-	-	
Fransportation Occupancy, Depreciation and Amortization	•	-	
Other Mental Health and Substance Abuse Services	-	-	
PCP and Specialist Services	-	-	
Tennessee Health Link	1,442,381	2,620,186	4,337,82
Other Mental Health Services - Write-Ins	44 500 405	- 04 400 740	40.557.07
Subtotal MH&SAS	11,503,435	21,168,719	42,557,37
CHOICES			
Nursing Facility Care	29,424,041	58,250,954	108,052,14
HCBS Services	7,505,612	12,542,624	19,206,992
Subtotal CHOICES	36,929,653	70,793,578	127,259,13
/alue Based Payouts			
√alue Based Recoveries			
Other Medical Incentive Pool and Withhold Adjustments			
Subtotal Hospital, Medical, MH&SAS, CHOICES	110,815,829	225,838,521	432,959,61
Subtotal Hospital, Medical, MH&SAS, CHOICES	110,013,029	223,030,321	432,939,01
LESS:			
Net Reinsurance Recoveries Incurred			
Copayments			
Subrogation and Coordination of Benefits Subtotal Reinsurance, Copay, Subrogation			
Total Hospital, Medical, MH&SAS	110,815,829	225,838,521	432,959,61
Administration:	, ,	, ,	
Compensation	8,121,418	16,088,422	30,889,80
Direct and Allocated Admin expenses	400.000	204 722	770.40
Marketing nterest Expense	162,222	264,796	773,42
Premium Tax Expense	8,867,529	17,335,578	31,712,82
Occupancy, Depreciation, and Amortization	705,485	1,452,989	2,436,95
Other Administration - Write-Ins	3,668,018	14,733,043	10,131,38
Total Administration Expenses	21,524,672	49,874,827	75,944,39
Total Expenses Extraordinary Item	132,340,500	275,713,348	508,904,01
Provision for Income Tax	3,295,134	4,711,620	549,74
Net Income (Loss)	8,091,458	2,225,156	8,177,24
Write-Ins for Other Revenues	6 16 - 11-		
HIF Reimbursement ASO for ECF	2,187,149 (1,776,160)	4,374,298 609,443	2,385,60
Total Other Revenues	410,988	4,983,741	2,385,60
Vrite-Ins for Other Medical and Hospital	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,000,111	_,300,00
· · · · ·			
	-	-	
Total Other Medical and Hospital	-	-	
Write-Ins for Other MH & SS			
	-	-	
Total Other MH & SS		-	
Vrite-Ins for Other Administration			
ACA Health Insurer Fee	421,559	8,438,520	
Outsourced Services	1,176,290	2,444,677	4,851,51
Postage, Express, and Telephone	151,294 1,755,414	346,280 1 755 414	882,44
Administrative Service Fee Legal Fees	1,755,414 82,505	1,755,414 146,181	274,65
Travel	62,505 14,606	134,970	614,62
Auditing, Actuarial, and Other consulting	643,269	1,441,017	3,253,09
Other Administration < \$175,000 YTD	(576,918)	25,984	255,05
Total Other Administration	3,668,018	14,733,043	10,131,386