

Cause No. _____

TEXAS DEPARTMENT OF INSURANCE, Plaintiff,	§ § § § § § § § § §	IN THE DISTRICT COURT OF TRAVIS COUNTY, TEXAS 345TH, DISTRICT COURT ____ JUDICIAL DISTRICT
v.		
FRIDAY HEALTH INSURANCE COMPANY, INC. Defendant.		

**PLAINTIFF'S ORIGINAL PETITION,
APPLICATION FOR AGREED ORDER APPOINTING LIQUIDATOR,
AND REQUEST FOR INJUNCTIVE RELIEF**

TO THE HONORABLE JUDGE:

^{345TH, DISTRICT COURT}
The Texas Department of Insurance (Plaintiff), through the Office of the Attorney General of Texas, complains of Defendant Friday Health Insurance Company, Inc. (Defendant) as follows:

I. DISCOVERY LEVEL

1.1 Plaintiff intends to conduct discovery under Level 2 of Texas Rules of Civil Procedure 190.

II. NATURE OF SUIT

2.1 This suit is brought at the request of the Texas Commissioner of Insurance (Commissioner) under Texas Insurance Code¹ Chapter 443, the Insurer Receivership Act. Specifically, Plaintiff seeks an order appointing the Commissioner as Liquidator of Defendant under Section 443.151 *et seq.*

¹ All statutory references are to the Texas Insurance Code unless otherwise indicated.

2.2 Plaintiff further seeks a Permanent Injunction under Section 443.008(a), restraining Defendant from conducting business, except as directed by the Liquidator, and restraining other parties from taking any actions against Defendant or its property.

2.3 Plaintiff further seeks to recover from Defendant all fees, taxes, fines, penalties, and forfeitures provided by law, subject to the provisions of the Insurer Receivership Act.

2.4 Plaintiff further seeks to recover from Defendant reasonable attorneys' fees and court costs incurred in this action and all of the fees, taxes, fines, penalties and forfeitures provided by law for the acts complained of herein.

III. DEFENDANT

3.1 Defendant is an insurer doing business in the state of Texas and is subject to Chapter 443. Defendant is a "covered person," as defined in Section 443.003.

3.2 Defendant has waived citation and service of process and has consented to the entry of an order of liquidation and permanent injunction under Section 443.057(20).

IV. JURISDICTION AND VENUE

4.1 This Court has jurisdiction over this action under Section 443.005 and the Texas Constitution, Article IV, Section 22.

4.2 Venue is proper in Travis County, Texas, under Sections 443.005(g) and 443.051.

V. FACTS

5.1 Defendant was organized as Friday Health Insurance Company, Inc. and licensed on May 29, 2020, under Chapters 801 and 841 as a domestic insurance company to write life, health, and accident insurance in Texas. Defendant began issuing policies of insurance in 2021.

5.2 Defendant is a stock company and is wholly owned by Friday Health Plans Management Services Company, Inc., a Colorado corporation, which is wholly owned by Friday Health Plans, Inc., a Delaware corporation. Defendant affiliated insurance companies are licensed and operating in five other states.² A copy of a Friday-produced organizational chart is included at page 68 of Exhibit 1, Defendant's 2022 Annual Financial Statement.

5.3 The Patient Protection and Affordable Care Act (ACA), 42 U.S.C. 18001 *et seq.*, was passed by Congress in 2010 with the goal of providing affordable healthcare to uninsured and underinsured individuals and small businesses. The ACA established a health insurance exchange (Exchange) where qualified health insurers could list their health plans. Consumers can access the Exchange to shop and compare among the available health plan listings.

5.4 Defendant participated on the Exchange in 2021 and 2022 in Texas. Defendant is not authorized to participate on the Exchange in 2023 in Texas or New Mexico.

² Colorado, Georgia, Nevada, North Carolina, and Oklahoma.

5.5 Exhibit 1 is a true and correct copy of Defendant's 2022 Annual Financial Statement, submitted to the Texas Department of Insurance for the period ending December 31, 2022. Exhibit 1 reflects that Defendant's capital and surplus as of December 31, 2022, was (\$244,409,229). (Exhibit 1, page 3, line 33). Section 841.054 requires Defendant to have capital stock in an amount of at least \$700,000 and surplus in an amount of at least \$700,000 for a total minimum capital and surplus of \$1.4 million.

5.6 Exhibit 1 further reflects that Defendant had earned premiums of \$219,568,063, (*See* page 4, line 2), and a net loss from operations of (\$32,591,289) (page 4, line 30). As of December 31, 2022, Defendant's total liabilities were \$799,147,794, (page 3, line 24), exceeding its admitted assets of \$554,738,564. (page 2 line 28).

5.7 As of December 31, 2022, Defendant had a total enrollment of 304,360. (Exhibit 1, page 17, line 7).

5.8 On March 14, 2023, a unanimous board of directors of Friday signed a "Consent to Order of Liquidation," consenting to placing Friday into liquidation and appointing the Commissioner as liquidator. *See* Exhibit 2, page 3, no. 5.

VI. GROUNDS FOR ORDER OF LIQUIDATION

6.1 The following grounds exist to place Defendant into liquidation, pursuant to Section 443.057:

- (a) Grounds exist under Section 443.057(1), as Defendant is impaired, as defined in Section 443.004(a)(12). Defendant does not have "admitted

assets at least equal to all its liabilities together with the minimum surplus required to be maintained under this code.”

- (b) Grounds exist under Section 443.057(2), as Defendant is insolvent as defined in Section 443.004(a)(13). Defendant does not have admitted assets equal to its liabilities and has total adjusted capital less than that required under Chapter 841.
- (c) Grounds exist under Section 443.057(20), as Defendant’s board of directors has consented to an order of liquidation. *See Exhibit 2.*

6.2 Pursuant to Section 443.058, “[i]f any of the grounds provided in Section 443.057 are established, the receivership court shall grant the petition and issue the order of ... liquidation requested in the petition.”

VII. APPOINTMENT OF LIQUIDATOR

7.1 Section 443.151(a) provides that an order of liquidation must appoint the Commissioner as the Liquidator. Pursuant to Section 443.151 *et seq*, Plaintiff requests that this Court issue an order appointing the Commissioner as Liquidator of Defendant and grant her all powers under the statutes and the common law of the state of Texas, including but not limited to Section 443.151 *et seq*, to conduct the business of the Defendant, and take any other actions as she deems necessary. Pursuant to Section 443.008(m), Plaintiff further requests that the Liquidator not be required to file a bond.

7.2 Plaintiff further requests that, pursuant to Section 443.151(a), this Court issue an order finding that all of Defendant’s property of any kind or nature,

wherever situated, whether real, personal, or mixed, and whether held in Defendant's name or for Defendant's benefit, including but not limited to cash, accounts, funds, stocks, bonds, statutory deposits (including deposits made by Defendant with any agency of a state or the federal government), trust funds, letters of credit, safe deposit boxes, notes, books, records, documents, furniture, equipment, real estate, retainages and retainers, and rights or causes of actions of any kind, including, but not limited to, accounts receivables, contract rights, premiums, insurance and reinsurance proceeds, and all licenses held by Defendant, be vested in the Liquidator.

VIII. STAY OF PROCEEDINGS

8.1 Pursuant to Section 443.008(c), the commencement of this proceeding operates as a stay against the commencement or continuation of a judicial, administrative, or other action or proceeding or process against Defendant or its property. Further, pursuant to Section 443.008(d), the commencement of this proceeding operates as a stay with respect to certain actions against insureds of Defendant for 90 days after the date of the order appointing the Liquidator, or such further time ordered by this Court. Plaintiff requests that this Court enter any additional stays under Section 443.008(a) as may be necessary.

IX. INJUNCTIVE RELIEF

9.1 This Court may grant injunctive relief as necessary or appropriate to carry out the provisions of the Insurer Receivership Act pursuant to Section 443.008(a). Plaintiff requests that this Court enter a Permanent Injunction pursuant to Section 443.008(a) to carry out the provisions of Chapter 443. Section 443.052(c)

provides that when a petition seeking receivership prays for injunctive relief, the petition must be verified but does not need to plead or prove irreparable harm or inadequate remedy at law.

9.2 Plaintiff would show that, unless restrained by this Court, Defendant will continue to operate its business in a manner that would not be in the best interest of its policyholders, creditors, or the public. Plaintiff therefore requests that this Court enter an order enjoining Defendant's current and former officers, directors, underwriters, managers and employees, including, but not limited to, Elizabeth Bierbower, Stacy Knowlton, Rhonda Bagby, Salvatore Gentile, David Pinkert, Eduardo Cruz, Theodore Lundberg, Justin Yang, Carlos Ferrer, and Daniel O'Connell; owners and affiliates, including but not limited to, Vestar Managers VII, LLC, Peloton Equity GP, LLC, Vestar Capital Partners LLC, Vestar Associates VII, LP, Peloton Equity II, L.P., Peloton FHP, LLC, New Biscayne Group, SA, FHP Investment LP, Friday Health Plans, Inc., Friday Health Plans Management Services Company, Inc., and Friday Health Plans of Colorado Inc.; local recording agents, managing general agents, agents, third party administrators, representatives, associates, servants, adjusters, attorneys and accountants, including but not limited to, Mitchell, Williams, Selig, Gates & Woodyard, PLLC, their other lawyers and those acting in concert with them from conducting business on behalf of Defendant, except as directed by the Liquidator, and from wasting, transferring, selling, assigning, canceling, concealing, claiming, hypothecating, or disposing of, in any manner, any of Defendant's property. Plaintiff further requests that this Court

order Defendant and Defendant's agents to cooperate with the Liquidator as required by Section 443.010.

9.3 Plaintiff would further show that all financial institutions and depositories, including, but not limited to, BOK Financial, BOKF, NA, Wells Fargo Bank, N.A., and any other parties that receive actual notice, should be restrained from taking unauthorized actions in connection with Defendant's property. Plaintiff therefore requests that this Court issue an order pursuant to Section 443.008(a) enjoining any parties from releasing, transferring, concealing, withdrawing, allowing to be withdrawn, or affecting, in any manner, any of Defendant's property, including any fiduciary accounts held for the benefit of Defendant, as further described herein, or other assets to the credit of Defendant on deposit with them or in their possession, except as authorized by the Liquidator or her designees, and that such parties be ordered to produce and deliver to the Liquidator or her designees such assets, money, deposits, or other items they have in their custody.

9.4 Plaintiff would further show that in order to avoid the dissipation or loss of Defendant's assets or records and prevent any creditors or claimants from obtaining any preferences in violation of the Insurer Receivership Act, an injunction should be issued against any and all parties asserting claims or causes of action of any kind against Defendant. Plaintiff therefore requests that this Court enjoin any parties from commencing or prosecuting any action against the Liquidator or Defendant, including, but not limited to, arbitration, administrative proceedings, lawsuits or appeals, and from obtaining any preference, judgment, attachment,

garnishment, lien or levy against the Liquidator, Defendant or Defendant's property, except by doing so as permitted by the Insurer Receivership Act. Plaintiff further requests that this Court order that the United States Postmaster deliver to the Liquidator any items addressed to Defendant.

X. OTHER RELIEF

10.1 Plaintiff asks that this Court award it all fees, taxes, fines, penalties, and forfeitures allowed by law, and all investigative costs, court costs, and reasonable attorneys' fees, subject to the provisions of Chapter 443.

10.2 Plaintiff asks that this Court appoint a master under Texas Rule of Civil Procedure 171 to make recommendations to this Court about matters requiring this Court's approval under Insurer Receivership Act.

10.3 Section 443.001(b) provides that the Insurer Receivership Act may not be interpreted to limit the powers granted to the Commissioner under other provisions of law. Plaintiff requests that this Court find that an order granting relief requested in this petition shall not be construed as a limitation of the Commissioner's powers granted under such provisions.

PRAYER

Plaintiff prays:

1. that the Court grant the Application and the relief requested;
2. that this court enter a Permanent Injunction enjoining Defendant and Defendant's agents, financial institutions and depositories, and all other persons from taking any action in connection with Defendant's business and property, including any fiduciary accounts held for the benefit of Defendant, except as directed by the Liquidator, and from taking any action against Defendant or the Liquidator, except as permitted by the Insurer Receivership Act;
3. that the Court immediately appoint the Commissioner as Liquidator to conduct Defendant's business and take charge of Defendant's property as described herein, and that the Liquidator be given all equitable powers under the statute and the common law of the state of Texas that authorize the appointment of a receiver;
4. that the Court vest the Liquidator with title to Defendant's property;
5. that the Court appoint a master under Texas Rule of Civil Procedure 171 to make recommendations to the Court about matters requiring the Court's approval under the Insurer Receivership Act;
5. that the Office of the Attorney General be awarded all costs incurred in this proceeding, including, but not limited to, reasonable attorneys' fees, investigative costs, and court costs, subject to the provisions of Insurer Receivership Act;
6. that no bond be required of the Commissioner or the Liquidator; and

7. for any and all further relief, both general and specific, in law and in equity, to which the Plaintiff may be entitled.

Respectfully submitted,

KEN PAXTON
Attorney General of Texas

BRENT WEBSTER
First Assistant Attorney General

GRANT DORFMAN
Deputy First Assistant Attorney General

SHAWN COWLES
Deputy Attorney General for Civil Litigation

CHRISTOPHER D. HILTON
Chief, General Litigation Division

/s/ Zachary L. Rhines
Zachary L. Rhines
Assistant Attorney General
State Bar No. 24116957
General Litigation Division
P.O. Box 12548, Mail Stop 01901
Austin, TX 78711-2548
Tel: (512) 463-9911
Fax: (512) 477-2348
Zachary.Rhines@oag.texas.gov

COUNSEL FOR PLAINTIFF
TEXAS DEPARTMENT OF INSURANCE

VERIFICATION AND AFFIDAVIT

STATE OF TEXAS

§
§
§

COUNTY OF TRAVIS

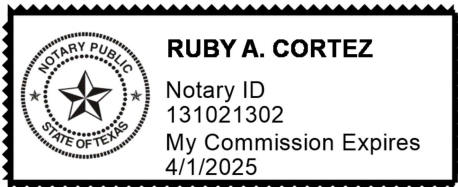
BEFORE ME, the undersigned authority, on this day personally appeared Jamie Walker, the Deputy Commissioner, Financial Regulation Division, for the Texas Department of Insurance, who, after by me being duly sworn, upon oath deposed and said:

“I am over the age of eighteen, have never been convicted of a felony, and am competent to make this affidavit. I am the Deputy Commissioner, Financial Regulation Division, for the Texas Department of Insurance. I have carefully read the allegations contained in the foregoing *Plaintiff’s Original Petition, Application for Agreed Order Appointing Liquidator, and Request for Injunctive Relief* and state that each and every one of the allegations of facts is true and correct and is made on my personal knowledge.”

DocuSigned by:
Jamie Walker
810ADE6B4BD8455...

Jamie Walker

SUBSCRIBED AND SWORN to before me on March, 16, 2023. This instrument was acknowledged before me by means of an interactive two-way audio and video communication. This notarial act was an online notarization.



DocuSigned by:
Ruby A. Cortez
19B014C2E0474AA...

Notary Public in and for the
State of Texas

EXHIBIT 1



ANNUAL STATEMENT
 FOR THE YEAR ENDED DECEMBER 31, 2022
 OF THE CONDITION AND AFFAIRS OF THE
FRIDAY HEALTH INSURANCE COMPANY, INC.

NAIC Group Code	4976	4976	NAIC Company Code	16803	Employer's ID Number	81-2132766
	<i>(Dates: (M/P)Year)</i>					
Organized under the Laws of	TX		State of Domicile or Port of Entry	TX		
Country of Domicile	US					
Licensed as business type:	Life, Accident & Health		Is HMO Federally Qualified?	NO		
Incorporated/Organized	05/04/2020		Commenced Business	05/04/2020		
Statutory Home Office	1999 Bryan Street, Suite 900		Dallas, TX, US 75201			
Main Administrative Office	700 Main Street		719-589-3696			
	Alamosa, CO, US 81101		<i>(Telephone)</i>			
Mail Address	700 Main Street		719-589-3696			
Primary Location of Books and Records	700 Main Street		<i>(Telephone)</i>			
	Alamosa, CO, US 81101					
Internet Website Address	www.fridayhealthplans.com		303-518-2482			
Statutory Statement Contact	Tiffany Cook		<i>(Telephone)</i>			
	Tiffany Cook@fridayhealthplans.com		719-589-1901			
	<i>(E-Mail)</i>		<i>(Fax)</i>			

OFFICERS

Elizabeth Bierbower#, Chief Executive Officer
 Stacy Knowlton#, Secretary
 Rhonda Bagby#, Chief Financial Officer

DIRECTORS OR TRUSTEES

Rhonda Bagby#
 Craig Domeracki#
 Elizabeth Bierbower#
 Tracy Faign#

State of _____
 County of _____

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

x Elizabeth Bierbower Elizabeth Bierbower
 Chief Executive Officer
 x Stacy Knowlton Stacy Knowlton
 Secretary
 x Rhonda Bagby Rhonda Bagby
 Chief Financial Officer

Subscribed and sworn to before me
 this 28th day of
February, 2023
 x Deanna Vermillion

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

DEANNA VERMILLION
 NOTARY PUBLIC
 STATE OF COLORADO
 NOTARY ID 20204015645
 MY COMMISSION EXPIRES MAY 4, 2024

ANNUAL STATEMENT

of the

FRIDAY HEALTH INSURANCE COMPANY, INC.

of

DALLAS

in the

STATE OF TEXAS

to the

INSURANCE DEPARTMENT

of the

state of

TEXAS

For the Year Ended
December 31, 2022

2022

2022



ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022 OF THE CONDITION AND AFFAIRS OF THE **FRIDAY HEALTH INSURANCE COMPANY, INC.**

NAIC Group Code 4976,..... 4976..... NAIC Company Code 16803..... Employer's ID Number 81-2132766.....
(Current) (Prior)

Organized under the Laws of TX State of Domicile or Port of Entry TX
Country of Domicile US
Licensed as business type: Life, Accident & Health Is HMO Federally Qualified? NO
Incorporated/Organized 05/04/2020 Commenced Business 05/04/2020
Statutory Home Office 1999 Bryan Street, Suite 900 Dallas, TX, US 75201
Main Administrative Office 700 Main Street
Alamosa, CO, US 81101 719-589-3696
(Telephone)
Mail Address 700 Main Street Alamosa, CO, US 81101
Primary Location of Books and
Records 700 Main Street
Alamosa, CO, US 81101 719-589-3696
(Telephone)
Internet Website Address www.fridayhealthplans.com
Statutory Statement Contact Tiffany Cook 303-518-2482
(Telephone)
Tiffany.Cook@fridayhealthplans.com 719-589-4901
(E-Mail) (Fax)

OFFICERS

..... Elizabeth Bierbower#, Chief Executive Officer Rhonda Bagby#, Chief Financial Officer
..... Stacy Knowlton#, Secretary

DIRECTORS OR TRUSTEES

..... Rhonda Bagby# Elizabeth Bierbower#
..... Craig Domeracki# Tracy Faigin#

State of
County of SS

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

x Elizabeth Bierbower Chief Executive Officer	x Stacy Knowlton Secretary	x Rhonda Bagby Chief Financial Officer
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Subscribed and sworn to before me
this _____ day of

x

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

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	3,897,863		3,897,863	
2. Stocks (Schedule D):				
2.1 Preferred stocks.....				
2.2 Common stocks.....				
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....				
3.2 Other than first liens.....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances).....				
4.2 Properties held for the production of income (less \$ encumbrances).....				
4.3 Properties held for sale (less \$ encumbrances).....				
5. Cash (\$ 199,728,994, Schedule E - Part 1), cash equivalents (\$, Schedule E - Part 2) and short-term investments (\$ 82,161,376, Schedule DA).....	281,890,370		281,890,370	69,182,543
6. Contract loans (including \$ premium notes).....				
7. Derivatives (Schedule DB).....				
8. Other invested assets (Schedule BA).....				
9. Receivables for securities.....				
10. Securities lending reinvested collateral assets (Schedule DL).....				
11. Aggregate write-ins for invested assets.....				
12. Subtotals, cash and invested assets (Lines 1 to 11).....	285,788,233		285,788,233	69,182,543
13. Title plants less \$ charged off (for Title insurers only).....				
14. Investment income due and accrued.....	1,043,750		1,043,750	
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	45,654,359	14,009,508	31,644,851	6,623,529
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$).....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....				15,939,380
16.2 Funds held by or deposited with reinsured companies.....	117,438,426		117,438,426	30,387,652
16.3 Other amounts receivable under reinsurance contracts.....	79,839,545		79,839,545	
17. Amounts receivable relating to uninsured plans.....				
18.1 Current federal and foreign income tax recoverable and interest thereon.....				
18.2 Net deferred tax asset.....				
19. Guaranty funds receivable or on deposit.....				
20. Electronic data processing equipment and software.....				
21. Furniture and equipment, including health care delivery assets (\$).....				
22. Net adjustment in assets and liabilities due to foreign exchange rates.....				
23. Receivables from parent, subsidiaries and affiliates.....	21,734,755		21,734,755	38,594,761
24. Health care (\$ 17,249,004) and other amounts receivable.....	55,945,424	38,696,420	17,249,004	7,714,022
25. Aggregate write-ins for other-than-invested assets.....				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	607,444,492	52,705,928	554,738,564	168,441,887
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27).....	607,444,492	52,705,928	554,738,564	168,441,887
Details of Write-Ins				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....				
2501.....				
2502.....				
2503.....				
2598. Summary of remaining write-ins for Line 25 from overflow page.....				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....				

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 106,820,316 reinsurance ceded)	13,276	27,356,604	27,369,880	10,649,344
2. Accrued medical incentive pool and bonus amounts				
3. Unpaid claims adjustment expenses	2,481,339		2,481,339	1,700,302
4. Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act	556,197,275		556,197,275	98,309,000
5. Aggregate life policy reserves				
6. Property/casualty unearned premium reserves				
7. Aggregate health claim reserves				
8. Premiums received in advance		1,972,773	1,972,773	6,418,492
9. General expenses due or accrued		31,913,684	31,913,684	4,015,881
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses))				
10.2 Net deferred tax liability				
11. Ceded reinsurance premiums payable				
12. Amounts withheld or retained for the account of others				
13. Remittances and items not allocated				
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)				
15. Amounts due to parent, subsidiaries and affiliates		470,529	470,529	
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)		117,438,426	117,438,426	30,387,652
20. Reinsurance in unauthorized and certified (\$) companies		61,303,888	61,303,888	
21. Net adjustments in assets and liabilities due to foreign exchange rates				
22. Liability for amounts held under uninsured plans				
23. Aggregate write-ins for other liabilities (including \$ current)				
24. Total liabilities (Lines 1 to 23)	558,691,890	240,455,904	799,147,794	151,480,671
25. Aggregate write-ins for special surplus funds	XXX	XXX		
26. Common capital stock	XXX	XXX	700,000	700,000
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	180,000,000	85,000,000
29. Surplus notes	XXX	XXX	1,800,000	1,800,000
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX		
31. Unassigned funds (surplus)	XXX	XXX	(426,909,229)	(70,538,784)
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 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	(244,409,229)	16,961,216
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	554,738,565	168,441,887
Details of Write-Ins				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months	XXX	3,145,689	552,840
2. Net premium income (including \$ non-health premium income)	XXX	219,568,063	65,737,454
3. Change in unearned premium reserves and reserve for rate credits	XXX	6,081,069	
4. Fee-for-service (net of \$ medical expenses)	XXX		
5. Risk revenue	XXX		
6. Aggregate write-ins for other health care related revenues	XXX		
7. Aggregate write-ins for other non-health revenues	XXX		
8. Total revenues (Lines 2 to 7)	XXX	225,649,132	65,737,454
Hospital and Medical:			
9. Hospital/medical benefits		812,355,403	120,423,591
10. Other professional services			
11. Outside referrals			
12. Emergency room and out-of-area			
13. Prescription drugs		133,091,857	18,635,303
14. Aggregate write-ins for other hospital and medical			
15. Incentive pool, withhold adjustments and bonus amounts			
16. Subtotal (Lines 9 to 15)		945,447,260	139,058,894
Less:			
17. Net reinsurance recoveries		775,704,808	86,639,166
18. Total hospital and medical (Lines 16 minus 17)		169,742,452	52,419,728
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$ 30,821,948 cost containment expenses		40,421,071	11,820,951
21. General administrative expenses		218,012,139	63,596,494
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		(169,360,000)	
23. Total underwriting deductions (Lines 18 through 22)		258,815,662	127,837,173
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(33,166,530)	(62,099,719)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		1,115,503	
26. Net realized capital gains (losses) less capital gains tax of \$			
27. Net investment gains (losses) (Lines 25 plus 26)		1,115,503	
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)]			
29. Aggregate write-ins for other income or expenses		(540,262)	
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(32,591,289)	(62,099,719)
31. Federal and foreign income taxes incurred	XXX		
32. Net income (loss) (Lines 30 minus 31)	XXX	(32,591,289)	(62,099,719)
Details of Write-Ins			
0601.	XXX		
0602.	XXX		
0603.	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX		
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX		
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX		
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX		
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			
2901. Miscellaneous income		(540,262)	
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page			
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		(540,262)	

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

	1	2
CAPITAL & SURPLUS ACCOUNT	Current Year	Prior Year
33. Capital and surplus prior reporting year.....	16,961,218	5,291,107
34. Net income or (loss) from Line 32.....	(32,591,289)	(62,099,719)
35. Change in valuation basis of aggregate policy and claim reserves.....		
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....		
37. Change in net unrealized foreign exchange capital gain or (loss).....		
38. Change in net deferred income tax.....		
39. Change in nonadmitted assets.....	(48,975,758)	(3,730,170)
40. Change in unauthorized and certified reinsurance.....	(61,303,888)	
41. Change in treasury stock.....		
42. Change in surplus notes.....		
43. Cumulative effect of changes in accounting principles.....		
44. Capital Changes:		
44.1 Paid in.....		
44.2 Transferred from surplus (Stock Dividend).....		
44.3 Transferred to surplus.....		
45. Surplus adjustments:		
45.1 Paid in.....	95,000,000	77,500,000
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.....	(213,499,508)	
48. Net change in capital and surplus (Lines 34 to 47).....	(261,370,443)	11,670,111
49. Capital and surplus end of reporting year (Line 33 plus 48).....	(244,409,225)	16,961,218
Details of Write-Ins		
4701. Prior Period Audit adjustments.....	(213,499,508)	
4702.....		
4703.....		
4798. Summary of remaining write-ins for Line 47 from overflow page.....		
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above).....	(213,499,508)	

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	811,147,552	160,289,355
2. Net investment income	53,714	
3. Miscellaneous income	(166,890,319)	
4. Total (Lines 1 to 3)	644,310,947	160,289,355
5. Benefit and loss related payments	183,455,732	67,281,992
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	230,294,632	70,064,037
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10. Total (Lines 5 through 9)	413,750,364	137,346,029
11. Net cash from operations (Line 4 minus Line 10)	230,560,583	22,943,326
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds		
12.2 Stocks		
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13. Cost of investments acquired (long-term only):		
13.1 Bonds	3,879,824	
13.2 Stocks		
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	3,879,824	
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(3,879,824)	
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock	95,000,000	77,500,000
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(108,972,929)	(37,741,300)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(13,972,929)	39,758,700
Reconciliation of Cash, Cash Equivalents and Short-Term Investments		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	212,707,830	62,702,026
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	69,182,545	6,480,519
19.2 End of year (Line 18 plus Line 19.1)	281,890,375	69,182,545

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

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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non- Health
1. Net premium income	219,568,063	219,568,063								
2. Change in unearned premium reserves and reserve for rate credit	6,081,069	6,081,069								
3. Fee-for-service (net of \$ medical expenses)										XXX
4. Risk revenue										XXX
5. Aggregate write-ins for other health care related revenues										XXX
6. Aggregate write-ins for other non-health care related revenues		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Lines 1 to 6)	225,649,132	225,649,132								
8. Hospital/medical benefits	812,355,403	812,355,403								XXX
9. Other professional services										XXX
10. Outside referrals										XXX
11. Emergency room and out-of-area										XXX
12. Prescription drugs	133,091,857	133,091,857								XXX
13. Aggregate write-ins for other hospital and medical										XXX
14. Incentive pool, withhold adjustments and bonus amounts										XXX
15. Subtotal (Lines 8 to 14)	945,447,260	945,447,260								XXX
16. Net reinsurance recoveries	775,704,808	775,704,808								XXX
17. Total hospital and medical (Lines 15 minus 16)	169,742,452	169,742,452								XXX
18. Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ 30,821,948 cost containment expenses	40,421,072	40,421,072								
20. General administrative expenses	218,012,139	218,012,139								
21. Increase in reserves for accident and health contracts	(169,360,000)	(169,360,000)								XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	258,815,663	258,815,663								
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(33,166,531)	(33,166,531)								
Details of Write-Ins										
0501.										XXX
0502.										XXX
0503.										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page										XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)										XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1301.										XXX
1302.										XXX
1303.										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page										XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)										XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 – PREMIUMS

Line of Business		1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1+2-3)
1.	Comprehensive (hospital and medical) individual.....	984,531,215		765,062,190	219,469,025
2.	Comprehensive (hospital and medical) group.....	477,795		378,757	99,038
3.	Medicare Supplement.....				
4.	Dental only.....				
5.	Vision only.....				
6.	Federal Employees Health Benefits Plan.....				
7.	Title XVIII – Medicare.....				
8.	Title XIX – Medicaid.....				
9.	Credit A&H.....				
10.	Disability Income.....				
11.	Long-Term Care.....				
12.	Other health.....				
13.	Health subtotal (Lines 1 through 12).....	985,009,010		765,440,947	219,568,063
14.	Life.....				
15.	Property/casualty.....				
16.	Totals (Lines 13 to 15).....	985,009,010		765,440,947	219,568,063

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 – CLAIMS INCURRED DURING THE YEAR

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Dental Only	6 Vision Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Payments during the year:														
1.1 Direct	886,178,101	885,751,031	427,070											
1.2 Reinsurance assumed														
1.3 Reinsurance ceded	702,722,368	702,386,469	335,899											
1.4 Net	183,455,733	183,364,562	91,171											
2. Paid medical incentive pools and bonuses														
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	134,190,196	134,125,105	65,091											
3.2 Reinsurance assumed														
3.3 Reinsurance ceded	106,820,316	106,768,501	51,815											
3.4 Net	27,369,880	27,356,604	13,276											
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct														
4.2 Reinsurance assumed														
4.3 Reinsurance ceded														
4.4 Net														
5. Accrued medical incentive pools and bonuses, current year														
6. Net health care receivables (a)	46,373,196	46,349,297	23,899											
7. Amounts recoverable from reinsurers December 31, current year														
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	28,547,841	28,538,185	9,656											
8.2 Reinsurance assumed														
8.3 Reinsurance ceded	17,898,496	17,892,442	6,054											
8.4 Net	10,649,345	10,645,743	3,602											
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct														
9.2 Reinsurance assumed														
9.3 Reinsurance ceded														
9.4 Net														
10. Accrued medical incentive pools and bonuses, prior year														
11. Amounts recoverable from reinsurers December 31, prior year	15,939,380	15,933,989	5,391											
12. Incurred benefits:														
12.1 Direct	945,447,260	944,988,654	458,606											
12.2 Reinsurance assumed														
12.3 Reinsurance ceded	775,704,808	775,328,539	376,269											
12.4 Net	169,742,452	169,660,115	82,337											
13. Incurred medical incentive pools and bonuses														

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A – CLAIMS LIABILITY END OF CURRENT YEAR

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Dental Only	6 Vision Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Reported in Process of Adjustment:														
1.1 Direct	67,045,239	67,012,718	32,521											
1.2 Reinsurance assumed														
1.3 Reinsurance ceded														
1.4 Net	67,045,239	67,012,718	32,521											
2. Incurred but Unreported:														
2.1 Direct	67,144,957	67,112,387	32,570											
2.2 Reinsurance assumed														
2.3 Reinsurance ceded	106,820,316	106,768,501	51,815											
2.4 Net	(39,675,359)	(39,656,114)	(19,245)											
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct														
3.2 Reinsurance assumed														
3.3 Reinsurance ceded														
3.4 Net														
4. TOTALS:														
4.1 Direct	134,190,196	134,125,105	65,091											
4.2 Reinsurance assumed														
4.3 Reinsurance ceded	106,820,316	106,768,501	51,815											
4.4 Net	27,369,880	27,356,604	13,276											

UNDERWRITING AND INVESTMENT EXHIBIT
 PART 2B – ANALYSIS OF CLAIMS UNPAID – PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual.....	20,030,954	179,267,439	94,000	27,262,604	20,124,954	10,645,743
2. Comprehensive (hospital and medical) group.....	9,721	86,999	46	13,231	9,767	3,602
3. Medicare Supplement.....						
4. Dental Only.....						
5. Vision Only.....						
6. Federal Employees Health Benefits Plan.....						
7. Title XVIII – Medicare.....						
8. Title XIX – Medicaid.....						
9. Credit A&H.....						
10. Disability Income.....						
11. Long-Term Care.....						
12. Other health.....						
13. Health subtotal (Lines 1 to 12).....	20,040,675	179,354,438	94,046	27,275,835	20,134,721	10,649,345
14. Health care receivables (a).....		55,945,424				9,572,228
15. Other non-health.....						
16. Medical incentive pools and bonus amounts.....						
17. Totals (Lines 13 - 14 + 15 + 16).....	20,040,675	123,409,014	94,046	27,275,835	20,134,721	1,077,117

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

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....	XXX				
4. 2020.....	XXX	XXX			
5. 2021.....	XXX	XXX	XXX	41,770	71,383
6. 2022.....	XXX	XXX	XXX	XXX	123,409

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....	XXX				
4. 2020.....	XXX	XXX			
5. 2021.....	XXX	XXX	XXX	52,420	71,477
6. 2022.....	XXX	XXX	XXX	XXX	150,685

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018.....										
2. 2019.....										
3. 2020.....										
4. 2021.....	65,737	71,383	17,153	24.030	88,536	134.682	94	8	88,638	134.837
5. 2022.....	219,568	123,409	32,608	26.423	156,017	71.056	27,276	2,473	185,766	84.605

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....	XXX				
4. 2020.....	XXX	XXX			
5. 2021.....	XXX	XXX	XXX	41,770	71,383
6. 2022.....	XXX	XXX	XXX	XXX	123,409

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....	XXX				
4. 2020.....	XXX	XXX			
5. 2021.....	XXX	XXX	XXX	52,420	71,477
6. 2022.....	XXX	XXX	XXX	XXX	150,685

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018.....										
2. 2019.....										
3. 2020.....										
4. 2021.....	65,737	71,383	17,153	24.030	88,536	134.682	94	8	88,638	134.837
5. 2022.....	219,568	123,409	32,608	26.423	156,017	71.056	27,276	2,473	185,766	84.605

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....					
4. 2020.....		XXX			
5. 2021.....	XXX	XXX	XXX		
6. 2022.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....					
4. 2020.....		XXX			
5. 2021.....	XXX	XXX	XXX		
6. 2022.....	XXX	XXX	XXX	XXX	

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018.....										
2. 2019.....										
3. 2020.....										
4. 2021.....										
5. 2022.....										

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....					
4. 2020.....		XXX			
5. 2021.....	XXX	XXX	XXX		
6. 2022.....	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....					
2. 2018.....					
3. 2019.....					
4. 2020.....		XXX			
5. 2021.....	XXX	XXX	XXX		
6. 2022.....	XXX	XXX	XXX	XXX	

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018.....										
2. 2019.....										
3. 2020.....										
4. 2021.....										
5. 2022.....										

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior					
2. 2018					
3. 2019					
4. 2020		XXX			
5. 2021	XXX	XXX	XXX		
6. 2022	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior					
2. 2018					
3. 2019					
4. 2020		XXX			
5. 2021	XXX	XXX	XXX		
6. 2022	XXX	XXX	XXX	XXX	

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018										
2. 2019										
3. 2020										
4. 2021										
5. 2022										

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior					
2. 2018					
3. 2019					
4. 2020		XXX			
5. 2021	XXX	XXX	XXX		
6. 2022	XXX	XXX	XXX	XXX	

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior					
2. 2018					
3. 2019					
4. 2020		XXX			
5. 2021	XXX	XXX	XXX		
6. 2022	XXX	XXX	XXX	XXX	

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018										
2. 2019										
3. 2020										
4. 2021										
5. 2022										

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

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

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2018.....	NONE									
2. 2019.....										
3. 2020.....										
4. 2021.....										
5. 2022.....										

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

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

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2018.....	NONE									
2. 2019.....										
3. 2020.....										
4. 2021.....										
5. 2022.....										

12 XI

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

Section A – Paid Health Claims

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

Section B – Incurred Health Claims

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior.....	NONE				
2. 2018.....					
3. 2019.....					
4. 2020.....			XXX		
5. 2021.....			XXX	XXX	
6. 2022.....			XXX	XXX	XXX

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

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2+3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2018.....	NONE									
2. 2019.....										
3. 2020.....										
4. 2021.....										
5. 2022.....										

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UNDERWRITING AND INVESTMENT EXHIBIT

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

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Dental Only	6 Vision Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
1. Unearned premium reserves													
2. Additional policy reserves (a)	20,200,000	20,200,000											
3. Reserve for future contingent benefits													
4. Reserve for rate credits or experience rating refunds (including \$ for investment income)													
5. Aggregate write-ins for other policy reserves	535,997,275	535,997,275											
6. Totals (gross)	556,197,275	556,197,275											
7. Reinsurance ceded													
8. Totals (Net) (Page 3, Line 4)	556,197,275	556,197,275											
9. Present value of amounts not yet due on claims													
10. Reserve for future contingent benefits													
11. Aggregate write-ins for other claim reserves													
12. Totals (gross)													
13. Reinsurance ceded													
14. Totals (Net) (Page 3, Line 7)													
Details of Write-Ins													
0501. ACA Risk Adjustment Payable	535,997,275	535,997,275											
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page													
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	535,997,275	535,997,275											
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page													
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)													

(a) Includes \$ 20,200,000 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 – ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$ for occupancy of own building)			933,480		933,480
2. Salaries, wages and other benefits	393,243	3,471,938	35,459,076		39,324,257
3. Commissions (less \$ ceded plus \$ assumed)			78,286,727		78,286,727
4. Legal fees and expenses			908,126		908,126
5. Certifications and accreditation fees			285,954		285,954
6. Auditing, actuarial and other consulting services	58,770	518,884	5,299,384		5,877,038
7. Traveling expenses			821,896		821,896
8. Marketing and advertising			4,833,523		4,833,523
9. Postage, express and telephone	2,142	18,915	193,175		214,232
10. Printing and office supplies	25,083	221,461	2,261,787		2,508,331
11. Occupancy, depreciation and amortization	1,931	17,047	174,105		193,083
12. Equipment	464	4,100	41,878		46,442
13. Cost or depreciation of EDP equipment and software	190,013	1,677,626	17,133,677		19,001,316
14. Outsourced services including EDP, claims, and other services	30,126,635	3,460,195	5,604,423		39,191,253
15. Boards, bureaus and association fees			77,811		77,811
16. Insurance, except on real estate			127,676		127,676
17. Collection and bank service charges			3,112,387		3,112,387
18. Group service and administration fees					
19. Reimbursements by uninsured plans					
20. Reimbursements from fiscal intermediaries					
21. Real estate expenses	3,221	28,443	290,485		322,149
22. Real estate taxes	257	2,268	23,166		25,691
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes					
23.2 State premium taxes			23,061,618		23,061,618
23.3 Regulatory authority licenses and fees			36,929,330		36,929,330
23.4 Payroll taxes	20,189	178,246	1,820,438		2,018,873
23.5 Other (excluding federal income and real estate taxes)					
24. Investment expenses not included elsewhere					
25. Aggregate write-ins for expenses			332,017		332,017
26. Total expenses incurred (Lines 1 to 25)	30,821,948	9,599,123	218,012,139		(a) 258,433,210
27. Less expenses unpaid December 31, current year		2,481,339	31,913,684		34,395,023
28. Add expenses unpaid December 31, prior year		1,700,302	4,015,881		5,716,183
29. Amounts receivable relating to uninsured plans, prior year					
30. Amounts receivable relating to uninsured plans, current year					
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	30,821,948	8,818,086	190,114,336		229,754,370
Details of Write-Ins					
2501. Other Miscellaneous Expenses			332,017		332,017
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page					
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)			332,017		332,017

(a) Includes management fees of \$ 91,919,079 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a) 18,367	42,778
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a)	
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)		
2.21 Common stocks of affiliates		
3. Mortgage loans	(c)	
4. Real estate	(d)	
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 53,386	1,072,725
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income		
10. Total gross investment income	71,753	1,115,503
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)		
17. Net investment income (Line 10 minus Line 16)		1,115,503
Details of Write-Ins		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

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

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)					
NONE					
Details of Write-Ins					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 – Col. 1)
1. Bonds (Schedule D).....			
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			
2.2 Common stocks.....			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			
3.2 Other than first liens.....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			
4.2 Properties held for the production of income.....			
4.3 Properties held for sale.....			
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			
6. Contract loans.....			
7. Derivatives (Schedule DB).....			
8. Other invested assets (Schedule BA).....			
9. Receivables for securities.....			
10. Securities lending reinvested collateral assets (Schedule DL).....			
11. Aggregate write-ins for invested assets.....			
12. Subtotals, cash and invested assets (Lines 1 to 11).....			
13. Title plants (for Title insurers only).....			
14. Investment income due and accrued.....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....	14,009,508	1,726,694	(12,282,814)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			
16.2 Funds held by or deposited with reinsured companies.....			
16.3 Other amounts receivable under reinsurance contracts.....			
17. Amounts receivable relating to uninsured plans.....			
18.1 Current federal and foreign income tax recoverable and interest thereon.....			
18.2 Net deferred tax asset.....			
19. Guaranty funds receivable or on deposit.....			
20. Electronic data processing equipment and software.....			
21. Furniture and equipment, including health care delivery assets.....			
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			
23. Receivables from parent, subsidiaries and affiliates.....			
24. Health care and other amounts receivable.....	38,696,420	1,858,206	(36,838,214)
25. Aggregate write-ins for other-than-invested assets.....		145,270	145,270
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	52,705,928	3,730,170	(48,975,758)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
28. Total (Lines 26 and 27).....	52,705,928	3,730,170	(48,975,758)
Details of Write-Ins			
1101.....			
1102.....			
1103.....			
1198. Summary of remaining write-ins for Line 11 from overflow page.....			
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....			
2501. Miscellaneous Receivables.....		145,270	145,270
2502.....			
2503.....			
2598. Summary of remaining write-ins for Line 25 from overflow page.....			
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....		145,270	145,270

EXHIBIT 1 – ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations.....	60,080	226,880	262,008	290,730	304,360	3,145,689
2. Provider Service Organizations.....						
3. Preferred Provider Organizations.....						
4. Point of Service.....						
5. Indemnity Only.....						
6. Aggregate write-ins for other lines of business.....						
7. Total.....	60,080	226,880	262,008	290,730	304,360	3,145,689
Details of Write-Ins						
0601.....						
0602.....						
0603.....						
0698. Summary of remaining write-ins for Line 6 from overflow page.....						
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....						

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....	25,135,072	4,079,490	2,430,289	14,009,507	14,009,507	31,644,851
Group subscribers:						
.....						
0299997 Group subscriber subtotal.....						
0299998 Premiums due and unpaid not individually listed.....						
0299999 Total group.....						
0399999 Premiums due and unpaid from Medicare entities.....						
0499999 Premiums due and unpaid from Medicaid entities.....						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15).....	25,135,072	4,079,490	2,430,289	14,009,507	14,009,507	31,644,851

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199998 – Aggregate of Amounts Not Individually Listed	4,046,069	3,968,683	4,000,883	12,618,963	12,618,963	12,015,635
0199999 – Pharmaceutical Rebate Receivables	4,046,069	3,968,683	4,000,883	12,618,963	12,618,963	12,015,635
0299998 – Aggregate of Amounts Not Individually Listed	15,876,633	(752,554)	5,178,138	11,008,610	26,077,458	5,233,369
0299999 – Claim Overpayment Receivables	15,876,633	(752,554)	5,178,138	11,008,610	26,077,458	5,233,369
0799999 – Gross Health Care Receivables	19,922,702	3,216,129	9,179,021	23,627,573	38,696,421	17,249,004

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected or Offset During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5	6
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year	Health Care Receivables from Prior Years (Cols. 1 + 3)	Estimated Health Care Receivables Accrued as of December 31 of Prior Year
1. Pharmaceutical rebate receivables	2,262,400	17,153,226		24,634,598	2,262,400	2,173,586
2. Claim overpayment receivables	1,621,496			31,310,827	1,621,496	7,398,642
3. Loans and advances to providers						
4. Capitation arrangement receivables						
5. Risk sharing receivables						
6. Other health care receivables						
7. Totals (Lines 1 through 6)	3,883,896	17,153,226		55,945,425	3,883,896	9,572,228

Note that the accrued amounts in Columns 3, 4 and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (REPORTED AND UNREPORTED)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
0299999 - Aggregate accounts not individually listed-uncovered	51,121,535	8,536,980	3,732,166	1,562,922	2,091,637	67,045,240
0499999 - Subtotals	51,121,535	8,536,980	3,732,166	1,562,922	2,091,637	67,045,240
0599999 - Unreported claims and other claim reserves						67,144,957
0799999 - Total claims unpaid						134,190,197
0899999 - Accrued medical incentive pool and bonus amounts						

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Friday Health Plans, Inc.....	5,276,122					5,276,122	
Friday Health Plan Mangement Services Company, Inc.....	11,402,946					11,402,946	
Friday Health Plans of CO.....	5,055,687					5,055,687	
0199999 – Individually listed receivables.....	21,734,755					21,734,755	
0399999 – Total gross amounts receivable.....	21,734,755					21,734,755	

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Friday Health Plans of Colorado Inc.....	Various.....	470,529	470,529	
0199999 – Individually listed payable.....		470,529	470,529	
0399999 – Total gross payables.....		470,529	470,529	

EXHIBIT 7 – PART 1 – SUMMARY OF TRANSACTIONS WITH PROVIDERS

	1	2	3	4	5	6
Payment Method	Direct Medical Expense Payment	Column 1 as a % of Total Payments	Total Members Covered	Column 3 as a % of Total Members	Column 1 Expenses Paid to Affiliated Providers	Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups.....			304,360	100.000		
2. Intermediaries.....						
3. All other providers.....						
4. Total capitation payments.....			304,360	100.000		
Other Payments:						
5. Fee-for-service.....	886,178,101	100.000	XXX	XXX		886,178,101
6. Contractual fee payments.....			XXX	XXX		
7. Bonus/withhold arrangements – fee-for-service.....			XXX	XXX		
8. Bonus/withhold arrangements – contractual fee payments.....			XXX	XXX		
9. Non-contingent salaries.....			XXX	XXX		
10. Aggregate cost arrangements.....			XXX	XXX		
11. All other payments.....			XXX	XXX		
12. Total other payments.....	886,178,101	100.000	XXX	XXX		886,178,101
13. Total (Line 4 plus Line 12).....	886,178,101	100.000 %	XXX	XXX		886,178,101

EXHIBIT 7 – PART 2 – SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
NAIC Code	Name of Intermediary	Capitation Paid	Average Monthly Capitation	Intermediary's Total Adjusted Capital	Intermediary's Authorized Control Level RBC
9999999 – Totals.....			XXX	XXX	XXX

NONE

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment.....	NONE					
2. Medical furniture, equipment and fixtures.....						
3. Pharmaceuticals and surgical supplies.....						
4. Durable medical equipment.....						
5. Other property and equipment.....						
6. Total.....						

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Friday Health Insurance Company, Inc. have been completed in accordance with the *Accounting Practices and Procedures Manual* and are presented on the basis of accounting practices prescribed or permitted by the Texas Department of Insurance.

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

	SSAP #	F/S Page	F/S Line #	2022	2021
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ (32,591,289)	\$ (62,099,719)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ (32,591,289)</u>	<u>\$ (62,099,719)</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ (244,409,229)	\$ 16,961,216
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ (244,409,229)</u>	<u>\$ 16,961,216</u>

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

The accompanying financial statements in conformity with Statutory Accounting Principals requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

The Company's revenue is derived primarily from member health-care premium payments. The premiums are based upon the actuarial determined cost of services and are recognized as revenue when earned. Member health care premiums are billed and due during the month prior to the effective month of coverage. Premiums receivable is comprised of member premiums that have been billed but not yet received. Unearned premiums represent the member premiums billed prior to the period for which benefit coverages are to be delivered and any prepaid member premiums. In addition, the Company uses the following accounting policies:

- (1) Short-term investments - None
- (2) Bonds are stated at amortized cost in the accompanying financial statements. The Company does not own any mandatory convertible securities.
- (3) Common stocks - None
- (4) Preferred stocks - None
- (5) Mortgage loans - None
- (6) Loan-backed securities - None
- (7) Investments in subsidiaries, controlled and affiliated entities - None
- (8) Investments in joint ventures, partnerships and limited liability companies - None
- (9) Derivatives - None
- (10) Investment income as a factor in the premium deficiency calculation - None
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
- (12) Changes in capitalization policy - None
- (13) Pharmacy rebate receivables are based on reports received from the Company's pharmacy benefit manager and estimates are prepared using historical trends.

D. Going Concern

The reporting of a 2023 Premium Deficiency Reserve in the December 31, 2022, filing resulted in a deficit equity position. Friday Health Plans, Inc., needs to raise additional capital to address the deficit reported at December 31, 2022, and to support future operations. There is doubt of the Company's ability to continue as a "going concern" without raising additional capital. The Company's management is actively engaged with the Board of Directors and outside advisors to address capital needs.

2. Accounting Changes and Corrections of Errors

The Company recorded adjustments based on the 2021 Audit that resulted in a \$213,499,508 reduction in Capital and Surplus.

3. Business Combinations and Goodwill - None

Notes to the Financial Statements

4. Discontinued Operations

- A. Discontinued Operation Disposed of or Classified as Held for Sale - None
- B. Change in Plan of Sale of Discontinued Operation - None
- C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal - None
- D. Equity Interest Retained in the Discontinued Operation After Disposal - None

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - None
- B. Debt Restructuring - None
- C. Reverse Mortgages - None
- D. Loan-Backed Securities - None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - None
- K. Low-Income Housing Tax Credits (LIHTC) - None
- L. Restricted Assets - None
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - None
- P. Short Sales - None
- Q. Prepayment Penalty and Acceleration Fees - None
- R. Reporting Entity's Share of Cash Pool by Asset type - None

6. Joint Ventures, Partnerships and Limited Liability Companies

- A. Investments in Joint Ventures, Partnerships or Limited Liability Companies that Exceed 10% of Admitted Assets - None
- B. Impaired Investments in Joint Ventures, Partnerships and Limited Liability Companies - None

7. Investment Income

- A. Due and Accrued Income Excluded from Surplus
All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.
- B. Total Amount Excluded - None

8. Derivative Instruments

- A. Derivatives under SSAP No. 86 - Derivatives - None
- B. Derivatives under SSAP No. 108 - Derivative Hedging Variable Annuity Guarantees (Life/Fraternal Only) - None

9. Income Taxes

- A. Components of the Net Deferred Tax Asset/(Liability)

(1) Change between years by tax character

	2022			2021			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets	\$	\$	\$	\$ 15,131,615	\$	\$ 15,131,615	\$ (15,131,615)	\$	\$ (15,131,615)
(b) Statutory valuation allowance adjustments				15,131,615		15,131,615	(15,131,615)		(15,131,615)
(c) Adjusted gross deferred tax assets (1a - 1b)									
(d) Deferred tax assets nonadmitted									
(e) Subtotal net admitted deferred tax asset (1c - 1d)	\$	\$	\$	\$	\$	\$	\$	\$	\$
(f) Deferred tax liabilities									
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$	\$	\$	\$	\$	\$	\$	\$	\$

Notes to the Financial Statements

9. Income Taxes (Continued)

(2) Admission calculation components SSAP No. 101

	2022			2021			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$	\$	\$	\$	\$	\$
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below)									
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date									
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX		XXX	XXX		XXX	XXX	
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities									
(d) Deferred tax assets admitted as the result of application of SSAP No. 101									
Total (2(a) + 2(b) + 2(c))	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Ratio used as basis of admissibility

	2022	2021
(a) Ratio percentage used to determine recovery period and threshold limitation amount	%	%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$	\$

(4) Impact of tax-planning strategies

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

	2022		2021		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
1. Adjusted gross DTAs amount from Note 9A1(c)	\$	\$	\$	\$	\$	\$
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$	\$	\$	\$	\$	\$
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

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

Does the company's tax-planning strategies include the use of reinsurance?

B. Regarding Deferred Tax Liabilities That Are Not Recognized - None

C. Major Components of Current Income Taxes Incurred

	(1) 2022	(2) 2021	(3) Change (1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal	\$	\$	\$
(b) Foreign			
(c) Subtotal (1a+1b)	\$	\$	\$
(d) Federal income tax on net capital gains			
(e) Utilization of capital loss carry-forwards			
(f) Other			
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$	\$	\$

Notes to the Financial Statements

9. Income Taxes (Continued)

	(1) 2022	(2) 2021	(3) Change (1-2)
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses	\$	\$ 337,762	\$ (337,762)
(2) Unearned premium reserve		269,577	(269,577)
(3) Policyholder reserves			
(4) Investments			
(5) Deferred acquisition costs			
(6) Policyholder dividends accrual			
(7) Fixed assets			
(8) Compensation and benefits accrual			
(9) Pension accrual			
(10) Receivables - nonadmitted			
(11) Net operating loss carry-forward		13,623,307	(13,623,307)
(12) Tax credit carry-forward			
(13) Other		900,969	(900,969)
(99) Subtotal (sum of 2a1 through 2a13)	\$	\$ 15,131,615	\$ (15,131,615)
(b) Statutory valuation allowance adjustment		15,131,615	(15,131,615)
(c) Nonadmitted			
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	\$	\$
(e) Capital			
(1) Investments	\$	\$	\$
(2) Net capital loss carry-forward			
(3) Real estate			
(4) Other			
(99) Subtotal (2e1+2e2+2e3+2e4)	\$	\$	\$
(f) Statutory valuation allowance adjustment			
(g) Nonadmitted			
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)			
(i) Admitted deferred tax assets (2d + 2h)	\$	\$	\$
	(1) 2022	(2) 2021	(3) Change (1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
(5) Other			
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$	\$	\$
(b) Capital			
(1) Investments	\$	\$	\$
(2) Real estate			
(3) Other			
(99) Subtotal (3b1+3b2+3b3)	\$	\$	\$
(c) Deferred tax liabilities (3a99 + 3b99)	\$	\$	\$
4. Net deferred tax assets/liabilities (2i - 3c)	\$	\$	\$

D. Among the More Significant Book to Tax Adjustments

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes.

	2022	Effective Tax Rate
Income Before Taxes	\$	%
Statutory Valuation Allowance Adjustment		
Total	\$	%
	2022	Effective Tax Rate
Total statutory income taxes	\$	%

Notes to the Financial Statements

9. Income Taxes (Continued)

	2021	Effective Tax Rate
Income Before Taxes.....	\$(14,088,055)	21.505 %
Statutory Valuation Allowance Adjustment.....	14,088,055	-21.505 %
Total.....	<u>\$</u>	<u>%</u>

	2021	Effective Tax Rate
Total statutory income taxes.....	<u>\$</u>	<u>%</u>

E. Operating Loss and Tax Credit Carryforwards

- (1)
- (2) Income tax expense available for recoupment

	Ordinary	Capital	Total
2020.....	\$	\$	\$
2021.....			
2022.....			
	<u>Total</u>		
2020.....	\$		
2021.....			
2022.....			

- (3)

F. Consolidated Federal Income Tax Return

- (1) The method of allocation among companies is subject to a written agreement, approved by the Board of Directors, whereby allocation is made primarily on a separate return basis with current credit for any net operating losses or other items utilized in the consolidated tax return.

- (2)

G. Federal or Foreign Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within the twelve months of the reporting date.

The Company is no longer subject to Federal or state examination prior to 2016

H. Repatriation Transition Tax (RTT) - Not Applicable

I. Alternative Minimum Tax (AMT) Credit - None

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

A. The Company has a Management Service Agreement (MSA) with its Parent, Friday Health Plans Management Services Company, Inc (FHP MGMT). As part of the MSA, FHP MGMT will provide administrative services to the Company.

B. For the period ended December 31, 2022 the following transactions occurred between the Company and its affiliates and parents:

- 1. In order to meet minimum capital requirements the Company received an additional \$95,000,000 from parent.
- 2. The Company has a \$1,800,000 surplus note with its parent, Friday Health Plans, Inc. No interest has been accrued or paid on this surplus note.
- 3. For the period ended December 31, 2022 the Company was allocated costs in the amount of \$91,919,079 from FHP MGMT for services provided. This amount was based on actual and allocated costs.

C. Transactions With Related Party Who Are Not Reported on Schedule Y - None

D.

	2022	2021
Due from Friday Health Plans Inc.	5,276,122	3,679,627
Due from Friday Health Management Serv	11,402,946	-
Due from Friday Health Plans of CO	5,055,687	9,026,341
Due to Friday Health Management Serv	-	(8,611,206)
Due to Friday Health Plans of CO	(470,529)	

E. Effective May 29, 2020, the Company entered into a Management Services Agreement whereby an affiliated organization, Friday Health Plans Management Company, Inc. is performing all administrative services. All employees of the Company and most contracts related to operational expenses have been transferred to Friday Health Plans Management Company, effective May 29, 2020.

F. Guarantees or Contingencies - None

Notes to the Financial Statements

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

- G. The Company and FHP MGMT, along with Friday Health Plans of Nevada, Inc, Friday Health Insurance Company, Inc., Friday Health Plans of Georgia, Inc., Friday Health Plans of Oklahoma, Inc., and Friday Health Plans of North Carolina, Inc. all share common management control under Friday Health Plans, Inc.
- H. Amount Deducted for Investment in Upstream Company - None
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - None
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - None
- K. Foreign Subsidiary Value Using CARVM - None
- L. Downstream Holding Company Value Using Look-Through Method - None
- M. All SCA Investments - None
- N. Investment in Insurance SCAs - None
- O. SCA and SSAP No. 48 Entity Loss Tracking - None

11. Debt

- A. Debt, Including Capital Notes - None
- B. FHLB (Federal Home Loan Bank) Agreements - None

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

- A. Defined Benefit Plan - None
- B. Investment Policies and Strategies of Plan Assets - None
- C. Fair Value of Each Class of Plan Assets - None
- D. Expected Long-Term Rate of Return for the Plan Assets - None
- E. Defined Contribution Plans - None
- F. Multiemployer Plans - None
- G. Consolidated/Holding Company Plans - None
- H. Postemployment Benefits and Compensated Absences - None
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - None

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

- A. Outstanding Shares - None
- B. Dividend Rate of Preferred Stock - None
- C. Dividend Restrictions - None
- D. Ordinary Dividends - None
- E. Company Profits Paid as Ordinary Dividends - None
- F. Surplus Restrictions - None
- G. Surplus Advances - None
- H. Stock Held for Special Purposes - None
- I. Changes in Special Surplus Funds - None
- J. Unassigned Funds (Surplus) - None
- K. Company-Issued Surplus Debentures or Similar Obligations

1	2	3	4	5	6	7	8
Item Number	Date Issued	Interest Rate	Original Issue Amount of Note	Is Surplus Note Holder a Related Party (YES/NO)	Carrying Value of Note Prior Year	Carrying Value of Note Current Year	Unapproved Interest And/Or Principal
0001	06/10/2020	0.085 %	\$ 1,800,000	YES	\$ 1,800,000	\$ 1,800,000	\$ 396,118
Total	XXX	XXX	<u>\$ 1,800,000</u>	XXX	<u>\$ 1,800,000</u>	<u>\$ 1,800,000</u>	<u>\$ 396,118</u>

1	9	10	11	12	13	14
Item Number	Current Year Interest Expense Recognized	Life-To-Date Interest Expense Recognized	Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	Current Year Principal Paid	Life-To-Date Principal Paid	Date of Maturity
0001	\$	\$	%	\$	\$	12/31/2035
Total	<u>\$</u>	<u>\$</u>	XXX	<u>\$</u>	<u>\$</u>	XXX

Notes to the Financial Statements

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

1	15	16	17	18	19
Item Number	Are Surplus Note payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO)	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issuer a Related Party (YES/NO)	Type of Assets Received Upon Issuance
0001	NO	NO	NO	YES	CASH
Total	XXX	XXX	XXX	XXX	XXX

1	20	21	22
Item Number	Principal Amount of Assets Received Upon Issuance	Book/Adjusted Carry Value of Assets	Is Liquidity Source a Related Party to the Surplus Note Issuer? (YES/NO)
0001	\$ 1,800,000	\$	
Total	\$ 1,800,000	\$	XXX

- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - None
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - None

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments - None
- B. Assessments - None
- C. Gain Contingencies - None
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - None
- E. Joint and Several Liabilities - None
- F. All Other Contingencies - None

15. Leases

- A. Lessee Operating Lease - None
- B. Lessor Leases - None

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

- 1. Face Amount of the Company's Financial Instruments with Off-Balance-Sheet Risk - None
- 2. As of December 31, 2022, the Company's uninsured or uncollateralized deposits in financial institutions were \$117,438,426. All funds held that were uncollateralized were in institutions with a star rating of 4 or 5.
- 3. Exposure to Credit Related Losses - None
- 4. Collateral Policy - None

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

- A. Transfers of Receivables Reported as Sales - None
- B. Transfer and Servicing of Financial Assets - None
- C. Wash Sales - None

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

- A. ASO Plans - None
- B. ASC Plans - None
- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract - None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None

20. Fair Value Measurements

- A. Fair Value Measurement

(1) Fair value measurements at reporting date

In accordance with SSAP No. 100, financial assets and liabilities recorded at fair value in the statements of assets, liabilities, capital and surplus are categorized based upon the level of judgment associated with the inputs used to measure their fair value. Input levels, as defined by NAIC SAP, are as follows:

Level 1 – Pricing inputs are based on unadjusted quoted market prices for identical financial assets in active markets. Active markets are those in which transactions occur in sufficient frequency and volume to provide pricing information on an ongoing basis.

Level 2 – Pricing inputs are based on other than quoted prices in active markets included in Level 1 that are observable unadjusted quoted market prices for similar financial assets or liabilities in active markets or quoted market prices for identical assets in inactive markets.

Notes to the Financial Statements

20. Fair Value Measurements (Continued)

Level 3 – Pricing inputs include unobservable inputs that are supported by little or no market activity that reflect management’s best estimate of what market participants would use in pricing the asset at the measurement date.

The following methods and assumptions were used to determine the fair value of each class of the following assets and liabilities recorded at fair value in the statements of assets, liabilities, capital and surplus:

Bonds: Fair values are based on quoted market prices, where available. These fair values are obtained primarily from a third party pricing service, which generally uses Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include corporate securities, securities from states, municipalities and political subdivisions and mortgage-backed securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds.

Preferred stocks: Certain preferred stocks have fair values based on quoted market prices and are designated as Level 1.

Common stocks: Fair values are generally designated as Level 1 and are based on quoted market prices. Certain common stocks’ prices have been estimated using the net asset value per share of the investments, which are based on market prices of underlying securities. The Corporation held no securities valued at fair value.

Short-term securities: Short-term securities include securities with a maturity of less than one year but greater than 90 days at the date of purchase. Fair values of short-term securities are based on quoted market prices, where available. These fair values are obtained primarily from a third party pricing service, which generally uses Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. U.S. Government securities represent Level 1 securities, while Level 2 securities include corporate securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds.

Cash and cash equivalents: Cash is designated as Level 1. Cash equivalents include exempt money market mutual funds, commercial paper, discount notes or securities with a maturity of 3 months or less and bank deposits that are purchased or deposited daily with specified yield rates. Cash equivalents are designated as Level 1 or Level 2, depending on structure and the extent of credit-related features. The Corporation uses a third party pricing service to obtain quoted prices for each security. The third party service provides pricing based on recent trades of the specific security or like securities, as well as a variety of valuation methodologies for those securities where an observable market price may not exist. The third party service may derive pricing for Level 2 securities from market corroborated pricing, matrix pricing, and inputs such as yield curves and indices. Pricing for Level 3 securities may be obtained from investment managers for private placements or derived from discounted cash flows, or ratio analysis and price comparisons of similar companies. The Corporation performs an analysis of reasonableness of the prices received for fair value by monitoring month-to-month fluctuations and determining reasons for significant differences, selectively testing fair values against prices obtained from other sources, and comparing the combined fair value of a class of assets against an appropriate index benchmark. There were no adjustments to quoted market prices obtained from third party pricing services during the period ended December 31, 2022 that were material to the statutory financial statements.

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Total assets at fair value/NAV	\$	\$	\$	\$	\$
b. Liabilities at fair value					
Total liabilities at fair value	\$	\$	\$	\$	\$

None

(2) Fair value measurements in Level 3 of the fair value hierarchy - None

(3) The Company’s policy for determining when transfers between levels are recognized is determined at the end of the reporting period.

(4) Inputs and techniques used for Level 2 and Level 3 fair values - None

(5) Derivatives - None

B. Other Fair Value Disclosures - None

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 3,885,353	\$ 3,897,863	\$ 3,885,353				
Short Term Investments	82,161,376	82,161,376	82,161,376				

D. Not Practicable to Estimate Fair Value - None

E. Nature and Risk of Investments Reported at NAV - None

21. Other Items

A. Unusual or Infrequent Items

The COVID-19 pandemic resulted in no substantial changes to financial position or operations during 2021 or 2020.

B. Troubled Debt Restructuring - None

C. Other Disclosures - None

D. Business Interruption Insurance Recoveries - None

E. State Transferable and Non-Transferable Tax Credits - None

F. Subprime-Mortgage-Related Risk Exposure - None

G. Retained Assets - None

H. Insurance-Linked Securities (ILS) Contracts - None

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy - None

Notes to the Financial Statements

22. Events Subsequent

Type I. – Recognized Subsequent Events

Subsequent events have been considered through March 1, 2022 for the statutory statement issued on December 31, 2022. - None

Type II. – Nonrecognized Subsequent Events

Subsequent events have been considered through March 1, 2022 for the statutory statement issued on December 31, 2022. - None

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?
Yes () No (X)
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?
Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

- (1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?
Yes () No (X)
- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?
Yes () No (X)

Section 3 – Ceded Reinsurance Report – Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?
Yes () No (X)

B. Uncollectible Reinsurance - None

C. Commutation of Reinsurance Reflected in Income and Expenses - None

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - None

E. Reinsurance Credit

- (1) Reinsurance contracts subject to A-791 - None
- (2) The Company has a reinsurance agreement in place with a stop-loss reinsurance provider Odyssey Reinsurance Company that provides for a \$500,000 attachment point, with 10% coinsurance up to \$1,000,000 and 40% coinsurance thereafter. The reinsurance credit was reduced for the risk limiting features.
- (3) There are no provisions that delay payment in form or in fact within the contract.
- (4) The reinsurance contract with AXA France Vie(AXA) meets the risk transfer requirements of SSAP No. 61R. This contract is a quota share agreement which results in significant surplus relief.

The Company has a reinsurance agreement with Odyssey Reinsurance Company. This contract is an excess of loss agreement which does not result in significant surplus relief.
- (5) Contracts with ceded risk not subject to A-791 accounted for differently under GAAP and SAP - None
- (6) Explanation of the accounting treatment disclosed in Note 23.E(5) if treated differently for GAAP and SAP - None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate - None

B. Method Used to Record - None

C. Amount and Percent of Net Retrospective Premiums - None

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - None

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

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

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

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

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

	Amount
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to the ACA risk adjustment (including high-risk pool payments).....	\$.....
Liabilities	
2. Risk adjustment user fees payable for ACA risk adjustment.....	\$.....
3. Premium adjustments payable due to ACA risk adjustment (including high-risk pool premium).....	535,997,275
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment.....	\$...(536,816,548)
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid).....
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA reinsurance.....	\$.....
2. Amounts recoverable for claims unpaid due to ACA reinsurance (contra liability).....
3. Amounts receivable relating to uninsured plans for contributions for ACA reinsurance.....
Liabilities	
4. Liabilities for contributions payable due to ACA reinsurance – not reported as ceded premium.....	\$.....
5. Ceded reinsurance premiums payable due to ACA reinsurance.....
6. Liabilities for amounts held under uninsured plans contributions for ACA reinsurance.....
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA reinsurance.....	\$.....
8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments.....
9. ACA reinsurance contributions - not reported as ceded premium.....
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA risk corridors liabilities.....	\$.....
2. Reserve for rate credits or policy experience rating refunds due to ACA risk corridors.....
Operations (Revenue & Expense)	
3. Effect of ACA risk corridors on net premium income (paid/received).....	\$.....
4. Effect of ACA risk corridors on change in reserves for rate credits.....
(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance	
None	

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	(1)	(2)	(3)	(4)	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	\$		\$		\$		\$		A	\$	
2. Premium adjustments (payable) (including high risk pool premium)		98,309,000		98,309,000					B		
3. Subtotal ACA Permanent Risk Adjustment Program	\$	98,309,000	\$	98,309,000	\$		\$			\$	
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	\$		\$		\$		\$		C	\$	
2. Amounts recoverable for claims unpaid (contra liability)									D		
3. Amounts receivable relating to uninsured plans									E		
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium									F		
5. Ceded reinsurance premiums payable									G		
6. Liability for amounts held under uninsured plans									H		
7. Subtotal ACA Transitional Reinsurance Program	\$		\$		\$		\$			\$	
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	\$		\$		\$		\$		I	\$	
2. Reserve for rate credits or policy experience rating refunds									J		
3. Subtotal ACA Risk Corridors Program	\$		\$		\$		\$			\$	
d. Total for ACA risk sharing provisions	\$	98,309,000	\$	98,309,000	\$		\$			\$	

Explanations of Adjustments: None

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

Reserves as of December 31, 2021 were \$12,349,646 for Claims and Claims Adjustment Expense. As of December 31 2022, \$21,740,977 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$94,046 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$9,485,377 unfavorable(favorable) prior-year development since December 31, 2021 to December 31, 2022. The increase (decrease) is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses

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 - None

27. Structured Settlements - None

Notes to the Financial Statements

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2022	\$ 12,015,635	\$	\$	\$	\$
09/30/2022	9,271,783				
06/30/2022	5,951,763		9,427,238		
03/31/2022	4,054,044		7,725,987		
12/31/2021	1,176,496				
09/30/2021					
06/30/2021			729,287		
03/31/2021			320,619		

B. Risk-Sharing Receivables - None

29. Participating Policies - None

30. Premium Deficiency Reserves

- 1. Liability carried for premium deficiency reserves: \$20,200,000
- 2. Date of the most recent evaluation of this liability: 12/31/2022
- 3. Was anticipated investment income utilized in the calculation? YES

31. Anticipated Salvage and Subrogation - None

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1. Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?..... YES
- If yes, complete Schedule Y, Parts 1, 1A, 2, and 3.
- 1.2. If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?..... YES
- 1.3. State Regulating?..... Texas
- 1.4. Is the reporting entity publicly traded or a member of a publicly traded group?..... NO
- 1.5. If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.....
- 2.1. Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?..... NO
- 2.2. If yes, date of change:.....
- 3.1. State as of what date the latest financial examination of the reporting entity was made or is being made..... 12/31/2020
- 3.2. State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.....
- 3.3. State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).....
- 3.4. By what department or departments?
Texas Department of Insurance, Colorado Division of Insurance
- 3.5. Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?..... N/A
- 3.6. Have all of the recommendations within the latest financial examination report been complied with?..... N/A
- 4.1. During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.11. sales of new business?..... NO
- 4.12. renewals?..... NO
- 4.2. During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:.....
- 4.21. sales of new business?..... NO
- 4.22. renewals?..... NO
- 5.1. Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO
- If yes, complete and file the merger history data file with the NAIC.
- 5.2. If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2	3
Name of Entity	NAIC Company Code	State of Domicile

- 6.1. Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?..... NO
- 6.2. If yes, give full information
- 7.1. Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?..... NO
- 7.2. If yes,
 - 7.21. State the percentage of foreign control..... %
 - 7.22. State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1	2
Nationality	Type of Entity

- 8.1. Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?..... NO
- 8.2. If response to 8.1 is yes, please identify the name of the DIHC.....
- 8.3. Is the company affiliated with one or more banks, thrifts or securities firms?..... NO
- 8.4. If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 8.5. Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?..... NO
- 8.6. If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?..... NO
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
BKD, LLP, 1201 Walnut St, Suite 1700, Kansas City, MO 64106
- 10.1. Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?..... NO
- 10.2. If the response to 10.1 is yes, provide information related to this exemption:
- 10.3. Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?..... NO
- 10.4. If the response to 10.3 is yes, provide information related to this exemption:
- 10.5. Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?..... YES
- 10.6. If the response to 10.5 is no or n/a, please explain.

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Milliman, 1400 Wewatta Street, Suite 900, Denver CO 80202

- 12.1. Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?.....
12.11 Name of real estate holding company
- 12.12 Number of parcels involved.....
12.13 Total book / adjusted carrying value..... \$
- 12.2. If yes, provide explanation

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

- 13.1. What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?.....
- 13.2. Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?.....
- 13.3. Have there been any changes made to any of the trust indentures during the year?.....
- 13.4. If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?.....
- 14.1. Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... YES
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - c. Compliance with applicable governmental laws, rules and regulations;
 - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - e. Accountability for adherence to the code.
- 14.11. If the response to 14.1 is no, please explain:
- 14.2. Has the code of ethics for senior managers been amended?..... NO
- 14.21. If the response to 14.2 is yes, provide information related to amendment(s).

- 14.3. Have any provisions of the code of ethics been waived for any of the specified officers?..... NO
- 14.31. If the response to 14.3 is yes, provide the nature of any waiver(s).

- 15.1. Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?..... NO
- 15.2. If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

BOARD OF DIRECTORS

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

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

FINANCIAL

- 19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?..... NO
- 20.1. Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
 - 20.11 To directors or other officers..... \$
 - 20.12 To stockholders not officers..... \$
 - 20.13 Trustees, supreme or grand (Fraternal only)..... \$
- 20.2. Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
 - 20.21 To directors or other officers..... \$
 - 20.22 To stockholders not officers..... \$
 - 20.23 Trustees, supreme or grand (Fraternal only)..... \$
- 21.1. Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?.....
- 21.2. If yes, state the amount thereof at December 31 of the current year:
 - 21.21 Rented from others..... \$
 - 21.22 Borrowed from others..... \$
 - 21.23 Leased from others..... \$
 - 21.24 Other..... \$
- 22.1. Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments?.....
- 22.2. If answer is yes:
 - 22.21 Amount paid as losses or risk adjustment..... \$
 - 22.22 Amount paid as expenses..... \$
 - 22.23 Other amounts paid..... \$
- 23.1. Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... YES
- 23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount..... \$ 16,679,068
- 24.1. Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?..... NO
- 24.2. If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

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

INVESTMENT

- 25.01. Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... YES
- 25.02. If no, give full and complete information, relating thereto
- 25.03. For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
- 25.04. For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions..... \$
- 25.05. For the reporting entity's securities lending program, report amount of collateral for other programs..... \$
- 25.06. Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?..... N/A
- 25.07. Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?..... N/A
- 25.08. Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?..... N/A
- 25.09. For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:
 - 25.091. Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2..... \$
 - 25.092. Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2..... \$
 - 25.093. Total payable for securities lending reported on the liability page..... \$
- 26.1. Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03)..... NO
- 26.2. If yes, state the amount thereof at December 31 of the current year:
 - 26.21. Subject to repurchase agreements..... \$
 - 26.22. Subject to reverse repurchase agreements..... \$
 - 26.23. Subject to dollar repurchase agreements..... \$
 - 26.24. Subject to reverse dollar repurchase agreements..... \$
 - 26.25. Placed under option agreements..... \$
 - 26.26. Letter stock or securities restricted as to sale - excluding FHLB Capital Stock..... \$
 - 26.27. FHLB Capital Stock..... \$
 - 26.28. On deposit with states..... \$
 - 26.29. On deposit with other regulatory bodies..... \$
 - 26.30. Pledged as collateral - excluding collateral pledged to an FHLB..... \$
 - 26.31. Pledged as collateral to FHLB - including assets backing funding agreements..... \$
 - 26.32. Other..... \$
- 26.3. For category (26.26) provide the following:

1	2	3
Nature of Restriction	Description	Amount
		\$

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 27.1. Does the reporting entity have any hedging transactions reported on Schedule DB?..... NO.....
 27.2. If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.....

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

- 27.3. Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?..... NO.....
 27.4. If the response to 27.3 is YES, does the reporting entity utilize:
 27.41 Special accounting provision of SSAP No. 108.....
 27.42 Permitted accounting practice.....
 27.43 Other accounting guidance.....
 27.5. By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:
 • The reporting entity has obtained explicit approval from the domiciliary state.
 • Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 • Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 • Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

- 28.1. Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?..... NO.....
 28.2. If yes, state the amount thereof at December 31 of the current year..... \$.....

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

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

1 Name of Custodian(s)	2 Custodian's Address

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

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

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

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

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

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

1 Name of Firm or Individual	2 Affiliation
Bank of Oklahoma Financial Capital Markets.....	U.....

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

29.0598. For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... NO.....

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

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

30.1. Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?..... NO.....

30.2. If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 TOTAL		\$.....

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1. Bonds.....	\$ 86,059,239	\$ 86,046,729	\$ (12,510)
31.2. Preferred Stocks.....			
31.3. Totals.....	\$ 86,059,239	\$ 86,046,729	\$ (12,510)

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

Bank Statements

32.1. Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?.....NO.....

32.2. If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?.....NO.....

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

Bank of Oklahoma

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

33.2. If no, list exceptions:

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

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

b. Issuer or obligor is current on all contracted interest and principal payments.

c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities?.....NO.....

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

a. The security was purchased prior to January 1, 2018.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.

d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?.....NO.....

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

a. The shares were purchased prior to January 1, 2019.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.

d. The fund only or predominantly holds bonds in its portfolio.

e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.

f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?.....NO.....

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.

b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.

c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.

d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?.....NO.....

38.1 Does the reporting entity directly hold cryptocurrencies?.....NO.....

38.2 If the response to 38.1 is yes, on what schedule are they reported?.....

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?.....NO.....

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly.....

39.22 Immediately converted to U.S. dollars.....

39.3. If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

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

OTHER

40.1. Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?.....\$.....

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

1	2
Name	Amount Paid
	\$.....

41.1. Amount of payments for legal expenses, if any?.....\$ 68,395

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

1	2
Name	Amount Paid
Mitchell William.....	\$..... 68,395

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

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

1	2
Name	Amount Paid
.....	\$.....

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? NO
- 1.2 If yes, indicate premium earned on U.S. business only \$
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$
- 1.31 Reason for excluding

- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above \$
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance \$
- 1.6 Individual policies:
Most current three years:
1.61 Total premium earned \$
1.62 Total incurred claims \$
1.63 Number of covered lives
- All years prior to most current three years:
1.64 Total premium earned \$
1.65 Total incurred claims \$
1.66 Number of covered lives
- 1.7 Group policies:
Most current three years:
1.71 Total premium earned \$
1.72 Total incurred claims \$
1.73 Number of covered lives
- All years prior to most current three years:
1.74 Total premium earned \$
1.75 Total incurred claims \$
1.76 Number of covered lives

2. Health Test:

	1	2
	Current Year	Prior Year
2.1 Premium Numerator	\$ 219,568,063	\$ 65,737,454
2.2 Premium Denominator	\$ 219,568,063	\$ 65,737,454
2.3 Premium Ratio (2.1/2.2)	100.000	100.000
2.4 Reserve Numerator	\$ 583,567,155	\$ 108,958,344
2.5 Reserve Denominator	\$ 583,567,155	\$ 108,958,344
2.6 Reserve Ratio (2.4/2.5)	100.000 %	100.000 %

- 3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? NO
- 3.2 If yes, give particulars:

- 4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? YES
- 4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?
- 5.1 Does the reporting entity have stop-loss reinsurance? YES
- 5.2 If no, explain:

- 5.3 Maximum retained risk (see instructions)

 - 5.31 Comprehensive Medical \$ 525,000
 - 5.32 Medical Only
 - 5.33 Medicare Supplement
 - 5.34 Dental and Vision
 - 5.35 Other Limited Benefit Plan
 - 5.36 Other

- 6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
Provider agreements contain Hold harmless clause"
- 7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? YES
- 7.2 If no, give details

GENERAL INTERROGATORIES
PART 2 - HEALTH INTERROGATORIES

- 8. Provide the following information regarding participating providers:
 - 8.1 Number of providers at start of reporting year 13,573
 - 8.2 Number of providers at end of reporting year 32,116
- 9.1 Does the reporting entity have business subject to premium rate guarantees? NO
- 9.2 If yes, direct premium earned:
 - 9.21 Business with rate guarantees between 15-36 months \$
 - 9.22 Business with rate guarantees over 36 months \$
- 10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? NO
- 10.2 If yes:
 - 10.21 Maximum amount payable bonuses \$
 - 10.22 Amount actually paid for year bonuses \$
 - 10.23 Maximum amount payable withholds \$
 - 10.24 Amount actually paid for year withholds \$
- 11.1 Is the reporting entity organized as:
 - 11.12 A Medical Group/Staff Model, YES
 - 11.13 An Individual Practice Association (IPA), or, NO
 - 11.14 A Mixed Model (combination of above)? NO
- 11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? YES
- 11.3 If yes, show the name of the state requiring such minimum capital and surplus. Texas
- 11.4 If yes, show the amount required. \$ 700,000
- 11.5 Is this amount included as part of a contingency reserve in stockholder's equity? NO
- 11.6 If the amount is calculated, show the calculation

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

1
Name of Service Area
BEXAR
BRAZORIA
CAMERON
COLLIN
DALLAS
DENTON
EL PASO
ELLIS
FORT BEND
GRAYSON
HARRIS
HIDALGO
LUBBOCK
MONTGOMERY
NUECES
STARR
TARRANT
TRAVIS
WEBB
WILLIAMSON

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

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

- 15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).
 - 15.1 Direct Premium Written \$
 - 15.2 Total Incurred Claims \$
 - 15.3 Number of Covered Lives

*Ordinary Life Insurance Includes
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

- 16. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? NO
- 16.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? NO

FIVE-YEAR HISTORICAL DATA

	1	2	3	4	5
	2022	2021	2020	2019	2018
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	554,738,564	168,441,887	7,479,250		
2. Total liabilities (Page 3, Line 24)	799,147,794	151,480,671	2,188,143		
3. Statutory minimum capital and surplus requirement	700,000	700,000	700,000		
4. Total capital and surplus (Page 3, Line 33)	(244,409,229)	16,961,216	5,291,107		
Income Statement (Page 4)					
5. Total revenues (Line 8)	225,649,132	65,737,454			
6. Total medical and hospital expenses (Line 18)	169,742,452	52,419,728			
7. Claims adjustment expenses (Line 20)	40,421,071	11,820,951			
8. Total administrative expenses (Line 21)	218,012,139	63,596,494	4,708,893		
9. Net underwriting gain (loss) (Line 24)	(33,166,530)	(62,099,719)	(4,708,893)		
10. Net investment gain (loss) (Line 27)	1,115,503				
11. Total other income (Lines 28 plus 29)	(540,262)				
12. Net income or (loss) (Line 32)	(32,591,289)	(62,099,719)	(4,708,893)		
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	230,560,583	22,943,326	(2,520,750)		
Risk-Based Capital Analysis					
14. Total adjusted capital	(244,409,229)	16,961,216	5,291,107		
15. Authorized control level risk-based capital	9,231,989	4,174,563	27,598		
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	304,360	60,080			
17. Total members months (Column 6, Line 7)	3,145,689	552,840			
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0 %	100.0 %	100.0 %	100.0 %	100.0 %
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	75.2	79.7			
20. Cost containment expenses	13.7	13.5			
21. Other claims adjustment expenses	4.3	4.5			
22. Total underwriting deductions (Line 23)	114.7	194.5			
23. Total underwriting gain (loss) (Line 24)	(14.7)	(94.5)			
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	20,134,721				
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	1,077,117				
Investments in Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)					
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)					
29. Affiliated short-term investments (subtotal included in Sch. DA Verification, Col. 5, Line 10)					
30. Affiliated mortgage loans on real estate					
31. All other affiliated					
32. Total of above Lines 26 to 31					
33. Total investment in parent included in Lines 26 to 31 above					

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

If no, please explain



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Friday Health Insurance Company, Inc.

2. Alamosa, CO
(LOCATION)

NAIC Group Code: 4976

BUSINESS IN THE STATE OF TEXAS DURING THE YEAR 2022

NAIC Company Code: 16803

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year.....	60,080	60,078	2											
2. First Quarter.....	228,216	228,055	161											
3. Second Quarter.....	263,423	263,233	190											
4. Third Quarter.....	293,111	292,924	187											
5. Current Year.....	304,360	304,184	176											
6. Current Year Member Months.....	3,145,689	3,143,593	2,096											
Total Member Ambulatory Encounters for Year:														
7. Physician.....	1,804,993	1,804,012	981											
8. Non-Physician.....	151,132	151,066	66											
9. Total.....	1,956,125	1,955,078	1,047											
10. Hospital Patient Days Incurred.....	80,109	72,391	7,718											
11. Number of Inpatient Admissions.....	12,970	12,963	7											
12. Health Premiums Written (b).....	985,009,010	984,531,215	477,795											
13. Life Premiums Direct.....														
14. Property/Casualty Premiums Written.....														
15. Health Premiums Earned.....	991,090,079	990,609,334	480,745											
16. Property/Casualty Premiums Earned.....														
17. Amount Paid for Provision of Health Care Services.....	886,178,101	885,751,031	427,070											
18. Amount Incurred for Provision of Health Care Services.....	945,447,260	944,988,655	458,605											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products .

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

30 TX



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Friday Health Insurance Company, Inc.

2. Alamosa, CO
(LOCATION)

NAIC Group Code: 4976

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2022

NAIC Company Code: 16803

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
Total Members at end of:														
1. Prior Year.....	60,080	60,078	2											
2. First Quarter.....	228,216	228,055	161											
3. Second Quarter.....	263,423	263,233	190											
4. Third Quarter.....	293,111	292,924	187											
5. Current Year.....	304,360	304,184	176											
6. Current Year Member Months.....	3,145,689	3,143,593	2,096											
Total Member Ambulatory Encounters for Year:														
7. Physician.....	1,804,993	1,804,012	981											
8. Non-Physician.....	151,132	151,066	66											
9. Total.....	1,956,125	1,955,078	1,047											
10. Hospital Patient Days Incurred.....	80,109	72,391	7,718											
11. Number of Inpatient Admissions.....	12,970	12,963	7											
12. Health Premiums Written (b).....	985,009,010	984,531,215	477,795											
13. Life Premiums Direct.....														
14. Property/Casualty Premiums Written.....														
15. Health Premiums Earned.....	991,090,079	990,609,334	480,745											
16. Property/Casualty Premiums Earned.....														
17. Amount Paid for Provision of Health Care Services.....	886,178,101	885,751,031	427,070											
18. Amount Incurred for Provision of Health Care Services.....	945,447,260	944,988,655	458,605											

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products .

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

30.GT

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than For Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
9999999 - Total (Sum of 0799999 and 1099999)												

NONE

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Accident and Health, Non-Affiliates, Non-U.S. Non-Affiliates						
	AA-1320000	01/01/2022	AXA FRANC VIE	FRA		106,820,316
	2099999 - Accident and Health, Non-Affiliates, Non-U.S. Non-Affiliates					106,820,316
	2199999 - Accident and Health, Non-Affiliates, Total Non-Affiliates					106,820,316
	2299999 - Total Accident and Health					106,820,316
	2499999 - Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					106,820,316
	9999999 - Total (Sum of 1199999 and 2299999)					106,820,316

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
General Account, Authorized, Non-Affiliates, U.S. Non-Affiliates													
..... 23680	47-0698507	01/01/2022	ODYSSEY REINSURANCE COMPANY	CT	SSL/I	CMM	41,314,698						
..... 23680	47-0698507	01/01/2022	ODYSSEY REINSURANCE COMPANY	CT	SSL/G	CMM	27,520						
0899999 – General Account, Authorized, Non-Affiliates, U.S. Non-Affiliates							41,342,218						
1099999 – General Account, Authorized, Total Authorized Non-Affiliates							41,342,218						
1199999 – Total General Account Authorized							41,342,218						
General Account, Unauthorized, Non-Affiliates, Non-U.S. Non-Affiliates													
	AA-1320000	01/01/2022	AXA FRANCE VIE	FRA	QA/I	CMM	723,747,492						
	AA-1320000	01/01/2022	AXA FRANCE VIE	FRA	QA/G	CMM	351,236						
2099999 – General Account, Unauthorized, Non-Affiliates, Non-U.S. Non-Affiliates							724,098,728						
2199999 – General Account, Unauthorized, Total Unauthorized Non-Affiliates							724,098,728						
2299999 – Total General Account Unauthorized							724,098,728						
4599999 – Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							765,440,946						
9199999 – Total U.S.							41,342,218						
9299999 – Total Non-U.S.							724,098,728						
9999999 – Total (Sum of 4599999 and 9099999)							765,440,946						

SCHEDULE S – PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name Of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5+6+7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols 9+11+12+13+14 but not in Excess of Col. 8
General Account, Accident and Health, Non-Affiliates, Non-U.S. Non-Affiliates														
	AA-1320000	01/01/2022	AXA FRANCE VIE		178,742,314		178,742,314			117,438,426				117,438,426
2099999	General Account, Accident and Health, Non-Affiliates, Non-U.S. Non-Affiliates				178,742,314		178,742,314		XXX	117,438,426				117,438,426
2199999	General Account, Accident and Health, Non-Affiliates, Total Non-Affiliates				178,742,314		178,742,314		XXX	117,438,426				117,438,426
2299999	General Account, Total Accident and Health				178,742,314		178,742,314		XXX	117,438,426				117,438,426
2399999	Total General Account				178,742,314		178,742,314		XXX	117,438,426				117,438,426
3699999	Total Non-U.S.				178,742,314		178,742,314		XXX	117,438,426				117,438,426
9999999	Total (Sum of 2399999 and 3499999)				178,742,314		178,742,314		XXX	117,438,426				117,438,426

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

NONE

SCHEDULE S – PART 5

Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (\$000 Omitted)

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating	8 Percent Collateral Required for Full Credit (0%-100%)	9 Reserve Credit Taken	10 Paid and Unpaid Losses Recoverable (Debit)	11 Other Debits	12 Total Recoverable / Reserve Credit Taken (Col. 9 + 10 + 11)	13 Miscellaneous Balances (Credit)	14 Net Obligation Subject to Collateral (Col. 12 - 13)	15 Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col. 8)	Collateral						23 Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 22 / Col. 14)	24 Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to exceed 100%)	25 Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	26 Liability for Reinsurance With Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)											
															16 Multiple Beneficiary Trust	17 Letters of Credit	18 Issuing or Confirming Bank Reference Number (a)	19 Trust Agreements	20 Funds Deposited by and Withheld from Reinsurers	21 Other					22 Total Collateral Provided (Col. 16 + 17 + 19 + 20 + 21)										
9999999 – Total (Sum of 2399999 and 3499999)															XXX						XXX	XXX													

NONE

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

NONE

SCHEDULE S - PART 6
 Five-Year Exhibit of Reinsurance Ceded Business
 (\$000 Omitted)

	2022	2021	2020	2019	2018
A. OPERATIONS ITEMS					
1 Premiums.....	765,441	98,057			
2 Title XVIII-Medicare.....					
3 Title XIX-Medicaid.....					
4 Commissions and reinsurance expense allowance.....	32,692				
5 Total hospital and medical expenses.....	775,705	86,639			
B. BALANCE SHEET ITEMS					
6 Premiums receivable.....					
7 Claims payable.....	106,820	17,898			
8 Reinsurance recoverable on paid losses.....		15,939			
9 Experience rating refunds due or unpaid.....					
10 Commissions and reinsurance expense allowances due.....					
11 Unauthorized reinsurance offset.....		30,388			
12 Offset for reinsurance with Certified Reinsurers.....					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13 Funds deposited by and withheld from (F).....					
14 Letters of credit (L).....					
15 Trust agreements (T).....	117,438	30,388			
16 Other (O).....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17 Multiple Beneficiary Trust.....					
18 Funds deposited by and withheld from (F).....					
19 Letters of credit (L).....					
20 Trust agreements (T).....					
21 Other (O).....					

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1 Cash and invested assets (Line 12)	285,788,233		285,788,233
2 Accident and health premiums due and unpaid (Line 15)	31,644,851		31,644,851
3 Amounts recoverable from reinsurers (Line 16.1)			
4 Net credit for ceded reinsurance	XXX	45,516,428	45,516,428
5 All other admitted assets (Balance)	237,305,480		237,305,480
6 Total assets (Line 28)	554,738,564	45,516,428	600,254,992
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7 Claims unpaid (Line 1)	27,369,880	106,820,316	134,190,196
8 Accrued medical incentive pool and bonus payments (Line 2)			
9 Premiums received in advance (Line 8)	1,972,773		1,972,773
10 Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount)			
11 Reinsurance in unauthorized companies (Line 20 minus inset amount)	61,303,888	(61,303,888)	
12 Reinsurance with Certified Reinsurers (Line 20 inset amount)			
13 Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)			
14 All other liabilities (Balance)	708,501,253		708,501,253
15 Total liabilities (Line 24)	799,147,794	45,516,428	844,664,222
16 Total capital and surplus (Line 33)	(244,409,229)	XXX	(244,409,229)
17 Total liabilities, capital and surplus (Line 34)	554,738,565	45,516,428	600,254,993
NET CREDIT FOR CEDED REINSURANCE			
18 Claims unpaid	106,820,316	XXX	XXX
19 Accrued medical incentive pool		XXX	XXX
20 Premiums received in advance		XXX	XXX
21 Reinsurance recoverable on paid losses		XXX	XXX
22 Other ceded reinsurance recoverables		XXX	XXX
23 Total ceded reinsurance recoverables	106,820,316	XXX	XXX
24 Premiums receivable		XXX	XXX
25 Funds held under reinsurance treaties with authorized and unauthorized reinsurers		XXX	XXX
26 Unauthorized reinsurance	61,303,888	XXX	XXX
27 Reinsurance with Certified Reinsurers		XXX	XXX
28 Funds held under reinsurance treaties with Certified Reinsurers		XXX	XXX
29 Other ceded reinsurance payables/offsets		XXX	XXX
30 Total ceded reinsurance payables/offsets	61,303,888	XXX	XXX
31 Total net credit for ceded reinsurance	45,516,428	XXX	XXX

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only								
		2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & Other Considerations	8 Property / Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama	AL	N								
2. Alaska	AK	N								
3. Arizona	AZ	N								
4. Arkansas	AR	N								
5. California	CA	N								
6. Colorado	CO	N								
7. Connecticut	CT	N								
8. Delaware	DE	N								
9. District of Columbia	DC	N								
10. Florida	FL	N								
11. Georgia	GA	N								
12. Hawaii	HI	N								
13. Idaho	ID	N								
14. Illinois	IL	N								
15. Indiana	IN	N								
16. Iowa	IA	N								
17. Kansas	KS	N								
18. Kentucky	KY	N								
19. Louisiana	LA	N								
20. Maine	ME	N								
21. Maryland	MD	N								
22. Massachusetts	MA	N								
23. Michigan	MI	N								
24. Minnesota	MN	N								
25. Mississippi	MS	N								
26. Missouri	MO	N								
27. Montana	MT	N								
28. Nebraska	NE	N								
29. Nevada	NV	N								
30. New Hampshire	NH	N								
31. New Jersey	NJ	N								
32. New Mexico	NM	N								
33. New York	NY	N								
34. North Carolina	NC	N								
35. North Dakota	ND	N								
36. Ohio	OH	N								
37. Oklahoma	OK	N								
38. Oregon	OR	N								
39. Pennsylvania	PA	N								
40. Rhode Island	RI	N								
41. South Carolina	SC	N								
42. South Dakota	SD	N								
43. Tennessee	TN	N								
44. Texas	TX	L	985,009,010						985,009,010	
45. Utah	UT	N								
46. Vermont	VT	N								
47. Virginia	VA	N								
48. Washington	WA	N								
49. West Virginia	WV	N								
50. Wisconsin	WI	N								
51. Wyoming	WY	N								
52. American Samoa	AS	N								
53. Guam	GU	N								
54. Puerto Rico	PR	N								
55. US Virgin Islands	VI	N								
56. Northern Mariana Islands	MP	N								
57. Canada	CAN	N								
58. Aggregate Other Alien	OT	XXX								
59. Subtotal	XXX		985,009,010						985,009,010	
60. Reporting entity contributions for Employee Benefit Plans	XXX									
61. Total (Direct Business)	XXX		985,009,010						985,009,010	
Details of Write-Ins										
58001.	XXX									
58002.	XXX									
58003.	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999. Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX									

(a) Active Status Counts

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

(b) Explanation of basis of allocation by states, premiums by state, etc

Premiums are allocated based on situs of contract

SCHEDULE T – PART 2
 INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN
 Allocated By States And Territories

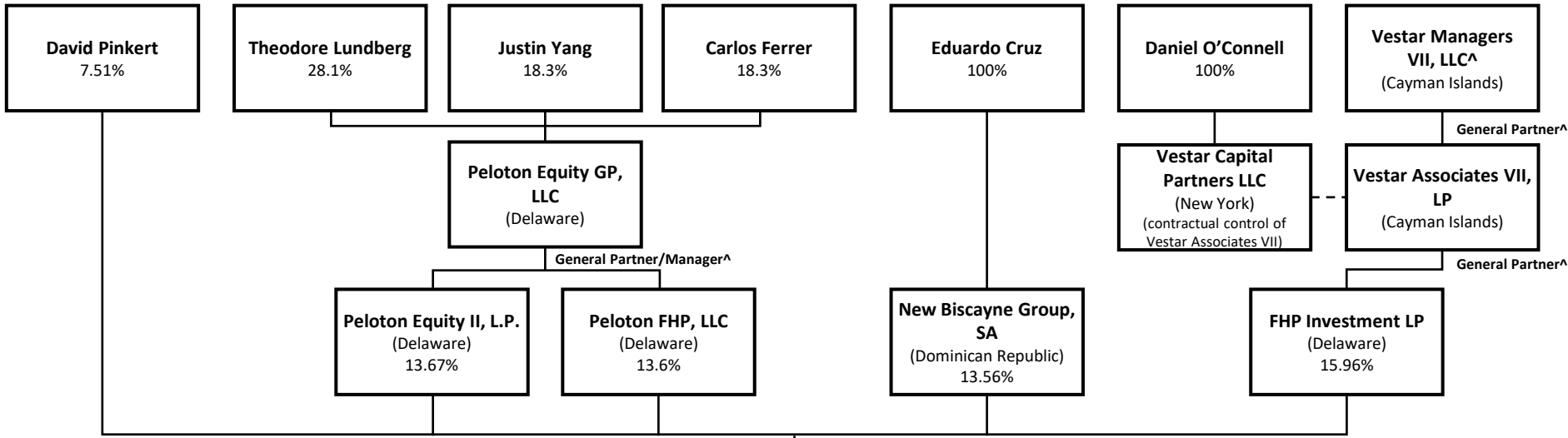
States, Etc.		Direct Business Only					Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1.	Alabama	AL					
2.	Alaska	AK					
3.	Arizona	AZ					
4.	Arkansas	AR					
5.	California	CA					
6.	Colorado	CO					
7.	Connecticut	CT					
8.	Delaware	DE					
9.	District of Columbia	DC					
10.	Florida	FL					
11.	Georgia	GA					
12.	Hawaii	HI					
13.	Idaho	ID					
14.	Illinois	IL					
15.	Indiana	IN					
16.	Iowa	IA					
17.	Kansas	KS					
18.	Kentucky	KY					
19.	Louisiana	LA					
20.	Maine	ME					
21.	Maryland	MD					
22.	Massachusetts	MA					
23.	Michigan	MI					
24.	Minnesota	MN					
25.	Mississippi	MS					
26.	Missouri	MO					
27.	Montana	MT					
28.	Nebraska	NE					
29.	Nevada	NV					
30.	New Hampshire	NH					
31.	New Jersey	NJ					
32.	New Mexico	NM					
33.	New York	NY					
34.	North Carolina	NC					
35.	North Dakota	ND					
36.	Ohio	OH					
37.	Oklahoma	OK					
38.	Oregon	OR					
39.	Pennsylvania	PA					
40.	Rhode Island	RI					
41.	South Carolina	SC					
42.	South Dakota	SD					
43.	Tennessee	TN					
44.	Texas	TX					
45.	Utah	UT					
46.	Vermont	VT					
47.	Virginia	VA					
48.	Washington	WA					
49.	West Virginia	WV					
50.	Wisconsin	WI					
51.	Wyoming	WY					
52.	American Samoa	AS					
53.	Guam	GU					
54.	Puerto Rico	PR					
55.	US Virgin Islands	VI					
56.	Northern Mariana Islands	MP					
57.	Canada	CAN					
58.	Aggregate Other Alien	OT					
59.	Totals						

NONE

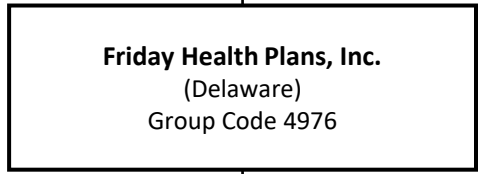
Friday Health Plans Organizational Chart

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

PART 1 - ORGANIZATIONAL CHART



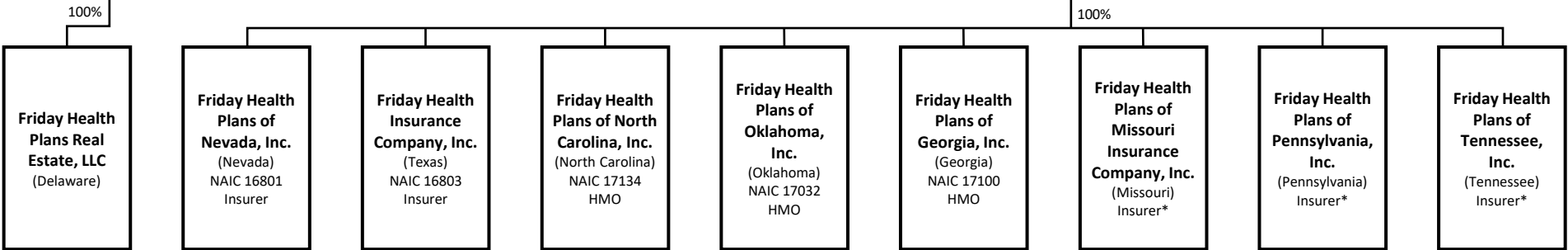
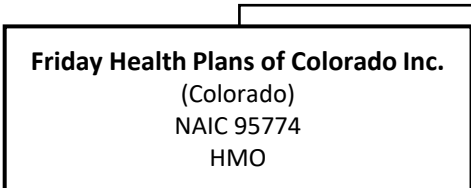
40



KEY

^ = General Partners (GPs) and/ or Mangers have 100% voting rights. GPs and Managers exercise all management and control.

* = License application pending



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
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership, Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
			47-5391343				Friday Health Plans, Inc.	CO	UDP				Friday Health Plans, Inc.	N	
			84-3646813				Friday Health Plans Management Services Company, Inc.	CO	NIA	Friday Health Plans, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	95774	23-7296258				Friday Health Plans of Colorado, Inc.	CO	IA	Friday Health Plans, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
			84-1772915				Friday Health Plans Real Estate, LLC	DE	DS	Friday Health Plans of Colorado, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	16801	81-2132766				Friday Health Plans of Nevada, Inc.	NV	IA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	16803	85-0957671				Friday Health Insurance Company, Inc.	TX	RE	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	17032	86-2561908				Friday Health Plans of Oklahoma, Inc.	OK	IA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	17100	86-2586561				Friday Health Plans of Georgia, Inc.	GA	IA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
4976	Friday Health Plans Group	17134	85-3160457				Friday Health Plans of North Carolina, Inc.	NC	IA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
			87-1572000				Friday Health Plans of Pennsylvania, Inc.	PA	NIA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
			87-0825504				Friday Health Plans of Virginia, Inc.	VA	NIA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	N	
			87-3791242				Friday Health Plans of Florida, Inc.	FL	NIA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	NO	
			87-3586930				Friday Health Plans of Tennessee, Inc.	TN	NIA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	NO	
							Friday Health Plans of Missouri Insurance Company, Inc.	MO	NIA	Friday Health Plans Management Services Company, Inc.	Ownership, Management	100.000	Friday Health Plans, Inc.	NO	
Asterisk		Explanation													

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
95774	23-7296258	Friday Helath Plans of Colorado, Inc.		18,500,000			(9,123,197)				9,376,803	
16801	81-2132766	Friday Health Plans of Nevada, Inc.		61,500,000			(6,315,602)				55,184,398	
16803	85-0957671	Friday Health Insurance Company, Inc.		95,000,000			(96,515,033)				(1,515,033)	
17134	85-3160457	Friday Health Plans of North Carolina, Inc.		5,764,658			(8,025,243)				(2,260,585)	
17100	86-2586561	Friday Health Plans of Georgia, Inc.		7,974,291			(4,994,683)				2,979,608	
17032	86-2561908	Friday Health Plans of Oklahoma, Inc.		10,760,639			(2,801,961)				7,958,678	
	84-3646813	Friday Health Plans Management Services Company, Inc.		(199,499,588)			127,775,718				(71,723,870)	
9999999	Control Totals								XXX			

SCHEDULE Y

Part 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1 Insurers in Holding Company	2 Owners with Greater than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control / Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control / Affiliation of Column 5 Over Column 6 (Yes/No)
Friday Health Plans of Colorado Inc.....	Friday Health Plans, Inc.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
Friday Health Plans of Nevada, Inc.....	Friday Health Plans Management Services.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
Friday Health Insurance Company Inc.....	Friday Health Plans Management Services.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
Friday Health Plans of Oklahoma, Inc.....	Friday Health Plans Management Services.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
Friday Health Plans of Georgia, Inc.....	Friday Health Plans Management Services.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
Friday Health Plans of North Carolina, Inc.....	Friday Health Plans Management Services.....	100.000 %	No.....	Friday Health Plans, Inc.....	Friday Health Plans Group.....	100.000 %	No.....
		%				%	

SUPPLEMENTAL EXHIBITS AND SCHEDULE INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** 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.










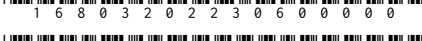
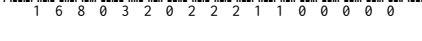

	Response
March Filing	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?.....	YES
2. Will an actuarial opinion be filed by March 1?.....	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?.....	YES
April Filing	
5. Will Management's Discussion and Analysis be filed by April 1?.....	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?.....	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?.....	YES
June Filing	
8. Will an audited financial report be filed by June 1?.....	YES
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?.....	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. 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.

March Filing	
10. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	No
11. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?.....	No
12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	No
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	No
14. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	No
15. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	No
16. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?.....	No
17. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?.....	No
18. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	No
April Filing	
19. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?.....	No
20. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?.....	No
21. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?.....	YES
22. Will the regulator-only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?.....	YES
23. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?.....	YES
August Filing	
24. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?.....	No

SUPPLEMENTAL EXHIBITS AND SCHEDULE INTERROGATORIES

Explanation	Barcode
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	 1 6 8 0 3 2 0 2 2 3 6 0 0 0 0 0 0
11.	 1 6 8 0 3 2 0 2 2 2 0 5 0 0 0 0 0
12.	 1 6 8 0 3 2 0 2 2 4 2 0 0 0 0 0 0
13.	 1 6 8 0 3 2 0 2 2 3 7 1 0 0 0 0 0
14.	 1 6 8 0 3 2 0 2 2 3 7 0 0 0 0 0 0
15.	 1 6 8 0 3 2 0 2 2 3 6 5 0 0 0 0 0
16.	 1 6 8 0 3 2 0 2 2 2 4 0 0 0 0 0 0
17.	 1 6 8 0 3 2 0 2 2 2 5 0 0 0 0 0 0
18.	 1 6 8 0 3 2 0 2 2 2 6 0 0 0 0 0 0
19.	 1 6 8 0 3 2 0 2 2 3 0 6 0 0 0 0 0
20.	 1 6 8 0 3 2 0 2 2 2 1 1 0 0 0 0 0
21.	
22.	
23.	
24.	 1 6 8 0 3 2 0 2 2 2 3 0 0 0 0 0 0

OVERFLOW PAGE FOR WRITE-INS

OVERFLOW PAGE FOR WRITE-INS

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1 Amount	2 Percentage of Column 1 Line 13	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3+4) Amount	6 Percentage of Column 5 Line 13
1. Long-term bonds (Schedule D, Part 1):						
1.01 U.S. governments	3,897,863	1.4	3,897,863		3,897,863	1.4
1.02 All other governments						
1.03 U.S. states, territories and possessions, etc. guaranteed						
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed						
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed						
1.06 Industrial and miscellaneous						
1.07 Hybrid securities						
1.08 Parent, subsidiaries and affiliates						
1.09 SVO identified funds						
1.10 Unaffiliated bank loans						
1.11 Unaffiliated certificates of deposit						
1.12 Total long-term bonds	3,897,863	1.4	3,897,863		3,897,863	1.4
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)						
2.02 Parent, subsidiaries and affiliates						
2.03 Total preferred stocks						
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)						
3.02 Industrial and miscellaneous Other (Unaffiliated)						
3.03 Parent, subsidiaries and affiliates Publicly traded						
3.04 Parent, subsidiaries and affiliates Other						
3.05 Mutual funds						
3.06 Unit investment trusts						
3.07 Closed-end funds						
3.08 Exchange traded funds						
3.09 Total common stocks						
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages						
4.02 Residential mortgages						
4.03 Commercial mortgages						
4.04 Mezzanine real estate loans						
4.05 Total valuation allowance						
4.06 Total mortgage loans						
5. Real estate (Schedule A):						
5.01 Properties occupied by company						
5.02 Properties held for production of income						
5.03 Properties held for sale						
5.04 Total real estate						
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	199,728,994	69.9	199,728,994		199,728,994	69.9
6.02 Cash equivalents (Schedule E, Part 2)						
6.03 Short-term investments (Schedule DA)	82,161,376	28.7	82,161,376		82,161,376	28.7
6.04 Total cash, cash equivalents and short-term investments	281,890,370	98.6	281,890,370		281,890,370	98.6
7. Contract loans						
8. Derivatives (Schedule DB)						
9. Other invested assets (Schedule BA)						
10. Receivables for securities						
11. Securities lending (Schedule DL, Part 1)				XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)						
13. Total invested assets	285,788,233	100.0	285,788,233		285,788,233	100.0

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1.	Book/adjusted carrying value, December 31 of prior year.....	_____
2.	Cost of acquired:	_____
2.1	Actual cost at time of acquisition (Part 2, Column 6).....	_____
2.2	Additional investment made after acquisition (Part 2, Column 9).....	_____
3.	Current year change in encumbrances:	_____
3.1	Totals, Part 1, Column 13.....	_____
3.2	Totals, Part 3, Column 11.....	_____
4.	Total gain (loss) on disposals, Part 3, Column 18.....	_____
5.	Deduct amounts received on disposals, Part 3, Column 15.....	_____
6.	Total foreign exchange change in book / adjusted carrying value:	_____
6.1	Totals, Part 1, Column 15.....	_____
6.2	Totals, Part 3, Column 13.....	_____
7.	Deduct current year's other-than-temporary impairment recognized:	_____
7.1	Totals, Part 1, Column 12.....	_____
7.2	Totals, Part 3, Column 10.....	_____
8.	Deduct current year's depreciation:	_____
8.1	Totals, Part 1, Column 11.....	_____
8.2	Totals, Part 3, Column 9.....	_____
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8).....	_____
10.	Deduct total nonadmitted amounts.....	_____
11.	Statement value at end of current period (Line 9 minus Line 10).....	_____

NONE

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

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 (Part 2, Column 7).....	_____
2.2	Additional investment made after acquisition (Part 2, Column 8).....	_____
3.	Capitalized deferred interest and other:	_____
3.1	Totals, Part 1, Column 12.....	_____
3.2	Totals, Part 3, Column 11.....	_____
4.	Accrual of discount.....	_____
5.	Unrealized valuation increase (decrease):	_____
5.1	Totals, Part 1, Column 9.....	_____
5.2	Totals, Part 3, Column 8.....	_____
6.	Total gain (loss) on disposals, Part 3, Column 18.....	_____
7.	Deduct amounts received on disposals, Part 3, Column 15.....	_____
8.	Deduct amortization of premium and mortgage interest points and commitment fees.....	_____
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest:	_____
9.1	Totals, Part 1, Column 13.....	_____
9.2	Totals, Part 3, Column 13.....	_____
10.	Deduct current year's other-than-temporary impairment recognized:	_____
10.1	Totals, Part 1, Column 11.....	_____
10.2	Totals, Part 3, Column 10.....	_____
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 of mortgages owned at end of current period (Line 13 minus Line 14).....	_____

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year.....		
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition (Part 2, Column 8).....		
2.2	Additional investment made after acquisition (Part 2, Column 9).....		
3.	Capitalized deferred interest and other:		
3.1	Totals, Part 1, Column 16.....		
3.2	Totals, Part 3, Column 12.....		
4.	Accrual of discount.....		
5.	Unrealized valuation increase (decrease):		
5.1	Totals, Part 1, Column 13.....		
5.2	Totals, Part 3, Column 9.....		
6.	Total gain (loss) on disposals, Part 3, Column 19.....		
7.	Deduct amounts received on disposals, Part 3, Column 16.....		
8.	Deduct amortization of premium and depreciation.....		
9.	Total foreign exchange change in book / adjusted carrying value:		
9.1	Totals, Part 1, Column 17.....		
9.2	Totals, Part 3, Column 14.....		
10.	Deduct current year's other-than-temporary impairment recognized:		
10.1	Totals, Part 1, Column 15.....		
10.2	Totals, Part 3, Column 11.....		
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).....		

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year.....		
2.	Cost of bonds and stocks acquired, Part 3, Column 7.....		3,879,824
3.	Accrual of discount.....		18,039
4.	Unrealized valuation increase (decrease):		
4.1	Part 1, Column 12.....		
4.2	Part 2, Section 1, Column 15.....		
4.3	Part 2, Section 2, Column 13.....		
4.4	Part 4, Column 11.....		
5.	Total gain (loss) on disposals, Part 4, Column 19.....		
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7.....		
7.	Deduct amortization of premium.....		
8.	Total foreign exchange change in book / adjusted carrying value:		
8.1	Part 1, Column 15.....		
8.2	Part 2, Section 1, Column 19.....		
8.3	Part 2, Section 2, Column 16.....		
8.4	Part 4, Column 15.....		
9.	Deduct current year's other-than-temporary impairment recognized:		
9.1	Part 1, Column 14.....		
9.2	Part 2, Section 1, Column 17.....		
9.3	Part 2, Section 2, Column 14.....		
9.4	Part 4, Column 13.....		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2.....		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....		3,897,863
12.	Deduct total nonadmitted amounts.....		
13.	Statement value at end of current period (Line 11 minus Line 12).....		3,897,863

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description	1 Book / Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS				
Governments (including all obligations guaranteed by governments)				
1. United States	3,897,863	3,885,353	3,879,824	4,000,000
2. Canada				
3. Other Countries				
4. Totals	3,897,863	3,885,353	3,879,824	4,000,000
U.S. States, Territories and Possessions (direct and guaranteed)				
5. Totals				
U.S. Political Subdivisions of States, Territories and Possessions (direct and guaranteed)				
6. Totals				
U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions				
7. Totals				
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)				
8. United States				
9. Canada				
10. Other Countries				
11. Totals				
Parent, Subsidiaries and Affiliates				
12. Totals				
13. Total Bonds	3,897,863	3,885,353	3,879,824	4,000,000
PREFERRED STOCKS				
Industrial and Miscellaneous (unaffiliated)				
14. United States				XXX
15. Canada				XXX
16. Other Countries				XXX
17. Totals				XXX
Parent, Subsidiaries and Affiliates				
18. Totals				XXX
19. Total Preferred Stocks				XXX
COMMON STOCKS				
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds				
20. United States				XXX
21. Canada				XXX
22. Other Countries				XXX
23. Totals				XXX
Parent, Subsidiaries and Affiliates				
24. Totals				XXX
25. Total Common Stocks				XXX
26. Total Stocks				XXX
27. Total Bonds and Stocks	3,897,863	3,885,353	3,879,824	XXX

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation		1	2	3	4	5	6	7	8	9	10	11	12
		1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
1.	U.S. Governments												
1.1.	NAIC 1	86,059,239					XXX	86,059,239	100.0			86,059,239	
1.2.	NAIC 2						XXX						
1.3.	NAIC 3						XXX						
1.4.	NAIC 4						XXX						
1.5.	NAIC 5						XXX						
1.6.	NAIC 6						XXX						
1.7.	Totals	86,059,239					XXX	86,059,239	100.0			86,059,239	
2.	All Other Governments												
2.1.	NAIC 1						XXX						
2.2.	NAIC 2						XXX						
2.3.	NAIC 3						XXX						
2.4.	NAIC 4						XXX						
2.5.	NAIC 5						XXX						
2.6.	NAIC 6						XXX						
2.7.	Totals						XXX						
3.	U.S. States, Territories and Possessions, etc., Guaranteed												
3.1.	NAIC 1						XXX						
3.2.	NAIC 2						XXX						
3.3.	NAIC 3						XXX						
3.4.	NAIC 4						XXX						
3.5.	NAIC 5						XXX						
3.6.	NAIC 6						XXX						
3.7.	Totals						XXX						
4.	U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.1.	NAIC 1						XXX						
4.2.	NAIC 2						XXX						
4.3.	NAIC 3						XXX						
4.4.	NAIC 4						XXX						
4.5.	NAIC 5						XXX						
4.6.	NAIC 6						XXX						
4.7.	Totals						XXX						
5.	U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1.	NAIC 1						XXX						
5.2.	NAIC 2						XXX						
5.3.	NAIC 3						XXX						
5.4.	NAIC 4						XXX						
5.5.	NAIC 5						XXX						
5.6.	NAIC 6						XXX						
5.7.	Totals						XXX						

S105

SCHEDULE D - PART 1A - SECTION 1 (CONTINUED)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation		1	2	3	4	5	6	7	8	9	10	11	12
		1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
6.	Industrial and Miscellaneous (unaffiliated)												
6.1.	NAIC 1						XXX						
6.2.	NAIC 2						XXX						
6.3.	NAIC 3						XXX						
6.4.	NAIC 4						XXX						
6.5.	NAIC 5						XXX						
6.6.	NAIC 6						XXX						
6.7.	Totals						XXX						
7.	Hybrid Securities												
7.1.	NAIC 1						XXX						
7.2.	NAIC 2						XXX						
7.3.	NAIC 3						XXX						
7.4.	NAIC 4						XXX						
7.5.	NAIC 5						XXX						
7.6.	NAIC 6						XXX						
7.7.	Totals						XXX						
8.	Parent, Subsidiaries and Affiliates												
8.1.	NAIC 1						XXX						
8.2.	NAIC 2						XXX						
8.3.	NAIC 3						XXX						
8.4.	NAIC 4						XXX						
8.5.	NAIC 5						XXX						
8.6.	NAIC 6						XXX						
8.7.	Totals						XXX						
9.	SVO Identified Funds												
9.1.	NAIC 1	XXX	XXX	XXX	XXX	XXX							
9.2.	NAIC 2	XXX	XXX	XXX	XXX	XXX							
9.3.	NAIC 3	XXX	XXX	XXX	XXX	XXX							
9.4.	NAIC 4	XXX	XXX	XXX	XXX	XXX							
9.5.	NAIC 5	XXX	XXX	XXX	XXX	XXX							
9.6.	NAIC 6	XXX	XXX	XXX	XXX	XXX							
9.7.	Totals	XXX	XXX	XXX	XXX	XXX							
10.	Unaffiliated Bank Loans												
10.1.	NAIC 1						XXX						
10.2.	NAIC 2						XXX						
10.3.	NAIC 3						XXX						
10.4.	NAIC 4						XXX						
10.5.	NAIC 5						XXX						
10.6.	NAIC 6						XXX						
10.7.	Totals						XXX						
11.	Unaffiliated Certificates of Deposit												
11.1.	NAIC 1						XXX			XXX	XXX		
11.2.	NAIC 2						XXX			XXX	XXX		
11.3.	NAIC 3						XXX			XXX	XXX		
11.4.	NAIC 4						XXX			XXX	XXX		
11.5.	NAIC 5						XXX			XXX	XXX		
11.6.	NAIC 6						XXX			XXX	XXX		
11.7.	Totals						XXX			XXX	XXX		

NONE

SCHEDULE D - PART 1A - SECTION 1 (CONTINUED)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1. NAIC 1	(d) 86,059,239						86,059,239	100.0	XXX	XXX	86,059,239	
12.2. NAIC 2	(d)								XXX	XXX		
12.3. NAIC 3	(d)								XXX	XXX		
12.4. NAIC 4	(d)								XXX	XXX		
12.5. NAIC 5	(d)						(c)		XXX	XXX		
12.6. NAIC 6	(d)						(c)		XXX	XXX		
12.7. Totals	86,059,239						(b) 86,059,239	100.0	XXX	XXX	86,059,239	
12.8. Line 12.7 as a % of Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	
13. Total Bonds Prior Year												
13.1. NAIC 1							XXX	XXX				
13.2. NAIC 2							XXX	XXX				
13.3. NAIC 3							XXX	XXX				
13.4. NAIC 4							XXX	XXX				
13.5. NAIC 5							XXX	XXX	(c)			
13.6. NAIC 6							XXX	XXX	(c)			
13.7. Totals							XXX	XXX	(b)			
13.8. Line 13.7 as a % of Col. 9							XXX	XXX		XXX		
14. Total Publicly Traded Bonds												
14.1. NAIC 1	86,059,239						86,059,239	100.0			86,059,239	XXX
14.2. NAIC 2												XXX
14.3. NAIC 3												XXX
14.4. NAIC 4												XXX
14.5. NAIC 5												XXX
14.6. NAIC 6												XXX
14.7. Totals	86,059,239						86,059,239	100.0			86,059,239	XXX
14.8. Line 14.7 as a % of Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	XXX
14.9. Line 14.7 as a % of Line 12.7, Col. 7, Section 12	100.0						100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.1. NAIC 1											XXX	
15.2. NAIC 2											XXX	
15.3. NAIC 3											XXX	
15.4. NAIC 4											XXX	
15.5. NAIC 5											XXX	
15.6. NAIC 6											XXX	
15.7. Totals											XXX	
15.8. Line 15.7 as a % of Col. 7									XXX	XXX	XXX	XXX
15.9. Line 15.7 as a % of Line 12.7, Col. 7, Section 12									XXX	XXX	XXX	XXX

S107

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ current year of bonds with Z designations and \$ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$ current year of bonds with 5GI designations, \$ prior year of bonds with 5GI designations and \$ current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$82,161,376; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$.

SCHEDULE D – PART 1A – SECTION 2

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type		1	2	3	4	5	6	7	8	9	10	11	12
		1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.09	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed
1.	U.S. Governments												
1.01.	Issuer Obligations	86,059,239					XXX	86,059,239	100.0			86,059,239	
1.02.	Residential Mortgage-Backed Securities						XXX						
1.03.	Commercial Mortgage-Backed Securities						XXX						
1.04.	Other Loan-Backed and Structured Securities						XXX						
1.05.	Totals	86,059,239					XXX	86,059,239	100.0			86,059,239	
2.	All Other Governments												
2.01.	Issuer Obligations						XXX						
2.02.	Residential Mortgage-Backed Securities						XXX						
2.03.	Commercial Mortgage-Backed Securities						XXX						
2.04.	Other Loan-Backed and Structured Securities						XXX						
2.05.	Totals						XXX						
3.	U.S. States, Territories and Possessions, Guaranteed												
3.01.	Issuer Obligations						XXX						
3.02.	Residential Mortgage-Backed Securities						XXX						
3.03.	Commercial Mortgage-Backed Securities						XXX						
3.04.	Other Loan-Backed and Structured Securities						XXX						
3.05.	Totals						XXX						
4.	U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01.	Issuer Obligations						XXX						
4.02.	Residential Mortgage-Backed Securities						XXX						
4.03.	Commercial Mortgage-Backed Securities						XXX						
4.04.	Other Loan-Backed and Structured Securities						XXX						
4.05.	Totals						XXX						
5.	U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.01.	Issuer Obligations						XXX						
5.02.	Residential Mortgage-Backed Securities						XXX						
5.03.	Commercial Mortgage-Backed Securities						XXX						
5.04.	Other Loan-Backed and Structured Securities						XXX						
5.05.	Totals						XXX						
6.	Industrial and Miscellaneous												
6.01.	Issuer Obligations						XXX						
6.02.	Residential Mortgage-Backed Securities						XXX						
6.03.	Commercial Mortgage-Backed Securities						XXX						
6.04.	Other Loan-Backed and Structured Securities						XXX						
6.05.	Totals						XXX						
7.	Hybrid Securities												
7.01.	Issuer Obligations						XXX						
7.02.	Residential Mortgage-Backed Securities						XXX						
7.03.	Commercial Mortgage-Backed Securities						XXX						
7.04.	Other Loan-Backed and Structured Securities						XXX						
7.05.	Totals						XXX						
8.	Parent, Subsidiaries and Affiliates												
8.01.	Issuer Obligations						XXX						
8.02.	Residential Mortgage-Backed Securities						XXX						
8.03.	Commercial Mortgage-Backed Securities						XXX						
8.04.	Other Loan-Backed and Structured Securities						XXX						
8.05.	Affiliated Bank Loans-Issued						XXX						
8.06.	Affiliated Bank Loans-Acquired						XXX						
8.07.	Totals						XXX						

SCHEDULE D – PART 1A – SECTION 2 (CONTINUED)

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type		1	2	3	4	5	6	7	8	9	10	11	12
		1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 12.09	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed
9.	SVO Identified Funds												
9.01.	Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX							
10.	Unaffiliated Bank Loans												
10.01.	Unaffiliated Bank Loans - Issued						XXX						
10.02.	Unaffiliated Bank Loans - Acquired						XXX						
10.03.	Totals						XXX						
11.	Unaffiliated Certificates of Deposit												
11.01.	Totals						XXX		XXX	XXX			
12.	Total Bonds Current Year												
12.01.	Issuer Obligations	86,059,239					XXX	86,059,239	100.0	XXX	XXX	86,059,239	
12.02.	Residential Mortgage-Backed Securities						XXX			XXX	XXX		
12.03.	Commercial Mortgage-Backed Securities						XXX			XXX	XXX		
12.04.	Other Loan-Backed and Structured Securities						XXX			XXX	XXX		
12.05.	SVO Identified Funds	XXX	XXX	XXX	XXX	XXX				XXX	XXX		
12.06.	Affiliated Bank Loans						XXX			XXX	XXX		
12.07.	Unaffiliated Bank Loans						XXX			XXX	XXX		
12.08.	Unaffiliated Certificates of Deposit						XXX			XXX	XXX		
12.09.	Totals	86,059,239						86,059,239	100.0	XXX	XXX	86,059,239	
12.10.	Lines 12.09 as a % Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	
13.	Total Bonds Prior Year												
13.01.	Issuer Obligations						XXX	XXX	XXX				
13.02.	Residential Mortgage-Backed Securities						XXX	XXX	XXX				
13.03.	Commercial Mortgage-Backed Securities						XXX	XXX	XXX				
13.04.	Other Loan-Backed and Structured Securities						XXX	XXX	XXX				
13.05.	SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	XXX				
13.06.	Affiliated Bank Loans						XXX	XXX	XXX				
13.07.	Unaffiliated Bank Loans						XXX	XXX	XXX				
13.08.	Unaffiliated Certificates of Deposit	XXX	XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX	XXX	XXX
13.09.	Totals							XXX	XXX				
13.10.	Line 13.09 as a % of Col. 9							XXX	XXX		XXX		
14.	Total Publicly Traded Bonds												
14.01.	Issuer Obligations	86,059,239					XXX	86,059,239	100.0			86,059,239	XXX
14.02.	Residential Mortgage-Backed Securities						XXX						XXX
14.03.	Commercial Mortgage-Backed Securities						XXX						XXX
14.04.	Other Loan-Backed and Structured Securities						XXX						XXX
14.05.	SVO Identified Funds	XXX	XXX	XXX	XXX	XXX							XXX
14.06.	Affiliated Bank Loans						XXX						XXX
14.07.	Unaffiliated Bank Loans						XXX						XXX
14.08.	Unaffiliated Certificates of Deposit						XXX			XXX	XXX		XXX
14.09.	Totals	86,059,239						86,059,239	100.0			86,059,239	XXX
14.10.	Line 14.09 as a % of Col. 7	100.0						100.0	XXX	XXX	XXX	100.0	XXX
14.11.	Line 14.09 as a % of Line 12.09, Col. 7, Section 12	100.0						100.0	XXX	XXX	XXX	100.0	XXX
15.	Total Privately Placed Bonds												
15.01.	Issuer Obligations						XXX					XXX	
15.02.	Residential Mortgage-Backed Securities						XXX					XXX	
15.03.	Commercial Mortgage-Backed Securities						XXX					XXX	
15.04.	Other Loan-Backed and Structured Securities						XXX					XXX	
15.05.	SVO Identified Funds	XXX	XXX	XXX	XXX	XXX						XXX	
15.06.	Affiliated Bank Loans						XXX					XXX	
15.07.	Unaffiliated Bank Loans						XXX					XXX	
15.08.	Unaffiliated Certificates of Deposit						XXX			XXX	XXX	XXX	
15.09.	Totals											XXX	
15.10.	Line 15.09 as a % of Col. 7								XXX	XXX	XXX	XXX	
15.11.	Line 15.09 as a % of Line 12.09, Col. 7, Section 12								XXX	XXX	XXX	XXX	

6018

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year.....					
2. Cost of short-term investments acquired.....	86,124,307	86,124,307			
3. Accrual of discount.....					
4. Unrealized valuation increase (decrease).....					
5. Total gain (loss) on disposals.....					
6. Deduct consideration received on disposals.....	3,962,931	3,962,931			
7. Deduct amortization of premium.....					
8. Total foreign exchange change in book / adjusted carrying value.....					
9. Deduct current year's other-than-temporary impairment recognized.....					
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	82,161,376	82,161,376			
11. Deduct total nonadmitted amounts.....					
12. Statement value at end of current period (Line 10 minus Line 11).....	82,161,376	82,161,376			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment: 0

(SI-11) Schedule DB - Part A - Verification Between Years - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

(SI-11) Schedule DB - Part B - Verification Between Years - Futures Contracts

NONE

(SI-12) Schedule DB - Part C - Section 1

NONE

(SI-13) Schedule DB - Part C - Section 2

NONE

(SI-14) Schedule DB - Verification

NONE

SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual Funds	Other (a)
1. Book/adjusted carrying value, December 31 of prior year.....				
2. Cost of cash equivalents acquired.....	5,983,683	5,983,683		
3. Accrual of discount.....				
4. Unrealized valuation increase (decrease).....				
5. Total gain (loss) on disposals.....				
6. Deduct consideration received on disposals.....	5,983,683	5,983,683		
7. Deduct amortization of premium.....				
8. Total foreign exchange change in book / adjusted carrying value.....				
9. Deduct current year's other-than-temporary impairment recognized.....				
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....				
11. Deduct total nonadmitted amounts.....				
12. Statement value at end of current period (Line 10 minus Line 11).....				

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

(E-01) Schedule A - Part 1

NONE

(E-02) Schedule A - Part 2

NONE

(E-03) Schedule A - Part 3

NONE

(E-04) Schedule B - Part 1

NONE

(E-05) Schedule B - Part 2

NONE

(E-06) Schedule B - Part 3

NONE

(E-07) Schedule BA - Part 1

NONE

(E-08) Schedule BA - Part 2

NONE

(E-09) Schedule BA - Part 3

NONE

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1 CUSIP Identification	2 Description	Codes			6 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	7 Actual Cost	Fair Value		10 Par Value	11 Book / Adjusted Carrying Value	Change in Book / Adjusted Carrying Value				Interest					Dates		
		3 Code	4 Foreign	5 Bond CHAR			8 Rate Used To Obtain Fair Value	9 Fair Value			12 Unrealized Valuation Increase / (Decrease)	13 Current Year's (Amortization) / Accretion	14 Current Year's Other-Than- Temporary Impairment Recognized	15 Total Foreign Exchange Change in B./A.C.V.	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due & Accrued	20 Amount Rec. During Year	21 Acquired	22 Stated Contractual Maturity Date	
U.S. Governments, Issuer Obligations																						
912796-XY-0	UNITED STATES TREAS BILLS	@			1.A	1,940,527	97.303	1,946,056	2,000,000	1,940,527						3.014	N/A		23,134		08/09/2022	08/10/2023
91282C-DA-6	UNITED STATES TREAS NTS				1.A	1,939,297	96.965	1,939,297	2,000,000	1,957,336		18,039			0.250	3.193	MS	1,277	2,500	09/06/2022	09/30/2023	
0019999999	U.S. Governments, Issuer Obligations					3,879,824	XXX	3,885,353	4,000,000	3,897,863		18,039			XXX	XXX	XXX	24,411	2,500	XXX	XXX	
0109999999	Subtotals - U.S. Governments					3,879,824	XXX	3,885,353	4,000,000	3,897,863		18,039			XXX	XXX	XXX	24,411	2,500	XXX	XXX	
2419999999	Subtotals - Issuer Obligations					3,879,824	XXX	3,885,353	4,000,000	3,897,863		18,039			XXX	XXX	XXX	24,411	2,500	XXX	XXX	
2509999999	Subtotals - Total Bonds					3,879,824	XXX	3,885,353	4,000,000	3,897,863		18,039			XXX	XXX	XXX	24,411	2,500	XXX	XXX	

1. Line Number Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A	1A	\$3,897,863	1B \$	1C \$	1D \$	1E \$	1F \$	1G \$
1B	2A	\$	2B \$	2C \$				
1C	3A	\$	3B \$	3C \$				
1D	4A	\$	4B \$	4C \$				
1E	5A	\$	5B \$	5C \$				
1F	6	\$						

(E-11) Schedule D - Part 2 - Section 1

NONE

(E-12) Schedule D - Part 2 - Section 2

NONE

SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Year

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
Bonds: U.S. Governments								
912796-XY-0	UNITED STATES TREAS BILLS		08/09/2022	Bank Of Oklahoma	XXX	1,940,527	2,000,000	
91282C-DA-6	UNITED STATES TREAS NTS		09/06/2022	Bank Of Oklahoma	XXX	1,939,297	2,000,000	2,172
0109999999 – Bonds: U.S. Governments						3,879,824	4,000,000	2,172
2509999997 – Subtotals - Bonds - Part 3						3,879,824	4,000,000	2,172
2509999999 – Subtotals - Bonds						3,879,824	4,000,000	2,172
6009999999 – Totals						3,879,824	XXX	2,172

(E-14) Schedule D - Part 4

NONE

(E-15) Schedule D - Part 5

NONE

(E-16) Schedule D - Part 6 - Section 1

NONE

(E-16) Schedule D - Part 6 - Section 2

NONE

SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1	Codes		4	5	6	7	Change In Book / Adjusted Carrying Value				12	13	Interest					20	
	2	3					8	9	10	11			14	15	16	17	18		19
Description	Code	Foreign	Date Acquired	Name of Vendor	Maturity Date	Book / Adjusted Carrying Value	Unrealized Valuation Increase / (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in B./A.C.V.	Par Value	Actual Cost	Amount Due and Accrued Dec 31 of Current Year on Bond Not in Default	Non-Admitted Due and Accrued	Rate of	Effective Rate of	When Paid	Amount Received During Year	Paid for Accrued Interest
Bonds: U.S. Governments, Issuer Obligations																			
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	02/23/2023	7,874,140					8,000,000	7,874,140	94,892			2.653	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	03/23/2023	7,858,444					8,000,000	7,858,444	94,386			2.647	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	04/20/2023	9,801,317					10,000,000	9,801,317	118,688			2.672	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	05/18/2023	9,776,758					10,000,000	9,776,758	120,719			2.728	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	06/15/2023	19,508,328					20,000,000	19,508,328	242,777			2.753	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	07/13/2023	19,444,667					20,000,000	19,444,667	252,069			2.872	N/A		
UNITED STATES TREAS BILLS	@		07/20/2022	Bank Of Oklahoma	01/12/2023	7,897,722					8,000,000	7,897,722	95,808			2.667	N/A		
0019999999 - Bonds: U.S. Governments, Issuer Obligations						82,161,376					84,000,000	82,161,376	1,019,339		XXX	XXX	XXX		
0109999999 - Bonds: Subtotals - U.S. Governments						82,161,376					84,000,000	82,161,376	1,019,339		XXX	XXX	XXX		
2419999999 - Total Bonds, Subtotals - Issuer Obligations						82,161,376					84,000,000	82,161,376	1,019,339		XXX	XXX	XXX		
2509999999 - Total Bonds, Subtotals - Bonds						82,161,376					84,000,000	82,161,376	1,019,339		XXX	XXX	XXX		
7709999999 - Total Short-Term Investments						82,161,376					XXX	82,161,376	1,019,339		XXX	XXX	XXX		

1. Line Number Book/Adjusted Carrying Value by NAIC Designation Category Footnote:

1A	1A	\$82,161,376	1B	\$	1C	\$	1D	\$	1E	\$	1F	\$	1G	\$
1B	2A	\$	2B	\$	2C	\$								
1C	3A	\$	3B	\$	3C	\$								
1D	4A	\$	4B	\$	4C	\$								
1E	5A	\$	5B	\$	5C	\$								
1F	6	\$												

(E-18) Schedule DB - Part A - Section 1

NONE

(E-18) Schedule DB - Part A - Section 1 - Description of Hedged Risk(s)

NONE

(E-18) Schedule DB - Part A - Section 1 - Financial or Economic Impact of the Hedge

NONE

(E-19) Schedule DB - Part A - Section 2

NONE

(E-19) Schedule DB - Part A - Section 2 - Description of Hedged Risk(s)

NONE

(E-19) Schedule DB - Part A - Section 2 - Financial or Economic Impact of the Hedge

NONE

(E-20) Schedule DB - Part B - Section 1

NONE

(E-20) Schedule DB - Part B - Section 1 - Broker Name

NONE

(E-20) Schedule DB - Part B - Section 1 - Description of Hedged Risk(s)

NONE

(E-20) Schedule DB - Part B - Section 1 - Financial or Economic Impact of the Hedge

NONE

(E-21) Schedule DB - Part B - Section 2

NONE

(E-21) Schedule DB - Part B - Section 2 - Description of Hedged Risk(s)

NONE

(E-21) Schedule DB - Part B - Section 2 - Financial or Economic Impact of the Hedge

NONE

(E-22) Schedule DB - Part D - Section 1

NONE

(E-23) Schedule DB - Part D - Section 2 - By Reporting Entity

NONE

(E-23) Schedule DB - Part D - Section 2 - To Reporting Entity

NONE

(E-24) Schedule DB - Part E

NONE

(E-25) Schedule DL - Part 1

NONE

(E-25) Schedule DL - Part 1 - General Interrogatories

NONE

(E-26) Schedule DL - Part 2

NONE

(E-26) Schedule DL - Part 2 - General Interrogatories

NONE

SCHEDULE E - PART 1 - CASH

1	2	3	4	5	6	7
Depository	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Open Depositories						
BOK Financial Corporation Denver, CO					199,139,436	XXX
Wells Fargo Denver, CO					589,558	XXX
0199998 – Deposits in depositories that do not exceed allowable limits in any one depository (See Instructions)-open depositories						XXX
0199999 – Totals – Open Depositories					199,728,994	XXX
0399999 – Total Cash on Deposit					199,728,994	XXX
0599999 – Total Cash					199,728,994	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January	79,952,677	4. April	248,738,635	7. July	251,481,917	10. October	162,917,769
2. February	148,754,988	5. May	295,447,930	8. August	115,636,552	11. November	158,710,435
3. March	230,264,226	6. June	270,103,353	9. September	147,875,792	12. December	199,728,994

(E-28) Schedule E - Part 2

NONE

(E-29) Schedule E - Part 3

NONE

(E-29) Write-Ins for Line 58 - Alien and Other

NONE

EXHIBIT 2

**ACTION BY UNANIMOUS WRITTEN CONSENT OF
THE BOARD OF DIRECTORS OF
FRIDAY HEALTH INSURANCE COMPANY, INC.**

March 14, 2023

The undersigned, being all of the members of the Board of Directors (the “Board”) of Friday Health Insurance Company, Inc., a Texas stock health insurance company (the “Company”), waiving all notice, consent to, approve of and adopt the following actions being taken without a meeting pursuant to the authorization of the Texas Business Organizations Code Section 6.201, Texas Insurance Code Section 841.063 (together referred to as the “Code”), and the Company’s Bylaws.

WHEREAS, pursuant to Section 3.17 of the Company’s Bylaws, the Board agrees to make the following resolution after having consulted with counsel of its choosing:

NOW, THEREFORE, BE IT RESOLVED, that the Board agrees to the attached Consent to Order of Liquidation and entry of an order placing the Company into liquidation and appointing the commissioner of insurance of the State of Texas (Commissioner) as liquidator under Texas Insurance Code § 443.057(20) without further notice or hearing and waive any and all rights to notice and hearing.

RESOLVED, that grounds exist for the entry of an order placing the Company into liquidation and appointing a liquidator under Texas Insurance Code § 443.057.

FURTHER RESOLVED, that grounds exist for the entry of an order placing the Company into liquidation and appointing a liquidator as the Company is impaired as that term is defined in Texas Insurance Code § 443.004(a)(12) and insolvent as that term is defined in § 443.004(a)(13).

FURTHER RESOLVED, that the Company consents to any injunctions the receivership court, as that term is defined in Texas Insurance Code § 443.004(24), deems necessary and appropriate under Texas Insurance Code § 443.008. The Company agrees that the Commissioner may, at her sole discretion, apply to the receivership court for any additional orders regarding the Company, and that all such orders entered shall be final when entered, with the Company waiving any right to appeal such orders, including any order liquidating the Company.

FURTHER RESOLVED, that the directors and the officers of the Company are hereby authorized to execute any and all consent agreements or documents on behalf of the Company and are authorized to take any and all additional actions as deemed necessary or appropriate by the commissioner without further approval of the directors or shareholders.

OMNIBUS RESOLUTIONS RESOLVED, that the officers and directors of the Company be, and each of them hereby is, authorized and directed, for and on behalf of the Company, to make all such arrangements, to do and perform all such acts and to execute and deliver all such certificates and such other instruments, agreements, and documents, and to pay all such expenses, as they may deem necessary or appropriate in order to fully effectuate the purpose of

each and all of the foregoing resolutions, and to waive all conditions and to do all things necessary and helpful to carry out the purposes of the foregoing resolutions, and that any and all prior or future actions taken by those officers or directors that are consistent with the purposes and intent of the above resolutions are ratified, approved, adopted, and confirmed; and

RESOLVED FURTHER, that all documents, agreements and instruments previously executed and delivered, and any and all actions previously taken by any director, officer, employee or agent of the Company in connection with or related to the matters set forth in, or reasonably contemplated or implied by, the foregoing resolutions be, and each of them hereby is, adopted, ratified, confirmed and approved in all respects and for all purposes as the acts and deeds of the Company. The actions taken by this consent shall have the same force and effect as if taken by the undersigned at a meeting of the Board, duly called and constituted pursuant to the Act and the Bylaws of the Company. This consent may be executed by telefacsimile signature or other electronic means, and a telefacsimile signature or signature delivered by other electronic means will constitute an original signature. This consent shall be filed with the minutes of the proceedings of the Board.

IN WITNESS WHEREOF, the undersigned have executed this Action by Unanimous Written Consent of the Board of Directors of Friday Health Insurance Company, Inc. effective as of the date first written above.

DocuSigned by:
By: Elizabeth D. Bierbower
9AEDB0CC4B64462...

Elizabeth Bierbower, Chief Executive Officer & Director

DocuSigned by:
By: Rhonda Bagby
14ABC2BAEE29489...

Rhonda Bagby, Chief Financial Officer & Director

DocuSigned by:
By: Craig Domeracki
D76F47F2A27A429...

Craig Domeracki, Market President & Director

DocuSigned by:
By: Tracy Faigin
7FAE5441542F47A...

Tracy Faigin, Director

CONSENT TO ORDER OF LIQUIDATION

It is hereby agreed to as follows:

1. Friday Health Insurance Company, Inc., (“Company”) is a Texas domiciled life, health and accident insurer licensed under Texas Insurance Code Chapter 801 and Chapter 841 and is authorized to transact insurance business in Texas.
2. Company admits that grounds exist for the entry of an order placing Company into liquidation and appointing a liquidator under Texas Insurance Code § 443.057.
3. Company specifically admits that grounds exist under Texas Insurance Code § 443.057(1) as it is impaired as that term is defined in Texas Insurance Code § 443.004(a)(12).
4. Company further specifically admits that grounds exist under Texas Insurance Code § 443.057(2) as it is insolvent as that term is defined in § 443.004(a)(13).
5. Company consents through an Action of Unanimous Written Consent of the Board to the entry of an order placing Company into liquidation and appointing the commissioner of insurance of the State of Texas (“Commissioner”) as liquidator under Texas Insurance Code § 443.057(20).
6. Company consents to any injunctions the receivership court, as that term is defined in Texas Insurance Code § 443.004(24), deems necessary and appropriate under Texas Insurance Code § 443.008. Company agrees that the Commissioner may, at her sole discretion, apply to the receivership court for any additional orders regarding Company, and that all such orders entered shall be final when entered, with Company waiving any right to appeal such orders, including any order liquidating the Company.
7. This consent is attached to the Unanimous Written Consent of the Board adopting it.
8. Company acknowledges that it has agreed to this Consent to Order of Liquidation voluntarily and after having the opportunity to consult counsel of its choosing.

Friday Health Insurance Company, Inc., consents to the entry of an order placing Company into liquidation and appointing the Commissioner as liquidator, agrees without reservation to all of the above terms and conditions, and shall be bound by all provisions herein.

Cause No. _____

**TEXAS DEPARTMENT OF
INSURANCE,
Plaintiff,**

v.

**FRIDAY HEALTH INSURANCE
COMPANY, INC.
Defendant.**

§
§
§
§
§
§
§
§

IN THE DISTRICT COURT OF

TRAVIS COUNTY, TEXAS

_____ **JUDICIAL DISTRICT**

**AGREED ORDER APPOINTING LIQUIDATOR, PERMANENT INJUNCTION,
AND NOTICE OF AUTOMATIC STAY**

On this day, the Court heard the *Plaintiff's Original Petition. Application for Agreed Order Appointing Liquidator, and Request for Injunctive Relief* (“Application”) filed by the Texas Department of Insurance through the Office of the Attorney General of Texas at the request of the Commissioner of Insurance for the State of Texas (“Commissioner”).

The Application requests an order placing Friday Health Insurance Company, Inc. (“Friday” or “Defendant”) into liquidation pursuant to Texas Insurance Code Chapter 443¹, the Insurer Receivership Act, and appointing the Commissioner as Liquidator of Defendant (“Liquidator”). The Application also requests a Permanent Injunction pursuant to Section 443.008, restraining Defendant and its agents from conducting Defendant’s business, and restraining other parties from taking any actions against Defendant or its property in violation of the Insurer Receivership Act.

The Texas Department of Insurance appeared by and through the Office of the Attorney General. Defendant appeared by and through its counsel of record. Having considered the Plaintiff’s verified petition, the evidence presented and the arguments of counsel, the Court finds

¹ All statutory references are to the Texas Insurance Code unless otherwise indicated.

that the Application should be GRANTED, and enters this Order.

IT IS, THEREFORE, ORDERED, ADJUDGED AND DECREED as follows:

I. FINDINGS OF FACT

1.1 Defendant is a “Covered Person” as defined in Section 443.003.

1.2 Defendant does not have admitted assets at least equal to all its liabilities together with the minimum surplus of \$1,400,000 required to be maintained under Section 841.054.

1.3 Defendant is insolvent as defined in Section 443.004(a)(13). Defendant does not have admitted assets equal to its liabilities and has total adjusted capital less than that required under Chapter 841.

1.4 The continued conduct of the business of Defendant would not be in the best interest of Defendant’s policyholders, creditors or the public.

1.5 On March 14, 2023, the Defendant’s board of directors unanimously consented to placing Friday into liquidation and appointing the Commissioner as liquidator.

II. CONCLUSIONS OF LAW

2.1 This Court has jurisdiction over the parties and the subject matter of this action under Section 443.005(c).

2.2 Grounds have been established to place Defendant into liquidation under Section 443.057. These grounds include, but are not limited to, the finding that Defendant is impaired, as defined in Section 443.004(a)(12), and insolvent, as defined in Section 443.004(a)(13).

2.3 In accordance with Section 443.058, Plaintiff is entitled to an order of liquidation, and the Commissioner must be appointed as Liquidator of Defendant pursuant to Section 443.151.

2.4 The Liquidator shall be vested by operation of law with title to all of Defendant’s property as defined in Section 443.004(a)(20). Such property shall include property of any kind or nature, whether real, personal, or mixed, including but not limited to money, funds, cash, stock,

bonds, account deposits, statutory deposits, special deposits, contents of safe deposit boxes, funds held in shared, escrow or trust accounts, retainages and retainers, letters of credit, real estate, fixtures, furniture, equipment, books, records, documents and insurance policies, intellectual property, computer software and systems, information technology, internet domain names, patents and intangible assets, whether owned individually, jointly, or severally, wherever located, and all rights, claims or causes of action belonging to Defendant, whether asserted or not, including but not limited to accounts receivable, notes, premiums, subrogation, insurance and reinsurance proceeds, and all licenses held by Defendant (collectively, Defendant's property). The Liquidator's title shall extend to Defendant's Property regardless of the name in which such items are held, or where such items are located.

2.5 Pursuant to Section 443.151(a), the Liquidator shall be directed to take possession and control of Defendant's Property, wherever located.

2.6 The Liquidator may act as she deems necessary or appropriate to perform her duties pursuant to Section 443.151. The Liquidator shall have all the powers of Defendant's directors, officers and managers, and the authority of such persons is suspended except as specifically permitted by the Liquidator or her designees.

2.7 Defendant and Defendant's agents shall be required to cooperate with the Liquidator and her designees pursuant to Section 443.010.

2.8 Pursuant to Section 443.008(c), an automatic stay is in effect with respect to actions against Defendant or its property, effective on the commencement of this proceeding. Pursuant to Section 443.008(d), an automatic stay is in effect with respect to actions against insureds of Defendant, commencing on the entry of this Order. In addition to the stays under Section 443.008, a stay shall be in effect upon the designation of Defendant as an "impaired insurer" pursuant to

Section 463.404.

2.9 Pursuant to Section 443.008(a), this Court may issue any stay or injunction as necessary or appropriate to carry out the Insurer Receivership Act. It is necessary for this Court to issue a permanent injunction pursuant to Section 443.008(a) to carry out the provisions of Chapter 443, and prevent irreparable injury, loss and damage to the general public and Defendant's creditors. A necessity exists to enjoin Defendant and Defendant's agents from conducting Defendant's business, except as specifically permitted by the Liquidator or her designees; to enjoin financial institutions or depositories from taking any actions in connection with Defendant's property, except as directed by the Liquidator or her designees; and to enjoin all claimants or creditors from asserting claims or causes of action against Defendant, except as permitted by the Insurer Receivership Act.

2.10 Pursuant to Section 443.151(a), this proceeding is exempt from any dormancy requirements.

2.11 Section 443.001(b) provides that the Insurer Receivership Act may not be interpreted to limit the powers granted to the Commissioner under other provisions of law. Accordingly, this Order shall not be construed as a limitation of the Commissioner's powers granted under such provisions.

III. APPOINTMENT OF LIQUIDATOR

The Commissioner is appointed as Liquidator of Defendant, and granted the following powers:

3.1 The Liquidator has all powers and authority granted by the Insurer Receivership Act, specifically, without limitation, Section 443.151 *et seq.* and any and all other powers and authority under applicable statutes and the common law of this State.

3.2 Pursuant to Section 443.151 (a), title to all of Defendant's property, including but
Order Appointing Liquidator, Permanent Injunction, and Automatic Stay Page 4 of 11

not limited to all the assets and rights described in this Order, is vested in the Liquidator. The Liquidator is authorized to take control and possession of Defendant's Property, wherever located, and remove all such property from Defendant's premises.

3.3 Pursuant to Section 443.154(w), the Liquidator is vested with all of Defendant's rights. The Liquidator is authorized to direct, manage, and supervise Defendant's directors, officers, managers, employees or agents, and compensate them as she deems necessary from Defendant's funds, or to suspend or discharge such persons at her discretion.

3.4 The Liquidator has all of Defendant's rights as the customer of a financial institution. The Liquidator is authorized to withdraw Defendant's Property from any banks, financial institutions and other depositories, agencies of any state or the federal government, and any other entities, or continue the operation of any accounts of Defendant, at her discretion.

3.5 The Liquidator is vested with all legal remedies available to Defendant pursuant to Section 443.154(w). The Liquidator is authorized to file, prosecute, defend, or settle any action as she deems necessary, including any action to enforce the provisions of this Order.

3.6 Pursuant to Section 443.154(k), the Liquidator may enter into contracts as necessary to perform her duties and may assume or reject any executory contract or unexpired lease to which Defendant is a party at her discretion pursuant to Section 443.013.

3.7 The Liquidator is authorized to change the locks on any property owned, leased, or occupied by Defendant.

3.8 The Liquidator is authorized to exclude any person from any property owned, leased, or occupied by Defendant, at her discretion.

3.9 The Liquidator is authorized to receive, collect, control, open and review all mail addressed to or intended for Defendant, or arriving at Defendant's address.

3.10 Section 443.154(a) authorizes the Liquidator to appoint a Special Deputy and employ or contract with legal counsel and other personnel as she deems necessary. Pursuant to Section 443.015(e), the Liquidator is authorized to set the compensation of any such Special Deputy or other persons as she deems necessary and pay for such services from Defendant's funds. The Liquidator's designees and any Special Deputy appointed under Section 443.154(a) have all the rights and powers of the Liquidator, subject to any limitations imposed by the Liquidator.

3.11 Pursuant to Section 443.008(m), the Commissioner is not required to file a bond in connection with this proceeding, in her capacity as Liquidator or otherwise.

3.12 In accordance with Section 443.151(a), any successor to the Commissioner shall be appointed as the Liquidator of Defendant. In the event a successor is appointed to be the Commissioner, the successor shall become the Liquidator upon appointment as Commissioner, and the former Commissioner shall be discharged as Liquidator as a matter of law.

3.13 The enumeration of the Liquidator's powers and authority in this Order shall not be construed as a limitation on the Liquidator to take any action authorized by the Insurer Receivership Act or other applicable law that is not specified in this Order.

IV. PERMANENT INJUNCTION

The Clerk of this Court shall issue a Permanent Injunction against the persons and entities named below, with the following force and effect:

TO: Defendant and its agents, including but not limited to:
Defendant's current and former officers, directors, underwriters, managers and employees, including but not limited to, Elizabeth Bierbower, Stacy Knowlton, Rhonda Bagby, Salvatore Gentile, David Pinkert, Eduardo Cruz, Theodore Lundberg, Justin Yang, Carlos Ferrer, and Daniel O'Connell; owners and affiliates, including but not limited to, Vestar Managers VII, LLC, Peloton Equity GP, LLC, Vestar Capital Partners LLC, Vestar Associates VII, LP, Peloton Equity II, L.P., Peloton FHP, LLC, New Biscayne Group, SA, FHP Investment LP, Friday Health Plans, Inc., Friday Health Plans Management Services Company, Inc., Friday Health Plans of Colorado Inc.; local recording agents, managing general agents, agents, third party administrators, representatives, associates, servants, adjusters,

attorneys and accountants, including but not limited to, Mitchell, Williams, Selig, Gates & Woodyard, PLLC, their other lawyers, and those acting in concert with them;

Financial institutions, including but not limited to:

Any and all banks, savings and loan associations; trust companies; credit unions; welfare trusts; or any other financial or depository institutions in the possession of any of Defendant's Property, including but not limited to, BOK Financial, BOKF, NA, and Wells Fargo Bank, N.A.; and

All other parties, including but not limited to:

Creditors, claimants, insurers, intermediaries, attorneys and all other persons, associations, corporations, or any other legal entities asserting claims or causes of action of any kind against Defendant, or in possession of any of Defendant's Property, and the United States Postmaster.

Each of you are hereby RESTRAINED and ENJOINED from taking any and all of the following actions:

4.1 Doing, operating, or conducting Defendant's business under any charter, certificate of authority, license, permit, power or privilege belonging to or issued to Defendant, or exercising any direction, control, or influence over Defendant's business, except through the authority of the Liquidator or her designees;

4.2 Transacting any business of Defendant's in any manner except through the authority of the Liquidator or her designees;

4.3 Wasting, disposing of, converting, dissipating, or concealing, in any manner, any of Defendant's Property;

4.4 Using, releasing, transferring, selling, assigning, canceling, hypothecating, withdrawing, allowing to be withdrawn, offsetting, asserting ownership of, concealing, in any manner, or removing from this Court's jurisdiction or from Defendant's place of business, any of Defendant's Property, or any other items purchased by Defendant, or any items into which such Property has been transferred, deposited or placed, or any other items owned by Defendant,

wherever located, except through the authority of the Liquidator or her designees;

4.5 Releasing, transferring, selling, assigning or asserting ownership of, in any manner, any claims, accounts receivable, or causes of action belonging to Defendant, whether asserted or not, except through the authority of the Liquidator or her designees;

4.6 Doing anything, directly or indirectly, to prevent the Liquidator or her designees from gaining access to, acquiring, examining, or investigating any of Defendant's Property or any other property, books, documents, records, or other materials concerning Defendant's business, under whatever name they may be found;

4.7 Obstructing or interfering in any way with the conduct of this proceeding or any incidental investigation as prohibited by Section 443.010(b);

4.8 Interfering with these proceedings or with the lawful acts of the Liquidator or her designees in any way;

4.9 Intervening in this proceeding for the purpose of obtaining a payment from the receivership estate of Defendant as prohibited by Section 443.005(i);

4.10 Making any claim, charge or offset, or commencing or prosecuting any action, appeal, or arbitration, including administrative proceedings, or obtaining any preference, judgment, attachment, garnishment, or other lien, or making any levy against Defendant, Defendant's Property or any part thereof, or against the Liquidator, except as permitted by the Insurer Receivership Act.

EACH OF YOU ARE FURTHER SPECIFICALLY ORDERED to make available and disclose to the Liquidator or her designees the nature, amount, and location of Defendant's Property, and immediately surrender all such property to the Liquidator or her designees.

DEFENDANT AND DEFENDANT'S AGENTS ARE FURTHER ORDERED to

cooperate with the Liquidator or her designees as required by Section 443.010(a).

IT IS FURTHER ORDERED that the United States Postmaster and any other delivery services shall deliver to the Liquidator any items addressed to or intended for Defendant.

V. STAY OF PROCEEDINGS

5.1 An automatic stay is in effect with respect to actions against Defendant or its Property as provided in Section 443.008(c). In accordance with Section 443.008(f), such stay of actions against Defendant is in effect for the duration of this proceeding, and the stay of actions against Defendant's Property is in effect for as long as the Property belongs to the receivership estate.

5.2 An automatic stay is in effect with respect to actions against a party insured by Defendant as provided in Section 443.008(d). Such stay shall continue for 90 days after the date of this Order, or such further time as ordered by this Court.

VI. CONTINUATION OF COVERAGE

6.1 All reinsurance contracts by which Defendant has assumed insurance obligations of another insurer are canceled upon entry of this order pursuant to Section 443.152(a).

6.2 Unless further extended by the Liquidator with the approval of this Court pursuant to Section 443.152(b), all policies, insurance contracts, surety bonds or surety undertakings issued by Defendant in effect at the time of issuance this order shall continue in force only until the earlier of:

- (a) the date of expiration of the policy coverage;
- (b) the date the insured has replaced the insurance coverage or otherwise terminated the policy;
- (c) the date of any transfer of a policy obligation by the Liquidator pursuant to Section 443.154(h); or

(d) the date proposed by the Liquidator to cancel coverage.

VII. OTHER ORDERS

7.1 This Order shall issue and become effective immediately and shall continue in full force and effect until the entry of an order by this Court terminating liquidation under Section 443.352.

7.2 Pursuant to Section 443.055, this Order constitutes a final judgment, provided that this Court shall retain jurisdiction to issue further orders pursuant to the Insurer Receivership Act.

7.3 The Texas Department of Insurance and the Attorney General of Texas shall have a claim for reasonable attorneys' fees and court costs, provided that the amount and payment of such claim are subject to the provisions of Chapter 443.

7.4 In accordance with Section 443.001(b), this Order does not limit the rights of the Commissioner or the Texas Department of Insurance to take any administrative action or issue any administrative order.

7.5 Notice of Plaintiff's Petition and this Order shall be provided under Section 443.052(b) by first class mail or electronic communication.

7.6 Pursuant to Section 443.007(e), the Liquidator may provide notice of any application in the time periods prescribed in Rule 21a of the Texas Rules of Civil Procedure if it determines that an expedited hearing is necessary. In accordance with Section 443.007(d), the Liquidator may provide notice of any application by first class mail, electronic mail, or facsimile transmission, at its discretion.

7.7 Anyone over the age of 18 whom is not a party to nor interested in the outcome of this suit may serve all citations, writs, and notices in this cause.

7.8 All of the foregoing is subject to further orders of this Court.

SIGNED at Austin, Travis County, Texas, on this the _____ day of _____, 2023,
at _____ o'clock ____m.

DISTRICT JUDGE PRESIDING

AGREED AS TO FORM ONLY:

/s/ Zachary Rhines

KEN PAXTON
Attorney General of Texas
ZACHARY RHINES
State Bar No. 24116957
Assistant Attorney General
General Litigation Division
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TEXAS DEPARTMENT OF INSURANCE

/s/ Stanton Strickland

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COUNSEL FOR DEFENDANT
FRIDAY HEALTH INSURANCE, INC.

Cause No. _____

TEXAS DEPARTMENT OF INSURANCE, Plaintiff,	§	IN THE DISTRICT COURT OF
	§	
	§	
	§	
v.	§	TRAVIS COUNTY, TEXAS
	§	
FRIDAY HEALTH INSURANCE COMPANY, INC. Defendant.	§	
	§	
	§	_____ JUDICIAL DISTRICT

AGREED ORDER OF REFERENCE TO MASTER

I. FINDINGS

This case is a delinquency proceeding brought against an insurer pursuant to Texas Insurance Code Chapter 443. Insurance receiverships are inherently exceptional cases requiring expert review by the Receivership Court. Insurance Code Chapter 443 imposes a duty on the Receivership Court to direct and approve numerous complex actions during the delinquency proceeding. Therefore, to provide the requisite judicial supervision of this proceeding, the Court finds that it is necessary to appoint a master herein under Rule 171 of the Texas Rules of Civil Procedure. The Court further finds that both the State of Texas and the Receiver for the Defendant have consented to the appointment of a master, and that the Receiver has consented to the payment of the master's reasonable fees and expenses from the assets of the receivership estate.

II. APPOINTMENT

Tom Collins, Texas State Bar No. 04619800, 106 White Dove, Horseshoe Bay, Texas, 78657, (512) 971-3172, is appointed as master in this proceeding. He is not an

attorney for any party. He is not related to any party. He is qualified by education and experience to serve as a master.

III. POWERS

The master shall make recommendations to the Court regarding the matters listed below, with references to the applicable provisions of the Insurance Code:

1. Sec. 443.005: Motions filed under subsection (e) to stay proceedings.
2. Sec. 443.007: Motions filed under subsection (g) to require an objecting party to pay the costs and fees of defending an action.
3. Sec. 443.008: Motions filed under subsection (a) for orders or stays to carry out Chapter 443 or an approved rehabilitation plan, except for temporary restraining orders and injunctions; motions filed under subsection (d) to extend a stay; motions filed under subsection (h) for relief, termination, annulment, modification, or conditioning of a stay; and motions filed under subsection (k) for sanctions for a violation of a stay.
4. Sec. 443.014: Applications filed under Subsection (l) to approve the payment of any settlement submitted to the Court for approval.
5. Sec. 443.015: Applications filed under Subsection (c) to approve the compensation and expenses of the Special Deputy Receiver and any contractors or establish thresholds for court approval for such compensation and expenses; applications filed under Subsection (d) to approve compensation, anticipated expenses, or incurred expenses; and applications filed under Subsection (g) to establish reporting periods.

6. Sec. 443.016: Requirements under Subsection (b) for financial reporting.
7. Sec. 443.056: Motions filed under Subsection (d) to terminate confidentiality obligations.
8. Sec. 443.151: Motions filed under Subsection (b) to fix rights.
9. Sec. 443.152: Applications filed under Subsection (b) for orders continuing coverage, and applications filed under Subsection (d) approving the transfer of policies or annuities.
10. Sec. 443.153: Applications filed under Subsection (a) to sell or dissolve the corporate entity or charter of the insurer.
11. Sec. 443.154: Applications filed under Subsection (c) to appoint an advisory committee; applications filed under Subsection (h) to determine liabilities under transferred policies, surety bonds or undertakings; applications filed under Subsection (p) to invest funds; applications filed under Subsection (y) to sell or abandon property, establish thresholds for Court approval, or transfer rights to reinsurance payments.
12. Sec. 443.155: Applications filed under Subsections (a) or (b) to approve the notice of liquidation, and applications filed under Subsection (e) regarding notice by publication.
13. Sec. 443.201: Motions filed under Subsection (b) to determine entitlement to property; motions filed under Subsection (c) claiming a right to retain property; and motions filed under Subsection (d) requesting the delivery of the property.

14. Sec. 443.203: Motions filed under Subsection (b) to determine remedies for a transferee or obligee of a voided transfer or obligation.
15. Sec. 443.204: Motions filed under Subsection (i)(2) regarding the preservation of a lien or the execution of a conveyance, and motions filed under Subsection (i)(3) to determine the value of the property or lien.
16. Sec. 443.207: Motions filed under Subsection (e) for the recovery of property or its value.
17. Sec. 443.208: Motions filed under Subsection (a) to extend the time to deliver money or property after the entry of a final judgment.
18. Sec. 443.210: Applications filed under Subsection (b) to approve assessments, or for an order to show cause; applications filed under Subsection (e) for orders directing the method of notice; and motions filed under Subsection (f) or (g) for orders determining the liability of a member.
19. Sec. 443.211: Motions filed under Subsection (d) to approve expenses of a reinsurer.
20. Sec. 443.213: Applications filed under Subsection (d) to allocate collateral to secure a deductible agreement and other obligations.
21. Sec. 443.251: Applications filed under Subsection (a) to extend the claims filing deadline, allow alternative procedures and requirements for filing, allowing, or proving claims, and dispense with the requirements of filing a proof of claim; and applications filed under Subsection (c) to set a date before which all late claims must be submitted.

22. Sec. 443.253: Applications filed under Subsection (h) to disallow claims for de minimis amount, and applications filed under Subsection (k) for handling claims if there are insufficient assets.
23. Sec. 443.255: Applications filed under Subsection (b) for orders directing the allowance of contingent claims, and applications filed under Subsection (c) for orders setting a date before which contingent claims must be finalized.
24. Sec. 443.257: Hearings on objections to the proposed treatment of claims, if the master determines that a recommendation will promote judicial economy or consistency, or if the matter will substantially affect the delinquency proceeding.
25. Sec. 443.258: Applications to approve reports of claims.
26. Sec. 443.301: Applications filed under Subsection (j) to allow interest on claims.
27. Sec. 443.302: Applications filed under Subsection (a) to declare and pay distributions, and applications filed under Subsection (c) to distribute and determine value of property.
28. Sec. 443.303: Applications filed under Subsection (c) for early access disbursements, and applications filed under Subsection (i) to offset a deposit or asset from the disbursement.
29. Sec. 443.304: Motions filed under Subsection (b) for orders approving the disposition of unclaimed funds and determining the notice of hearing, and motions filed under Subsection (d) for orders determining the priority of a claim for funds advanced.

30. Sec. 443.352: Applications for orders terminating the liquidation proceeding, discharging the liquidator, and any related orders.
31. Sec. 443.353: Applications for orders reopening the liquidation proceeding.
32. Sec. 443.354: Applications for orders directing the disposition of records.
33. Sec. 443.355: External audits of the records of the receivership as ordered by the Court.
34. Any matters related to the application, enforcement, and extension of the stay provided by Insurance Code § 463.404.
35. Any other matters submitted to the Court to approve an action by the Receiver or Special Deputy Receiver, and any other specific questions referred by the Court.

The master is further authorized to make recommendations to the Court regarding hearings on objections to the Liquidator's proposed treatment of claims under Insurance Code § 443.257. The master may hear any such matter if he determines that doing so will be in the interests of judicial economy, will promote consistency, or if a decision on the matter will affect the delinquency proceeding. If the master determines that the matter should be heard by the Court without the necessity of a recommendation, he may request that a District Court Judge hear the matter.

The master is further authorized to conduct conferences or hearings regarding the status of the delinquency proceeding, at his discretion.

IV. PROCEEDINGS

The parties must proceed before the master regarding any matter referred to the master, provided that the master, in his discretion, may request that a District Court Judge hear any matter referred to him under this order. The master may consider the matter by oral hearing or written submission in accordance with the terms of this Order.

The Court finds that it is necessary and proper for the master to regulate proceedings before him pursuant to Rule 171 of the Texas Rules of Civil Procedure. The Court therefore adopts the following procedures of practice, which shall apply to any applications or motions filed in this proceeding as specified in this Order, unless otherwise provided by law:

1. Any application or motion within the terms of this Order must be served on the master through his docket clerk, and on all interested parties as determined by the master. The master shall ensure that proper notice is given to all interested parties. The master may consider matters presented to him by submission or oral hearing and shall establish a docket schedule for the submission and hearing of such matters.
2. At any oral hearing, the master may hear argument and testimony, and admit or exclude evidence as permitted under Rule 171 of the Texas Rules of Civil Procedure. Such authority shall include, without limitation, the exclusion of any argument or evidence that is not raised in a timely filed objection.

3. The master shall hear all matters in a hearing room at the Texas Department of Insurance designated for that purpose by the Commissioner of Insurance.
4. Pursuant to Rule 171 of the Texas Rules of Civil Procedure, and the discretion granted to the Court under Insurance Code § 443.007(e) to determine the period for filing objections, the following procedures and deadlines are established:
 - (a) The Applicant shall file an application or motion with the Travis County District Clerk and provide notice thereof to all interested parties at least fourteen (14) calendar days before the date on which the matter is set on the master's docket, unless the Applicant requests an expedited hearing for good cause. The Applicant shall give notice of the date on which the matter is set on the master's docket.
 - (b) The deadline for the filing of an objection or response shall be not later than three (3) calendar days before the date on which the matter is set on the master's docket, unless the master authorizes additional time for the filing of an objection, or the Applicant and the objecting party otherwise agree. Any party responding or objecting to an application must file such response or objection with the Travis County District Clerk and serve a copy by such date on the master through his docket clerk and on all interested parties, including those listed on the Applicant's Certificate of Service. The written objection must specify the

basis for the objection, with references to and discussion of supporting legal authority.

- (c) If a matter is set for submission, an objecting party shall expeditiously coordinate with Applicant's counsel and the master's docket clerk to obtain an oral hearing, unless the master determines that an oral hearing is not necessary. The objecting party shall serve a Notice of Oral Hearing on applicant's counsel and all interested parties, including those listed on the Applicant's Certificate of Service.
- (d) The master shall promptly report his recommendation to the Court and submit a proposed order. If no objection is timely filed to the application or motion as set forth above, the Court may enter the proposed order upon its submission to the Court by the master. If an objection is timely filed to the application or motion as set forth above, notice of the recommendation and order shall be provided by the master's docket clerk to the Applicant and the objecting party. If any party objects to the master's recommendation, the party shall file its objection within ten (10) days of the submission of the recommendation and proposed order to the Court, and set a hearing before the District Court Judge. A copy of any objection with notice of hearing shall be served on the master and all interested parties.
- (e) If one or more guaranty associations are involved in the proceeding, the guaranty association or its representative shall file an Acknowledgment

of Notice and Waiver of Objection if it does not object to the application or motion. Any Acknowledgment of Notice and Waiver of Objection should be filed at least three (3) calendar days before the date on which the matter is set on the master's docket.

V. ASSISTANCE TO THE MASTER

The District Clerk, the Receiver, and any Special Deputy Receiver are ORDERED to provide reasonable clerical and other assistance the master deems necessary to perform his duties. Any such expenses shall be payable as a cost of administration, Class 1 priority, pursuant to Insurance Code § 443.301(a).

VI. COMPENSATION

The master shall be compensated for his time at \$200.00 an hour and shall be reimbursed for his costs up to \$500.00 per month. The master shall contemporaneously record the time worked on this delinquency proceeding and shall periodically submit one certified statement of time and costs for all receivership proceedings. The master's statement shall be reported by the Receiver or the Special Deputy Receiver and shall be reported to the Court under Insurance Code § 443.015 (g).

The Receiver, Special Deputy Receiver, or any interested party may file with the Court an objection to any item in the master's statement, and set a hearing before the District Court. A copy of the objection with notice of hearing shall be served on the master. If an objection is filed, the Receiver or Special Deputy Receiver may withhold payment for only time or costs in dispute. Items that are not subject to an

objection shall be paid within thirty (30) days of submission of the master's statement. Items that are subject to an objection that is overruled shall be paid within thirty (30) days of the date on which the objection is overruled.

The master's statement shall be taxed as court costs and charged to the receivership estate. The Receiver or Special Deputy Receiver shall treat this taxable court cost as a cost of administration, Class 1 priority, pursuant to Insurance Code § 443.301(a).

SIGNED at Austin, Travis County, Texas on this the _____ day of _____, 2023, at _____ o'clock ____m..

DISTRICT JUDGE PRESIDING

AGREED AS TO FORM ONLY:

/s/ Zachary Rhines

KEN PAXTON

Attorney General of Texas

ZACHARY RHINES

State Bar No. 24116957

Assistant Attorney General

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FRIDAY HEALTH INSURANCE, INC.

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Karen Walters on behalf of Zachary Rhines

Bar No. 24116957

karen.walters@oag.texas.gov

Envelope ID: 73874831

Filing Code Description: Petition

Filing Description: PLAINTIFF'S ORIGINAL PETITION, APPLICATION FOR AGREED ORDER APPOINTING LIQUIDATOR, AND REQUEST FOR INJUNCTIVE RELIEF

Status as of 3/22/2023 3:52 PM CST

Associated Case Party: TEXAS DEPARTMENT OF INSURANCE

Name	BarNumber	Email	TimestampSubmitted	Status
Zachary L.Rhines		zachary.rhines@oag.texas.gov	3/21/2023 4:14:38 PM	SENT