

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.



**HEALTH ANNUAL STATEMENT**  
 FOR THE YEAR ENDED DECEMBER 31, 2022  
 OF THE CONDITION AND AFFAIRS OF THE  
**AmeriChoice of New Jersey, Inc.**

NAIC Group Code 0707 0707 NAIC Company Code 95497 Employer's ID Number 22-3368602  
(Current) (Prior)

Organized under the Laws of New Jersey, State of Domicile or Port of Entry NJ

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [ ] No [ X ]

Incorporated/Organized 10/17/1994 Commenced Business 02/01/1996

Statutory Home Office 170 Wood Avenue South 3rd Floor, Iselin, NJ, US 08830  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 170 Wood Avenue South 3rd Floor  
(Street and Number)  
Iselin, NJ, US 08830, 732-623-1258  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 4 Research Drive 5th Floor, Shelton, CT, US 06484  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 185 Asylum Street  
(Street and Number)  
Hartford, CT, US 06103, 860-702-9855  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.AmeriChoice.com

Statutory Statement Contact Daniel John Blumberg, 952-979-6570  
(Name) (Area Code) (Telephone Number)  
dan\_blumberg@uhc.com, 952-931-4651  
(E-mail Address) (FAX Number)

**OFFICERS**

President Charles Reeves Wayland Treasurer Peter Marshall Gill  
 Secretary Nicholas Robert Shjerve # Chief Financial Officer Richard Michael Hersch

**OTHER**

Nyle Brent Cottingham, Vice President Heather Anastasia Lang, Assistant Secretary

**DIRECTORS OR TRUSTEES**

Michael Lester Cotton Phillip Robert Franz Tameeka Lashell Smith  
Scott Douglas Waulters Charles Reeves Wayland

State of Virginia State of Minnesota State of Connecticut  
 County of Henrico County of Hennepin County of Fairfield

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.

*Charles Reeves Wayland*

Charles Reeves Wayland  
President

*Nicholas Robert Shjerve*

Nicholas Robert Shjerve  
Secretary

*Richard Michael Hersch*

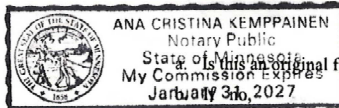
Richard Michael Hersch  
Chief Financial Officer

Subscribed and sworn to before me this  
23<sup>rd</sup> day of January 2023  
*Angie W Jordan*

Subscribed and sworn to before me this  
17 day of January 2023  
*Angie W Jordan*

Subscribed and sworn to before me this  
25 day of January 2023  
*Carl S Moore*

*Angie W Jordan*  
**ANGIE W JORDAN**  
 NOTARY PUBLIC  
 REGISTRATION # 7615807  
 COMMONWEALTH OF VIRGINIA  
 MY COMMISSION EXPIRES  
4/31/2025



ANA CRISTINA KEMPPAINEN  
 Notary Public  
 State of Minnesota  
 My Commission Expires  
 January 31, 2027  
 State of this an original filing? ..... Yes [ X ] No [ ]

1. State the amendment number.....
2. Date filed.....
3. Number of pages attached.....

**CARL S. MOORE**  
 NOTARY PUBLIC  
 MY COMMISSION EXPIRES APR. 30, 2026

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**ASSETS**

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	702,158,133	0	702,158,133	650,547,889
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0	0	0	0
2.2 Common stocks .....	0	0	0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....	0	0	0	0
3.2 Other than first liens .....	0	0	0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ .....0 encumbrances) .....	0	0	0	0
4.2 Properties held for the production of income (less \$ .....0 encumbrances) .....	0	0	0	0
4.3 Properties held for sale (less \$ .....0 encumbrances) .....	0	0	0	0
5. Cash (\$ .....453,087 , Schedule E - Part 1), cash equivalents (\$ .....207,790,898 , Schedule E - Part 2) and short-term investments (\$ .....0 , Schedule DA) .....	208,243,985	0	208,243,985	269,243,147
6. Contract loans, (including \$ .....0 premium notes) .....	0	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0	0
9. Receivables for securities .....	2,995	0	2,995	1,645
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	910,405,113	0	910,405,113	919,792,681
13. Title plants less \$ .....0 charged off (for Title insurers only) .....	0	0	0	0
14. Investment income due and accrued .....	6,443,337	0	6,443,337	3,764,042
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	16,689,879	0	16,689,879	19,770,312
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ .....0 earned but unbilled premiums) .....	0	0	0	0
15.3 Accrued retrospective premiums (\$ .....3,527,238 ) and contracts subject to redetermination (\$ .....3,228,072 ) .....	6,755,310	0	6,755,310	2,551,070
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0	5,901
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0	5,864,864
18.2 Net deferred tax asset .....	3,012,845	0	3,012,845	4,211,758
19. Guaranty funds receivable or on deposit .....	0	0	0	0
20. Electronic data processing equipment and software .....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ .....0 ) .....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0	0
24. Health care (\$ .....6,825,146 ) and other amounts receivable .....	18,256,881	11,431,735	6,825,146	6,513,803
25. Aggregate write-ins for other than invested assets .....	2,826	2,826	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	961,566,191	11,434,561	950,131,630	962,474,431
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0	0
28. Total (Lines 26 and 27)	961,566,191	11,434,561	950,131,630	962,474,431
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Miscellaneous Receivables .....	2,826	2,826	0	0
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,826	2,826	0	0

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....0 reinsurance ceded) .....	243,685,478	0	243,685,478	205,312,725
2. Accrued medical incentive pool and bonus amounts .....	4,816,531	0	4,816,531	8,175,776
3. Unpaid claims adjustment expenses.....	2,184,672	0	2,184,672	1,961,137
4. Aggregate health policy reserves, including the liability of \$ .....0 for medical loss ratio rebate per the Public Health Service Act .....	159,835,848	0	159,835,848	188,264,745
5. Aggregate life policy reserves.....	0	0	0	0
6. Property/casualty unearned premium reserves.....	0	0	0	0
7. Aggregate health claim reserves.....	2,803,247	0	2,803,247	2,717,971
8. Premiums received in advance.....	0	0	0	0
9. General expenses due or accrued.....	106,062,928	0	106,062,928	76,519,108
10.1 Current federal and foreign income tax payable and interest thereon (including \$ .....0 on realized capital gains (losses)) .....	14,537,329	0	14,537,329	0
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable.....	0	0	0	0
12. Amounts withheld or retained for the account of others.....	0	0	0	0
13. Remittances and items not allocated.....	0	0	0	0
14. Borrowed money (including \$ .....0 current) and interest thereon \$ .....0 (including \$ .....0 current).....	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates.....	17,525,422	0	17,525,422	12,662,169
16. Derivatives.....	0	0	0	0
17. Payable for securities.....	0	0	0	0
18. Payable for securities lending .....	0	0	0	0
19. Funds held under reinsurance treaties (with \$ .....0 authorized reinsurers, \$ .....0 unauthorized reinsurers and \$ .....0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$ .....0 ) companies .....	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates .....	0	0	0	0
22. Liability for amounts held under uninsured plans.....	1,065,921	0	1,065,921	49,028,004
23. Aggregate write-ins for other liabilities (including \$ .....3,090 current).....	3,090	0	3,090	3,251
24. Total liabilities (Lines 1 to 23).....	552,520,466	0	552,520,466	544,644,886
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	0	0
27. Preferred capital stock.....	XXX	XXX	0	0
28. Gross paid in and contributed surplus.....	XXX	XXX	278,069,150	278,069,150
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	119,542,014	139,760,395
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$ .....0 ).....	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$ .....0 ).....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	397,611,164	417,829,545
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	950,131,630	962,474,431
<b>DETAILS OF WRITE-INS</b>				
2301. Unclaimed Property .....	3,090	0	3,090	3,251
2302. ....				
2303. ....				
2398. Summary of remaining write-ins for Line 23 from overflow page .....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	3,090	0	3,090	3,251
2501. ....	XXX	XXX		
2502. ....	XXX	XXX		
2503. ....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001. ....	XXX	XXX		
3002. ....	XXX	XXX		
3003. ....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	4,929,536	4,647,580
2. Net premium income ( including \$ .....0 non-health premium income) .....	XXX	3,092,519,138	2,512,231,268
3. Change in unearned premium reserves and reserve for rate credits .....	XXX	32,500,536	(88,346,352)
4. Fee-for-service (net of \$ .....0 medical expenses) .....	XXX	0	0
5. Risk revenue .....	XXX	0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	3,125,019,674	2,423,884,916
<b>Hospital and Medical:</b>			
9. Hospital/medical benefits .....	0	2,108,639,353	1,604,731,217
10. Other professional services .....	0	104,625,536	92,949,261
11. Outside referrals .....	0	0	0
12. Emergency room and out-of-area .....	0	0	0
13. Prescription drugs .....	0	373,688,966	338,664,455
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....	0	4,042,979	8,291,983
16. Subtotal (Lines 9 to 15) .....	0	2,590,996,834	2,044,636,916
<b>Less:</b>			
17. Net reinsurance recoveries .....	0	0	0
18. Total hospital and medical (Lines 16 minus 17) .....	0	2,590,996,834	2,044,636,916
19. Non-health claims (net) .....	0	0	0
20. Claims adjustment expenses, including \$ .....92,592,722 cost containment expenses .....	0	110,632,303	100,949,710
21. General administrative expenses .....	0	276,453,246	209,373,830
22. Increase in reserves for life and accident and health contracts (including \$ .....0 increase in reserves for life only) .....	0	0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	2,978,082,383	2,354,960,456
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	146,937,291	68,924,460
25. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	0	19,664,460	11,838,738
26. Net realized capital gains (losses) less capital gains tax of \$ .....(1,853,618) .....	0	(6,973,134)	535,453
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	12,691,326	12,374,191
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ .....0 ) (amount charged off \$ .....0 )] .....	0	0	0
29. Aggregate write-ins for other income or expenses .....	0	(128,511)	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	159,500,106	81,298,651
31. Federal and foreign income taxes incurred .....	XXX	34,385,558	16,422,800
32. Net income (loss) (Lines 30 minus 31) .....	XXX	125,114,548	64,875,851
<b>DETAILS OF WRITE-INS</b>			
0601. ....	XXX		
0602. ....	XXX		
0603. ....	XXX		
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above) .....	XXX	0	0
0701. ....	XXX		
0702. ....	XXX		
0703. ....	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above) .....	XXX	0	0
1401. ....			
1402. ....			
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above) .....	0	0	0
2901. Fines and Penalties .....	0	(128,511)	0
2902. ....			
2903. ....			
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above) .....	0	(128,511)	0



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

	1 Current Year	2 Prior Year
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
33. Capital and surplus prior reporting year.....	417,829,545	430,400,820
34. Net income or (loss) from Line 32 .....	125,114,548	64,875,851
35. Change in valuation basis of aggregate policy and claim reserves .....	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....0 .....	0	0
37. Change in net unrealized foreign exchange capital gain or (loss) .....	0	0
38. Change in net deferred income tax .....	(1,198,913)	320,730
39. Change in nonadmitted assets .....	5,865,984	(1,767,856)
40. Change in unauthorized and certified reinsurance .....	0	0
41. Change in treasury stock .....	0	0
42. Change in surplus notes .....	0	0
43. Cumulative effect of changes in accounting principles.....	0	0
44. Capital Changes:		
44.1 Paid in .....	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....	0	0
45. Surplus adjustments:		
45.1 Paid in .....	0	0
45.2 Transferred to capital (Stock Dividend) .....	0	0
45.3 Transferred from capital .....	0	0
46. Dividends to stockholders .....	(150,000,000)	(76,000,000)
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0
48. Net change in capital and surplus (Lines 34 to 47) .....	(20,218,381)	(12,571,275)
49. Capital and surplus end of reporting period (Line 33 plus 48)	397,611,164	417,829,545
<b>DETAILS OF WRITE-INS</b>		
4701. ....		
4702. ....		
4703. ....		
4798. Summary of remaining write-ins for Line 47 from overflow page .....	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**CASH FLOW**

	1	2
	Current Year	Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	3,095,466,970	2,510,904,580
2. Net investment income .....	19,927,473	14,852,074
3. Miscellaneous income .....	0	0
4. Total (Lines 1 through 3) .....	3,115,394,443	2,525,756,654
5. Benefit and loss related payments .....	2,550,343,092	2,042,139,898
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	405,373,538	280,880,085
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ .....0 tax on capital gains (losses) .....	12,129,747	21,758,769
10. Total (Lines 5 through 9) .....	2,967,846,377	2,344,778,752
11. Net cash from operations (Line 4 minus Line 10) .....	147,548,066	180,977,902
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	226,694,181	128,532,917
12.2 Stocks .....	0	0
12.3 Mortgage loans .....	0	0
12.4 Real estate .....	0	0
12.5 Other invested assets .....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	0
12.7 Miscellaneous proceeds .....	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	226,694,181	128,532,917
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	290,102,843	302,264,470
13.2 Stocks .....	0	0
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	0	0
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	1,350	671,645
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	290,104,193	302,936,115
14. Net increase (decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(63,410,012)	(174,403,198)
<b>Cash from Financing and Miscellaneous Sources</b>		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes .....	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0
16.3 Borrowed funds .....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0
16.5 Dividends to stockholders .....	150,000,000	111,000,000
16.6 Other cash provided (applied) .....	4,862,783	(606,707)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(145,137,217)	(111,606,707)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(60,999,162)	(105,032,003)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	269,243,147	374,275,150
19.2 End of year (Line 18 plus Line 19.1) .....	208,243,985	269,243,147

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

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ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**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	3,092,519,138	38,418,855	0	0	0	0	0	3,054,100,283	0	0
2. Change in unearned premium reserves and reserve for rate credit	32,500,536	111,624	0	0	0	0	(7,599)	32,396,511	0	0
3. Fee-for-service (net of \$ medical expenses)	0	0	0	0	0	0	0	0	0	XXX
4. Risk revenue	0	0	0	0	0	0	0	0	0	XXX
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6)	3,125,019,674	38,530,479	0	0	0	0	(7,599)	3,086,496,794	0	0
8. Hospital/medical benefits	2,108,639,353	26,358,256	0	0	0	0	0	2,082,281,097	0	XXX
9. Other professional services	104,625,536	4,278,493	0	0	0	0	0	100,347,043	0	XXX
10. Outside referrals	0	0	0	0	0	0	0	0	0	XXX
11. Emergency room and out-of-area	0	0	0	0	0	0	0	0	0	XXX
12. Prescription drugs	373,688,966	10,816,585	0	0	0	0	3,840	362,868,541	0	XXX
13. Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts	4,042,979	226,148	0	0	0	0	0	3,816,831	0	XXX
15. Subtotal (Lines 8 to 14)	2,590,996,834	41,679,482	0	0	0	0	3,840	2,549,313,512	0	XXX
16. Net reinsurance recoveries	0	0	0	0	0	0	0	0	0	XXX
17. Total medical and hospital (Lines 15 minus 16)	2,590,996,834	41,679,482	0	0	0	0	3,840	2,549,313,512	0	XXX
18. Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19. Claims adjustment expenses including \$ cost containment expenses	92,592,722	110,632,303	1,586,789	0	0	0	0	109,045,514	0	0
20. General administrative expenses	276,453,246	4,273,095	0	0	0	0	(1,401)	272,181,552	0	0
21. Increase in reserves for accident and health contracts	0	0	0	0	0	0	0	0	0	XXX
22. Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23. Total underwriting deductions (Lines 17 to 22)	2,978,082,383	47,539,366	0	0	0	0	2,439	2,930,540,578	0	0
24. Total underwriting gain or (loss) (Line 7 minus Line 23)	146,937,291	(9,008,887)	0	0	0	0	(10,038)	155,956,216	0	0
DETAILS OF WRITE-INS										
0501.										XXX
0502.										XXX
0503.										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	XXX
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.										XXX
1302.										XXX
1303.										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	XXX
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**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 .....	38,418,855	0	0	38,418,855
2. Comprehensive (hospital and medical) group .....	0	0	0	0
3. Medicare Supplement .....	0	0	0	0
4. Dental only .....	0	0	0	0
5. Vision only .....	0	0	0	0
6. Federal Employees Health Benefits Plan .....	0	0	0	0
7. Title XVIII - Medicare .....	0	0	0	0
8. Title XIX - Medicaid .....	3,054,100,283	0	0	3,054,100,283
9. Credit A&H .....	0	0	0	0
10. Disability Income .....	0	0	0	0
11. Long-Term Care .....	0	0	0	0
12. Other health .....	0	0	0	0
13. Health subtotal (Lines 1 through 12) .....	3,092,519,138	0	0	3,092,519,138
14. Life .....	0	0	0	0
15. Property/casualty .....	0	0	0	0
16. Totals (Lines 13 to 15)	3,092,519,138	0	0	3,092,519,138

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**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	2,542,940,869	36,871,698	0	0	0	0	0	3,840	2,506,065,331	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Net	2,542,940,869	36,871,698	0	0	0	0	0	3,840	2,506,065,331	0	0	0	0	0
2. Paid medical incentive pools and bonuses	7,402,224	169,364	0	0	0	0	0	0	7,232,860	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	243,685,478	6,820,619	0	0	0	0	0	0	236,864,859	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	243,685,478	6,820,619	0	0	0	0	0	0	236,864,859	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	2,803,246	23,414	0	0	0	0	0	0	2,779,832	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	2,803,246	23,414	0	0	0	0	0	0	2,779,832	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	4,816,531	(22,152)	0	0	0	0	0	140	4,838,543	0	0	0	0	0
6. Net health care receivables (a)	(5,554,959)	(112,105)	0	0	0	0	0	0	(5,442,854)	0	0	0	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	205,312,725	2,368,776	0	0	0	0	0	0	202,943,949	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net	205,312,725	2,368,776	0	0	0	0	0	0	202,943,949	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	2,717,971	5,727	0	0	0	0	0	0	2,712,244	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.4 Net	2,717,971	5,727	0	0	0	0	0	0	2,712,244	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	8,175,776	(78,936)	0	0	0	0	0	140	8,254,572	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:														
12.1 Direct	2,586,953,856	41,453,333	0	0	0	0	0	3,840	2,545,496,683	0	0	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.4 Net	2,586,953,856	41,453,333	0	0	0	0	0	3,840	2,545,496,683	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	4,042,979	226,148	0	0	0	0	0	0	3,816,831	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**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 .....	76,351,216	4,261,130	0	0	0	0	0	0	72,090,086	0	0	0	0	0
1.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Net .....	76,351,216	4,261,130	0	0	0	0	0	0	72,090,086	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct .....	167,334,262	2,559,489	0	0	0	0	0	0	164,774,773	0	0	0	0	0
2.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Net .....	167,334,262	2,559,489	0	0	0	0	0	0	164,774,773	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct .....	243,685,478	6,820,619	0	0	0	0	0	0	236,864,859	0	0	0	0	0
4.2 Reinsurance assumed .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net .....	243,685,478	6,820,619	0	0	0	0	0	0	236,864,859	0	0	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**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	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual .....	2,923,461	33,948,237	3,736,254	3,107,780	6,659,715	2,374,503
2. Comprehensive (hospital and medical) group .....	0	0	0	0	0	0
3. Medicare Supplement .....	0	0	0	0	0	0
4. Dental Only .....	0	0	0	0	0	0
5. Vision Only .....	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan .....	0	0	0	0	0	0
7. Title XVIII - Medicare .....	3,840	0	0	0	3,840	0
8. Title XIX - Medicaid .....	304,754,924	2,201,310,404	11,714,178	227,930,513	316,469,102	205,656,194
9. Credit A&H .....	0	0	0	0	0	0
10. Disability Income .....	0	0	0	0	0	0
11. Long-Term Care .....	0	0	0	0	0	0
12. Other health .....	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12) .....	307,682,225	2,235,258,641	15,450,432	231,038,293	323,132,657	208,030,697
14. Health care receivables (a) .....	9,078,723	8,632,291	0	545,866	9,078,723	23,811,839
15. Other non-health .....	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts .....	5,347,989	2,054,235	321,400	4,495,131	5,669,389	8,175,776
17. Totals (Lines 13 - 14 + 15 + 16)	303,951,491	2,228,680,585	15,771,832	234,987,558	319,723,323	192,394,634

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

(\$000 Omitted)

**Section A - Paid Health Claims - Comprehensive (Hospital & Medical)**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior .....	2,323	2,201	2,199	2,200	2,200
2. 2018 .....	38,372	41,462	41,462	41,462	41,462
3. 2019 .....	XXX	40,888	42,734	42,734	42,734
4. 2020 .....	XXX	XXX	30,132	31,614	31,614
5. 2021 .....	XXX	XXX	XXX	27,845	30,911
6. 2022 .....	XXX	XXX	XXX	XXX	33,975

**Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)**

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 .....	2,674	2,201	2,199	2,200	2,200
2. 2018 .....	40,439	41,698	41,462	41,462	41,462
3. 2019 .....	XXX	44,757	44,007	42,734	42,734
4. 2020 .....	XXX	XXX	33,045	32,101	31,614
5. 2021 .....	XXX	XXX	XXX	29,653	34,569
6. 2022 .....	XXX	XXX	XXX	XXX	37,139

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	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 .....	40,119	41,462	262	0.6	41,724	104.0	0	0	41,724	104.0
2. 2019 .....	40,005	42,734	2,003	4.7	44,737	111.8	0	0	44,737	111.8
3. 2020 .....	37,452	31,614	1,563	4.9	33,177	88.6	0	0	33,177	88.6
4. 2021 .....	33,249	30,911	1,103	3.6	32,014	96.3	3,657	15	35,686	107.3
5. 2022 .....	38,530	33,975	1,367	4.0	35,342	91.7	3,165	13	38,520	100.0

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ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

(\$000 Omitted)

**Section A - Paid Health Claims - Title XVIII**

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior		(14)	(16)	(16)	(17)	(17)
2. 2018		0	0	0	0	0
3. 2019		XXX	0	(1)	(1)	(1)
4. 2020		XXX	XXX	0	(10)	(10)
5. 2021		XXX	XXX	XXX	0	4
6. 2022		XXX	XXX	XXX	XXX	0

**Section B - Incurred Health Claims - Title XVIII**

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		(24)	(16)	(16)	(17)	(17)
2. 2018		0	(10)	0	0	0
3. 2019		XXX	0	(11)	(1)	(1)
4. 2020		XXX	XXX	0	(10)	(10)
5. 2021		XXX	XXX	XXX	0	4
6. 2022		XXX	XXX	XXX	XXX	0

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	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	(4)	0	0	0.0	0	0.0	0	0	0	0.0
2. 2019	0	(1)	0	0.0	(1)	0.0	0	0	(1)	0.0
3. 2020	0	(10)	0	0.0	(10)	0.0	0	0	(10)	0.0
4. 2021	0	4	0	0.0	4	0.0	0	0	4	0.0
5. 2022	(8)	0	0	0.0	0	0.0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

(\$000 Omitted)

**Section A - Paid Health Claims - Title XIX**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior .....	192,715	187,890	186,447	185,819	185,330
2. 2018 .....	2,159,269	2,354,824	2,352,082	2,350,358	2,348,740
3. 2019 .....	XXX	2,173,942	2,343,200	2,345,347	2,342,342
4. 2020 .....	XXX	XXX	1,804,283	1,939,772	1,927,278
5. 2021 .....	XXX	XXX	XXX	1,877,541	2,205,106
6. 2022 .....	XXX	XXX	XXX	XXX	2,203,338

**Section B - Incurred Health Claims - Title XIX**

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 .....	208,993	187,890	186,447	185,819	185,330
2. 2018 .....	2,374,669	2,364,194	2,352,082	2,350,358	2,348,740
3. 2019 .....	XXX	2,389,257	2,352,643	2,345,347	2,342,342
4. 2020 .....	XXX	XXX	2,000,710	1,950,383	1,927,278
5. 2021 .....	XXX	XXX	XXX	2,080,840	2,217,220
6. 2022 .....	XXX	XXX	XXX	XXX	2,435,707

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	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 .....	2,674,348	2,348,740	34,973	1.5	2,383,713	89.1	0	0	2,383,713	89.1
2. 2019 .....	2,609,748	2,342,342	125,223	5.3	2,467,565	94.6	0	0	2,467,565	94.6
3. 2020 .....	2,359,321	1,927,278	97,512	5.1	2,024,790	85.8	0	0	2,024,790	85.8
4. 2021 .....	2,390,636	2,205,106	103,788	4.7	2,308,894	96.6	12,114	107	2,321,115	97.1
5. 2022 .....	3,086,496	2,203,338	92,315	4.2	2,295,653	74.4	232,369	2,049	2,530,071	82.0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

(\$000 Omitted)

**Section A - Paid Health Claims - Grand Total**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2018	2 2019	3 2020	4 2021	5 2022
1. Prior .....	195,024	190,075	188,630	188,002	187,513
2. 2018 .....	2,197,641	2,396,286	2,393,544	2,391,820	2,390,202
3. 2019 .....	XXX	2,214,830	2,385,933	2,388,080	2,385,075
4. 2020 .....	XXX	XXX	1,834,415	1,971,376	1,958,882
5. 2021 .....	XXX	XXX	XXX	1,905,386	2,236,021
6. 2022 .....	XXX	XXX	XXX	XXX	2,237,313

**Section B - Incurred Health Claims - Grand Total**

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 .....	211,643	190,075	188,630	188,002	187,513
2. 2018 .....	2,415,108	2,405,882	2,393,544	2,391,820	2,390,202
3. 2019 .....	XXX	2,434,014	2,396,639	2,388,080	2,385,075
4. 2020 .....	XXX	XXX	2,033,755	1,982,474	1,958,882
5. 2021 .....	XXX	XXX	XXX	2,110,493	2,251,793
6. 2022 .....	XXX	XXX	XXX	XXX	2,472,846

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total**

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	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 .....	2,714,463	2,390,202	35,235	1.5	2,425,437	89.4	0	0	2,425,437	89.4
2. 2019 .....	2,649,753	2,385,075	127,226	5.3	2,512,301	94.8	0	0	2,512,301	94.8
3. 2020 .....	2,396,773	1,958,882	99,075	5.1	2,057,957	85.9	0	0	2,057,957	85.9
4. 2021 .....	2,423,885	2,236,021	104,891	4.7	2,340,912	96.6	15,771	122	2,356,805	97.2
5. 2022 .....	3,125,018	2,237,313	93,682	4.2	2,330,995	74.6	235,534	2,062	2,568,591	82.2

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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 .....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a) .....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits .....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including \$ .....0 for investment income) ..	159,283,848	853,704	0	0	0	0	0	0	158,430,144	0	0	0	0
5. Aggregate write-ins for other policy reserves .....	552,000	0	0	0	0	0	0	0	552,000	0	0	0	0
6. Totals (gross) .....	159,835,848	853,704	0	0	0	0	0	0	158,982,144	0	0	0	0
7. Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4) .....	159,835,848	853,704	0	0	0	0	0	0	158,982,144	0	0	0	0
9. Present value of amounts not yet due on claims .....	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits .....	2,803,247	23,415	0	0	0	0	0	0	2,779,832	0	0	0	0
11. Aggregate write-ins for other claim reserves .....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross) .....	2,803,247	23,415	0	0	0	0	0	0	2,779,832	0	0	0	0
13. Reinsurance ceded .....	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7) .....	2,803,247	23,415	0	0	0	0	0	0	2,779,832	0	0	0	0
DETAILS OF WRITE-INS													
0501. Reserve for NJ State Sanction .....	552,000	0	0	0	0	0	0	0	552,000	0	0	0	0
0502. ....													
0503. ....													
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	552,000	0	0	0	0	0	0	0	552,000	0	0	0	0
1101. ....													
1102. ....													
1103. ....													
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

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



**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 3 - ANALYSIS OF EXPENSES**

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$ .....0 for occupancy of own building) .....	2,563,619	479,278	2,726,356	0	5,769,253
2. Salary, wages and other benefits .....	47,300,097	8,842,933	50,302,692	0	106,445,722
3. Commissions (less \$ .....0 ceded plus \$ .....0 assumed) .....	0	0	0	0	0
4. Legal fees and expenses .....	670,156	125,288	712,697	0	1,508,141
5. Certifications and accreditation fees .....	0	0	0	0	0
6. Auditing, actuarial and other consulting services ...	5,319,255	994,455	5,656,920	0	11,970,630
7. Traveling expenses .....	790,174	147,726	840,334	0	1,778,234
8. Marketing and advertising .....	2,816,282	526,515	2,995,059	0	6,337,856
9. Postage, express and telephone .....	1,965,262	367,413	2,090,016	0	4,422,691
10. Printing and office supplies .....	3,121,052	583,493	3,319,176	0	7,023,721
11. Occupancy, depreciation and amortization .....	1,182,789	221,127	1,257,872	0	2,661,788
12. Equipment .....	373,888	69,900	397,622	0	841,410
13. Cost or depreciation of EDP equipment and software .....	5,097,662	953,027	5,421,260	0	11,471,949
14. Outsourced services including EDP, claims, and other services .....	5,735,740	1,581,780	5,350,820	0	12,668,340
15. Boards, bureaus and association fees .....	67,545	12,628	71,833	0	152,006
16. Insurance, except on real estate .....	881,078	164,721	937,009	0	1,982,808
17. Collection and bank service charges .....	257,821	48,201	274,187	0	580,209
18. Group service and administration fees .....	993,149	185,673	1,056,194	0	2,235,016
19. Reimbursements by uninsured plans .....	0	0	0	0	0
20. Reimbursements from fiscal intermediaries .....	0	0	0	0	0
21. Real estate expenses .....	0	0	0	0	0
22. Real estate taxes .....	106,597	30,399	142,918	0	279,914
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes .....	0	0	20,505,522	0	20,505,522
23.2 State premium taxes .....	0	0	0	0	0
23.3 Regulatory authority licenses and fees .....	0	0	157,318,860	0	157,318,860
23.4 Payroll taxes .....	2,135,820	609,088	2,863,568	0	5,608,476
23.5 Other (excluding federal income and real estate taxes) .....	0	0	0	0	0
24. Investment expenses not included elsewhere .....	0	0	0	426,694	426,694
25. Aggregate write-ins for expenses .....	11,214,736	2,095,936	12,212,331	0	25,523,003
26. Total expenses incurred (Lines 1 to 25) .....	92,592,722	18,039,581	276,453,246	426,694	(a) 387,512,243
27. Less expenses unpaid December 31, current year .....	1,828,442	356,230	105,940,279	122,649	108,247,600
28. Add expenses unpaid December 31, prior year ....	1,527,204	433,933	76,367,110	151,998	78,480,245
29. Amounts receivable relating to uninsured plans, prior year .....	0	0	5,901	0	5,901
30. Amounts receivable relating to uninsured plans, current year .....	0	0	0	0	0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	92,291,484	18,117,284	246,874,176	456,043	357,738,987
<b>DETAILS OF WRITE-INS</b>					
2501. Sundry General Expenses .....	9,354,922	1,748,938	9,948,770	0	21,052,630
2502. Professional Fees/Consulting .....	1,217,963	227,703	1,295,279	0	2,740,945
2503. Information Technology .....	520,123	97,239	553,140	0	1,170,502
2598. Summary of remaining write-ins for Line 25 from overflow page .....	121,728	22,056	415,142	0	558,926
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	11,214,736	2,095,936	12,212,331	0	25,523,003

(a) Includes management fees of \$ .....155,507,617 to affiliates and \$ .....0 to non-affiliates.

**EXHIBIT OF NET INVESTMENT INCOME**

	1	2
	Collected During Year	Earned During Year
1. U.S. government bonds	(a) 314,590	327,911
1.1 Bonds exempt from U.S. tax	(a) 0	0
1.2 Other bonds (unaffiliated)	(a) 15,014,476	17,649,548
1.3 Bonds of affiliates	(a) 0	0
2.1 Preferred stocks (unaffiliated)	(b) 0	0
2.11 Preferred stocks of affiliates	(b) 0	0
2.2 Common stocks (unaffiliated)	0	0
2.21 Common stocks of affiliates	0	0
3. Mortgage loans	(c) 0	0
4. Real estate	(d) 0	0
5. Contract Loans	0	0
6. Cash, cash equivalents and short-term investments	(e) 2,113,695	2,113,695
7. Derivative instruments	(f) 0	0
8. Other invested assets	0	0
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	17,442,761	20,091,154
11. Investment expenses		(g) 426,694
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h) 0
14. Depreciation on real estate and other invested assets		(i) 0
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		426,694
17. Net investment income (Line 10 minus Line 16)		19,664,460
<b>DETAILS OF WRITE-INS</b>		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 845,488 accrual of discount less \$ 3,817,145 amortization of premium and less \$ 1,340,928 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.
- (e) Includes \$ 9,369 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.
- (g) Includes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ 0 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	(1,603,475)	0	(1,603,475)	0	0
1.1 Bonds exempt from U.S. tax	0	0	0	0	0
1.2 Other bonds (unaffiliated)	(7,223,277)	0	(7,223,277)	0	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	0	0	0	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	(8,826,752)	0	(8,826,752)	0	0
<b>DETAILS OF WRITE-INS</b>					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**EXHIBIT OF NON-ADMITTED 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) .....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks .....	0	0	0
2.2 Common stocks .....	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....	0	0	0
3.2 Other than first liens.....	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale .....	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....	0	0	0
6. Contract loans .....	0	0	0
7. Derivatives (Schedule DB) .....	0	0	0
8. Other invested assets (Schedule BA) .....	0	0	0
9. Receivables for securities .....	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL) .....	0	0	0
11. Aggregate write-ins for invested assets .....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	0	0	0
13. Title plants (for Title insurers only) .....	0	0	0
14. Investment income due and accrued .....	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..	0	0	0
15.3 Accrued retrospective premiums and contracts subject to redetermination .....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0
17. Amounts receivable relating to uninsured plans .....	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0
18.2 Net deferred tax asset .....	0	0	0
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software .....	0	0	0
21. Furniture and equipment, including health care delivery assets .....	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0
23. Receivable from parent, subsidiaries and affiliates .....	0	0	0
24. Health care and other amounts receivable .....	11,431,735	17,298,036	5,866,301
25. Aggregate write-ins for other than invested assets .....	2,826	2,509	(317)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	11,434,561	17,300,545	5,865,984
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0	0
28. Total (Lines 26 and 27)	11,434,561	17,300,545	5,865,984
<b>DETAILS OF WRITE-INS</b>			
1101. ....			
1102. ....			
1103. ....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Miscellaneous Receivables .....	2,826	2,509	(317)
2502. ....			
2503. ....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,826	2,509	(317)

**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 .....	401,930	407,171	412,201	416,808	421,421	4,929,536
2. Provider Service Organizations .....	0	0	0	0	0	0
3. Preferred Provider Organizations .....	0	0	0	0	0	0
4. Point of Service .....	0	0	0	0	0	0
5. Indemnity Only .....	0	0	0	0	0	0
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	401,930	407,171	412,201	416,808	421,421	4,929,536
<b>DETAILS OF WRITE-INS</b>						
0601. ....						
0602. ....						
0603. ....						
0698. Summary of remaining write-ins for Line 6 from overflow page .....	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

**AMERICHoice OF NEW JERSEY, INC.**

**NOTES TO STATUTORY BASIS FINANCIAL STATEMENTS  
AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2022 AND 2021**

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**1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN**

**Organization and Operation**

AmeriChoice of New Jersey (the “Company”), licensed as a health maintenance organization (“HMO”), offers its enrollees a variety of managed care programs and products through contractual arrangements with health care providers. The Company is a wholly owned subsidiary of AmeriChoice Corporation, Inc. (“AmeriChoice”). AmeriChoice is a wholly owned subsidiary of UnitedHealth Group Incorporated (“UnitedHealth Group”). UnitedHealth Group is a publicly held company trading on the New York Stock Exchange.

The Company was incorporated on October 17, 1994, as an HMO, and operations commenced in February 1996. The Company is certified as an HMO by the State of New Jersey Department of Banking and Insurance (“the Department”). The Company has entered into contracts with physicians, hospitals, and other health care provider organizations to deliver health care services for all enrollees.

The Company has a contract with the State of New Jersey, Division of Medical Assistance and Health Services (“DMAHS”), to provide health care services to Medicaid and FamilyCare (a program for uninsured children and adults) eligible beneficiaries in New Jersey. The current contract is effective through June 30, 2023, and is subject to annual renewal provisions thereafter.

**A. Accounting Practices**

The statutory basis financial statements (herein referred to as “financial statements”) are presented on the basis of accounting practices prescribed or permitted by the Department.

The Department recognizes only statutory accounting practices, prescribed or permitted by the State of New Jersey (the “State”), for determining and reporting the financial condition and results of operations of an HMO, for determining its solvency under New Jersey Insurance Law. The State prescribes the use of the National Association of Insurance Commissioners’ (“NAIC”) Accounting Practices and Procedures manual (“NAIC SAP”) in effect for the accounting periods covered in the financial statements.

On October 3, 2022, the Department adopted certain prescribed accounting practices that differ from those found in the NAIC SAP. These prescribed accounting practices have no effect on the Company’s net income and capital and surplus as of December 31, 2022 and December 31, 2021, and therefore are not reported in the reconciliation table below. The prescribed accounting practices relate to certain Medicaid pass-through payments. Pass-through payments are now required to be reported as premium income and medical expense (see Note 25) depending upon the program.

No significant differences exist between the practices prescribed or permitted by the State of New Jersey and the NAIC SAP which materially affect the statutory basis net income and capital and surplus, as illustrated in the table below:

	SSAP #	F/S Page #	F/S Line #	December 31, 2022	December 31, 2021
<b>Net Income</b>					
(1) Company state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 125,114,548	\$ 64,875,851
(2) State prescribed practices that are an increase/(decrease) from NAIC SAP: None				-	-
(3) State permitted practices that are an increase/(decrease) from NAIC SAP: None				-	-
(4) NAIC SAP (1 - 2 - 3 = 4)	XXX	XXX	XXX	<u>\$ 125,114,548</u>	<u>\$ 64,875,851</u>
<b>Capital and Surplus</b>					
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 397,611,164	\$ 417,829,545
(6) State prescribed practices that are an increase/(decrease) from NAIC SAP: None				-	-
(7) State permitted practices that are an increase/(decrease) from NAIC SAP: None				-	-
(8) NAIC SAP (5 - 6 - 7 = 8)	XXX	XXX	XXX	<u>\$ 397,611,164</u>	<u>\$ 417,829,545</u>

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

The preparation of these financial statements in conformity with the NAIC Annual Statement Instructions and the NAIC SAP include certain amounts that are based on the Company's estimates and judgments. These estimates require the Company to apply complex assumptions and judgments, often because the Company must make estimates about the effects of matters that are inherently uncertain and will change in subsequent periods. The most significant estimates relate to hospital and medical benefits, claims unpaid, aggregate health policy reserves, aggregate health claim reserves, risk corridor, and risk adjustment estimates. The Company adjusts these estimates each period as more current information becomes available. The impact of any changes in estimates is included in the determination of net income in the period in which the estimate is adjusted.

**C. Accounting Policy**

**Basis of Presentation** — The Company prepares its financial statements on the basis of accounting practices prescribed or permitted by the Department. These statutory practices differ from accounting principles generally accepted in the United States of America ("GAAP").

Accounting policy disclosures that are required by the NAIC Annual Statement instructions are as follows:

- (1–2) Bonds are stated at book/adjusted carrying value if they meet NAIC designation of one or two and stated at the lower of book/adjusted carrying value or fair value if they meet an NAIC designation of three or higher. The Company does not have any mandatory convertible securities or Investment Analysis Office of the NAIC ("IAO") identified funds (i.e.: exchange traded funds or bond mutual funds) in its bond portfolio. Amortization of bond premium or accretion of discount is calculated using the constant yield interest method. Bonds and short-term investments are valued and reported using market prices published by the IAO in accordance with the NAIC Valuation of Securities manual prepared by the IAO or an external pricing service;
- (3–4) The Company holds no common or preferred stock;
- (5) The Company holds no mortgage loans on real estate;
- (6) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors. The Company's investment policy limits investments in nonagency residential mortgage-backed securities, including home equity and sub-prime mortgages, to 10% of total cash and invested assets. Total combined investments in mortgage-backed securities and asset-backed securities cannot exceed more than 30% of total cash and invested assets;



- (7) The Company holds no investments in subsidiaries, controlled, or affiliated entities;
- (8) The Company has no investment interests with respect to joint ventures, partnerships, or limited liability companies;
- (9) The Company holds no derivatives;
- (10) Premium deficiency reserves (“PDR”) (inclusive of conversion reserves) and the related expenses are recognized when it is probable that expected future health care expenses, claims adjustment expenses (“CAE”), direct administration costs, and an allocation of indirect administration costs under a group of existing contracts will exceed anticipated future premiums and reinsurance recoveries considered over the remaining lives of the contracts, and are recorded as aggregate health policy reserves in the financial statements. Indirect administration costs arise from activities that are not specifically identifiable to a specific group of existing contracts, and therefore, those costs are fully allocated among the various contract groupings. The allocation of indirect administration costs to each contract grouping is made proportionately to the expected margins remaining in the premiums after future health care expenses, CAE and direct administration costs are considered. The data and assumptions underlying such estimates and the resulting reserves are periodically updated, and any adjustments are reflected as an increase in reserves for life, accident, and health contracts in the financial statements in the period in which the change in estimate is identified. The Company does anticipate investment income as a factor in the PDR calculation (see Note 30);
- (11) CAE are those costs expected to be incurred in connection with the adjustment and recording of accident and health claims. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to its affiliate, United HealthCare Services, Inc. (“UHS”), in exchange for administrative and management services. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and general administrative expenses (“GAE”) to be reported in the financial statements. It is the responsibility of UHS to pay CAE in the event the Company ceases operations. The Company has recorded an estimate of unpaid CAE associated with incurred but unpaid claims, which is included in unpaid CAE in the financial statements. Management believes the amount of the liability for unpaid CAE as of December 31, 2022 is adequate to cover the Company’s cost for the adjustment and recording of unpaid claims; however, actual expenses may differ from those established estimates. Adjustments to the estimates for unpaid CAE are reflected in operating results in the period in which the change in estimate is identified;
- (12) The Company does not carry any fixed assets in the financial statements;
- (13) Health care and other amounts receivable consist of pharmacy rebates receivable estimated based on the most currently available data from the Company’s claims processing systems and from data provided by the Company’s affiliated pharmaceutical benefit manager, OptumRx, Inc. (“OptumRx”). Health care and other amounts receivable also include receivables for amounts due to the Company for claim overpayments to providers, hospitals and other health care organizations. Health care and other amounts receivable are considered nonadmitted assets under the NAIC SAP if they do not meet admissibility requirements. Accordingly, the Company has excluded receivables that do not meet the admissibility criteria from the financial statements (see Note 28).

The Company has also deemed the following to be significant accounting policies:

## **ASSETS**

### ***Cash and Invested Assets***

- Bonds include securities with a maturity of greater than one year at the time of purchase;
- Cash equivalents include securities that have original maturity dates of three months or less from the date of acquisition. Cash equivalents also consist of the Company’s share of a qualified cash pool sponsored and administered by UHS. The investment pool is recorded at cost or book/adjusted carrying value depending on the composition of the underlying securities. Interest income from the pool accrues daily to participating members based upon ownership percentage. Cash equivalents, excluding money-market funds, are reported at cost or book/adjusted carrying value depending on the nature of the underlying security, which approximates fair value. Money-market funds are reported at fair value or net asset value (“NAV”) as a practical expedient;
- Realized capital gains and losses on sales of investments are calculated based upon specific identification of the investments sold. These gains and losses are reported as net realized capital (losses) gains less capital gains (benefit) tax (“net realized capital (losses) gains less taxes”) in the financial statements.

- The Company continually monitors the difference between amortized cost and estimated fair value of its investments. If any of the Company's investments experience a decline in value that the Company has determined is other-than-temporary, or if the Company has determined it will sell a security that is in an impaired status, the Company will record a realized loss in net realized capital (losses) gains less taxes in the financial statements. The new cost basis is not changed for subsequent recoveries in fair value. The prospective adjustment method is utilized for loan-backed securities for periods subsequent to the loss recognition (see Note 5).

## **LIABILITIES**

- **Claims Unpaid and Aggregate Health Claim Reserves** — Claims unpaid and aggregate health claim reserves include claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

The estimates for incurred but not yet reported claims are developed using an actuarial process that is consistently applied, centrally controlled, and automated. The actuarial models consider factors such as historical submission and payment data, cost trends, customer and product mix, seasonality, utilization of health care services, contracted service rates, and other relevant factors. The Company estimates such liabilities for physician, hospital, and other medical cost disputes based upon an analysis of potential outcomes, assuming a combination of litigation and settlement strategies. These estimates may change as actuarial methods change or as underlying facts upon which estimates are based change. The Company did not change actuarial methods during 2022 and 2021. Management believes the amount of claims unpaid and aggregate health claim reserves is a best estimate of the Company's liability for unpaid claims and aggregate health claim reserves as of December 31, 2022; however, actual payments may differ from those established estimates.

The Company contracts with hospitals, physicians, and other providers of health care under capitated or discounted fee for service arrangements, including a hospital per diem to provide medical care services to enrollees. Some of these contracts are with related parties (see Note 10). Capitated providers are at risk for the cost of medical care services provided to the Company's enrollees; however, the Company is ultimately responsible for the provision of services to its enrollees should the capitated provider be unable to provide the contracted services.

- **Aggregate Health Policy Reserves** — Aggregate health policy reserves includes risk corridor payables due to DMAHS for which adjustments are based on a target MLR that is established to determine if the Company's actual MLR differs from the expected MLR within a specified range by rate cell category, which is determined by the Department (see Note 24). Aggregate health policy reserves also includes risk adjustment payables due to DMAHS which represents adjustments to capitation payments that are based on a calculation performed by DMAHS consultants for each company participating in the program (see Note 24).
- **General Expenses Due or Accrued** — General expenses that are due as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general expenses due or accrued in the financial statements.
- **Liability for Amounts Held Under Uninsured Plans** — Liability for amounts held under uninsured plans represents amounts due from the Company to the state Medicaid agency for the administrative activities it performs for which it has no insurance risk (see Note 18).

## **CAPITAL AND SURPLUS AND MINIMUM STATUTORY REQUIREMENTS**

- **Restricted Cash Reserves** — The Company is in compliance with the The New Jersey Administrative Code ("NJAC") regulatory deposit requirements as of December 31, 2022 and 2021, respectively, for qualification purposes as a domestic insurer. These restricted cash reserves are stated at book/adjusted carrying value, which approximates fair value. These restricted deposits are included in bonds in the financial statements. Interest earned on these deposits accrues to the Company (see Note 5).

The NJAC also requires the Company to maintain minimum insolvency claim deposits with the State of New Jersey of \$314,411,547 for claim expenses at June 30, 2022 and 2021, respectively. The Company held regulatory deposits with the State of New Jersey with a book/adjusted carrying value of \$377,560,691 and \$371,569,537 as of December 31, 2022 and 2021, respectively, which was in compliance with the requirement for both years. These restricted deposits are included in bonds in the statutory basis statements of admitted assets, liabilities, and capital and surplus. Interest earned on this deposit accrues to the Company.

- Minimum Capital and Surplus** — Under the laws of the State of New Jersey, the Department requires the Company to maintain a minimum capital and surplus equal to the greater of \$2,391,860; 2% of the first \$150 million of annual premium revenue and 1% of annual premium revenue over \$150 million; three months of uncovered health care expenditures; or an amount equal to the sum of 8% of the annual health care expenditures (not including those expenditures paid on a capitated basis or those on a managed hospital plan basis), plus 4% of the annual hospital expenditures paid on a managed hospital payment basis. The minimum capital and surplus requirement were \$200,504,759 and \$177,819,290, for December 31, 2022 and 2021, respectively, which was based on health care expenditures, as that produced the highest minimum requirement.

Risk-based capital (“RBC”) is a regulatory tool for measuring the minimum amount of capital appropriate for a managed care organization to support its overall business operations in consideration of its size and risk profile. The Department requires the Company to maintain minimum capital and surplus equal to the greater of the state statute as outlined above, or the company action level as calculated by the RBC formula, or the level needed to avoid action pursuant to the trend test in the RBC formula.

The Company is in compliance with the minimum required capital and surplus amounts where it is licensed to do business, as of December 31, 2022 and 2021.

### **STATEMENTS OF OPERATIONS**

- Net Premium Income and Change in Unearned Premium Reserves and Reserve for Rate Credits** — Revenues consist of net premium income that is recognized in the period in which enrollees are entitled to receive health care services.

The Medicaid plan is subject to experience rated rebates, including risk corridor programs, risk adjustment programs, and performance guarantees based on various utilization measures. The Company records premium adjustments for the changes to the estimates for experience rated rebates and risk corridor programs which are reflected in change in unearned premium reserves and reserve for rate credits and for the risk adjustment program and performance guarantees which are reflected in net premium income in the financial statements (see Note 24). Net premium income also includes amounts paid by state and federal governments on a per member basis in exchange for the provision and administration of medical benefits under Medicaid and Children’s Health Insurance Program (“CHIP”), and home nursing risk-sharing payments, high-dollar risk pool payments, and maternity payments. Premiums are contractual and are recognized in the coverage period in which members are entitled to receive services, except in the case of maternity payments. Maternity income is billed on contractual rates and recognized as income as each birth case is identified by the Company.

- Total Hospital and Medical Expenses** — Total hospital and medical expenses include claims paid, claims processed but not yet paid, estimates for claims received but not yet processed, estimates for the costs of health care services enrollees have received but for which claims have not yet been submitted, and payments and liabilities for physician, hospital, and other medical costs disputes.

Total hospital and medical expenses also include amounts incurred for incentive pool, withhold adjustments, and bonus amounts that are based on the underlying contractual provisions with the respective providers. In addition, adjustments to claims unpaid estimates and aggregate health claim reserves are reflected in the period once the change in estimate is identified and included in total hospital and medical expenses in the financial statements.

- General Administrative Expenses** — General expenses that have been paid as of the reporting date in addition to general expenses that have been incurred but are not due until a subsequent period are reported as general administrative expenses. Pursuant to the terms of the Agreement (see Note 10), the Company pays a management fee to UHS in exchange for administrative and management services. Costs for items not included within the scope of the Agreement are directly expensed as incurred. State income taxes are also a component of GAE. A detailed review of the administrative expenses of the Company and UHS is performed to determine the allocation between CAE and GAE to be reported in the financial statements.

### **OTHER**

- Vulnerability Due to Certain Concentrations** — The Company is subject to substantial federal and state government regulation, including licensing and other requirements relating to the offering of the Company’s existing products in new markets and offerings of new products, both of which may restrict the Company’s ability to expand its business.

Direct premiums written and uncollected premiums, including receivables for contracts subject to redetermination, from the State of New Jersey DMAHS as a percentage of total direct premiums written and total uncollected premiums, including receivables for contracts subject to redetermination, are 100% and 100% as of December 31, 2022 and 100% and 100% as of December 31, 2021, respectively.

**Recently Issued Accounting Standards** — The Company reviewed all recently issued guidance in 2022 and 2021 that has been adopted for 2022 or subsequent years' implementation and has determined that none of the items would have a significant impact to the financial statements.

**D. Going Concern**

The Company has the ability and will continue to operate for a period of time sufficient to carry out its commitments, obligations and business objectives.

**2. ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS**

No changes in accounting principles or corrections of errors have been recorded during the years ended December 31, 2022 and 2021.

**3. BUSINESS COMBINATIONS AND GOODWILL**

**A–E.** The Company was not party to a business combination during the years ended December 31, 2022 and 2021, and does not carry goodwill in its financial statements.

**4. DISCONTINUED OPERATIONS**

**A. Discontinued Operation Disposed of or Classified as Held for Sale**

**(1–4)** The Company did not have any discontinued operations disposed of or classified as held for sale during 2022 and 2021.

**B. Change in Plan of Sale of Discontinued Operation** — Not applicable.

**C. Nature of any Significant Continuing Involvement with Discontinued Operations after Disposal** — Not applicable.

**D. Equity Interest Retained in the Discontinued Operation after Disposal** — Not applicable.

**5. INVESTMENTS**

For purposes of calculating gross realized gains and losses on sales of investments, the amortized cost of each investment sold is used. The gross realized gains and losses on sales of long-term investments were \$71,214 and \$8,701,224, respectively, for 2022 and \$828,291 and \$0, respectively, for 2021. There were no gross realized gains and losses on sales of short-term investments in 2022 or 2021. The net realized gain is included in net realized capital (losses) gains less taxes. Total proceeds on the sale of long-term investments were \$164,028,183 and \$33,079,646 in 2022 and 2021, respectively. There were no proceeds on the sale for short-term investments for 2022 or 2021.

As of December 31, 2022 and 2021, the book/adjusted carrying value, fair value, and gross unrecognized unrealized gains and losses of the Company's investments, excluding cash and cash equivalents of \$208,243,985 and \$269,243,147 respectively, are disclosed in the table below:

	2022				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
U.S. government and agency securities	\$ 76,076,723	\$ -	\$ 6,004,230	\$ 4,438,234	\$ 65,634,259
State and agency municipal securities	73,633,746	223,155	1,729,842	1,673,912	70,453,147
City and county municipal securities	109,288,557	578,519	5,581,422	848,882	103,436,772
Corporate debt securities	<u>443,159,107</u>	<u>986,471</u>	<u>18,596,230</u>	<u>13,899,745</u>	<u>411,649,603</u>
Total Bonds	<u>\$ 702,158,133</u>	<u>\$ 1,788,145</u>	<u>\$ 31,911,724</u>	<u>\$ 20,860,773</u>	<u>\$ 651,173,781</u>

	2021				
	Book/Adjusted Carrying Value	Gross Unrecognized Unrealized Gains	Gross Unrecognized Unrealized Losses < 1 Year	Gross Unrecognized Unrealized Losses > 1 Year	Fair Value
Less than one year	\$ 8,289,892	\$ 694	\$ 6,818	\$ 69,033	\$ 8,214,735
One to five years	83,087,991	144,028	2,470,541	1,046,106	79,715,372
Five to ten years	288,119,278	774,544	16,434,831	4,837,729	267,621,262
Over ten years	<u>322,660,972</u>	<u>868,879</u>	<u>12,999,534</u>	<u>14,907,905</u>	<u>295,622,412</u>
Total Bonds	<u>\$ 702,158,133</u>	<u>\$ 1,788,145</u>	<u>\$ 31,911,724</u>	<u>\$ 20,860,773</u>	<u>\$ 651,173,781</u>

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

	Book/Adjusted Carrying Value	2021			Fair Value
		Gross Unrealized Gains	Gross Unrealized Losses < 1 Year	Gross Unrealized Losses > 1 Year	
U.S. government and agency securities	\$ 95,437,433	\$ 725,245	\$ 743,864	\$ -	\$ 95,418,814
State and agency municipal securities	65,035,864	3,184,982	258,282	-	67,962,564
City and county municipal securities	93,916,730	3,958,845	25,271	-	97,850,304
Corporate debt securities	<u>396,157,862</u>	<u>6,174,566</u>	<u>1,541,894</u>	<u>96,232</u>	<u>400,694,302</u>
Total Bonds	<u>\$ 650,547,889</u>	<u>\$ 14,043,638</u>	<u>\$ 2,569,311</u>	<u>\$ 96,232</u>	<u>\$661,925,984</u>

Included in U.S. government and agency securities and corporate debt securities in the tables above are mortgage-related loan-backed securities, which do not have a single maturity date. For the years to maturity table above, these securities have been presented in the maturity group based on the securities' final maturity date and at a book/adjusted carrying value of \$243,284,745 and fair value of \$222,959,193.

The following table illustrates the fair value and gross unrecognized unrealized losses, aggregated by investment category and length of time that the individual securities have been in a continuous unrecognized unrealized loss position as of December 31, 2022 and 2021:

	2022					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses
U.S. government and agency securities	\$ 41,782,412	\$ 6,004,230	\$ 23,851,847	\$ 4,438,234	\$ 65,634,259	\$ 10,442,464
State and agency municipal securities	36,461,598	1,729,842	15,847,183	1,673,912	52,308,781	3,403,754
City and county municipal securities	64,237,291	5,581,422	8,927,253	848,882	73,164,544	6,430,304
Corporate debt securities	<u>230,940,962</u>	<u>18,596,230</u>	<u>94,960,067</u>	<u>13,899,745</u>	<u>325,901,030</u>	<u>32,495,975</u>
Total bonds	<u>\$ 373,422,263</u>	<u>\$ 31,911,724</u>	<u>\$ 143,586,350</u>	<u>\$ 20,860,773</u>	<u>\$ 517,008,614</u>	<u>\$ 52,772,497</u>

	2021					
	< 1 Year		> 1 Year		Total	
	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses	Fair Value	Gross Unrealized Losses
U.S. government and agency securities	\$ 69,562,026	\$ 743,864	\$ -	\$ -	\$ 69,562,026	\$ 743,864
State and agency municipal securities	18,226,962	258,282	-	-	18,226,962	258,282
City and county municipal securities	11,268,742	25,271	-	-	11,268,742	25,271
Corporate debt securities	<u>196,518,978</u>	<u>1,541,894</u>	<u>2,919,542</u>	<u>96,232</u>	<u>199,438,520</u>	<u>1,638,126</u>
Total bonds	<u>\$ 295,576,708</u>	<u>\$ 2,569,311</u>	<u>\$ 2,919,542</u>	<u>\$ 96,232</u>	<u>\$ 298,496,250</u>	<u>\$ 2,665,543</u>

The unrecognized unrealized losses on investments in U.S. government and agency securities, state and agency municipal securities, city and county municipal securities, and corporate debt securities at December 31, 2022 and 2021, were mainly caused by interest rate fluctuations and not by unfavorable changes in the credit ratings associated with these securities. The Company evaluates impairment at each reporting period for each of the securities whereby the fair value of the investment is less than its book/adjusted carrying value. The contractual cash flows of the U.S. government and agency securities are guaranteed either by the U.S. government or an agency of the U.S. government. It is expected that the securities would not be settled at a price less than the cost of the investment, and the Company does not intend to sell the investment until the unrealized loss is fully recovered. The Company assessed the credit quality of the state and agency municipal securities, city and county municipal securities and corporate debt securities, noting whether a significant deterioration since purchase or other factors that may indicate an other-than temporary impairment ("OTTI"), such as the length of time and extent to which fair value has been less than cost, the financial condition, and near term prospects of the issuer as well as specific events or circumstances that may influence the operations of the issuer and the Company's intent to sell the investment. Additionally, the Company evaluated its intent and ability to retain loan-backed securities for a period of time sufficient to recover the amortized cost. As a result of these reviews no OTTI was recorded by the Company as of December 31, 2022 and 2021.

**A-C.** The Company has no mortgage loans, real estate loans, restructured debt, or reverse mortgages. The Company also has no real estate property occupied by the Company, real estate property held for the production of income, or real estate property held for sale.

**D. Loan-Backed Securities**

- (1) U.S. government and agency securities and corporate debt securities include loan-backed securities (mortgage-backed securities and asset-backed securities), which are valued using the retrospective adjustment methodology. Prepayment assumptions for the determination of the book/adjusted carrying value, commonly referred to as amortized cost, of loan-backed securities are based on a three-month constant prepayment rate history obtained from external data source vendors.
- (2) The Company did not recognize any OTTIs on loan-backed securities as of December 31, 2022.
- (3) The Company did not have any loan-backed securities with other-than-temporary impairments OTTIs to report by CUSIP as of December 31, 2022 or 2021.

- (4) The following table illustrates the fair value, gross unrecognized unrealized losses, and length of time that the loan-backed securities have been in a continuous unrecognized unrealized loss position as of December 31, 2022 and 2021:

	<b>2022</b>
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 8,262,831
2. 12 months or longer	12,158,396
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	123,122,688
2. 12 months or longer	88,947,825
	<b>2021</b>
The aggregate amount of unrealized losses:	
1. Less than 12 months	\$ 1,627,611
2. 12 months or longer	96,233
The aggregate related fair value of securities with unrealized losses:	
1. Less than 12 months	198,923,477
2. 12 months or longer	2,919,542

- (5) The Company believes that it will continue to collect timely the principal and interest due on its loan-backed securities that have an amortized cost in excess of fair value. The unrealized losses were primarily caused by interest rate changes and not by unfavorable changes in the credit quality associated with these securities that impacted the assessment on collectability of principal and interest. At each reporting period, the Company evaluates available-for-sale debt securities for any credit-related impairment when the fair value of the investment is less than its amortized cost. The Company evaluated the expected cash flows and the underlying credit quality and credit ratings of the issuers, noting no significant credit deterioration since purchase. As of December 31, 2022, the unrealized loss on any security that the Company classified as available for sale was not material to the Company's investment portfolio. Any other securities in an unrealized loss position as of December 31, 2022, the Company considers to be temporary.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions** — Not applicable.
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing** — Not applicable.
- H. Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale** — Not applicable.
- J. Real Estate** — Not applicable.
- K. Low-Income Housing Tax Credits** — Not applicable.



**L. Restricted Assets**

(1) Restricted assets, including pledged securities as of December 31, 2022 and 2021, are presented below:

Restricted Asset Category	1 Total Gross (Admitted & Nonadmitted) Restricted From Current Year	2 Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	3 Increase/ (Decrease) (1 Minus 2)	4 Total Current Year Nonadmitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Nonadmitted) Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	0 %	0 %
b. Collateral held under security lending agreements	-	-	-	-	-	0 %	0 %
c. Subject to repurchase agreements	-	-	-	-	-	0 %	0 %
d. Subject to reverse repurchase agreements	-	-	-	-	-	0 %	0 %
e. Subject to dollar repurchase agreements	-	-	-	-	-	0 %	0 %
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	0 %	0 %
g. Placed under option contracts	-	-	-	-	-	0 %	0 %
h. Letter stock or securities restricted as to sale—excluding FHLB capital stock	-	-	-	-	-	0 %	0 %
i. FHLB capital stock	-	-	-	-	-	0 %	0 %
j. On deposit with states	380,161,770	376,563,046	3,598,724	-	380,161,770	40 %	40 %
k. On deposit with other regulatory bodies	-	-	-	-	-	0 %	0 %
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	0 %	0 %
m. Pledged as collateral not captured in other categories	-	-	-	-	-	0 %	0 %
n. Other restricted assets	-	-	-	-	-	0 %	0 %
<b>o. Total restricted assets</b>	<b>\$ 380,161,770</b>	<b>\$ 376,563,046</b>	<b>\$ 3,598,724</b>	<b>\$ -</b>	<b>\$ 380,161,770</b>	<b>40 %</b>	<b>40 %</b>

(a) Column 1 divided by Asset Page, Column 1, Line 28  
(b) Column 5 divided by Asset Page, Column 3, Line 28

(2–4) The Company has no assets pledged as collateral not captured in other categories and no other restricted assets as of December 31, 2022 or 2021.

**M. Working Capital Finance Investments** — Not applicable.

**N. Offsetting and Netting of Assets and Liabilities**

The Company does not have any offsetting or netting of assets and liabilities as it relates to derivatives, repurchase and reverse repurchase agreements, and securities borrowing and securities lending activities.

**O. 5GI Securities**

The Company does not have any investments with an NAIC designation of 5GI as of December 31, 2022 and 2021.

**P. Short Sales** — Not applicable.

**Q. Prepayment Penalty and Acceleration Fees**

The following table illustrates prepayment penalty and acceleration fees as of December 31, 2022:

	General Account
1. Number of CUSIPs	5
2. Aggregate Amount of Investment Income	\$ 27,058

**R. Reporting Entity's Share of Cash Pool by Asset Type** — Not applicable.

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is \$192,909,920 and \$256,487,192 as of December 31, 2022 and December 31, 2021, respectively. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of December 31, 2022:

Asset Type	Percent Share
(1) Cash	0%
(2) Cash Equivalents	63%
(3) Short-Term Investments	37%
<b>(4) Total</b>	<b>100%</b>

**6. JOINT VENTURES, PARTNERSHIPS, AND LIMITED LIABILITY COMPANIES**

**A–B.** The Company has no investments in joint ventures, partnerships, or limited liability companies that exceed 10% of admitted assets and did not recognize any impairment write-down for its investments in joint ventures, partnerships, and limited liability companies during the statement periods.

**7. INVESTMENT INCOME**

**A.** The Company excludes all investment income due and accrued amounts that are over 90 days past due from the financial statements.

**B.** There were no investment income amounts excluded from the financial statements.

**8. DERIVATIVE INSTRUMENTS**

**A–B.** The Company has no derivative instruments.

**9. INCOME TAXES**

The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The Company does not expect to be liable for the Corporate Alternative Minimum Tax in 2023.

**A. Deferred Tax Asset/Liability**

**(1)** The components of the net deferred tax asset at December 31, 2022 and 2021 are as follows:

	2022			2021			Change		
	1 Ordinary	2 Capital	3 (Col 1+2) Total	4 Ordinary	5 Capital	6 (Col 4+5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7+8) Total
(a) Gross deferred tax assets	\$3,140,349	\$ -	\$ 3,140,349	\$ 4,381,763	\$ -	\$ 4,381,763	\$ (1,241,414)	\$ -	\$ (1,241,414)
(b) Statutory valuation allowance adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted gross deferred tax assets (1a - 1b)	3,140,349	-	3,140,349	4,381,763	-	4,381,763	(1,241,414)	-	(1,241,414)
(d) Deferred tax assets nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal net admitted deferred tax asset (1c - 1d)	3,140,349	-	3,140,349	4,381,763	-	4,381,763	(1,241,414)	-	(1,241,414)
(f) Deferred tax liabilities	127,504	-	127,504	170,005	-	170,005	(42,501)	-	(42,501)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	<u>\$3,012,845</u>	<u>\$ -</u>	<u>\$ 3,012,845</u>	<u>\$ 4,211,758</u>	<u>\$ -</u>	<u>\$ 4,211,758</u>	<u>\$ (1,198,913)</u>	<u>\$ -</u>	<u>\$ (1,198,913)</u>

(2) The components of the adjusted gross deferred tax assets admissibility calculation under SSAP No. 101, *Income Taxes*, are as follows:

Admission Calculation Components SSAP No. 101	2022			2021			Change		
	1 Ordinary	2 Capital	3 (Col 1 + 2) Total	4 Ordinary	5 Capital	6 (Col 4 + 5) Total	7 (Col 1 - 4) Ordinary	8 (Col 2 - 5) Capital	9 (Col 7 + 8) Total
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 3,140,348	\$ -	\$ 3,140,348	\$ 4,381,762	\$ -	\$ 4,381,762	\$ (1,241,414)	\$ -	\$ (1,241,414)
(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. (The 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	59,189,748	XXX	XXX	62,042,668	XXX	XXX	(2,852,920)
(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	<u>1</u>	-	<u>1</u>	<u>1</u>	-	<u>1</u>	-	-	-
(d) Deferred tax assets admitted as the result of application of SSAP No. 101									
Total (2(a) + 2(b) + 2(c))	<u>\$ 3,140,349</u>	<u>\$ -</u>	<u>\$ 3,140,349</u>	<u>\$ 4,381,763</u>	<u>\$ -</u>	<u>\$ 4,381,763</u>	<u>\$ (1,241,414)</u>	<u>\$ -</u>	<u>\$ (1,241,414)</u>

(3) The ratio percentage and adjusted capital and surplus used to determine the recovery period and threshold limitations for the admissibility calculation are presented below:

	2022	2021
(a) Ratio percentage used to determine recovery period and threshold limitation amount	>300%	>300%
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)(2) above	\$ 394,598,319	\$ 413,617,787

(4) The impact to the gross deferred tax assets balances as a result of tax-planning strategies as of December 31, 2022 and 2021 is presented below:

Impact of Tax-Planning Strategies	2022		2021		Change	
	1 Ordinary	2 Capital	3 Ordinary	4 Capital	5 (Col 1 - 3) Ordinary	6 (Col 2 - 4) Capital
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets by tax character as a percentage.						
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 3,140,349	\$ -	\$ 4,381,763	\$ -	\$(1,241,414)	\$ -
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)	\$ 3,140,349	\$ -	\$ 4,381,763	\$ -	\$(1,241,414)	\$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax-planning strategies	- %	- %	- %	- %	- %	- %
(b) Does the Company's tax-planning strategies include the use of reinsurance?			Yes			No <u>X</u>

**B. Unrecognized Deferred Tax Liabilities**

(1-4) There are no unrecognized deferred tax liabilities for the years ended December 31, 2022 and 2021.

**C. Significant Components of Income Taxes**

(1) The current federal income taxes incurred for the years ended December 31, 2022 and 2021 are as follows:

	1 2022	2 2021	3 (Col 1 - 2) Change
1. Current income tax			
(a) Federal	\$ 34,385,558	\$ 16,422,800	\$ 17,962,758
(b) Foreign	-	-	-
(c) Subtotal (1a+1b)	34,385,558	16,422,800	17,962,758
(d) Federal income tax on net capital gains (losses)	(1,853,618)	142,336	(1,995,954)
(e) Utilization of capital loss carryforwards	-	-	-
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	<u>\$ 32,531,940</u>	<u>\$ 16,565,136</u>	<u>\$ 15,966,804</u>

(2-4) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities as of December 31, 2022 and 2021, are as follows:

	1 2022	2 2021	3 (Col 1 - 2) Change
2 Deferred tax assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 701,290	\$ 710,848	\$ (9,558)
(2) Unearned premium reserve	-	-	-
(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	2,401,258	3,633,114	(1,231,856)
(11) Net operating loss carryforward	-	-	-
(12) Tax credit carryforward	-	-	-
(13) Other	37,801	37,801	-
(99) Subtotal (sum of 2a1 through 2a13)	3,140,349	4,381,763	(1,241,414)
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	<u>3,140,349</u>	<u>4,381,763</u>	<u>(1,241,414)</u>
(e) Capital:			
(1) Investments	-	-	-
(2) Net capital loss carryforward	-	-	-
(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)	<u>3,140,349</u>	<u>4,381,763</u>	<u>(1,241,414)</u>
3 Deferred tax liabilities:			
(a) Ordinary:			
(1) Investments	-	-	-
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other	127,504	170,005	(42,501)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	127,504	170,005	(42,501)
(b) Capital:			
(1) Investments	-	-	-
(2) Real estate	-	-	-
(3) Other	-	-	-
(99) Subtotal (3b1+3b2+3b3)	-	-	-
(c) Deferred tax liabilities (3a99 + 3b99)	127,504	170,005	(42,501)
4 Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 3,012,845</u>	<u>\$ 4,211,758</u>	<u>\$ (1,198,913)</u>

The other ordinary deferred tax liability of \$127,504 and \$170,005 for 2022 and 2021, respectively, consists of discounting of unpaid losses.

The Company assessed the potential realization of the gross deferred tax asset and as a result no statutory valuation allowance was required and no allowance was established as of December 31, 2022 and 2021.

- D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory federal income tax rate of 21%, to net income before federal income taxes incurred, plus capital gains tax or less capital gains tax (benefit). A summarization of the significant items causing this difference as of December 31, 2022 and 2021 is as follows:

	2022		2021	
	Amount	Effective Tax Rate	Amount	Effective Tax Rate
Tax provision at the federal statutory rate	\$ 33,105,762	21%	\$ 17,102,608	21%
Tax-exempt interest	(606,766)	-	(486,952)	(1)
Tax effect of nonadmitted assets	1,231,857	1	(371,250)	-
Total statutory income taxes	<u>\$ 33,730,853</u>	<u>22%</u>	<u>\$ 16,244,406</u>	<u>20%</u>
Federal income taxes incurred	\$ 34,385,558	22%	\$ 16,422,800	20%
Capital gains tax (benefit)	(1,853,618)	(1)	142,336	-
Change in net deferred income tax	1,198,913	1	(320,730)	-
Total statutory income taxes	<u>\$ 33,730,853</u>	<u>22%</u>	<u>\$ 16,244,406</u>	<u>20%</u>

- E. At December 31, 2022, the Company had no net operating loss carryforwards.

Current federal income taxes payable (recoverable) of \$14,537,329 and (\$5,864,864), as of December 31, 2022 and 2021, respectively, are included in the financial statements. Federal income taxes paid, net of refunds were \$12,129,747 and \$21,758,769 in 2022 and 2021, respectively.

Federal income taxes incurred of \$32,601,329 and \$16,495,746 for 2022 and 2021, respectively, are available for recoupment in the event of future net losses.

The Company has not admitted any aggregate amounts of deposits that are included within Section 6603 ("Deposits made to suspend running of interest on potential underpayments, etc.") of the Internal Revenue Service ("IRS") Code.

- F. The Company is included in the consolidated federal income tax return with its ultimate parent, UnitedHealth Group. The entities included within the consolidated return are included in the NAIC Statutory Statement Schedule Y - Information Concerning Activities of Insurer Members Of A Holding Company Group. Federal income taxes are paid to or refunded by UnitedHealth Group pursuant to the terms of a tax-sharing agreement, approved by the Board of Directors, under which taxes approximate the amount that would have been computed on a separate company basis, with the exception of net operating losses and capital losses. For these losses the Company receives a benefit at the federal rate in the current year for current taxable losses incurred in that year to the extent losses can be utilized in the consolidated federal return of UnitedHealth Group. UnitedHealth Group currently files income tax returns in the U.S. federal jurisdiction, various states, and foreign jurisdictions. The U.S. IRS has completed exams on UnitedHealth Group's consolidated income tax returns for fiscal years 2016 and prior. UnitedHealth Group's 2017 through 2020 tax returns are under review by the IRS under its Compliance Assurance Program. With the exception of a few states, UnitedHealth Group is no longer subject to income tax examinations prior to the 2014 tax year. In general, the Company is subject to examination in non-U.S. jurisdictions for years 2015 and forward. The Company does not believe any adjustments that may result from these examinations will be material to the Company.

- G. **Tax Contingencies** — Not applicable.
- H. **Repatriation Transition Tax** — Not applicable.
- I. **Alternative Minimum Tax Credit** — Not applicable.

**10. INFORMATION CONCERNING PARENT, SUBSIDIARIES, AND AFFILIATES**

**A–B.** In the ordinary course of business, the Company contracts with several affiliates to provide a wide variety of services to the Company’s members. These agreements are filed with and approved by the Department according to Management’s understanding of the current requirements and standards. Within the confines of the applicable filed and approved agreements (including subsequent amendments thereto), the amount and types of services provided by these affiliated entities can change year over year.

UHS maintains a private short-term investment pool in which affiliated companies may participate (see Note 1). At December 31, 2022 and 2021, the Company’s portion was \$192,909,920 and \$256,487,192, respectively and is included in cash equivalents in the financial statements.

The Company has a tax-sharing agreement with UnitedHealth Group (see Note 9).

The Company paid dividends of \$150,000,000 and \$111,000,000 in 2022 and 2021, respectively, to its parent (see Note 13).

The Company holds a \$75,000,000 subordinated revolving credit agreement with UnitedHealth Group at an interest rate of London InterBank Offered Rate (“LIBOR”) plus a margin of 0.50%. This credit agreement is subordinate to the extent it does not conflict with any credit facility held by either party. The agreement was terminated effective December 31, 2022. Due to the elimination of LIBOR as an interest rate benchmark in 2023, this agreement will be terminated in 2023. No amounts were outstanding under the line of credit as of December 31, 2022 and 2021.

**C. Transactions With Related Parties Who Are Not Reported On Schedule Y**

The Company has no material related party transactions that meet the disclosure requirements pursuant to SSAP No. 25, *Affiliates and Other Related Parties* (“SSAP No. 25”) that are not included in NAIC Statutory Statement Schedule Y—Part 2 Summary Of Insurer’s Transactions With Any Affiliates.

**D.** At December 31, 2022 and 2021, the Company reported \$17,525,422 and \$12,662,169, respectively, as amounts due to parent, subsidiaries, and affiliates, which are included in the financial statements. These balances are generally settled within 90 days from the incurred date. Any balances due to the Company that are not settled within 90 days are considered nonadmitted assets.

**E.** The administrative services, access fees, and cost of care services provided by affiliates are calculated using one or more of the following methods: (1) a percentage of premiums; (2) use of assets; (3) direct pass-through of charges; (4) per member per month; (5) per employee per month; (6) per claim; or (7) a combination thereof consistent with the provisions contained in each contract. These amounts are included in GAE, CAE, and hospital and medical expenses in the financial statements. The following table identifies the amounts reported for the administrative services, access fees, and cost of care services provided by related parties for the years ended December 31, 2022 and 2021, which meet the disclosure requirements pursuant to SSAP No. 25, regardless of the effective date of the contract:

	2022	2021
OptumRx	\$ 396,960,758	\$ 348,546,677
UHS	160,793,298	144,536,667
March Vision Care Group, Incorporated	11,803,345	11,119,188
Optum Medical Care of New Jersey, P.C.	9,258,367	7,258,776
United Behavioral Health	7,300,971	1,169,697

OptumRx provides services that may include, but are not limited to, administrative services related to pharmacy management and pharmacy claims processing for enrollees, manufacturer rebate administration, pharmacy incentive services, specialty drug pharmacy services, durable medical equipment services including orthotics and prosthetics and personal health products catalogues showing the healthcare products and benefit credits enrollees needed to redeem the respective products.

UHS provides, or arranges for the provision of, management, administrative, and other services deemed necessary or appropriate for UHS to provide management and operational support to the Company. The services can include, but are not limited to, the categories of management and operational services outlined in the Agreement, such as human resources, legal, facilities, general administration, treasury and investment functions, claims adjudication and payment, benefit administration, disease management, health care decision support, medical management, credentialing, preventative health services, utilization management reporting and expenses incurred for new business that will be effective in the subsequent year.

March Vision Care Group, Inc. provides administrative services related to vision benefit management and claims processing.

Optum Medical Care of New Jersey, P.C. provides medical assistance for children.

United Behavioral Health provides services related to mental health and substance abuse treatment.

- F. The Company has not extended any guarantees or undertakings for the benefit of an affiliate or related party.
- G. The Company is part of an insurance holding company system with UnitedHealth Group as the ultimate parent. Management believes that the Company's transactions with affiliates are fair and reasonable; however, operations of the Company may not be indicative of those that would have occurred if it had operated as an independent company.
- H. The Company does not have any amount deducted from the value of an upstream intermediate entity or ultimate parent owned, either directly or indirectly, via a downstream subsidiary, controlled, or affiliated entity.
- I. The Company does not have any investments in a subsidiary, controlled, or affiliated entity that exceeds 10% of admitted assets.
- J. The Company does not have any investments in impaired subsidiaries, controlled, or affiliated entities.
- K. The Company does not have any investments in foreign insurance subsidiaries.
- L. The Company does not hold any investments in a downstream noninsurance holding company.
- M. The Company does not have any investments in noninsurance subsidiaries, controlled, or affiliated entities.
- N. The Company does not have any investments in insurance subsidiaries, controlled, or affiliated entities.
- O. The Company does not have any investments in subsidiary, controlled, or affiliated entities or joint ventures, partnerships and limited liability companies in which the Company's share of losses exceeds the investment.

**11. DEBT**

- A–B. The Company had no outstanding debt with third-parties or outstanding Federal Home Loan Bank agreements during 2022 and 2021.

**12. RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS**

- A–I. The Company has no defined benefit plans, defined contribution plans, multiemployer plans, consolidated/holding company plans, postemployment benefits, or compensated absences plans and is not impacted by the Medicare Modernization Act on postretirement benefits, since all personnel are employees of UHS, which provides services to the Company under the terms of the Agreement (see Note 10).

**13. CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS, AND QUASI-REORGANIZATIONS**

- A–B. The Company has 25,000 shares authorized and 5,369 shares issued and outstanding of no par value common stock. The Company has no preferred stock outstanding. All issued and outstanding shares of common stock are held by the Company's parent, AmeriChoice.
- C. Dividend payment requirements are outlined in the domiciliary state statutes and may be further restricted by the Department.

- D.** The Company paid extraordinary cash dividends of \$75,000,000 and \$75,000,000 on June 21, 2022 and October 28, 2022, respectively, to AmeriChoice, which was approved by the Department and recorded as a reduction to unassigned surplus in the financial statements.

The Company paid ordinary cash dividends of \$35,000,000 and \$76,000,000 on January 28, 2021 and November 5, 2021, respectively, to AmeriChoice, which were approved by the Department and recorded as a reduction to unassigned surplus in the financial statements.

- E.** The amount of ordinary dividends that may be paid out during any given period is subject to certain restrictions as specified by state statute.
- F.** There are no restrictions placed on the Company's unassigned surplus.
- G.** The Company is not a mutual reciprocal or a similarly organized entity and does not have advances to surplus not repaid.
- H.** The Company does not hold any stock, including stock of affiliated companies for special purposes, such as conversion of preferred stock, employee stock options, or stock purchase warrants.
- I.** The Company does not have any special surplus funds.
- J.** The portion of unassigned surplus, excluding net income, and dividends or infusions, represented (or reduced) by each item below is as follows:

	2022	2021
Net deferred income taxes	\$ 3,012,845	\$ 4,211,758
Nonadmitted assets	<u>(11,434,561)</u>	<u>(17,300,545)</u>
Total	<u>\$ (8,421,716)</u>	<u>\$ (13,088,787)</u>

- K-M.** The Company does not have any outstanding surplus notes and has never been a party to a quasi-reorganization.

#### 14. LIABILITIES, CONTINGENCIES AND ASSESSMENTS

**A. Contingent Commitments**

The Company has no contingent commitments.

**B. Assessments**

The Company is not aware of any guaranty fund assessments or premium tax offsets, potential or accrued, that could have a material financial effect on the operations of the entity.

**C. Gain Contingencies**

The Company is not aware of any gain contingencies that should be disclosed in the financial statements.

**D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits** — Not applicable.

**E. Joint and Several Liabilities** — Not applicable.

**F. All Other Contingencies**

The Company's business is regulated at the federal, state, and local levels. The laws and rules governing the Company's business and interpretations of those laws and rules are subject to frequent change. Broad latitude is given to the agencies administering those regulations. Further, the Company must obtain and maintain regulatory approvals to market and sell many of its products.



The Company has been, or is currently involved, in various governmental investigations, audits and reviews. These include routine, regular and special investigations, audits and reviews by Centers for Medicare and Medicaid Services ("CMS"), state insurance and health and welfare departments and other governmental authorities. The Company cannot reasonably estimate the range of loss, if any, that may result from any material government investigations, audits and reviews in which it is currently involved given the inherent difficulty in predicting regulatory action, fines and penalties, if any, and the various remedies and levels of judicial review available to the Company in the event of an adverse finding.

Because of the nature of its businesses, the Company is frequently made party to a variety of legal actions and regulatory inquiries, including class actions and suits brought by members, care providers, consumer advocacy organizations, customers and regulators, relating to the Company's businesses, including management and administration of health benefit plans and other services.

The Company records liabilities for its estimates of probable costs resulting from these matters where appropriate. Estimates of costs resulting from legal and regulatory matters involving the Company are inherently difficult to predict, particularly where the matters involve: indeterminate claims for monetary damages or may involve fines, penalties or punitive damages; present novel legal theories or represent a shift in regulatory policy; involve a large number of claimants or regulatory bodies; are in the early stages of the proceedings; or could result in a change in business practices. Accordingly, the Company is often unable to estimate the losses or ranges of losses for those matters where there is a reasonable possibility, or it is probable that a loss may be incurred. Although the outcomes of any such legal actions cannot be predicted, in the opinion of management, the resolution of any currently pending or threatened actions will not have a material adverse effect on the financial statements of the Company.

The Company routinely evaluates the collectability of all receivable amounts included in the financial statements. Impairment reserves are established for those amounts where collectability is uncertain. Based on the Company's past experience, exposure related to uncollectible balances and the potential of loss for those balances not currently reserved for is not material to the Company's statutory basis financial condition.

There are no assets that the Company considers to be impaired at December 31, 2022 and 2021, except as disclosed in Note 5 and Note 20.

## **15. LEASES**

**A–B.** According to the Agreement between the Company and UHS (see Note 10), operating leases for the rental of office facilities and equipment are the responsibility of UHS. Fees associated with the lease agreements are included as a component of the Company's management fee.

## **16. INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE-SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK**

**(1–4)** The Company does not hold any financial instruments with off-balance-sheet risk or have any concentrations of credit risk.

## **17. SALE, TRANSFER, AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES**

**A–C.** The Company did not participate in any transfer of receivables, financial assets or wash sales.

## **18. GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS**

**A–B.** The Company has no operations from Administrative Services Only Contracts or Administrative Services Contracts in 2022 and 2021.

### **C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract**

The Company does not have any Medicare cost reimbursement contracts in 2022 and 2021.

The Company's Medicaid contract was subject to reconciliations under the Affordable Care Act ("ACA") program for enhanced rates to primary care physicians through non-risk reconciled payments. The enhanced rate program is in run-out as of December 31, 2016. The Company recorded a payable in liability for amounts held under uninsured plans in the financial statements of \$1,065,920 and \$1,065,920 as of December 31, 2022 and 2021, respectively, for cost reimbursements and payments to providers under this program. There is no risk to the Company since any excess or shortfall will be 100% remitted to or received back from the state at the time the final reconciliation is completed.

The Company's Medicaid contract with the state Medicaid agency includes provisions for various types of enhanced payments to participating providers. Funds are received from the state Medicaid agency and the Company subsequently disburses these funds to providers as directed by the state Medicaid agency. There is no risk to the Company as a result of these pass-through payments. The Company recorded a payable of \$1 and \$47,960,024 as of December 31, 2022 and 2021, respectively, in liability for amounts held under uninsured plans in the financial statements for the additional pass-through payments to be made to providers.

**19. DIRECT PREMIUM WRITTEN/PRODUCED BY MANAGING GENERAL AGENTS/THIRD-PARTY ADMINISTRATORS**

The Company did not have any direct premiums written or produced by managing general agents or third-party administrators in 2022 and 2021.

**20. FAIR VALUE MEASUREMENTS**

The NAIC SAP defines fair value, establishes a framework for measuring fair value, and outlines the disclosure requirements related to fair value measurements. The fair value hierarchy is as follows:

*Level 1* — Quoted (unadjusted) prices for identical assets in active markets.

*Level 2* — Other observable inputs, either directly or indirectly, including:

- Quoted prices for similar assets in active markets;
- Quoted prices for identical or similar assets in nonactive markets (few transactions, limited information, noncurrent prices, high variability over time, etc.);
- Inputs other than quoted prices that are observable for the asset (interest rates, yield curves, volatilities, default rates, etc.);
- Inputs that are derived principally from or corroborated by other observable market data.

*Level 3* — Unobservable inputs that cannot be corroborated by observable market data.

The estimated fair values of bonds and cash equivalents (collectively "investment holdings") are based on quoted market prices, where available. The Company obtains one price for each security primarily from a third-party pricing service ("pricing service"), which generally uses quoted prices or other observable inputs for the determination of fair value. The pricing service normally derives the security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, non-binding broker quotes, benchmark yields, credit spreads, default rates, and prepayment speeds. As the Company is responsible for the determination of fair value, it performs quarterly analyses on the prices received from the pricing service to determine whether the prices are reasonable estimates of fair value. Specifically, the Company compares the prices received from the pricing service to a secondary pricing source, prices reported by its custodian, its investment consultant, and third-party investment advisors. Additionally, the Company compares changes in the reported market values and returns to relevant market indices to test the reasonableness of the reported prices. The Company's internal price verification procedures and review of fair value methodology documentation provided by independent pricing services have not historically resulted in an adjustment in the prices obtained from the pricing service.

In instances in which the inputs used to measure fair value fall into different levels of the fair value hierarchy, the fair value measurement has been determined based on the lowest-level input that is significant to the fair value measurement in its entirety. The Company's assessment of the significance of a particular item to the fair value measurement in its entirety requires judgment, including the consideration of inputs specific to the asset or liability.

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

The following tables present information about the Company's financial assets that are measured and reported at fair value at December 31, 2022 and 2021, in the financial statements according to the valuation techniques the Company used to determine their fair values:

Description for Each Class of Asset or Liability	December 31, 2022				Total
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total perpetual preferred stocks	-	-	-	-	-
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total bonds	-	-	-	-	-
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total common stocks	-	-	-	-	-
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	-	-	-	-	-
Total derivatives	-	-	-	-	-
Money-market funds	7,395,022	-	-	-	7,395,022
Qualified cash pool	192,909,920	-	-	-	192,909,920
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	<u>\$ 200,304,942</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 200,304,942</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

Description for Each Class of Asset or Liability	December 31, 2021				
	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value:					
Perpetual preferred stock:					
Industrial and misc	\$ -	\$ -	\$ -	\$ -	\$ -
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total perpetual preferred stocks	-	-	-	-	-
Bonds:					
U.S. governments	-	-	-	-	-
Industrial and misc	-	-	-	-	-
Hybrid securities	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total bonds	-	-	-	-	-
Common stock:					
Industrial and misc	-	-	-	-	-
Parent, subsidiaries, and affiliates	-	-	-	-	-
Total common stocks	-	-	-	-	-
Derivative assets:					
Interest rate contracts	-	-	-	-	-
Foreign exchange contracts	-	-	-	-	-
Credit contracts	-	-	-	-	-
Commodity futures contracts	-	-	-	-	-
Commodity forward contracts	-	-	-	-	-
Total derivatives	-	-	-	-	-
Money-market funds	12,289,859	-	-	-	12,289,859
Qualified cash pool	256,487,192	-	-	-	256,487,192
Separate account assets	-	-	-	-	-
Total assets at fair value/NAV	<u>\$ 268,777,051</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 268,777,051</u>
b. Liabilities at fair value:					
Derivative liabilities	\$ -	\$ -	\$ -	\$ -	\$ -
Total liabilities at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

- (2) The Company does not have any financial assets with a fair value hierarchy of Level 3 that were measured and reported at fair value.
- (3) Transfers between fair value hierarchy levels, if any, are recorded as of the beginning of the reporting period in which the transfer occurs. There were no transfers between Levels 1, 2 or 3 of any financial assets or liabilities during the years ended December 31, 2022 or 2021.
- (4) The Company has no investments reported with a fair value hierarchy of Level 2 or Level 3 and therefore has no valuation technique to disclose.
- (5) The Company has no derivative assets and liabilities to disclose.

**B. Fair Value Combination** — Not applicable.

**C. Aggregate Fair Value Hierarchy**

The aggregate fair value by hierarchy of all financial instruments as of December 31, 2022 and 2021 is presented in the table below:

Type of Financial Instrument	December 31, 2022						Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)			
U.S. government and agency securities	\$ 65,634,259	\$ 76,076,723	\$ 14,847,634	\$ 50,786,625	\$ -	\$ -	\$ -	
State and agency municipal securities	70,453,149	73,633,746	-	70,453,149	-	-	-	
City and county municipal securities	103,436,772	109,288,557	-	103,436,772	-	-	-	
Corporate debt securities	411,649,602	443,159,107	-	411,649,602	-	-	-	
Cash equivalents	207,790,898	207,790,898	200,304,942	7,485,956	-	-	-	
Total bonds and cash equivalents	<u>\$ 858,964,680</u>	<u>\$ 909,949,031</u>	<u>\$ 215,152,576</u>	<u>\$ 643,812,104</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	
Type of Financial Instrument	December 31, 2021						Net Asset Value (NAV)	Not Practicable (Carrying Value)
	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)			
U.S. government and agency securities	\$ 95,418,814	\$ 95,437,433	\$ 27,120,069	\$ 68,298,745	\$ -	\$ -	\$ -	
State and agency municipal securities	67,962,564	65,035,864	-	67,962,564	-	-	-	
City and county municipal securities	97,850,304	93,916,730	-	97,850,304	-	-	-	
Corporate debt securities	400,694,302	396,157,862	-	400,694,302	-	-	-	
Cash equivalents	268,777,051	268,777,051	268,777,051	-	-	-	-	
Total bonds and cash equivalents	<u>\$ 930,703,035</u>	<u>\$ 919,324,940</u>	<u>\$ 295,897,120</u>	<u>\$ 634,805,915</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	

**D. Not Practicable to Estimate Fair Value** — Not applicable.

E. **Investments Measured Using the NAV Practical Expedient** — Not applicable.

**21. OTHER ITEMS**

**A. Unusual or Infrequent Items**

The Company did not encounter any unusual or infrequent items for the years ended December 31, 2022 and 2021.

**B. Troubled Debt Restructuring: Debtors**

The Company has no troubled debt restructurings as of December 31, 2022 and 2021.

**C. Other Disclosures**

The Company does not have any amounts not recorded in the financial statements that represent segregated funds held for others. The Company also does not have any exposures related to forward commitments that are not derivative instruments.

**D. Business Interruption Insurance Recoveries**

The Company has not received any business interruption insurance recoveries during 2022 and 2021.

**E. State Transferable and Non-transferable Tax Credits**

The Company has no transferable or non-transferable state tax credits.

**F. Sub-Prime Mortgage-Related Risk Exposure**

(1) The investment policy for the Company limits investments in loan backed securities, which includes subprime issuers. Further, the policy limits investments in private issuer mortgage securities to 10% of the portfolio, which also includes subprime issuers. The exposure to unrealized losses on subprime issuers is due to changes in market prices. There are no realized losses due to not receiving anticipated cash flows. The investments covered have an NAIC designation of 1 or 2.

(2) The Company has no direct exposure through investments in sub-prime mortgage loans.

(3) The Company has no direct exposure through other investments.

(4) The Company has no underwriting exposure to sub-prime mortgage risk through mortgage guaranty or financial guaranty insurance coverage.

**G. Retained Assets**

The Company does not have any retained asset accounts for beneficiaries.

**H. Insurance-Linked Securities Contracts**

As of December 31, 2022, the Company is not aware of any possible proceeds of insurance-linked securities.

I. **The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy** — Not applicable.

**22. EVENTS SUBSEQUENT**

Subsequent events have been evaluated through February 28, 2023, which is the date these financial statements were available for issuance.

**TYPE I — Recognized Subsequent Events**

Any material Type I events subsequent to December 31, 2022, have been recognized in the financial statements and corresponding disclosures.

**TYPE II — Non-Recognized Subsequent Events**

There are no material non-recognized Type II events that require disclosure.

**23. REINSURANCE**

**A–D.** The Company does not have any material affiliated or unaffiliated reinsurance agreements in place as of December 31, 2022 or 2021.

**E. Reinsurance Credit** – Not applicable.

**24. RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDETERMINATION**

- A.** The Company estimates accrued retrospective premium adjustments for its group health insurance business based on mathematical calculations in accordance with contractual terms.
- B.** Estimated accrued retrospective premiums due to (from) the Company are recorded in premiums and considerations or aggregate health policy reserves in the financial statements and as an adjustment to change in unearned premium reserves and reserve for rate credits in the financial statements.
- C.** CMS has released the final Medicaid Managed Care Rule which is subject to each State's administration elections. This rule is the first major update to the Medicaid Managed Care regulations in more than a decade, which includes a minimum loss ratio requirement. Pursuant to the regulations, premiums associated with the Company's Medicaid line of business is subject to retrospectively rated features based on the actual MLR experienced on this product. The calculation is pursuant to the Medicaid Managed Care guidance. The Company also has recorded risk-corridor amounts from the State Medicaid agency which are subject to a retrospectively rated feature. The Company has estimated accrued retrospective premiums adjustments based on the risk-corridor tier guidelines included in the contract. In addition, the Company's Medicaid contract, including CHIP with the State of New Jersey, is subject to redetermination features for which a portion of direct premiums written is at risk and can be returned to the Company based on various utilization measures, and for which a stated percentage of the direct premiums written can be eligible for a performance guarantee payment based on various quality measures, and for which a portion of direct premiums written is subject to risk adjusted rating changes and withhold adjustments. The total amount of direct premiums written for the Medicaid line of business for which a portion is subject to the retrospectively rated and redetermination features was \$3,092,519,138 and \$2,512,231,268 representing 100% and 100% of total direct premiums written as of December 31, 2022 and December 31, 2021, respectively.
- D.** The Company does not have any business subject to specific minimum loss ratio requirements as of December 31, 2022 and 2021.

Pursuant to the Medicaid Managed Care Rule, based on the State's election, the Company is required to maintain specific MLRs on its Medicaid population. The Company's has no amounts accrued for Medicaid MLR rebates as of December 31, 2022 and December 31, 2021, respectively. The company recorded a risk corridor payable due to the DMAHS as the Company's actual MLR was lower than the target MLR established in the contract (see Note 1). As of December 31, 2022 and December 31, 2021, the company recorded a payable of \$159,835,848 and \$188,264,745, respectively, which is included in aggregate health policy reserves in the financial statements.

**E. Risk-Sharing Provisions of the Affordable Care Act**

**(1–5)** The Company did not write accident and health premiums in 2022 and 2021 subject to the risk-sharing provisions of the ACA.

**25. CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES**

- A.** Changes in estimates related to the prior year incurred claims are included in total hospital and medical expenses in the current year in the financial statements. As stated in Note 1, the Department adopted certain prescribed accounting practices that differ from those found in the NAIC SAP. The Medicaid pass-through payments that are subject to these prescribed accounting practices have been excluded from the table below. The following tables disclose paid claims, incurred claims, and the balance in claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, and health care and other amounts receivable at December 31, 2022 and December 31, 2021:

	<b>2022</b>		
	<b>Current Year Incurred Claims</b>	<b>Prior Years Incurred Claims</b>	<b>Total</b>
Beginning of year claim reserve	\$ -	\$ (216,206,473)	\$ (216,206,473)
Paid claims—net of health care receivables <sup>1</sup>	2,092,129,957	175,793,637	2,267,923,594
End of year claim reserve <sup>2</sup>	<u>219,193,225</u>	<u>15,771,832</u>	<u>234,965,057</u>
Incurred claims excluding the change in health care receivables	2,311,323,182	(24,641,004)	2,286,682,178
Beginning of year health care receivables	-	23,811,839	23,811,839
End of year health care receivables	<u>(9,178,158)</u>	<u>(9,078,723)</u>	<u>(18,256,881)</u>
Total incurred claims <sup>3</sup>	<u>\$ 2,302,145,024</u>	<u>\$ (9,907,888)</u>	<u>\$ 2,292,237,136</u>

<sup>1</sup>Paid claims—net of health care receivables excludes pass-through amounts of \$282,419,499 and \$0 for 2022 and 2021, respectively.

<sup>2</sup>End of year claim reserve excludes pass-through amounts of \$16,088,199 and \$0 for 2022 and 2021, respectively.

<sup>3</sup>Total incurred claims excludes pass-through amounts of \$298,507,698 and \$0 for 2022 and 2021, respectively.

	<b>2021</b>		
	<b>Current Year Incurred Claims</b>	<b>Prior Years Incurred Claims</b>	<b>Total</b>
Beginning of year claim reserve	\$ -	\$ (210,047,604)	\$ (210,047,604)
Paid claims—net of health care receivables	1,905,385,755	136,754,143	2,042,139,898
End of year claim reserve	<u>205,107,174</u>	<u>11,099,299</u>	<u>216,206,473</u>
Incurred claims excluding the change in health care receivables	2,110,492,929	(62,194,162)	2,048,298,767
Beginning of year health care receivables	-	20,149,988	20,149,988
End of year health care receivables	<u>(8,636,992)</u>	<u>(15,174,847)</u>	<u>(23,811,839)</u>
Total incurred claims	<u>\$ 2,101,855,937</u>	<u>\$ (57,219,021)</u>	<u>\$ 2,044,636,916</u>

The liability for claims unpaid, accrued medical incentive pool and bonus amounts, aggregate health claim reserves, net of health care and other amounts receivable as of December 31, 2021 was \$192,394,634. As of December 31, 2022, \$175,793,637 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, health care and other amounts receivable are now \$6,693,109, as a result of re-estimation of unpaid claims. Therefore, there has been \$9,907,888 favorable prior year development since December 31, 2021 to December 31, 2022. The primary drivers consist of favorable development as a result of a change in the provision for adverse deviations in experience of \$11,380,822 and favorable development in risk share activity of \$2,506,387, partially offset by unfavorable development of \$1,540,055 in retroactivity for inpatient, outpatient, physician, and pharmacy claims. At December 31, 2021, the Company recorded \$57,219,021 of favorable prior year development. The primary drivers consist of favorable development of \$26,273,105 in retroactivity for inpatient, outpatient, physician, and pharmacy claims, favorable development of \$19,000,000 as a result of the release of actuarial reserves, and \$9,086,943 favorable development in the provision for adverse deviations in experience. Original estimates are increased or decreased, as additional information becomes known regarding individual claims, which could have an impact to the accruals for retrospectively rated contracts. As a result of the prior year effects, on a regular basis, the Company adjusts revenue and the corresponding liability and/or receivable related to retrospectively rated policies and the impact of the change is included as a component of change in unearned premium reserves and reserve for rate credits in the financial statements.

The Company incurred CAE of \$110,632,303 and \$100,949,710 in 2022 and 2021, respectively. These costs are included in the management service fees paid by the Company to UHS as a part of the Agreement (see Note 10). The following table discloses paid CAE, incurred CAE, and the balance in unpaid CAE reserve for 2022 and 2021:

	2022	2021
Total claims adjustment expenses	\$ 110,632,303	\$ 100,949,709
Less: current year unpaid claims adjustment expenses	(2,184,672)	(1,961,137)
Add: prior year unpaid claims adjustment expenses	<u>1,961,137</u>	<u>2,029,575</u>
Total claims adjustment expenses paid	<u>\$ 110,408,769</u>	<u>\$ 101,018,147</u>

- B.** The Company did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid CAE in 2022.

## 26. INTERCOMPANY POOLING ARRANGEMENTS

- A–G.** The Company did not have any intercompany pooling arrangements in 2022 or 2021.

## 27. STRUCTURED SETTLEMENTS

- A–B.** The Company did not have structured settlements in 2022 or 2021.

## 28. HEALTH CARE AND OTHER AMOUNTS RECEIVABLE

- A.** Pharmacy rebates receivable are recorded when reasonably estimated or billed by the affiliated pharmaceutical benefit manager in accordance with pharmaceutical rebate contract provisions. Information used to support rebates billed to the manufacturer is based on utilization information gathered by the pharmaceutical benefit manager and adjusted for significant changes in pharmaceutical contract provisions.

The Company evaluates the admissibility of all pharmacy rebates receivable based on the administration of each underlying pharmaceutical benefit management agreement. The Company has nonadmitted and excluded all pharmacy rebates receivable that do not meet the admissibility criteria of SSAP No. 84, *Health Care and Government Insured Plan Receivables* (“SSAP No. 84”) from the financial statements.

For each pharmaceutical management agreement for which a portion of the total pharmacy rebates receivable can be admitted based on the admissibility criteria of SSAP No. 84, the pharmacy rebate transaction history is summarized as follows:

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	\$ 3,970,869	\$ 1,213,102	\$ -	\$ -	\$ -
9/30/2022	4,207,215	4,075,096	1,602,256	-	-
6/30/2022	3,879,574	3,649,135	2,132,536	1,476,752	-
3/31/2022	3,808,720	3,733,972	1,646,111	1,899,614	78,915
12/31/2021	3,937,992	3,846,023	1,688,105	1,976,522	124,052
9/30/2021	3,866,460	3,921,673	2,489,567	1,369,737	10,793
6/30/2021	3,958,068	3,969,286	2,265,613	1,620,308	65,417
3/31/2021	3,708,985	3,714,602	1,167,967	2,097,829	383,598
12/31/2020	3,105,016	3,006,410	1,177,599	1,624,877	157,732
9/30/2020	3,206,592	3,118,762	1,780,898	1,005,202	286,416
6/30/2020	3,725,618	3,477,262	1,618,171	1,478,362	257,890
3/31/2020	4,398,220	3,888,874	202,582	3,652,594	100,573

Of the amount reported as health care and other amounts receivable, \$6,135,788 and \$5,576,961 relates to pharmacy rebates receivable as of December 31, 2022 and 2021, respectively. This change is primarily due to increased membership along with the change in generic/name brand mix.

The Company also admitted \$689,358 and \$936,842 of provider receivables resulting from claims overpayments as of December 31, 2022, and December 31, 2021, respectively, which are included in health care and other amounts receivable in the financial statements.



B. The Company does not have any risk-sharing receivables.

**29. PARTICIPATING POLICIES**

The Company did not have any participating contracts in 2022 or 2021.

**30. PREMIUM DEFICIENCY RESERVES**

The Company has not recorded any PDR as of December 31, 2022 or 2021. The analysis of PDR was completed as of December 31, 2022 and 2021. The Company did consider anticipated investment income when calculating the PDR.

The following table summarizes the Company's PDR as of December 31, 2022 and 2021:

	<b>2022</b>
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	<u>12/31/2022</u>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	<b>2021</b>
1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	<u>12/31/2021</u>
3. Was anticipated investment income utilized in this calculation?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

**31. ANTICIPATED SALVAGE AND SUBROGATION**

Due to the type of business being written, the Company has no salvage. As of December 31, 2022 and 2021, the Company had no specific accruals established for outstanding subrogation, as it is considered a component of the actuarial calculations used to develop the estimates of claims unpaid and aggregate health claim reserves.

# 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  No   
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  No  N/A
- 1.3 State Regulating? ..... New Jersey
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? ..... Yes  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. .... 0000731766
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes  No
- 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. .... 12/31/2018
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2018
- 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). .... 06/01/2020
- 3.4 By what department or departments?  
New Jersey Department of Banking and 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? ..... Yes  No  N/A
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes  No  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? ..... Yes  No   
4.12 renewals? ..... Yes  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? ..... Yes  No   
4.22 renewals? ..... Yes  No
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes  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 Name of Entity	2 NAIC Company Code	3 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? ..... Yes  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? ..... Yes  No
- 7.2 If yes,  
7.21 State the percentage of foreign control; ..... 0.0 %  
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 Nationality	2 Type of Entity

**GENERAL INTERROGATORIES**

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
Optum Bank, Inc. ....	Salt Lake City, Utah .....	NO	NO	YES	NO

- 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? ..... Yes [ ] No [ X ]
- 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? ..... Yes [ ] No [ X ] N/A [ ]
- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
Deloitte & Touche LLP, Minneapolis, MN .....
- 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? ..... Yes [ ] No [ X ]
- 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? ..... Yes [ ] No [ X ]
- 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 [ X ] No [ ] N/A [ ]
- 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?  
Kevin P. Donnelly, Vice President of Actuarial Services of the Community and State division of United HealthCare Services, Inc., of which AmeriChoice of New Jersey, Inc. is an affiliate, 9800 Health Care Lane, Minnetonka, MN 55343 .....
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]
  - 12.11 Name of real estate holding company ...
  - 12.12 Number of parcels involved ..... 0
  - 12.13 Total book/adjusted carrying value ..... \$ .....0
- 12.2 If, yes provide explanation:  
.....
- 13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]
- 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]
- 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 [ X ] No [ ]
  - a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
  - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
  - c. Compliance with applicable governmental laws, rules and regulations;
  - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
  - e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:  
.....
- 14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]
- 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? ..... Yes [ ] No [ X ]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).  
.....

**GENERAL INTERROGATORIES**

- 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? ..... Yes [ ] No [ X ]
- 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 [ X ] No [ ]
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]
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 [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers.....\$ .....0
  - 20.12 To stockholders not officers.....\$ .....0
  - 20.13 Trustees, supreme or grand (Fraternal Only) .....\$ .....0
- 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.....\$ .....0
  - 20.22 To stockholders not officers.....\$ .....0
  - 20.23 Trustees, supreme or grand (Fraternal Only) .....\$ .....0
- 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? ..... Yes [ ] No [ X ]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others.....\$ .....0
  - 21.22 Borrowed from others.....\$ .....0
  - 21.23 Leased from others .....\$ .....0
  - 21.24 Other .....\$ .....0
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ X ] No [ ]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$ .....0
  - 22.22 Amount paid as expenses .....\$ .....157,198,766
  - 22.23 Other amounts paid .....\$ .....0
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: .....\$ .....0
- 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? ..... Yes [ ] No [ X ]
- 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.

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 [ X ] No [ ]

**GENERAL INTERROGATORIES**

- 25.02 If no, give full and complete information relating thereto  
N/A .....
- 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)  
N/A .....
- 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. .... \$ .....0
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. .... \$ .....0
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]
- 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? ..... Yes [ ] No [ ] N/A [ X ]
- 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. .... \$ .....0
- 25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... \$ .....0
- 25.093 Total payable for securities lending reported on the liability page. .... \$ .....0
- 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). .... Yes [ X ] No [ ]
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements ..... \$ .....0
- 26.22 Subject to reverse repurchase agreements ..... \$ .....0
- 26.23 Subject to dollar repurchase agreements ..... \$ .....0
- 26.24 Subject to reverse dollar repurchase agreements ..... \$ .....0
- 26.25 Placed under option agreements ..... \$ .....0
- 26.26 Letter stock or securities restricted as to sale -  
excluding FHLB Capital Stock ..... \$ .....0
- 26.27 FHLB Capital Stock ..... \$ .....0
- 26.28 On deposit with states ..... \$ .....380,161,770
- 26.29 On deposit with other regulatory bodies ..... \$ .....0
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB ..... \$ .....0
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements ..... \$ .....0
- 26.32 Other ..... \$ .....0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ X ]  
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? . Yes [ ] 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 ..... Yes [ ] No [ ]
- 27.42 Permitted accounting practice ..... Yes [ ] No [ ]
- 27.43 Other accounting guidance ..... Yes [ ] No [ ]
- 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: ..... Yes [ ] No [ ]
- 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? ..... Yes [ ] No [ X ]
- 28.2 If yes, state the amount thereof at December 31 of the current year. .... \$ .....0
29. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?..... Yes [ X ] 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
Bank of New York Mellon .....	Global Liquidity Services, 1 Wall St, 14th Floor, New York NY 10286 .....
Northern Trust .....	50 S. LaSalle, Chicago, IL 60675 .....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**GENERAL INTERROGATORIES**

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?..... Yes [ ] No [ X ]

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
Internally Managed .....	I.....
BlackRock Financial Management, Inc. ....	U.....
Wellington Management Company, LLP .....	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 [ X ] No [ ]

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [ X ] 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
107105 .....	BlackRock Financial Management, Inc .....	549300LVXY1VJKE13M84 .....	SEC .....	NO.....
106595 .....	Wellington Management Company, LLP .....	549300YHP12TEZNLX41 .....	SEC .....	NO.....

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

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

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**

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 .....	709,644,089	658,659,738	(50,984,351)
31.2 Preferred stocks .....	0	0	0
31.3 Totals	709,644,089	658,659,738	(50,984,351)

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

For those securities that had prices in the NAIC SVO ISIS database, those prices were used; for those securities that did not have prices in the NAIC SVO ISIS database, pricing was obtained from Hub which is an external data sources vendor. Hub utilizes various pricing sources.

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

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

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

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? ..... Yes [ ] No [ X ]

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 a 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? ..... Yes [ ] No [ X ]

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? ..... Yes [ ] No [ X ]

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

## GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? ..... Yes [ ] No [ X ]

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? ..... Yes [ ] No [ X ]

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 ..... Yes [ ] No [ X ]  
 39.22 Immediately converted to U.S. dollars ..... Yes [ ] No [ X ]

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

### OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....0

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 Name	2 Amount Paid

41.1 Amount of payments for legal expenses, if any? .....\$ .....0

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 Name	2 Amount Paid

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....0

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 Name	2 Amount Paid



**GENERAL INTERROGATORIES**

**PART 2 - HEALTH INTERROGATORIES**

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [ X ]

1.2 If yes, indicate premium earned on U.S. business only. .... \$ 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... \$ 0

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 ..... \$ 0

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. .... \$ 0

1.6 Individual policies: Most current three years:

1.61 Total premium earned ..... \$ 0

1.62 Total incurred claims ..... \$ 0

1.63 Number of covered lives ..... 0

All years prior to most current three years:

1.64 Total premium earned ..... \$ 0

1.65 Total incurred claims ..... \$ 0

1.66 Number of covered lives ..... 0

1.7 Group policies: Most current three years:

1.71 Total premium earned ..... \$ 0

1.72 Total incurred claims ..... \$ 0

1.73 Number of covered lives ..... 0

All years prior to most current three years:

1.74 Total premium earned ..... \$ 0

1.75 Total incurred claims ..... \$ 0

1.76 Number of covered lives ..... 0

2. Health Test:

		1	2	
		Current Year	Prior Year	
2.1	Premium Numerator .....	3,092,519,138	2,512,231,268	
2.2	Premium Denominator .....	3,092,519,138	2,512,231,268	
2.3	Premium Ratio (2.1/2.2) .....	1.000	1.000	
2.4	Reserve Numerator .....	411,141,104	404,471,217	
2.5	Reserve Denominator .....	411,141,104	404,471,217	
2.6	Reserve Ratio (2.4/2.5) .....	1.000	1.000	

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? ..... Yes [ ] No [ X ]

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 [ X ] No [ ]

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? ..... Yes [ ] No [ ]

5.1 Does the reporting entity have stop-loss reinsurance? ..... Yes [ ] No [ X ]

5.2 If no, explain:  
AmeriChoice of New Jersey, Inc. is not required to have stop loss reinsurance. ....

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical ..... \$ 0

5.32 Medical Only ..... \$ 0

5.33 Medicare Supplement ..... \$ 0

5.34 Dental & Vision ..... \$ 0

5.35 Other Limited Benefit Plan ..... \$ 0

5.36 Other ..... \$ 0

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:  
.....

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? ..... Yes [ X ] No [ ]

7.2 If no, give details  
.....

8. Provide the following information regarding participating providers: 8.1 Number of providers at start of reporting year ..... 22,879

8.2 Number of providers at end of reporting year ..... 22,434

9.1 Does the reporting entity have business subject to premium rate guarantees? ..... Yes [ ] No [ X ]

9.2 If yes, direct premium earned: 9.21 Business with rate guarantees between 15-36 months.. \$..... 0

9.22 Business with rate guarantees over 36 months ..... \$..... 0

**GENERAL INTERROGATORIES**

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? ..... Yes [ X ] No [ ]

10.2 If yes:

10.21 Maximum amount payable bonuses.....\$ .....4,816,531

10.22 Amount actually paid for year bonuses.....\$ .....7,402,224

10.23 Maximum amount payable withholds.....\$ .....0

10.24 Amount actually paid for year withholds.....\$ .....0

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, ..... Yes [ ] No [ X ]

11.13 An Individual Practice Association (IPA), or, ..... Yes [ ] No [ X ]

11.14 A Mixed Model (combination of above)? .... Yes [ ] No [ X ]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes [ X ] No [ ]

11.3 If yes, show the name of the state requiring such minimum capital and surplus. .... New Jersey

11.4 If yes, show the amount required. .... \$ 200,504,759

11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes [ ] No [ X ]

11.6 If the amount is calculated, show the calculation

.....

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

1 Name of Service Area
All 21 counties within the State of New Jersey .....

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

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

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

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

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [ X ] N/A [ ]

14.2 If the answer to 14.1 is yes, please provide the following:

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

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

15.1 Direct Premium Written ..... \$ .....0

15.2 Total Incurred Claims ..... \$ .....0

15.3 Number of Covered Lives ..... 0

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

**FIVE-YEAR HISTORICAL DATA**

	1 2022	2 2021	3 2020	4 2019	5 2018
<b>Balance Sheet</b> (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28) .....	950,131,630	962,474,431	890,550,493	728,109,826	587,710,133
2. Total liabilities (Page 3, Line 24) .....	552,520,466	544,644,886	460,149,673	373,400,856	304,442,763
3. Statutory minimum capital and surplus requirement .....	200,504,759	177,819,290	171,323,432	210,326,183	208,915,517
4. Total capital and surplus (Page 3, Line 33) .....	397,611,164	417,829,545	430,400,820	354,708,970	283,267,370
<b>Income Statement</b> (Page 4)					
5. Total revenues (Line 8) .....	3,125,019,674	2,423,884,916	2,396,773,442	2,649,753,209	2,714,463,416
6. Total medical and hospital expenses (Line 18) .....	2,590,996,834	2,044,636,916	1,985,149,648	2,414,990,105	2,389,951,877
7. Claims adjustment expenses (Line 20) .....	110,632,303	100,949,710	99,263,391	109,073,170	107,194,643
8. Total administrative expenses (Line 21) .....	276,453,246	209,373,830	252,686,913	190,397,949	237,703,493
9. Net underwriting gain (loss) (Line 24) .....	146,937,291	68,924,460	121,084,490	(112,210,015)	(34,295,597)
10. Net investment gain (loss) (Line 27) .....	12,691,326	12,374,191	14,548,540	14,920,374	12,498,882
11. Total other income (Lines 28 plus 29) .....	(128,511)	0	0	0	1,287,046
12. Net income or (loss) (Line 32) .....	125,114,548	64,875,851	112,906,614	(85,918,220)	(26,072,006)
<b>Cash Flow</b> (Page 6)					
13. Net cash from operations (Line 11) .....	147,548,066	180,977,902	178,169,547	(6,472,051)	(1,782,642)
<b>Risk-Based Capital Analysis</b>					
14. Total adjusted capital .....	397,611,164	417,829,545	430,400,820	354,708,970	283,267,370
15. Authorized control level risk-based capital .....	56,061,446	37,906,777	57,634,731	100,785,491	99,638,013
<b>Enrollment</b> (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7) .....	421,421	401,930	375,015	418,865	469,999
17. Total members months (Column 6, Line 7) .....	4,929,536	4,647,580	4,627,838	5,314,621	5,811,442
<b>Operating Percentage</b> (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) .....	82.9	84.4	82.8	91.1	88.0
20. Cost containment expenses .....	3.0	3.2	3.2	3.0	2.5
21. Other claims adjustment expenses .....	0.6	0.9	1.0	1.1	1.4
22. Total underwriting deductions (Line 23) .....	95.3	97.2	94.9	104.2	101.3
23. Total underwriting gain (loss) (Line 24) .....	4.7	2.8	5.1	(4.2)	(1.3)
<b>Unpaid Claims Analysis</b> (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5) .....	319,723,323	132,678,596	167,564,861	190,874,732	196,856,537
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)] .....	192,394,634	189,897,616	206,081,090	199,616,971	202,328,401
<b>Investments In Parent, Subsidiaries and Affiliates</b>					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1) .....	0	0	0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1) .....	0	0	0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1) .....	0	0	0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10) .....	0	0	0	0	0
30. Affiliated mortgage loans on real estate .....	0	0	0	0	0
31. All other affiliated .....	0	0	0	0	0
32. Total of above Lines 26 to 31 .....	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	0

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

**SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS**

**Allocated by States and Territories**

		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, etc.		Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1. Alabama	AL	N	0	0	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0	0	0
31. New Jersey	NJ	L	0	3,054,100,283	38,418,855	0	0	0	3,092,519,138	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0	0	0
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	XXX	0	3,054,100,283	38,418,855	0	0	0	3,092,519,138	0	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX	XXX	0	0	0	0	0	0	0	0	0
61. Totals (Direct Business)	XXX	XXX	0	3,054,100,283	38,418,855	0	0	0	3,092,519,138	0	0
DETAILS OF WRITE-INS											
58001.	XXX	XXX									
58002.	XXX	XXX									
58003.	XXX	XXX									
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	XXX	0	0	0	0	0	0	0	0	0

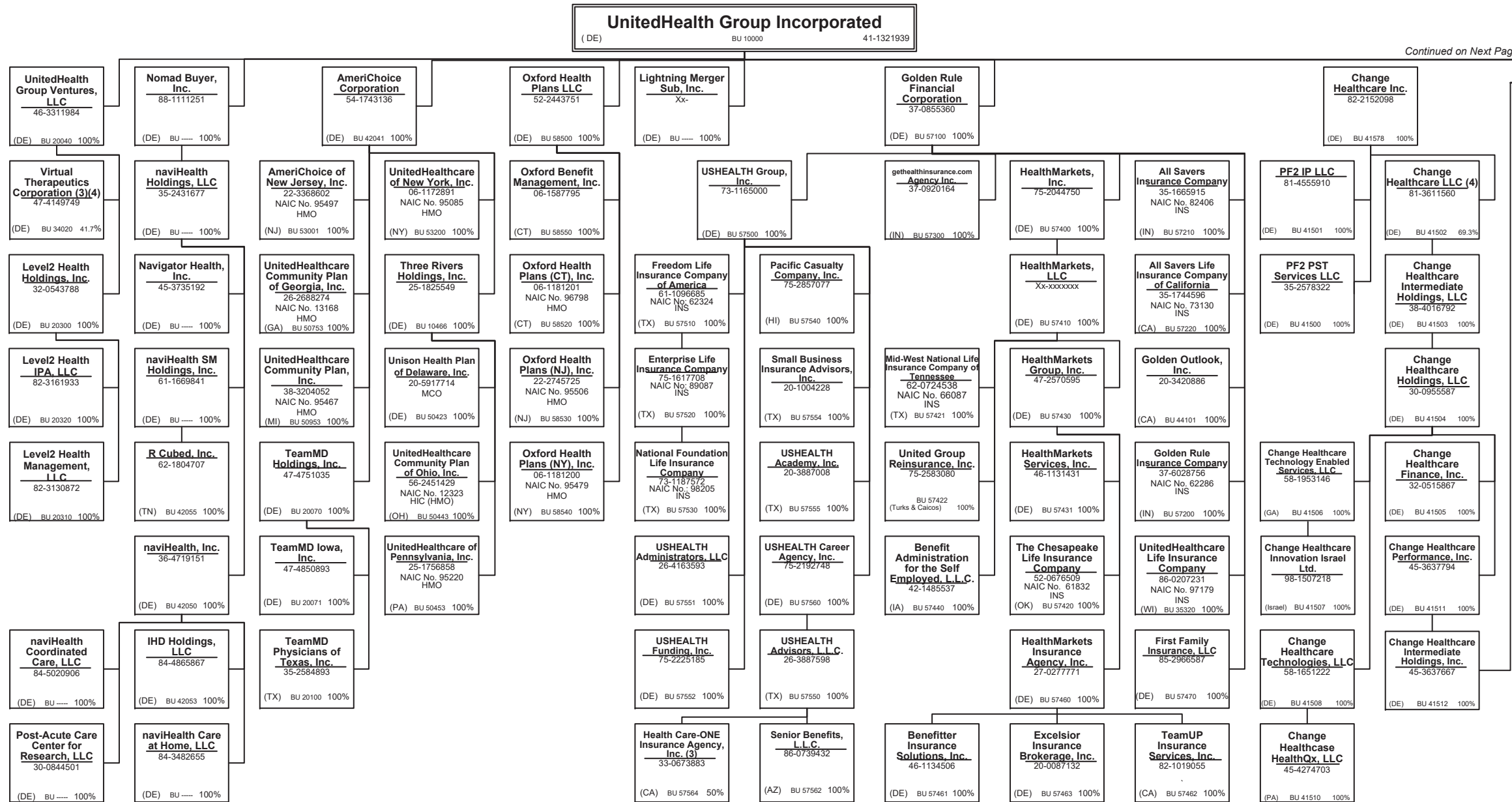
(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. .... 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N - None of the above - Not allowed to write business in the state..... 56

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

All premiums written within the state of New Jersey.

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



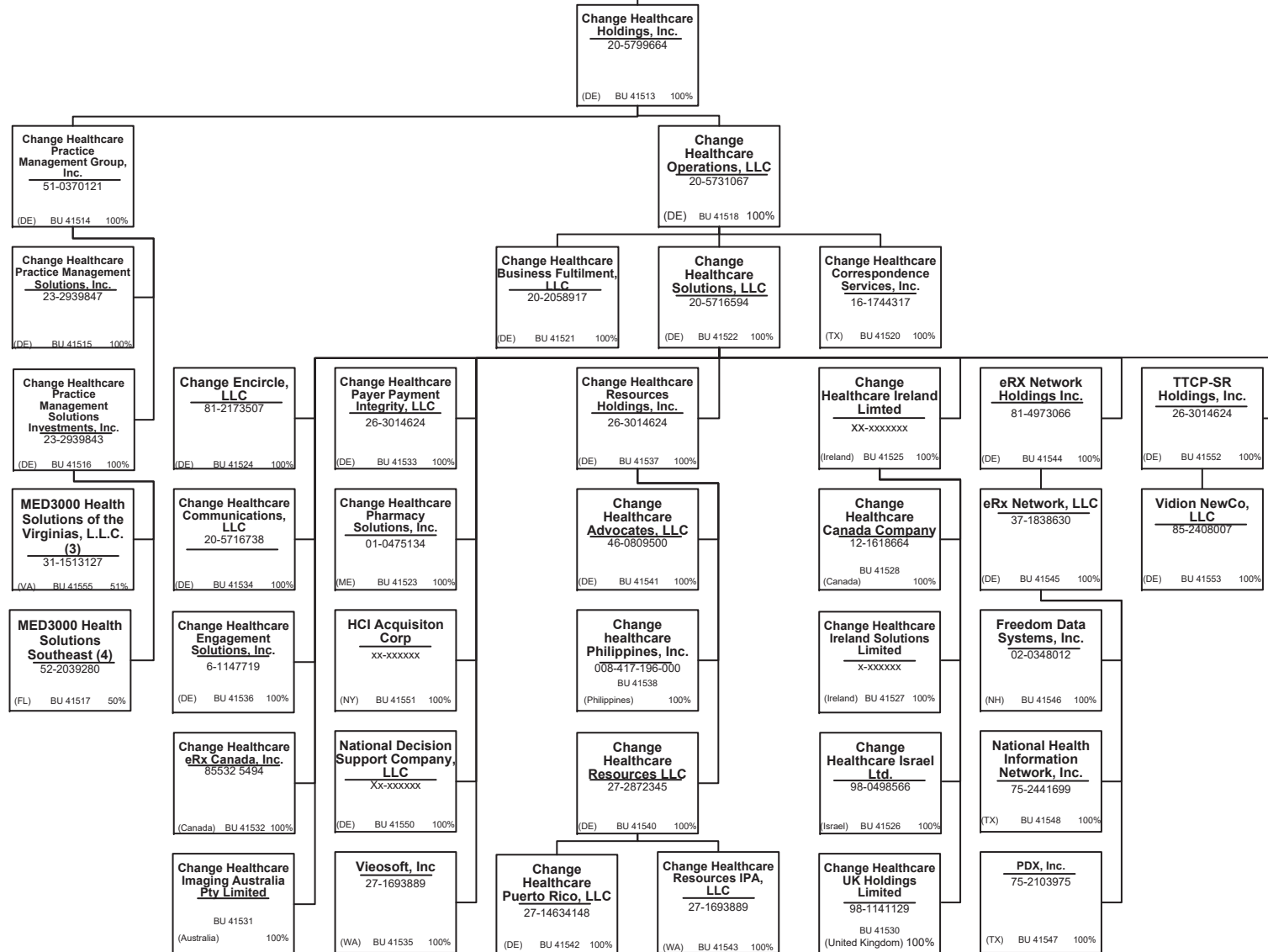
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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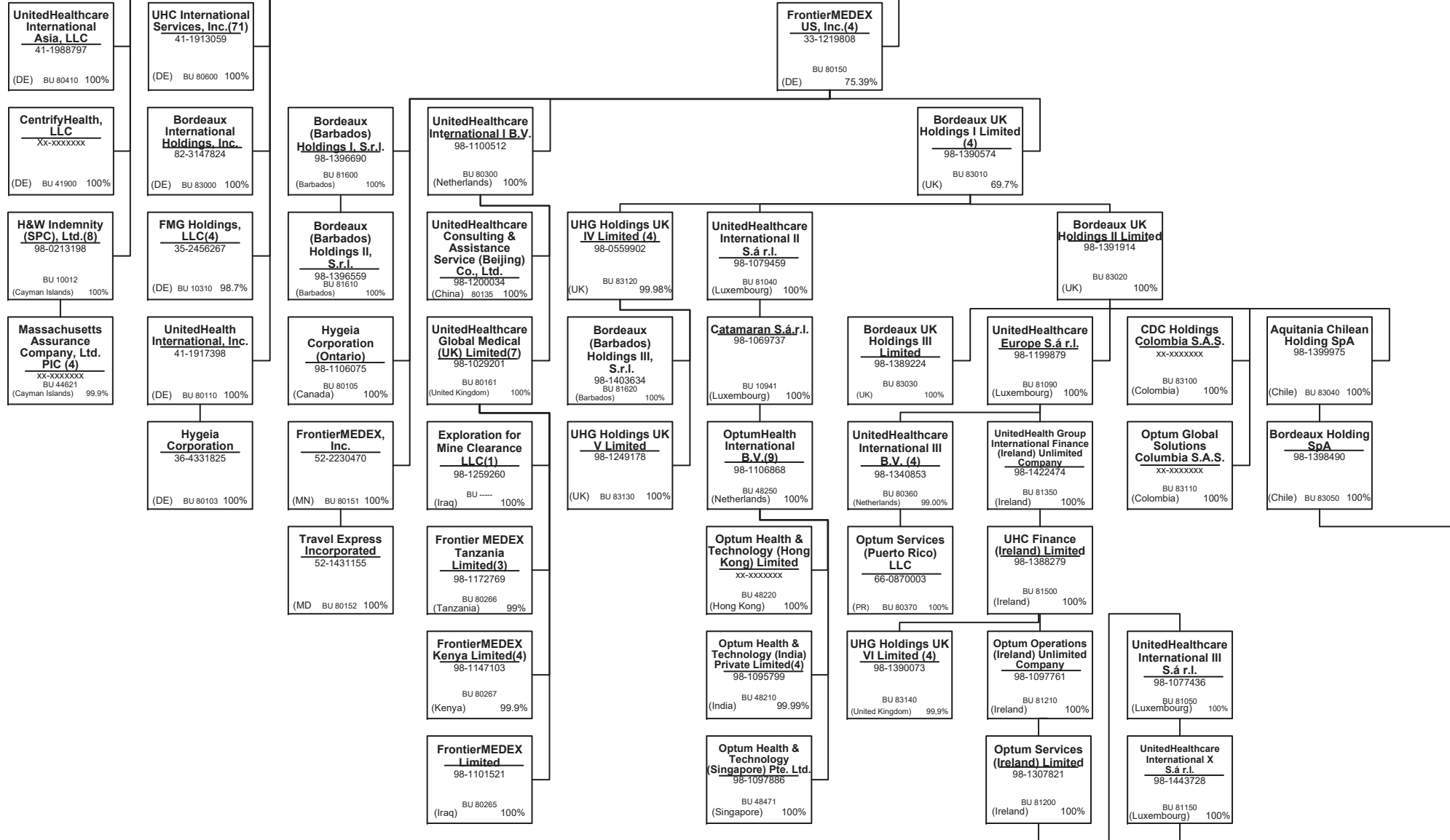
40.1

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

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

Continued from Previous Page

Continued on Next Page



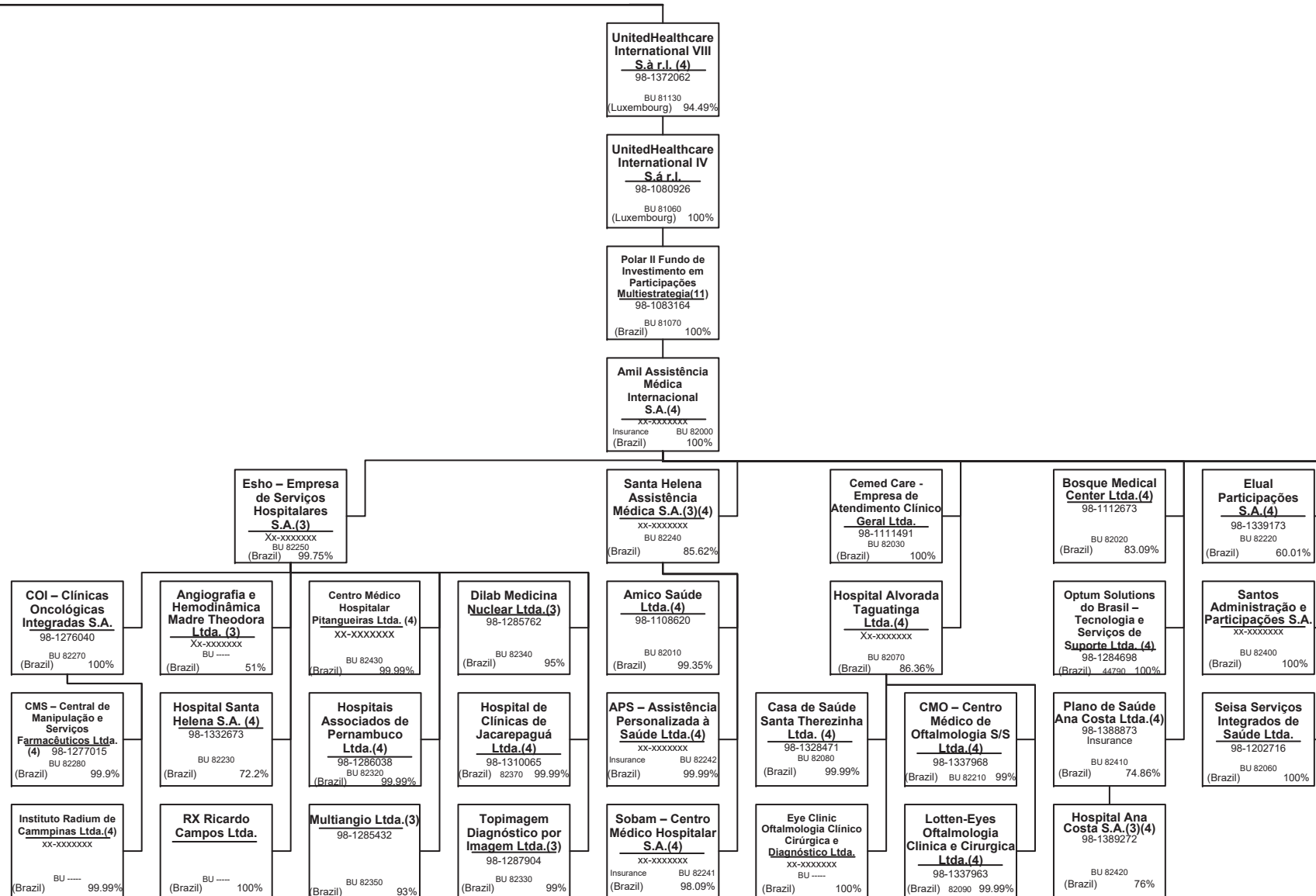
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

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Continued on Next Page





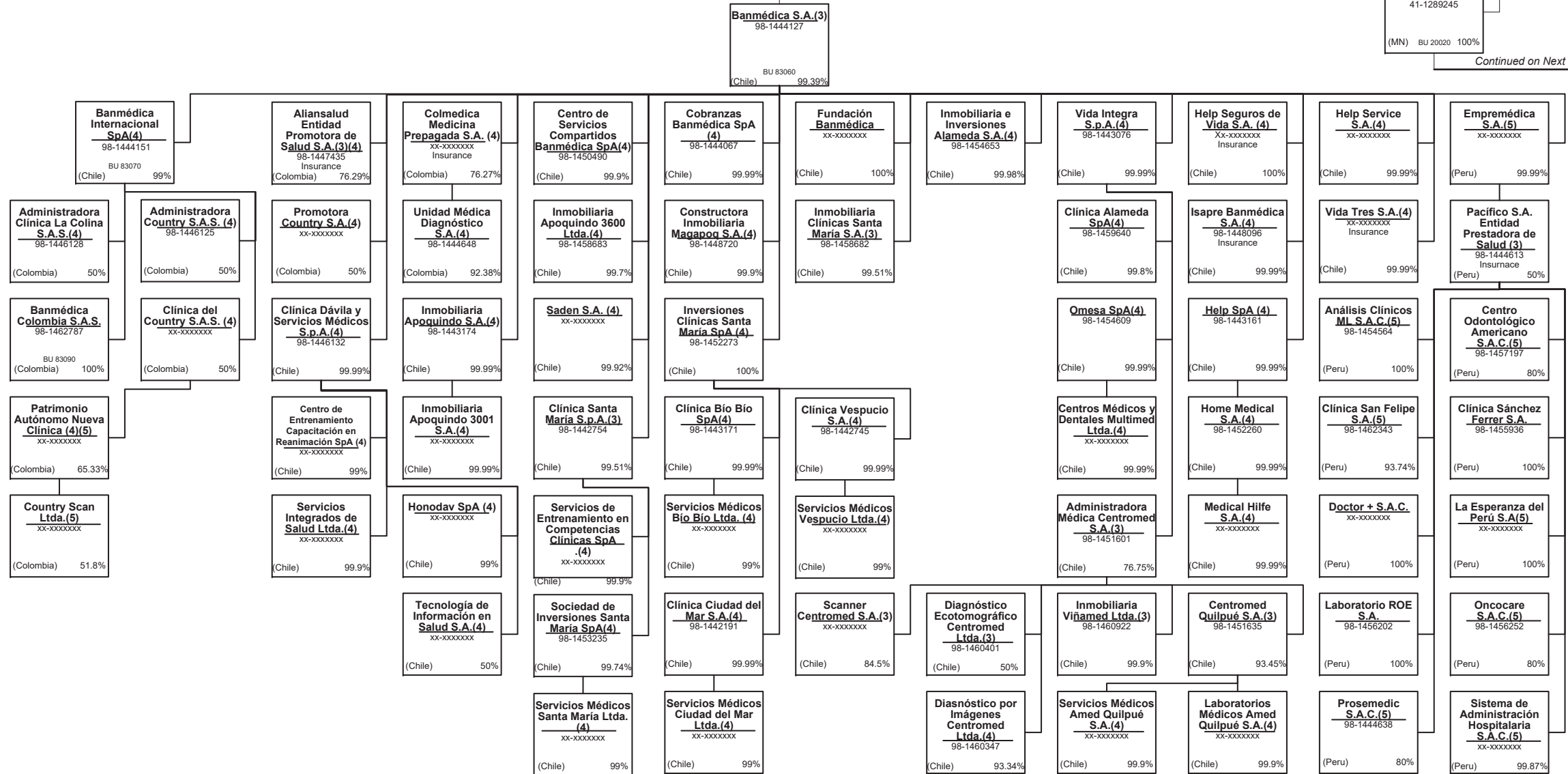
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**UnitedHealth Group Incorporated**  
 (DE) 41-1321939

**United HealthCare Services, Inc.**  
 41-1289245  
 (MN) BU 20020 100%

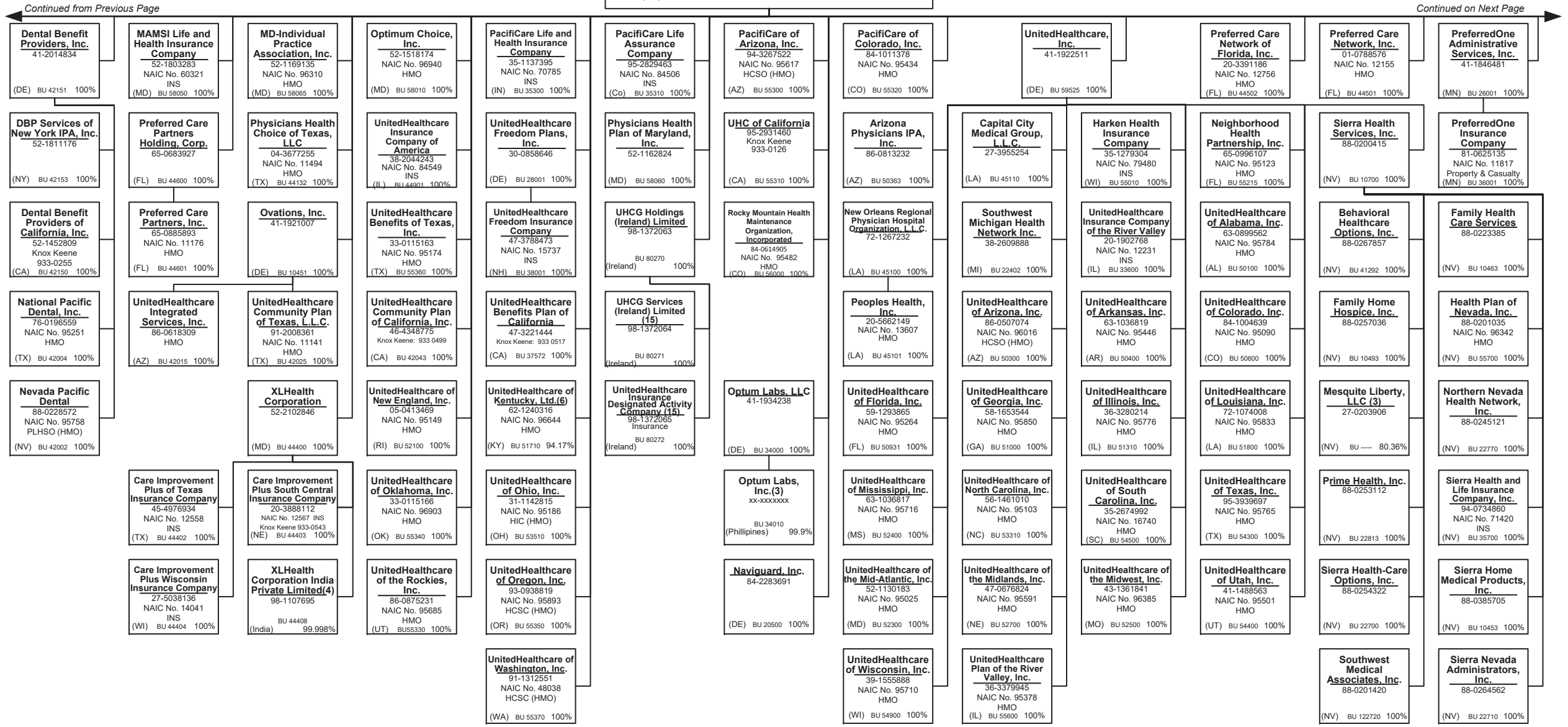
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**United HealthCare Services, Inc.**  
 (MN) 41-1289245 100%



40.5

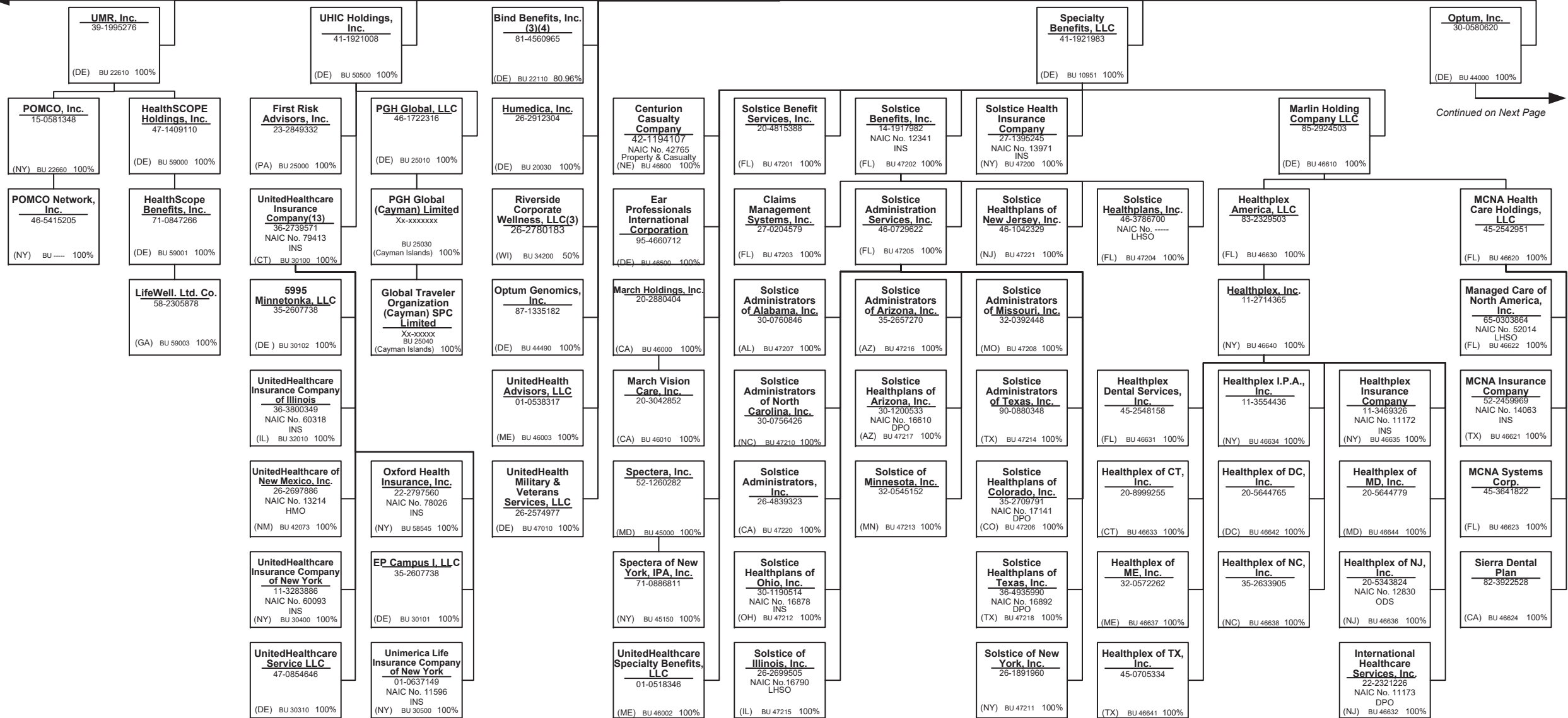
ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

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

**United HealthCare Services, Inc.**  
(MN) 41-1289245 100%

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40.6

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

**Optum, Inc.**  
 (DE) 30-0580620 100%

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**Optum Frontier Therapies Holdings, LLC**  
 85-2786455  
 (DE) BU 11650 100%

**Optum Frontier Therapies, LLC**  
 45-2301399  
 (MI) BU 11527 100%

**Optum Frontier Therapies Commercial Services, Inc.**  
 47-3146510  
 (DE) BU 11653 100%

**Optum Frontier Therapies II, LLC**  
 45-2532834  
 (NV) BU 11651 100%

**OptumRx Group Holdings, Inc.**  
 47-4734235  
 (DE) BU 44800 100%

**1070715 B.C. Unlimited Liability Company**  
 98-1308130  
 BU 44890  
 (Canada) 100%

**OptumRx Holdings I, LLC(1)**  
 80-0870454  
 (DE) BU 10943 100%

**OptumRx Administrative Services, LLC(1)**  
 75-2578509  
 (TX) BU 10944 100%

**OptumRx Holdings, LLC**  
 xx-xxxxxxx  
 (DE) BU 44030 100%

**Apothecary Holdings, Inc.**  
 26-3913051  
 (DE) BU 11300 100%

**Genoa Healthcare, Inc.**  
 47-3851949  
 (DE) BU ----- 100%

**Center for Quality Improvement, LLC**  
 Xx-xxxxxxx  
 (DE) BU 11700 100%

**Optum Pharmacy 801, Inc.**  
 13-4318552  
 (AZ) BU 11302 100%

**Optum Pharmacy, 601, LLC**  
 36-4435924  
 (FL) BU 11315 100%

**QoL Acquisition Holdings Corp.**  
 46-3901920  
 (DE) BU ----- 100%

**Penzo Enterprises, LLC**  
 47-2429625  
 (DE) BU 11600 100%

**OptumRx PBM of Illinois, Inc.**  
 11-2581812  
 (DE) BU 10977 100%

**Healthcare Solutions, Inc.**  
 77-0693060  
 (DE) BU 10931 100%

**Optum Pharmacy 700, LLC**  
 82-4030553  
 (DE) BU 10997 100%

**OptumRx Health Solutions, LLC**  
 46-0666840  
 (DE) BU 10995 100%

**Optum Compounding Services, LLC**  
 20-3253658  
 (AZ) BU 11316 100%

**Optum Pharmacy 800, Inc.**  
 27-2869469  
 (AZ) BU 11311 00%

**Specialized Pharmaceuticals, Inc.**  
 25-1868213  
 (PA) BU ----- 100%

**Care Logistics, LLC**  
 83-0585009  
 (DE) BU 11602 100%

**BriovaRx of Florida, Inc.**  
 11-3647935  
 (DE) BU 10981 100%

**BriovaRx of Maine, Inc.**  
 01-0516051  
 (ME) BU 10983 100%

**Cypress Care, Inc.**  
 26-0080565  
 (DE) BU 10932 100%

**Optum Pharmacy 701, LLC**  
 84-2827343  
 (DE) BU 10950 100%

**Coalition for Advanced Pharmacy Services, Inc. (4)**  
 27-1193028  
 (DE) BU 10975 93.3%

**inPharmative, Inc.**  
 88-0482274  
 (NV) BU 10966 100%

**Optum Hospice Pharmacy Services, LLC**  
 20-0212381  
 (DE) BU 10964 100%

**Optum Pharmacy 803, Inc.**  
 26-4241458  
 (AZ) BU 11306 100%

**Genoa Healthcare LLC**  
 27-0556097  
 (PA) BU 11400 100%

**divvyMED, LLC**  
 47-2415159  
 (DE) BU 11601 100%

**Optum Pharmacy 704, Inc.**  
 20-2719823  
 (TX) BU 10980 100%

**Optum Pharmacy 705, LLC**  
 55-0824381  
 (AL) BU 10984 100%

**Procura Management, Inc.**  
 14-1873402  
 (DE) BU 10933 100%

**Salveo Specialty Pharmacy, Inc.**  
 45-2219585  
 (DE) BU 10991 100%

**OptumRx Home Delivery of Ohio, LLC**  
 34-1472211  
 (OH) BU 10970 100%

**OptumRx of Pennsylvania, LLC**  
 27-3419292  
 (DE) BU 10972 100%

**Optum Senior Services, LLC**  
 26-0543382  
 (AL) BU 10965 100%

**Optum Pharmacy 805, Inc.**  
 26-0583808  
 (AZ) BU 11304 100%

**1st Avenue Pharmacy, Inc.**  
 20-2904092  
 (WA) BU 11404 100%

**Genoa of Arkansas, LLC**  
 20-5009764  
 (AR) BU ----- 100%

**Optum Pharmacy 702, LLC**  
 46-2731176  
 (IN) BU 10990 100%

**OptumRx PBM of Wisconsin, LLC**  
 38-3693753  
 (WI) BU 10978 100%

**Optum Pharmacy 706, Inc.**  
 74-3103518  
 (NY) BU 10993 100%

**OptumRx PBM of Maryland, LLC**  
 88-0361447  
 (NV) BU 10945 100%

**OptumRx PD of Pennsylvania, LLC**  
 16-1767416  
 (PA) BU 10974 100%

**OptumRx PBM of Pennsylvania, LLC**  
 03-0592263  
 (PA) BU 10973 100%

**Optum Pharmacy 806, Inc.**  
 27-0121303  
 (CA) BU 11308 100%

**Genoa, QoL Wholesale, LLC**  
 81-4703295  
 (DE) BU ----- 100%

**Genoa Telepsychiatry, Inc.**  
 45-3010132  
 (DE) BU 11401 100%

**BriovaRx of Massachusetts, LLC**  
 27-3331130  
 (MA) BU 10987 100%

**Optum Pharmacy 707, Inc.**  
 20-4515146  
 (CA) BU 10994 100%

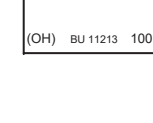
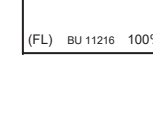
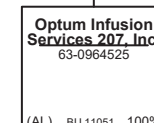
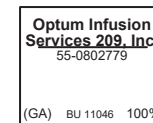
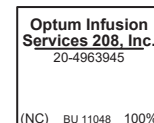
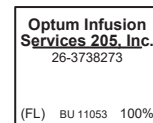
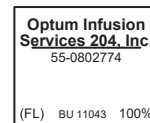
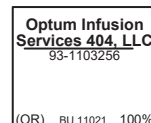
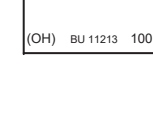
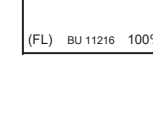
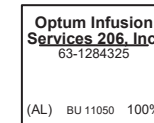
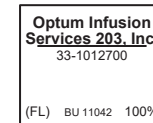
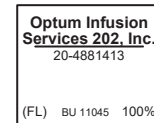
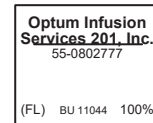
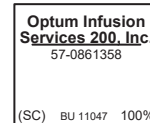
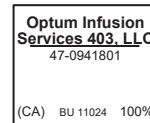
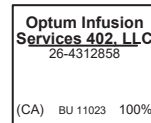
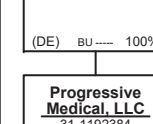
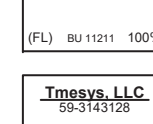
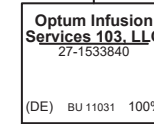
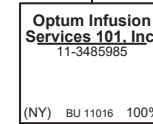
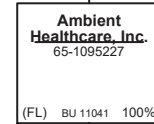
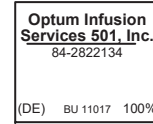
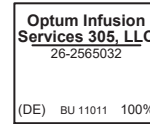
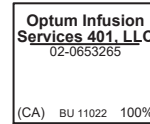
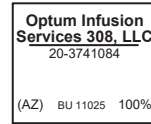
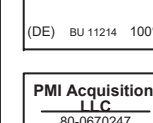
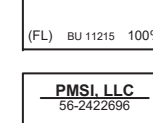
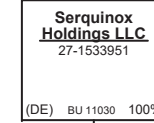
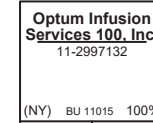
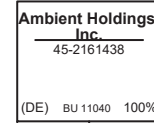
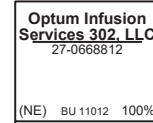
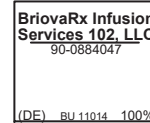
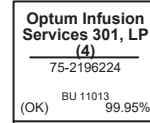
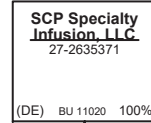
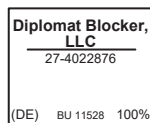
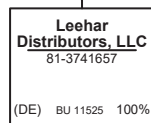
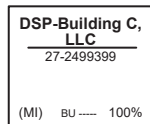
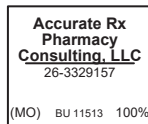
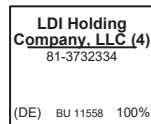
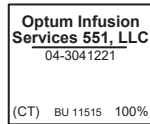
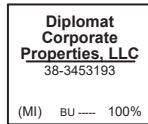
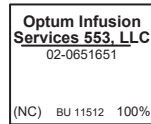
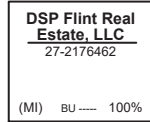
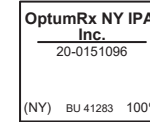
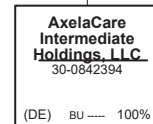
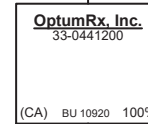
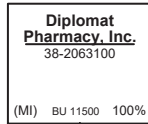
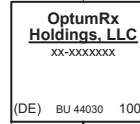
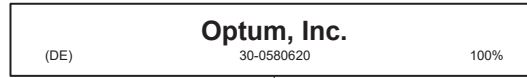
**OptumRx IPA III, Inc.**  
 20-0218027  
 (NY) BU 10947 100%

**Optum Insurance of Ohio, Inc.**  
 31-0628424  
 NAIC: 69647  
 INS  
 (OH) BU 30900 100%

**OptumRx Pharmacy of Nevada, Inc.**  
 88-0373347  
 (NV) BU 10967 100%

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



Continued from Previous Page

Continued on Next Page

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

**Optum, Inc.**  
 (DE) 30-0580620 100%

**OptumInsight Holdings, LLC**  
 xx-xxxxxxx  
 (DE) BU 44010 100%

**OptumInsight, Inc.(9)**  
 41-1858498  
 (DE) BU 41322 100%

**OptumHealth Care Solutions, LLC**  
 41-1591944  
 (DE) BU 42300 100%

**OptumServe Technology Services, Inc.**  
 52-2016292  
 (MD) BU 41345 100%

**OptumInsight Life Sciences, Inc.**  
 04-3383745  
 (DE) BU 41422 100%

**Optum Public Sector Solutions, Inc.**  
 20-4581265  
 (DE) BU 41372 100%

**Optum Government Solutions, Inc.**  
 04-3574101  
 (DE) BU 43350 100%

**Optum Technology, LLC**  
 46-5713629  
 (DE) BU 44770 100%

**Optum360 Solutions, LLC**  
 82-3446942  
 (DE) BU 41880 100%

**ACN Group IPA of New York, Inc.**  
 41-1913523  
 (NY) BU 42310 100%

**ACN Group of California, Inc.**  
 27-0015861  
 Knox Keene  
 933-0407  
 (CA) BU 42330 100%

**My Wellness Solutions, LLC**  
 26-2564744  
 (DE) BU 42340 100%

**OrthoNet Holdings, Inc.**  
 13-3960641  
 (DE) BU 48080 100%

**Payment Resolution Services, LLC**  
 62-1451147  
 (TN) BU 43403 100%

**Optum Life Sciences (Canada) Inc.**  
 98-1209730  
 BU 41410  
 (Canada) 100%

**The Lewin Group, Inc.**  
 56-1970224  
 (NC) BU 41342 100%

**hCentive, Inc.**  
 27-0549481  
 (DE) BU 41325 100%

**Optum Global Solutions International B.V.(4)**  
 98-1201187  
 BU 44810  
 (Netherlands) 97.48%

**Electronic Network Systems, Inc.**  
 84-1162764  
 (DE) BU 41350 100%

**Managed Physical Network, Inc.**  
 14-1782475  
 (NY) BU 42320 100%

**Optum Biometrics, Inc.**  
 36-3437660  
 (IL) BU 42301 100%

**Pronounced Health Solutions, Inc.**  
 22-3493126  
 (DE) BU 42343 100%

**Optum Networks of New Jersey, Inc.**  
 30-0029448  
 NAIC: 11068  
 INS  
 (DE) BU 48085 100%

**OrthoNet LLC**  
 13-3818652  
 (NY) BU 48084 100%

**Optum Rocket, LLC**  
 46-3328009  
 (DE) BU 41850 100%

**Equian Parent Corp.**  
 81-0732646  
 (DE) BU 43370 100%

**The Advisory Board Company**  
 52-1468699  
 (DE) BU 41323 100%

**DocASAP, Inc.**  
 26-4753954  
 (DE) BU 44231 100%

**Optum Global Solutions (Philippines), Inc.(3)**  
 98-1097776  
 BU 41340  
 (Philippines) 99.99%

**Executive Health Resources, Inc.**  
 11-3669765  
 (PA) BU 41841 100%

**Plus One Holdings, Inc.**  
 13-3613705  
 (DE) BU 42304 100%

**United Resource Networks IPA of New York, Inc.**  
 30-0318238  
 (NY) BU 45001 100%

**Optum Women's and Children's Health, LLC**  
 58-2205984  
 (DE) BU 42341 100%

**OrthoNet New York IPA, Inc.**  
 13-4025898  
 (NY) BU 48086 100%

**OrthoNet of the South, Inc.**  
 26-2884306  
 (DE) BU 48082 100%

**Optum360 Services, Inc.**  
 46-3983926  
 (DE) BU 41851 100%

**Fortified Provider Network, Inc.**  
 86-0901608  
 (AZ) BU 43371 100%

**AccuReg Holdings, LLC**  
 xx-xxxxxxx  
 (DE) BU 41890 100%

**DocASAP US, LLC**  
 xx-xxxxxxx  
 (DE) BU 44233 100%

**Optum Health & Technology Services do Brasil Ltda.(4)**  
 98-1184561  
 BU 43230  
 (Brazil) 99.99%

**Netwerkes, LLC**  
 20-4755277  
 (TN) BU 43404 100%

**Plus One Health Management Puerto Rico, Inc.**  
 66-0742844  
 (PR) BU 42305 100%

**Vivify Health, Inc.**  
 27-1348358  
 (DE) BU 42360 100%

**Optum Healthcare of Illinois, Inc.**  
 58-2068880  
 (GA) BU ---- 100%

**OrthoNet West, Inc.**  
 20-0221966  
 (DE) BU 48087 100%

**Optum360, LLC**  
 46-3328307  
 (DE) BU 41860 95.8%

**Equian, LLC**  
 27-0083277  
 (IN) BU 43380 100%

**Database Solutions, Inc.**  
 63-1230900  
 (AL) BU ---- 100%

**Optum Global Solutions (India) Private Limited(4)**  
 98-1103015  
 BU 41346  
 (India) 99.9%

**Mustang Razorback Holdings, Inc.**  
 47-1935798  
 (DE) BU 41870 100%

**Vivify Health Canada, Inc.**  
 Xx-xxxxxxx  
 BU 42361  
 (Canada) 100%

**Optum of New York, Inc.**  
 58-1873062  
 (NY) BU ---- 100%

**OmniClaim, LLC**  
 27-0062838  
 (DE) BU 43381 100%

**MedSynergies, LLC**  
 75-2515691  
 (DE) BU 41871 100%

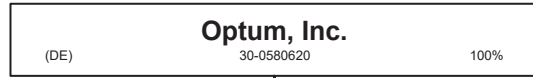
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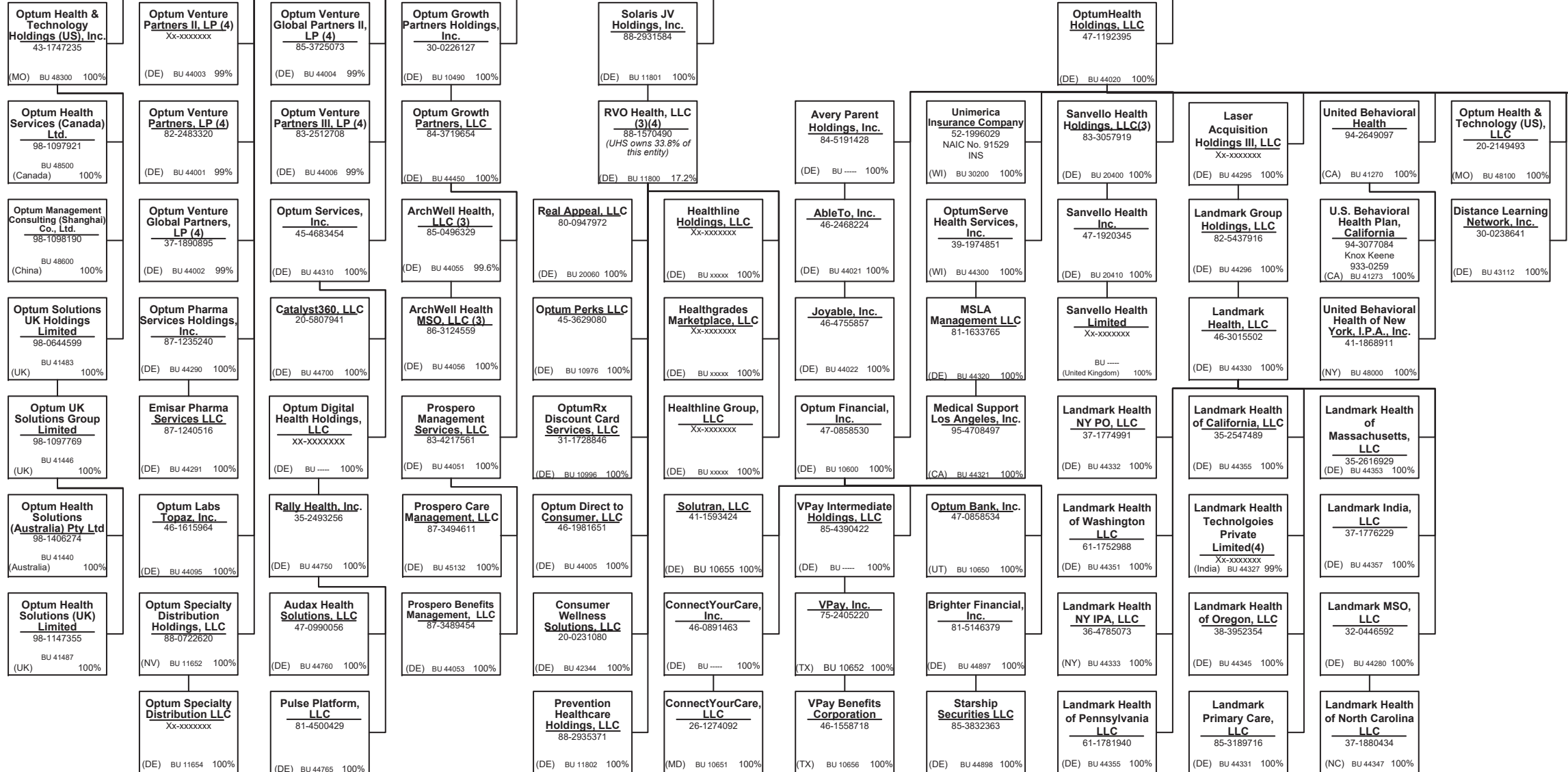


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

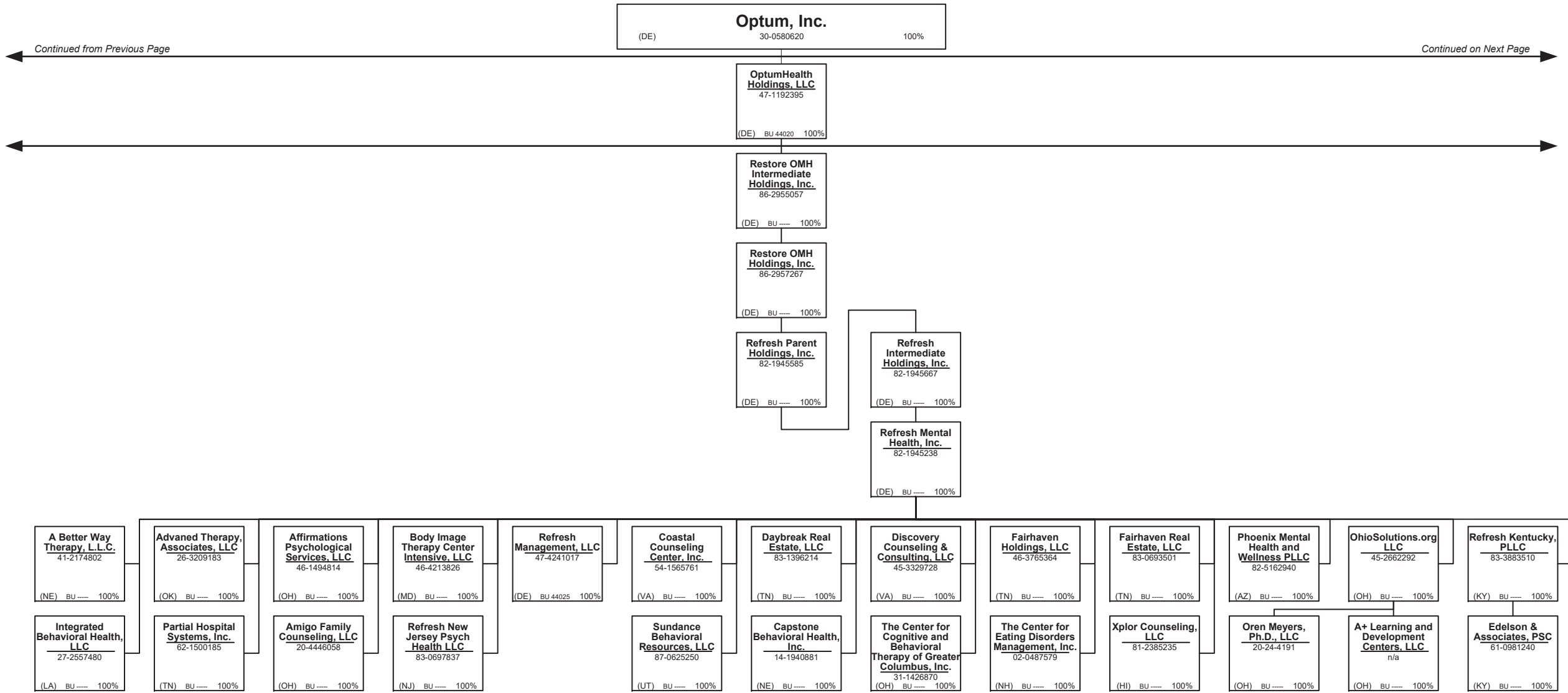


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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



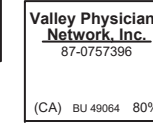
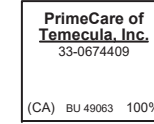
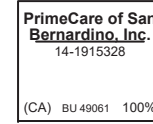
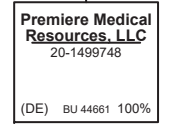
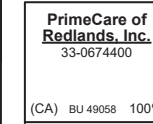
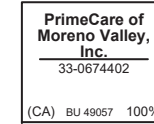
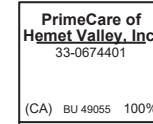
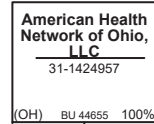
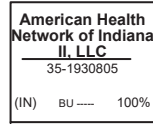
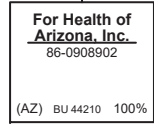
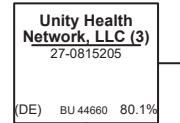
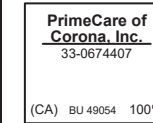
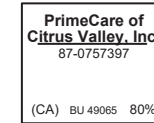
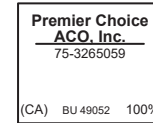
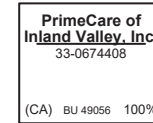
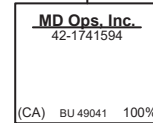
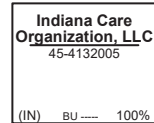
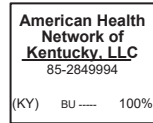
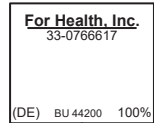
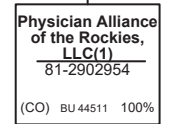
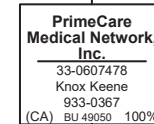
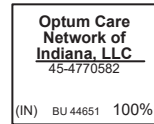
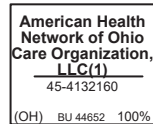
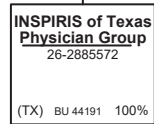
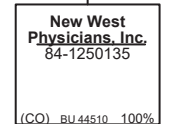
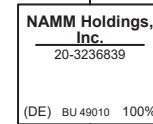
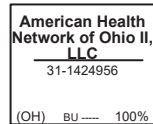
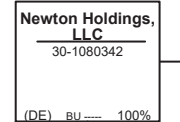
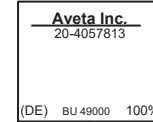
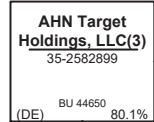
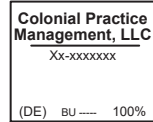
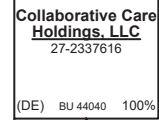
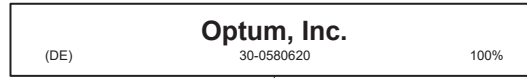
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**



40.12

Continued from Previous Page

Continued on Next Page

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

**Optum, Inc.**  
 (DE) 30-0580620 100%

**OptumHealth Holdings, LLC**  
 47-1192395

(DE) BU 44020 100%

**Collaborative Care Holdings, LLC**  
 27-2337616

(DE) BU 44040 100%

**WellMed Medical Management, Inc. (3)**  
 74-2786364

(TX) BU 44110 86%

**OptumCare Holdings, LLC(1)**  
 56-2592163

(CA) BU 42600 100%

**The Polyclinic MSO, LLC(3)**  
 83-1192367

(DE) BU 41950 80.1%

**ProHEALTH Medical Management, LLC**  
 47-1049961

(DE) BU 49080 100%

**HCAT Acquisition Inc.**  
 81-2378903

(DE) BU ---- 100%

**Comfort Care Transportation, LLC**  
 11-3647007

(TX) BU 44112 100%

**USMD Holdings, Inc.**  
 27-2866866

(DE) BU 44350 100%

**WellMed Medical Management of Florida, Inc.**  
 74-2797745

(FL) BU 44111 100%

**OptumCare Clinical Trials, LLC**  
 47-1422097

(DE) BU 42603 100%

**HealthCare Partners RE, LLC**  
 81-1080535

(DE) BU 42602 100%

**OptumCare Management, LLC**  
 95-4509662

(CA) BU 42610 100%

**Optum Health Plan of California**  
 46-2385459  
 Knox Keene Restricted  
 933-0498

(DE) BU 42601 100%

**First Hill Surgery Center, LLC(3)**  
 47-2066485

(WA) BU 41955 55%

**Orthology, Inc.(9)**  
 46-2742615

(DE) BU 20050 80%

**Day-Op Surgery Consulting Company, LLC**  
 75-2790663

(DE) BU 49094 100%

**Healthcare Associates of Texas, LLC**  
 81-0760425

(DE) BU 44116 100%

**Impel Management Services, L.L.C.**  
 75-2574317

(TX) BU 44360 100%

**USMD Inc.**  
 20-8050318

(TX) BU 44370 100%

**OptumCare Florida, LLC**  
 87-0408859

(DE) BU 42710 100%

**California Medical Group Insurance Company, Risk Retention Group(3)**  
 20-1711131

(AZ) BU ---- 67%

**HCP ACO California, LLC**  
 45-3007213

(CA) BU 42614 100%

**OptumCare Colorado, LLC**  
 47-2196783

(CO) BU 42680 100%

**Collaborative Care Services, Inc.**  
 27-2337487

(DE) BU 44070 100%

**Perham Physical Therapy, LTD**  
 20-5608977

(MN) BU 20055 100%

**Riverside Medical Management, LLC**  
 32-0500242

(DE) BU 49083 100%

**Impel Consulting Experts, L.L.C.**  
 20-4351923

(TX) BU 44361 100%

**USMD Administrative Services, L.L.C.**  
 20-8048861

(TX) BU 44374 100%

**USMD PPM, LLC**  
 35-2446102

(TX) BU 44373 100%

**OptumCare Florida CI, LLC**  
 82-2227280

(DE) BU 42711 100%

**HealthCare Partners ASC-LB, LLC(4)**  
 95-4628842

(CA) BU 42613 99%

**OptumCare New Mexico, LLC**  
 20-4043287

(DE) BU 42670 100%

**Clinical Partners of Colorado Springs, LLC**  
 46-2879718

(CO) BU ---- 50%

**OptumCare Holdings Colorado, LLC(3)**  
 30-0999065

(CO) BU 42690 85%

**Jordan Ridge Family Medicine, LLC**  
 68-0624157

(DE) BU 44078 100%

**Waypoint Minnesota Sports PC**  
 46-2859426

(MN) BU 20053 100%

**ME AHS UC LLC (3)**  
 83-1183650

(DE) BU 49172 70%

**USMD Affiliated Services**  
 27-2956222

(TX) BU 44380 100%

**Everett MSO, Inc.**  
 81-1070402

(WA) BU 42720 100%

**HealthCare Partners Management Services California, LLC**  
 47-5274363

(DE) BU 42616 100%

**OptumCare ACO New Mexico, LLC**  
 30-0940296

(DE) BU 42672 100%

**Colorado Innovative Physician Solutions, Inc.**  
 37-1636677

(CO) BU 42681 100%

**OptumCare Colorado Springs, LLC**  
 47-2218380

(CO) BU 42691 100%

**Optum Care, Inc.**  
 83-1959511

(DE) BU 44610 100%

**Healthcare Associates of Irving PLLC**  
 75-2674367

(TX) BU 44117 100%

**Medical Clinic of North Texas PLLC**  
 75-2566987

(TX) BU 44381 100%

**Urology Associates of North Texas, P.L.L.C.**  
 75-2613230

(TX) BU 44370 100%

**North Puget Sound Oncology Equipment Leasing Company, LLC**  
 20-2564137

(WA) BU 42721 72.25%

**OptumCare South Florida, LLC**  
 45-3462809

(FL) BU 42621 100%

**OptumCare Endoscopy Center New Mexico, LLC**  
 26-1508741

(NM) BU 42671 100%

**OptumCare Colorado ASC, LLC**  
 35-2597463

(CO) BU 42691 100%

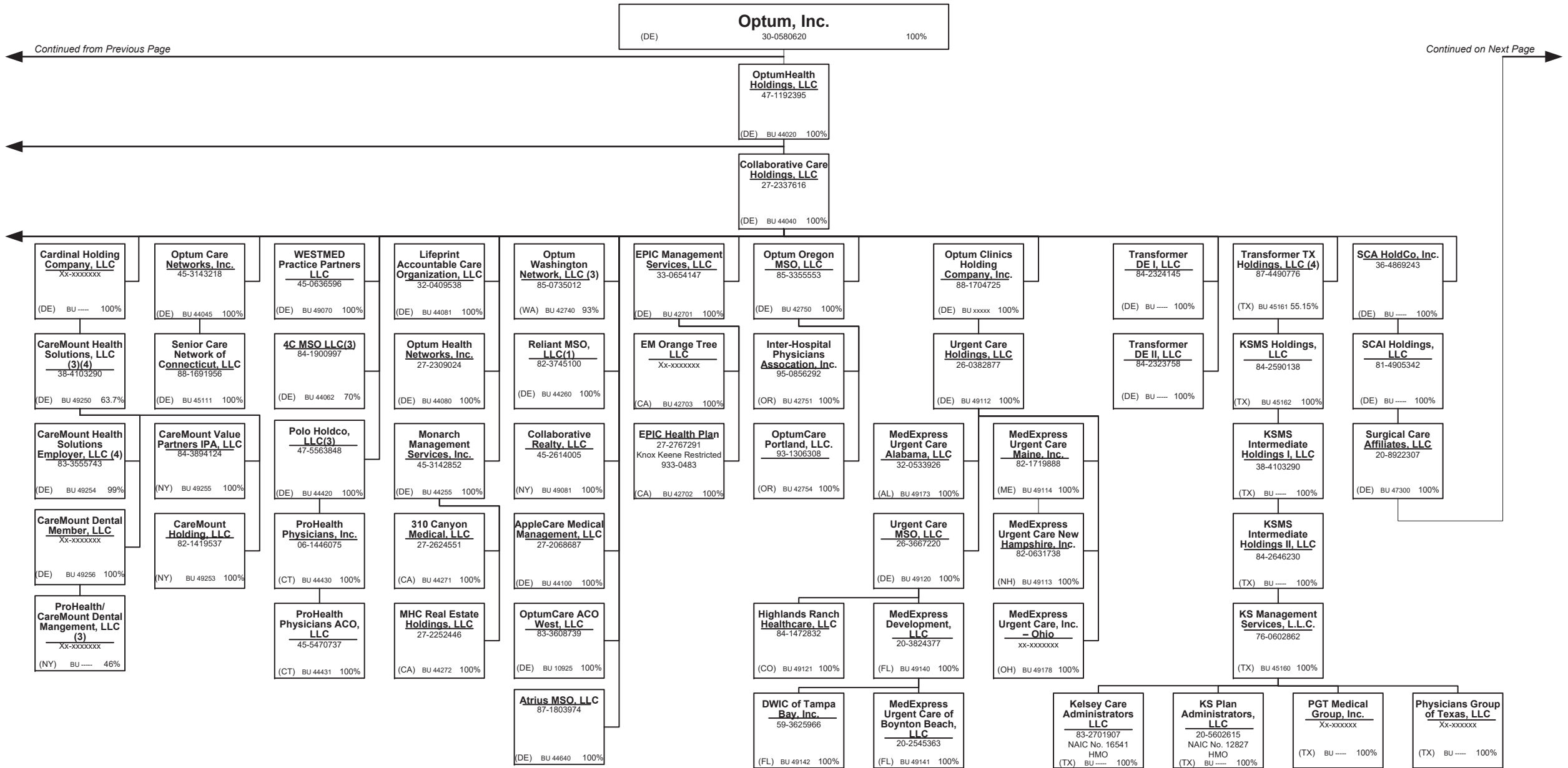
**AMG Health, LLC**  
 Xx-xxxxxx

(DE) BU ---- 100%

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



40.14

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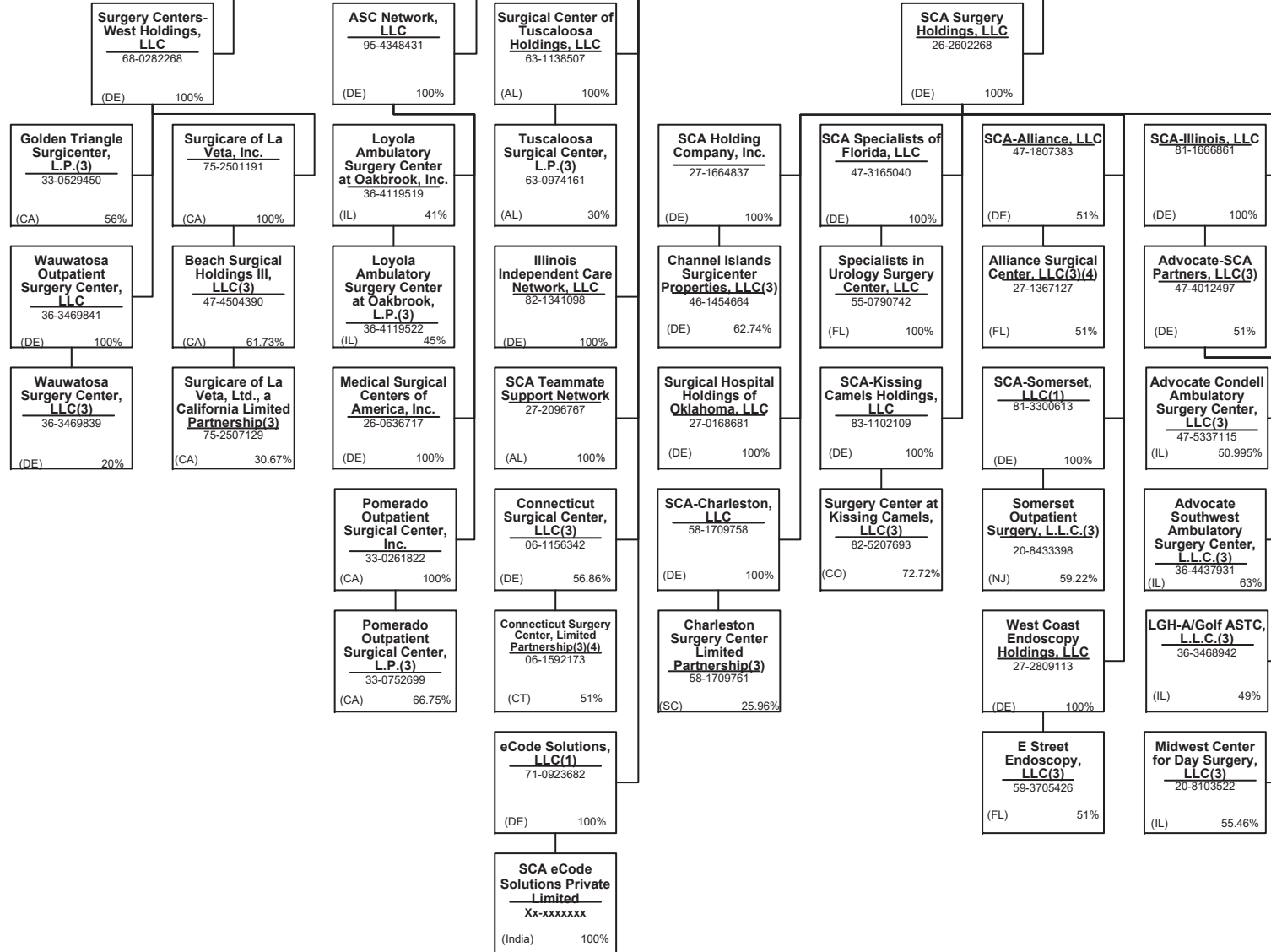
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

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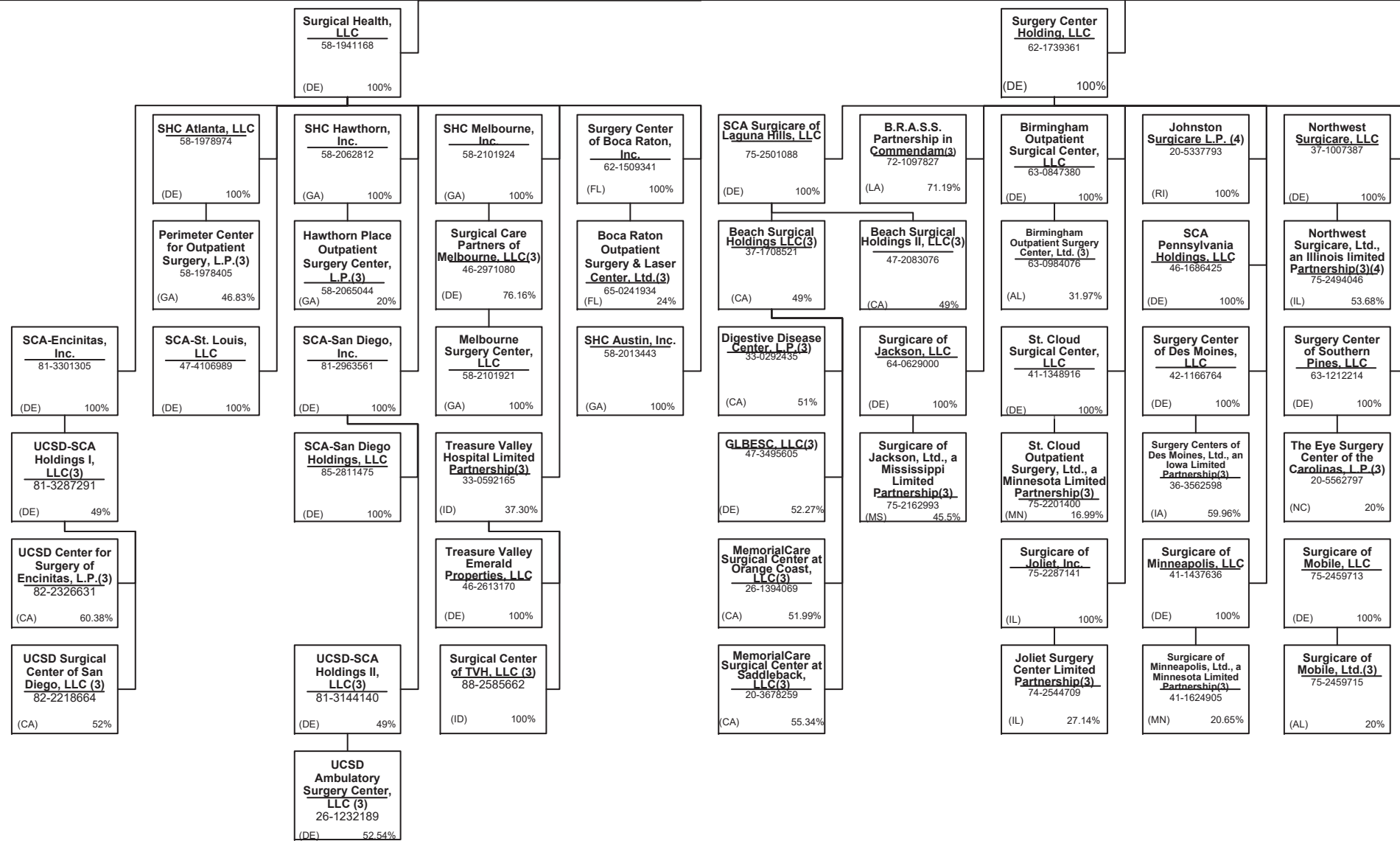


**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

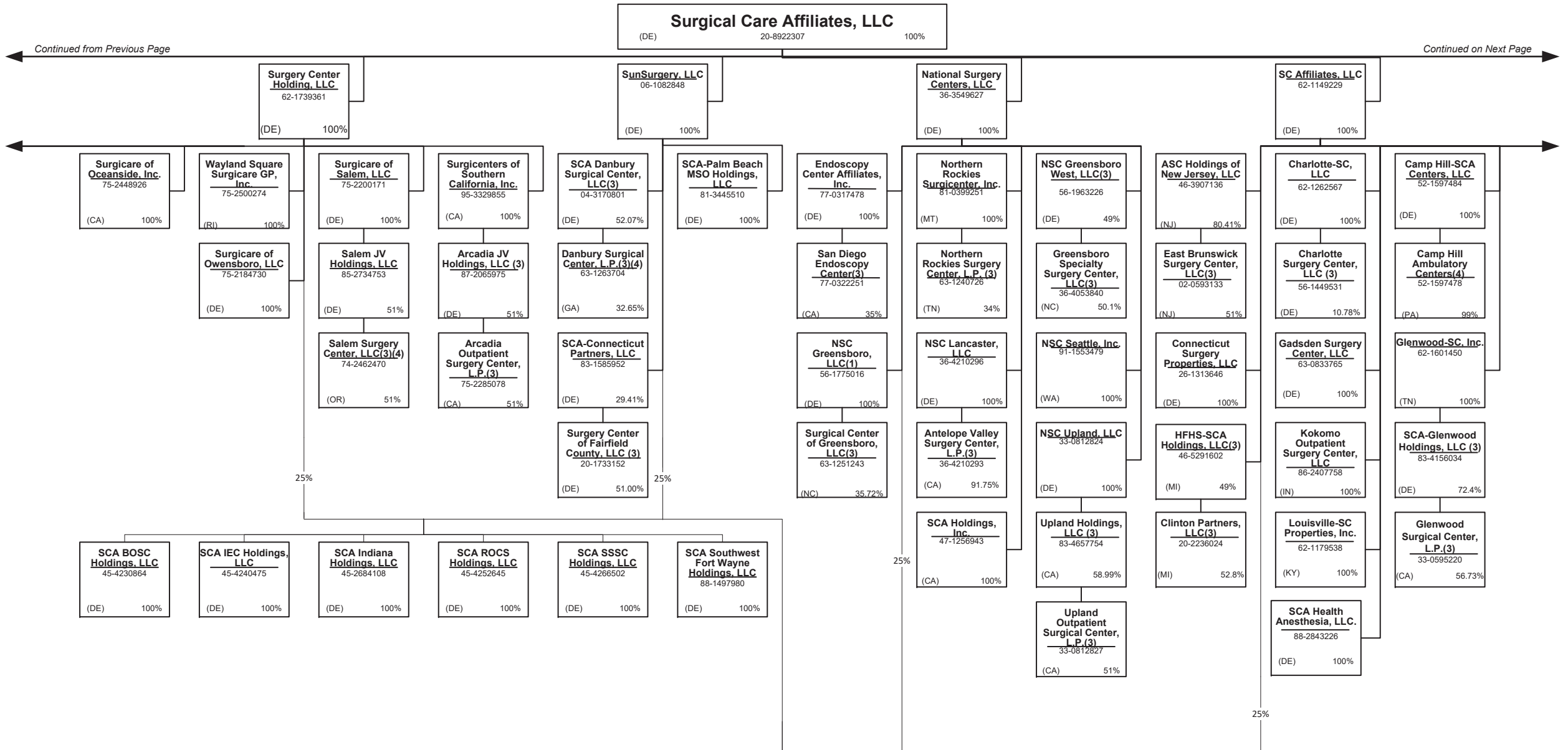
**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

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



40.17

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

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

**Health Inventures, LLC**  
 04-3723090  
 (DE) 100%

**Marin Surgery Holdings, Inc.**  
 26-2601943  
 (DE) 100%

**Maryland-SCA Centers, LLC**  
 52-1401791  
 (DE) 100%

**OC Cardiology Practice Partners, LLC**  
 83-4364718  
 (DE) 100%

**Redlands-SCA Surgery Centers, Inc.**  
 94-3115627  
 (CA) 100%

**SCA Duluth Holdings, LLC**  
 85-3450755  
 (DE) 100%

**SCA Austin Holdings, LLC**  
 47-5014406  
 (DE) 100%

**SCA Bloomfield Holdings, LLC**  
 85-2723465  
 (DE) 100%

**SCA Clifton, LLC**  
 84-4338108  
 (DE) 100%

**SCA Cottonwood Holdings, LLC**  
 85-4043847  
 (DE) 100%

**SCA Denver Holdings, LLC**  
 85-2019401  
 (DE) 100%

**Health Inventures Employment Solutions, LLC**  
 20-5944768  
 (DE) 100%

**MGH/SCA, LLC(4)**  
 38-3861395  
 (CA) 99%

**SCA Development, LLC**  
 62-1535981  
 (DE) 100%

**Via Vitae MSO, LLC (3)**  
 81-2820395  
 (DE) 70%

**Redlands Ambulatory Surgery Center(3)**  
 94-3115625  
 (CA) 54%

**Duluth Surgical Suites, LLC**  
 82-0668583  
 (MN) 42.7%

**Arise Physician Group**  
 46-4843100  
 (TX) 100%

**SCA Austin Medical Center Holdings, LLC(3)**  
 47-5051685  
 (DE) 100%

**Bloomfield ASC, LLC**  
 47-4758895  
 (CT) 58.39%

**Advanced Surgery Center of Clifton, LLC (3)**  
 20-1310827  
 (NJ) 74.1%

**SCA-VLR Holdings Company, LLC (3)**  
 85-1998338  
 (DE) 51%

**H.I. Investments Holding Company, LLC**  
 26-1227494  
 (DE) 100%

**Marin Speciality Surgery Center, LLC (3)**  
 26-2637247  
 (CA) 51%

**SCA Maple Grove Holdings, LLC**  
 85-3425387  
 (DE) 49%

**SCA ESSC Holdings, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**Inland Surgery Center, L.P.(3)(4)**  
 33-0018673  
 (CA) 51%

**SCA Heartland Holdings, LLC**  
 83-2735871  
 (DE) 100%

**SCA Hays Holdings, LLC**  
 47-5064834  
 (DE) 100%

**SCA Stonegate Holdings, LLC**  
 47-5038680  
 (DE) 100%

**SCA Global One Holdings, LLC**  
 85-2064446  
 (DE) 100%

**SCA Greenway Holdings, LLC**  
 85-3472510  
 (DE) 49%

**SCA Grove Creek Holdings, LLC**  
 85-4003008  
 (DE) 100%

**HealthEast Surgery Center-Maplewood, LLC(3)**  
 20-3349887  
 (MN) 26.28%

**Marin Health Ventures, LLC**  
 94-3377073  
 (CA) 100%

**Center for Restorative Surgery at Maple Grove, LLC**  
 85-3324771  
 (MN) 55.38%

**SCA AHN JV Holdings, LLC**  
 86-1452226  
 (DE) 51%

**SCA High Point Holdings, LLC**  
 86-1735298  
 (DE) 100%

**Heartland Heart and Vascular, LLC(3)**  
 83-2722254  
 (DE) 99%

**Hays JV Partners, LLC (3)**  
 85-2037257  
 (TX) 31.37%

**Stonegate JV Partners, LLC(3)**  
 85-2023852  
 (TX) 39.22%

**Global One Ventures, LLC**  
 27-3337336  
 (CA) 100%

**Greenway Surgical Suites, LLC**  
 85-3346468  
 (MN) 52.77%

**Surgery Center at Grove Creek, LLC**  
 84-4085559  
 (UT) 51.00%

**OptumCare Specialty Practices, LLC**  
 84-3504842  
 (DE) 100%

**SCA Rush Oak Brook Holdings, LLC**  
 87-4302841  
 (DE) 100%

**Eye Specialists Surgery Centers, LLC**  
 27-0927202  
 (IN) 51%

**SCA Duncanville Holdings, LLC**  
 86-1859923  
 (DE) 100%

**SCA Palisades Holdings, LLC**  
 85-1370857  
 (DC) 100%

**Hays Surgery Center, LLC(3) (4)**  
 27-4579547  
 (TX) 51%

**Stonegate Surgery Center, L.P.(3) (4)**  
 20-1211544  
 (TX) 58.17%

**SCA Premier Surgery Center of Louisville, LLC**  
 72-1386840  
 (DE) 100%

**SCA Pinnacle Holdings, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**SCA Northern Utah Holdings, LLC**  
 85-4043674  
 (DE) 100%

**SCLHS-SCA Holdings, LLC (3)**  
 85-2316290  
 (DE) 51%

**OCC MSO, LLC**  
 84-3189778  
 (DE) 50%

**Rush Oak Brook Surgery Center, LLC**  
 37-1832312  
 (IL) 10%

**SCA AHN JV Holdings, LLC**  
 88-4253145  
 (DE) 51%

**Advanced Surgical Center, LLC**  
 47514859  
 (TX) 51%

**Rockville Eye Surgery Center, LLC (3)**  
 04-3713185  
 (MD) 63.72%

**SCA Cedar Park Holdings, LLC**  
 47-5030792  
 (DE) 100%

**Premier Surgery Center of Louisville, I.P.(3)**  
 72-1378216  
 (TN) 51%

**Pinnacle III, LLC**  
 84-1498816  
 (CO) 100%

**Logan Surgical Suites, LLC**  
 82-2435405  
 (UT) 51%

**Lutheran Campus ASC, LLC**  
 02-0749532  
 (CO) 69.73%

**OrthoWest MSO, LLC**  
 85-2357227  
 (DE) 50%

**Northlake Real Estate Holdings, LLC**  
 92-1092423  
 (GA) 100%

**Physicians' Medical Center, LLC**  
 20-5071967  
 (IN) 50.99%

**SCA Duncanville MSO, LLC**  
 86-1855507  
 (TX) 100%

**SCA Northwest Holdings, LLC**  
 85-2527319  
 (DE) 100%

**Cedar Park Surgery Center, LLC**  
 27-2533497  
 (TX) 19.66%

**Cedar Park JV Partners, LLC**  
 85-3868373  
 (TX) 43.7%

**SCA Mohawk Holdings, LLC**  
 85-2302375  
 (DE) 100%

**Specialty Billing Solutions, LLC**  
 20-1494993  
 (CO) 100%

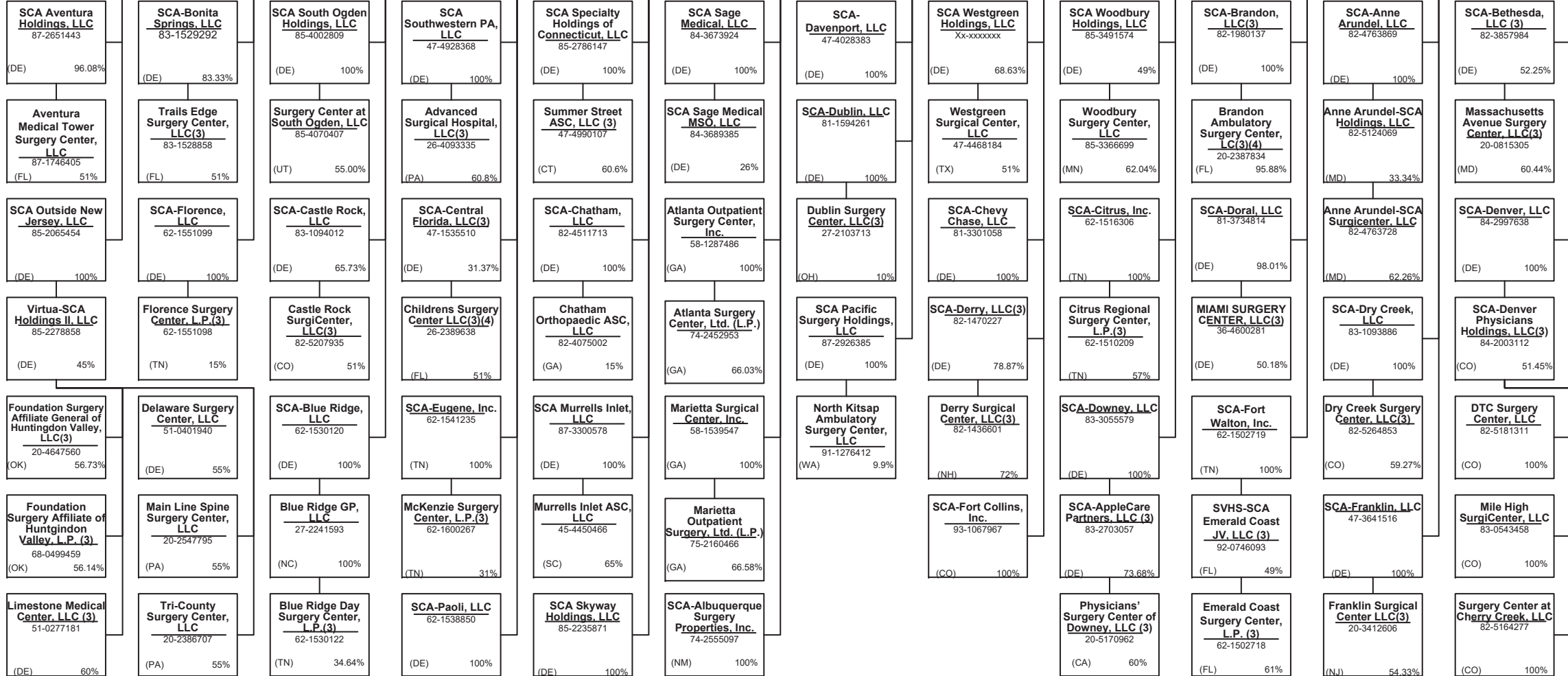
**SCA Health, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**SJ East Campus ASC, LLC**  
 82-1485491  
 (CO) 51%

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

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%



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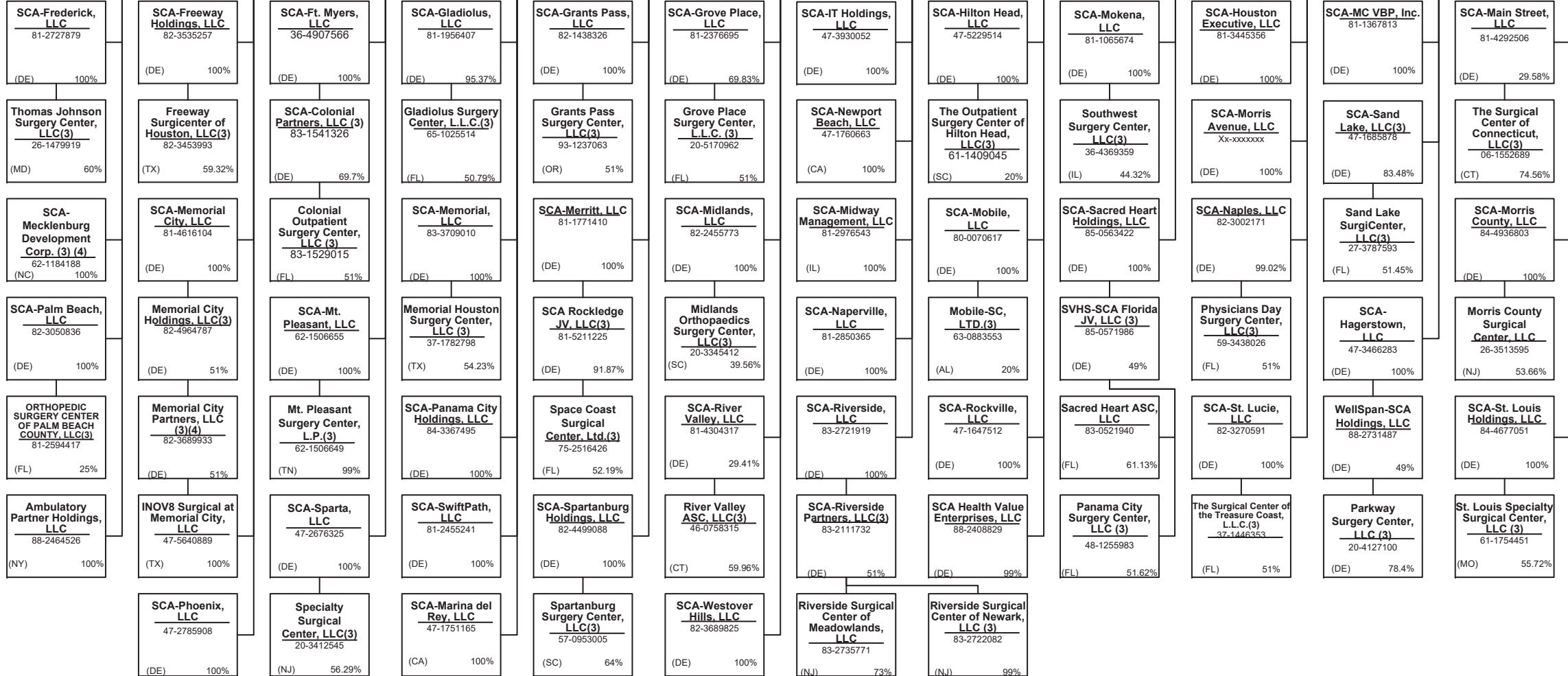
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%



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

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

**SCA-Portland, LLC**  
 81-4139195  
 (DE) 100%

**SCA-Surgicare, LLC**  
 81-4371453  
 (DE) 100%

**SCA-Verta, LLC**  
 82-1987225  
 (DE) 100%

**SCA-Wake Forest, LLC**  
 82-2294882  
 (DE) 100%

**SCA-Western Connecticut, LLC(3)**  
 82-1449412  
 (DE) 67%

**Surgery Center of Muskogee, LLC**  
 63-1194204  
 (DE) 100%

**SCA-Winter Park, Inc.**  
 62-1525777  
 (TN) 100%

**SCA-Woodlands Holdings, LLC**  
 82-3528300  
 (DE) 100%

**Surgery Center of Colorado Springs, LLC**  
 63-1214140  
 (DE) 100%

**Surgery Center of Easton, LLC**  
 72-1349752  
 (DE) 100%

**SCA Pacific Holdings, Inc.**  
 27-1707364  
 (CA) 100%

**Wayland Square Surgicare Acquisition, L.P.(4)**  
 20-5429310  
 (RI) 99%

**Providence & SCA On-Campus Holdings, LLC(3)**  
 82-3270499  
 (DE) 20%

**Surgicare, LLC(3)**  
 35-1975122  
 (IN) 53.68%

**Surgery Center of Louisville, LLC**  
 62-1179537  
 (DE) 100%

**Surgery Center of Maui, LLC**  
 63-1231944  
 (DE) 100%

**Western Connecticut Orthopedic Surgical Center, LLC(3)**  
 06-1521999  
 (CT) 57.91%

**Muskogee Surgical Investors, LLC**  
 20-4209261  
 (OK) 100%

**OptumCare Specialty Practices Investments, LLC**  
 Xx-xxxxxx  
 (DE) 100%

**Surgery Center of The Woodlands, LLC(3)**  
 82-3448050  
 (TX) 54.79%

**SCA-Pocono, LLC**  
 47-1620189  
 (DE) 100%

**The Surgery Center of Easton, L.P.(3)**  
 72-1349755  
 (TN) 49%

**Corpus Christi Endoscopy Center, L.L.P.(3)**  
 20-2595593  
 (TX) 18.5%

**Surgery Center of Lexington, LLC(3)**  
 62-1179539  
 (DE) 49%

**Surgery Center at St. Vincent, LLC (3)**  
 81-3129674  
 (OR) 57.7%

**SCA-Winchester, LLC**  
 81-1159878  
 (DE) 100%

**Louisville S.C., Ltd.(3)**  
 62-1179566  
 (KY) 60.20%

**Aloha Surgical Center, LLC(3)**  
 63-1231942  
 (TN) 67%

**SCA Alaska Surgery Center, Inc.**  
 92-0080881  
 (AK) 100%

**Three Rivers Surgical Care, L.P.(3) (4)**  
 63-1194203  
 (TN) 85.10%

**Summit Cardiovascular Group, LLC**  
 88-4233584  
 (DE) 100%

**Surgical Management Solutions, LLC**  
 84-4983977  
 (DE) 100%

**SCA-San Luis Obispo, LLC**  
 94-3138088  
 (DE) 100%

**Surgery Center of Ellicott City, Inc.**  
 63-1212213  
 (DE) 100%

**CCEC Anesthesia Management, LLC(3)**  
 82-1715584  
 (TX) 100%

**Lexington Surgery Center, Ltd.(3)**  
 61-1028180  
 (KY) 75.5%

**Providence & SCA Off-Campus Holdings, LLC(3)**  
 82-3765555  
 (DE) 40%

**SCA-St. Clout Holdings, LLC**  
 88-1844951  
 (DE) 100%

**SCA-JPM Holdings, LLC**  
 83-3090526  
 (DE) 100%

**SCA-Santa Rosa, Inc.**  
 88-0185362  
 (NV) 100%

**SCA-First Coast, LLC**  
 83-2805878  
 (DE) 100%

**SCA-Gainesville, LLC**  
 62-1547690  
 (DE) 100%

**Maryland Ambulatory Centers, LLC(3)(4)**  
 52-1456812  
 (MD) 50%

**Oregon Outpatient Surgery Center, LLC(3)**  
 22-3883387  
 (OR) 51.18%

**St. Cloud MSO, LLC**  
 88-1908453  
 (DE) 100%

**JPM Healthcare, LLC (3)**  
 83-2306992  
 (DE) 51%

**ASV-HOPCo-SCA Florida, LLC**  
 87-3912899  
 (FL) 39.22%

**First Coast Orthopedic Center, LLC**  
 82-2929226  
 (FL) 54.33%

**Montgomery Surgery Center Limited Partnership(3)**  
 52-1401868  
 (MD) 51%

**Northwest Spine and Laser Surgery Center, LLC (3)**  
 45-5055997  
 (OR) 51.52%

**SCA Englewood Holdings, LLC**  
 86-3781364  
 (DE) 100%

**SCA Providence Holdings, LLC**  
 Xx-xxxxxxx  
 (DE) 100%

**SCA Englewood Holdings, LLC**  
 86-3781364  
 (DE) 100%

**Patient Care Associates, L.L.C.**  
 20-1311030  
 (NJ) 55.84%

**Surgery Center of Mt. Scott, LLC (3)**  
 83-2600045  
 (OR) 51%

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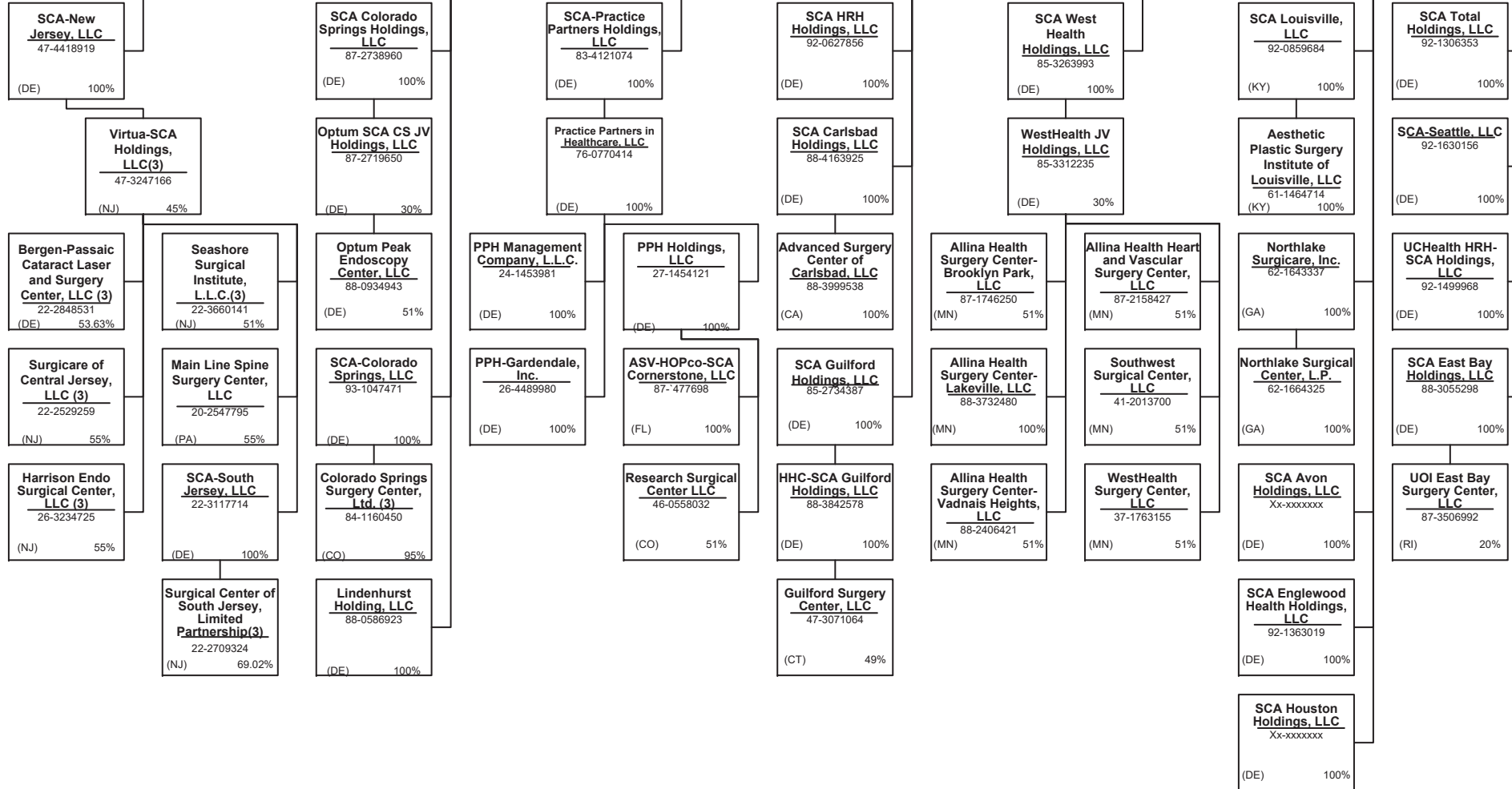
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

**SC Affiliates, LLC**  
 62-1149229  
 (DE) 100%

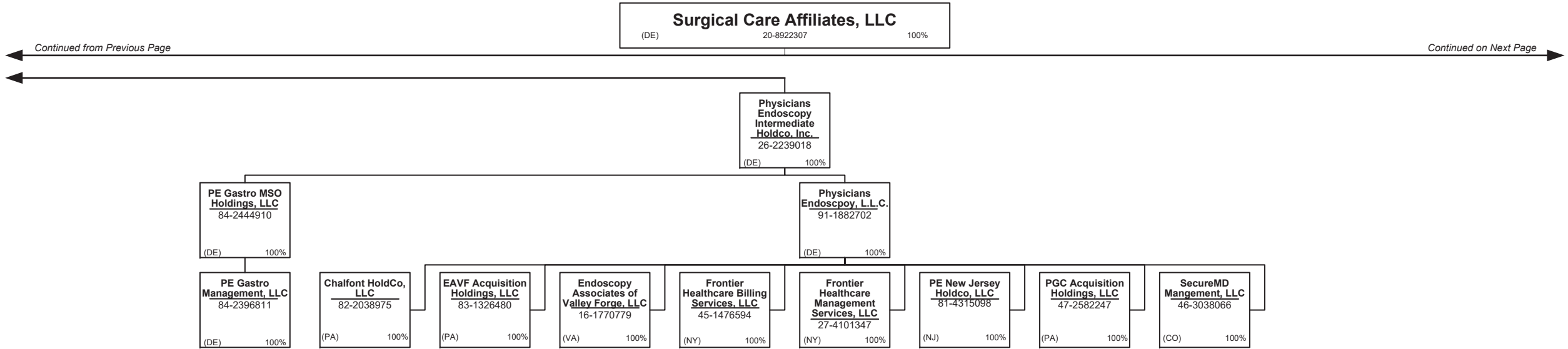
**Endo Parent, Inc.**  
 Xx-xxxxxxx  
 (DE) 100%



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



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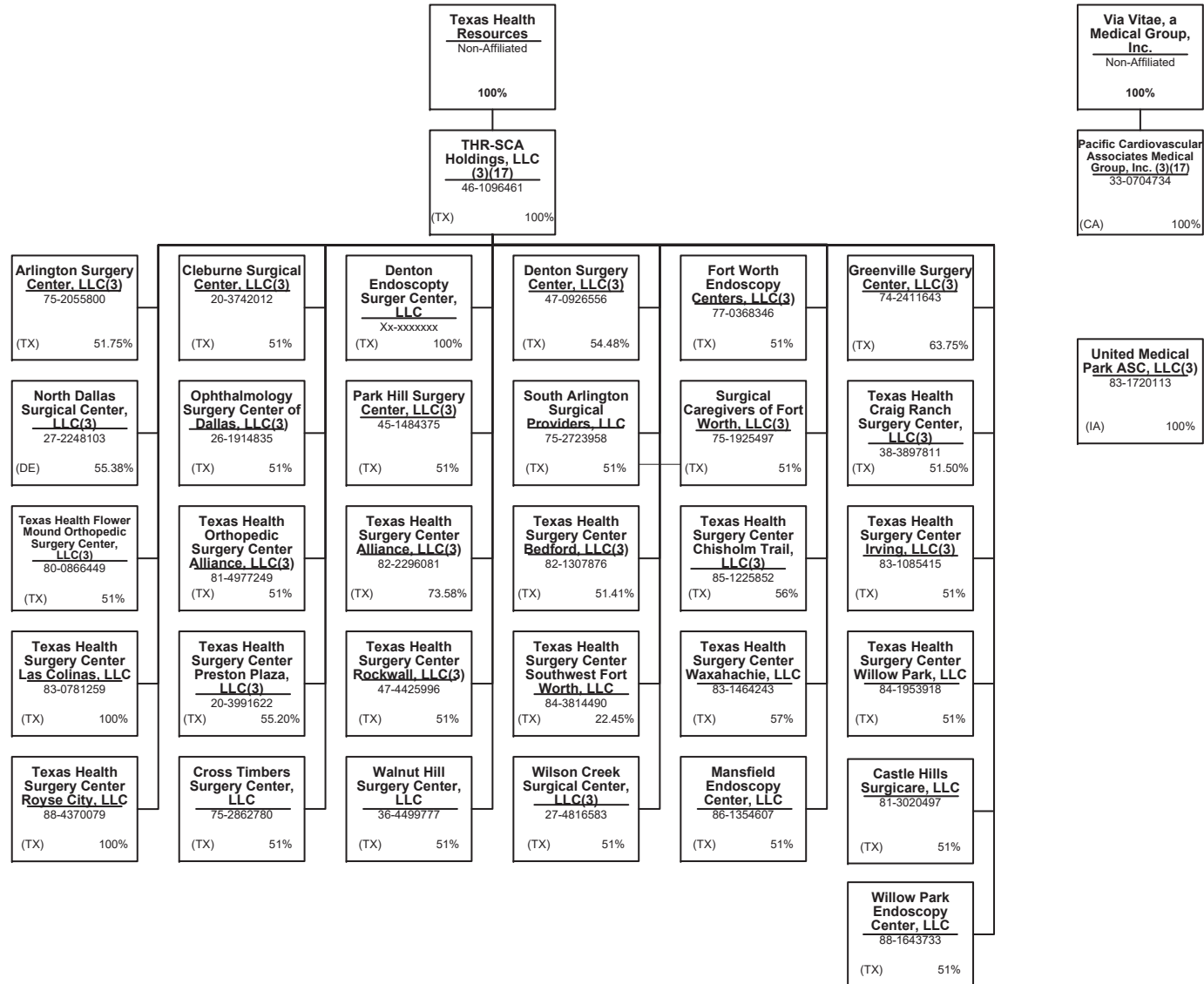
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**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

**Surgical Care Affiliates, LLC**  
 (DE) 20-8922307 100%

Continued from Previous Page

Substantively Controlled Surgical Care Affiliate Entities



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.  
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
 PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
4C Medical Group, PLC	AZ	45-2402948	Carbondale Counseling Associates LLC	IL	47-1130641
A.G. Dikengil, Inc.	NJ	22-3149900	CareMount Health Solutions ACO, LLC	NY	n/a
AbleTo Behavioral Health Services of Michigan, P.C.	MI	85-4328419	Carolina Behavioral Care, P.A.	NC	56-1780933
AbleTo Behavioral Health Services of New Jersey, P.C.	NJ	85-4306375	Carroll Counseling Center LLC	MD	52-2072546
AbleTo Behavioral Health Services, PC	CT	47-5519672	Centers for Family Medicine, GP	CA	33-0483510
AbleTo Licensed Clinical Social Worker Services, P.C.	CA	85-0739865	Christopher Stalberg, M.D., PLLC	AZ	n/a
AbleTo Psychiatry Health Services, P.C.	MA	88-2290313	Cielo House, Inc.	CA	87-2440218
AHN Accountable Care Organization, LLC	IN	45-4171713	Cognitive-Behavioral Therapy Center of Western North Carolina, P.A.	NC	20-3056794
Aleph Psychological Services Inc.	CA	46-3477124	Colonial Family Practice, L.L.C.	SC	--
American Health Network of Indiana, LLC	IN	35-2108729	Columbia Counseling Center P.A.	MD	52-2052733
Angie Coil FNP, PLLC	AZ	81-2112951	Connect Medical, P.C.	NY	32-0551188
AppleCare Hospitalists Medical Group, Inc.	CA	14-1890491	David C. Anderholm, M.D., P.A.	MN	41-1879063
AppleCare Medical ACO, LLC	CA	45-2852872	David Moen, M.D. P.C.	NY	81-5101448
AppleCare Medical Group St. Francis, Inc.	CA	33-0845269	David R. Ferrell, M.D., P.C.	NV	45-2380022
AppleCare Medical Group, Inc.	CA	33-0898174	Day-OP Center Of Long Island Inc.	NY	11-2811353
ArchWell Health Professional Services Holding Co.	DE	86-3278602	DBT and EMDR Specialists, P.A.	MN	47-3322541
ArchWell Health Professional Services of Alabama, LLC	AL	86-3152173	Doc Martins, PLLC	AZ	20-0419099
ArchWell Health Professional Services of Arizona, LLC	AZ	87-2986923	Durable Medical Equipment, Inc.	MA	04-3106404
ArchWell Health Professional Services of Florida, P.A.	FL	88-3481216	Elite Focus Clinic, Inc., a Professional Corporation	CA	47-3861802
ArchWell Health Professional Services of Kansas, P.A.	KS	86-3241870	Empire Physicians' Medical Group, Inc.	CA	33-0181426
ArchWell Health Professional Services of Nebraska, LLC	NE	87-3065955	Eugene Center of Anxiety and Stress, LLC	OR	83-2740282
ArchWell Health Professional Services of Nevada, P.C.	NV	88-1285211	Eugene Therapy, LLC	OR	90-0624377
ArchWell Health Professional Services of North Carolina, P.C.	NC	86-3222071	Everett Physicians, Inc. P.S.	WA	81-1625636
ArchWell Health Professional Services of Oklahoma, LLC	OK	86-3190019	Evolve, LLC	WI	61-1752488
ARTA Western California, Inc.	CA	33-0658815	Family Counseling Associates of Salem Andover LLC	NH	27-0820363
Aspectus, Inc.	MA	04-3403101	Ferrell Physician Services, P.C.	NY	87-4007730
Astra Medical Clinic, PLLC	AZ	86-0882561	First Hill Surgery Center, LLC	WA	47-2066485
Atrius Health, Inc.	MA	n/a	First Step Services, LLC	NC	51-0484581
Beaver Medical Group, P.C.	CA	33-0645967	Flagstaff Family Physicians, PLLC	AZ	86-0959327
Behavioral Solutions, P.C.	MA	04-3316367	Good Samaritan Medical Practice Association, Inc., A Medical Group	CA	95-3969271
Better Health Value Network, LLC	WA	47-4349079	Greater Phoenix Collaborative Care, P.C.	AZ	27-2337725
Bexar Imaging Center, LLC	TX	22-3858211	HealthCare Partners Affiliates Medical Group	CA	95-4526112
California Spring Holdings, PC	CA	81-0881243	HealthCare Partners ASC-HB, LLC	CA	26-4247365

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.  
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
 PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
HealthCare Partners Associates Medical Group, P.C.	CA	45-5273760	Landmark Medical of Pennsylvania, PC	PA	81-1605378
HealthCare Partners Medical Group, P.C.	CA	95-4340584	Landmark Medical of Rhode Island, PC	RI	84-2830065
Heron Ridge Assoc., P.L.C.	MI	80-0020865	Landmark Medical of Tennessee, PC	TN	30-1288593
Homecare Dimensions of Florida, Inc.	TX	81-0884465	Landmark Medical of Texas, PA	TX	83-2296389
Homecare Dimensions, Inc.	TX	74-2758644	Landmark Medical of Utah, PC	UT	84-2660339
IN Style OPTICAL, LLC	MA	27-3296953	Landmark Medical of Virginia, P.C.	VA	85-0839774
Inland Faculty Medical Group, Inc.	CA	33-0618077	Landmark Medical of Washington, PC	WA	47-3028655
Inspiris Medical Services of New Jersey, P.C.	NJ	45-2563134	Landmark Medical, P.C.	NY	47-1588943
INSPIRIS of Michigan Medical Services, P.C.	MI	27-1561674	Level2 Medical Services, P.A.	DE	84-5003916
INSPIRIS of New York Medical Services, P.C.	NY	13-4168739	Level2 Medical Services, P.A. New Jersey	NJ	87-2684015
INSPIRIS of Pennsylvania Medical Services, P.C.	PA	26-2895670	Level2 Medical Services, P.C. Alaska	AK	87-2600511
Jonathan E. Goldberg, Ph.D., Inc.	MA	26-3013277	Level2 Medical Services, P.C. California	CA	92-1153396
Joyce Marter & Associates, P.C.	IL	26-3478896	Level2 Medical Services, P.C. Utah	UT	87-0989804
K.P. Counseling, Ltd.	IL	30-0089259	Life Strategies Counseling, Inc.	AR	20-0468524
Kelsey-Seybold Medical Group, PLLC	TX	76-0386391	LifeSolutions Counseling Associates, P.C.	IN	26-3292877
KS Pharm, LLC	TX	84-2355006	March Vision Care Group, Incorporated	CA	95-4874334
KS SC, LLC	TX	84-2241460	March Vision Care IPA, Inc.	NY	27-3115058
Landmark Medical of Arkansas, P.A.	AR	85-0997438	March Vision Care of Texas, Inc.	TX	45-4227915
Landmark Medical of California, PC	CA	47-4553619	MAT-RX DEVELOPMENT, L.L.C.	TX	43-1967820
Landmark Medical of Connecticut, PC	CT	83-2295301	Mat-Rx Fort Worth GP, L.L.C.	TX	35-2262695
Landmark Medical of Florida, P.A.	FL	85-0838149	ME Urgent Care Nebraska, Inc.	NE	81-0936574
Landmark Medical of Idaho, PC	ID	92-0496439	MedExpress Employed Services, Inc.	DE	81-1265129
Landmark Medical of Kansas, P.A.	KS	82-4633545	MedExpress Primary Care Arizona, P.C.	AZ	81-4550969
Landmark Medical of Kentucky, PSC	KY	82-4881602	MedExpress Primary Care Arkansas, P.A.	AR	84-4234388
Landmark Medical of Louisiana, a Professional Corporation	LA	82-4881732	MedExpress Primary Care Kansas, P.A.	KS	81-4605885
Landmark Medical of Massachusetts, PLLC	MA	81-5364097	MedExpress Primary Care Maryland, P.C.	MD	82-3384324
Landmark Medical of Michigan, P.C.	MI	86-3599871	MedExpress Primary Care Massachusetts, P.C.	MA	82-1096099
Landmark Medical of Mississippi, P.C.	MS	82-5084178	MedExpress Primary Care Minnesota P.C.	MN	81-4396738
Landmark Medical of Missouri, P.C.	MO	82-4857713	MedExpress Primary Care Oklahoma, P.C.	OK	83-1077265
Landmark Medical of New Hampshire, P.C.	NH	85-1174070	MedExpress Primary Care South Carolina, P.C.	SC	83-0764858
Landmark Medical of North Carolina, P.C.	NC	82-4256752	MedExpress Primary Care Texas, P.A.	TX	84-2500750
Landmark Medical of Ohio, Professional Corporation	OH	82-4864947	MedExpress Primary Care Virginia, P.C.	VA	82-3395792
Landmark Medical of Oregon, PC	OR	47-2926188	MedExpress Primary Care West Virginia, Inc.	WV	82-4401181



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.  
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
 PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
MedExpress Primary Care Wisconsin, S.C.	WI	81-4563448	Mental Health Resources, PLLC	TN	62-1396317
MedExpress Urgent Care – New Jersey, P.C.	NJ	45-5388778	MH Physician Three Holdco, a Medical Corporation	CA	27-4691544
MedExpress Urgent Care - Northern New Jersey PC	NJ	83-2089623	MHCH, Inc.	CA	80-0507474
MedExpress Urgent Care Arizona, P.C.	AZ	81-4030280	MHIPA Physician Two Holdco, a Medical Corporation	CA	27-4691508
MedExpress Urgent Care Arkansas, P.A.	AR	46-4348120	Mindscales Counseling, LLC	CT	47-2117693
MedExpress Urgent Care California, P.C.	CA	82-0930142	Mobile Medical Services of New Jersey, PC	NJ	81-2977678
MedExpress Urgent Care Connecticut, P.C.	CT	81-1956812	Mobile Medical Services, P.C.	NY	30-0445773
MedExpress Urgent Care Idaho, P.C.	ID	82-1135336	Moen, M.D., P.C.	CA	85-3287029
MedExpress Urgent Care Illinois, P.C.	IL	47-4308614	Monarch Health Plan, Inc.	CA	22-3935634
MedExpress Urgent Care Iowa, P.C.	IA	81-5353472	Monarch HealthCare, A Medical Group, Inc.	CA	33-0587660
MedExpress Urgent Care Kansas, P.A.	KS	47-1919283	Monika Roots, M.D., P.C.	CA	84-4887072
MedExpress Urgent Care Minnesota P.C.	MN	81-1125396	NAMM Medical Group Holdings, Inc.	CA	56-2627070
MedExpress Urgent Care Missouri P.C.	MO	47-3132625	naviHealth Michigan HBPC, P.C.	MI	84-3469040
MedExpress Urgent Care North Carolina, P.C.	NC	81-5138747	NC Center For Resiliency, PLLC	NC	47-2693055
MedExpress Urgent Care Oregon, P.C.	OR	82-1919436	New Perspectives Center for Counseling & Therapy, L.L.C.	OR	93-1173779
MedExpress Urgent Care Rhode Island, P.C.	RI	81-5362765	New York Licensed Clinical Social Work, P.C.	NY	86-3891057
MedExpress Urgent Care South Carolina, P.C.	SC	81-5380706	Northlight Counseling Associates, Inc.	AZ	86-0646417
MedExpress Urgent Care Texas, P.A.	TX	47-5147441	Northwest Medical Group Alliance, LLC	WA	91-1699944
MedExpress Urgent Care Washington, P.C.	WA	82-2443118	NPN IPA Washington, PLLC	WA	61-1855159
MedExpress Urgent Care Wisconsin, S.C.	WI	81-4281678	Oakland Psychological Clinic, P.C.	MI	38-2481929
MedExpress Urgent Care, Inc. – West Virginia	WV	26-4546400	OHR Physician Group, P.C.	OR	93-0979031
MedExpress Urgent Care, P.C. – Georgia	GA	47-1804667	Optum Clinic, P.A.	TX	75-2778455
MedExpress Urgent Care, P.C. – Indiana	IN	90-0929572	Optum Medical Care of New Jersey, P.C.	NJ	22-3624559
MedExpress Urgent Care, P.C. – Maryland	MD	45-3461101	Optum Medical Care, P.C.	NY	13-3544120
MedExpress Urgent Care, P.C. – Massachusetts	MA	47-1857908	Optum Medical Services of California, P.C.	CA	30-0826311
MedExpress Urgent Care, P.C. – Michigan	MI	46-4793937	Optum Medical Services of Colorado, P.C.	CO	45-5424191
MedExpress Urgent Care, P.C. – Oklahoma	OK	47-1824365	Optum Medical Services, P.C.	NC	45-3866363
MedExpress Urgent Care, P.C. – Pennsylvania	PA	26-3750502	OptumCare Portland, LLC	OR	93-1306308
MedExpress Urgent Care, P.C. – Tennessee	TN	45-4973138	Oregon Healthcare Resources, LLC	OR	27-3674492
MedExpress Urgent Care, P.C. – Virginia	VA	45-3123110	PE Healthcare Associates, LLC	NY	27-4496894
MedExpress Urgent Care, P.S.C. - Kentucky	KY	83-1565124	Peninsula Psychological Center, Inc., P.S.	WA	91-1885912
MedExpress, Inc. – Delaware	DE	45-5436856	Perspectives of Troy, P.C.	MI	38-2592367
Memorial Healthcare IPA, GP	CA	95-4688463	Physician Partners Medical Group, Inc.	CA	30-0516435



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.  
**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
 PART 1 – ORGANIZATIONAL CHART

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
Physician United PLLC	AZ	84-3476733	Refresh In-Home Counseling LLC	IL	82-5351068
Physicians Care Network, L.L.C.	WA	91-1822767	Refresh Pennsylvania, LLC	PA	84-1756547
Physicians Medical Group of San Jose, Inc.	CA	94-2722082	Reliant Medical Group The Endoscopy Center, LLC	MA	20-5251393
Physicians Medical Health Plan	CA	84-3715606	Reliant Medical Group, Inc.	MA	04-2472266
Physicians Medical Holdings	CA	86-2631012	Riverside Community Healthplan Medical Group, Inc.	CA	33-0055097
Pilot Holdings, P.C.	CA	87-3931756	Riverside Electronic Healthcare Resources, Inc.	CA	20-3420379
Pinnacle Medical Group, Inc.	CA	33-0795271	Robert B. McBeath, M.D. II, P.C.	NV	86-0857176
Polyclinic Holdings, P.C.	WA	83-3042027	Robert B. McBeath, M.D. III, P.C.	NV	46-2662506
POLYCLINIC MANAGEMENT SERVICES COMPANY, LLC	WA	46-0508606	Robert B. McBeath, M.D., Professional Corporation	NV	88-0310956
Primary Care Associated Medical Group, Inc.	CA	33-0527335	Saad A. Shakir, M.D., Inc.	CA	77-0398259
ProHEALTH Accountable Care Medical Group, PLLC	NY	45-4469117	San Bernardino Medical Group, Inc.	CA	--
ProHEALTH Ambulatory Surgery Center, Inc.	NY	11-3447394	Sanvello Behavioral Health Services of New Jersey, P.C.	NJ	85-0666386
ProHEALTH Care Associates of New Jersey LLP	NJ	47-5656253	Sanvello Behavioral Health Services of North Carolina, P.C.	NC	85-1959641
ProHEALTH Care Associates, L.L.P.	NY	11-3355604	Sanvello Behavioral Health Services of Texas, P.A.	TX	84-3152209
ProHEALTH Medical NY, P.C.	NY	47-1388406	Sanvello Behavioral Health Services, P.A.	DE	84-1754732
ProHealth Physicians, P.C.	CT	06-1469068	Saris Counseling, LLC	WI	n/a
ProHEALTH Urgent Care Medicine of New Jersey LLP	NJ	47-5661535	Seattle Psychology, P.L.L.C.	WA	46-3238571
ProHEALTH Urgent Care Medicine, PLLC	NY	46-1883579	SecureMD Professionals - California, PC	CA	46-3057015
Prospero Health Partners Florida, Inc.	FL	85-0775386	Serenity Family and Psychological Counseling Center, P.C.	CA	45-3802527
Prospero Health Partners New York, P.C.	NY	82-2400620	Shark Holdings, P.C.	CA	87-3142148
Prospero Health Partners North Carolina, P.C.	NC	84-4569314	Sherman Counseling Management, S.C.	WI	47-5082677
Prospero Health Partners, P.C.	MN	84-3234753	Silicon Valley TMS of Monterey Bay, GP	CA	81-3200297
Prospero Medical Services New Jersey, P.C.	NJ	84-3844362	Southwest Internal Medicine Group, Robert Ruiz, M.D., PLLC	AZ	86-0516447
Prospero Medical Services, P.A.	FL	87-2406404	Spring Behavioral Health of New Jersey, LLC	NJ	82-3087236
Psychiatry Services of New York, P.C.	NY	85-0921665	Springfield Psychological, P.C.	PA	23-2833266
Psychiatry Specialists Inc.	IL	27-3409538	Surgical Eye Experts, LLC	MA	65-1321064
Psychological Healthcare, PLLC	NY	16-1484552	Surprise Health Center, PLLC	AZ	86-1047772
Red Oak Counseling, Ltd.	WI	20-0785644	Susan Albright P.L.C.	AZ	20-5176158
Redlands Family Practice Medical Group, Inc.	CA	56-2627067	Talbert Medical Group, P.C.	CA	93-1172065
Refresh Canopy Cove, Inc.	FL	82-3603285	The Everett Clinic, PLLC	WA	91-0214500
Refresh Centers, Inc.	IN	30-0358493	The Polyclinic, PLLC	WA	91-0369070
Refresh Connecticut LLC	CT	84-2663780	The Potter's House Family & Children Treatment Center, LLC	GA	20-8357849
Refresh Evolve, LLC	WI	83-4507157	The Tabor Therapy Group, Inc.	IL	46-5461304

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE AmeriChoice of New Jersey, Inc.

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

Professionally Owned Entities

<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>	<u>Entity Name</u>	<u>Juris.</u>	<u>Federal Tax ID</u>
Triangle Counseling Agency, Inc.	NC	26-2552129			
USMD Diagnostic Services, LLC	TX	27-2803133			
USMD Hospital at Arlington, L.P.	TX	73-1662763			
USMD Hospital at Fort Worth, L.P.	TX	20-3571243			
USMD of Arlington GP, L.L.C.	TX	73-1662757			
Vitucci, LCSW, P.C.	IL	85-1453387			
Warner Family Practice, P.C.	AZ	86-0462952			
Waypoint Minnesota PC	MN	46-2854394			
WellMed Florida Medicare ACO, LLC	TX	84-2233329			
WellMed Florida Services, PLLC	TX	45-2158334			
WellMed Greater Texas Medicare ACO, LLC	TX	84-2178104			
WellMed Medical Group, P.A.	TX	74-2574229			
WellMed Network of Florida, Inc.	TX	35-2314192			
WellMed Networks - DFW, Inc.	TX	41-2250215			
WellMed Networks, Inc.	TX	74-2889447			
WellMed of Las Cruces, Inc.	TX	92-0183013			
WellMed Tampa/Orlando Medicare ACO, LLC	TX	84-2193803			
WellMed Texas Medicare ACO, LLC	TX	84-2219968			
XLHome Michigan, P.C.	MI	46-3537245			
XLHome Northeast, P.C.	NJ	45-5530241			
XLHome Oklahoma, Inc.	OK	46-2931689			
XLHome, P.C.	MD	27-3543997			

**Organizational Chart Footnotes**

- (1) Entity is owned in full or in part by a UnitedHealth Group Incorporated friendly physician.
- (2) Control of the Foundation is based on sole membership, not the ownership of voting securities.
- (3) The remaining percentage is owned either by a non-affiliated entity, outside investor(s), current/former company officer(s), or third party shareholder(s).
- (4) The minority percentage is owned by one or more affiliated UnitedHealth Group Incorporated subsidiaries. Voting rights do vary.
- (5) No information of the other shareholder(s) has been provided
- (6) General partnership interests are held by United HealthCare Services, Inc. (89.77%) and by UnitedHealthcare, Inc. (10.23%). United HealthCare Services, Inc. also holds 100% of the limited partnership interests. When combining general and limited partner interests, United HealthCare Services, Inc. owns 94.18% and UnitedHealthcare, Inc. owns 5.83%.
- (7) Branch offices in Iraq and Uganda.
- (8) H&W Indemnity (SPC), Ltd. is an exempted segregated portfolio company organized under the laws of the Cayman Islands and holds a Cayman insurance license.
- (9) Registered as a foreign shareholder in Brazil.
- (10) Open
- (11) Polar II Fundo de Investimento em Participações is a Brazilian private equity investment fund incorporated in the form of a closed-end condominium.
- (12) N/A
- (13) Entity has a representative office in Beijing, China.
- (14) Open
- (15) Registered branch in the United Kingdom.
- (16) Open
- (17) Entity is not directly owned by the parent. However, the parent does have a viable economic interest as well as control over the entity through contractual agreements.

**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
2504. Interest .....	48,161	9,004	340,894	0	398,059
2505. Managed Care & Network Access .....	52,720	9,155	52,078	0	113,953
2506. Miscellaneous Losses .....	20,847	3,897	22,170	0	46,914
2597. Summary of remaining write-ins for Line 25 from overflow page	121,728	22,056	415,142	0	558,926