

# Accident and Health Markets Gross Annual Premium Enrollment Report Summary

CY 2022



November 1, 2023

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Insurance Commissioner

**CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment**  
*Statewide Data: Summary by Major Medical Lines of Business*  
**Group Markets**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b><u>Groups 50 or Less</u></b>							
ACA Off Exchange 2 - 50 Member Groups	\$2,330,803,092	\$1,862,828,823	\$216,998,982	48,667	219,132	120,020	339,152
Grandfathered (In-State and Out-of-State) Self-Employed or Sole Proprietor	\$105,225	\$643,950	\$0	5	5	5	10
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups	\$110,451,811	\$78,755,239	\$0	1,314	7,634	5,644	13,278
Transitional (In-State and Out-of-State) Self-Employed or Sole Proprietor	\$472,052	\$475,460	\$0	22	22	25	47
Transitional (In-State and Out-of-State) 2 - 50 Member Groups	\$502,970,645	\$420,835,171	\$5,879,362	8,285	40,594	27,195	67,789
Subtotal	\$2,944,802,825	\$2,363,538,643	\$222,878,344	58,293	267,387	152,889	420,276
<b><u>Groups 51-100</u></b>							
ACA Off Exchange 51-100 Member Groups	\$1,290,367,965	\$1,074,008,015	\$401,207,241	10,336	141,191	68,864	210,055
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$58,673,542	\$26,834,724	\$0	84	3,845	1,430	5,275
Transitional (In-State and Out-of-State) 51-100 Member Groups	\$16,127,256	\$14,179,334	\$261,101	241	1,062	838	1,900
Subtotal	\$1,365,168,763	\$1,115,022,073	\$401,468,342	10,661	146,098	71,132	217,230
<b><u>Groups 100+</u></b>							
ACA Off Exchange 101+ Member Groups	\$5,354,538,085	\$4,464,289,986	\$429,356,810	12,833	501,803	324,848	826,651
Grandfathered (In-State and Out-of-State) 101+ Member Groups	\$949,290,133	\$902,485,098	\$769,202	8,381	86,858	61,692	148,550
Transitional (In-State and Out-of-State) 101+ Member Groups	\$897,578,804	\$730,316,561	\$70,764,937	3,364	92,209	66,420	158,629
Subtotal	\$7,201,407,022	\$6,097,091,645	\$500,890,949	24,578	680,870	452,960	1,133,830
<b>Total</b>	<b>\$11,511,378,610</b>	<b>\$9,575,652,361</b>	<b>\$1,125,237,635</b>	<b>93,532</b>	<b>1,094,355</b>	<b>676,981</b>	<b>1,771,336</b>

**CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment**  
**Statewide Data: Summary by Major Medical Lines of Business**  
*Individual Markets*

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b><u>Guarantee Issue</u></b>							
ACA On Exchange	\$17,534,106,462	\$15,066,004,579	\$8,277,464,513	0	1,968,934	661,191	2,630,125
ACA Off Exchange	\$1,162,947,165	\$904,087,317	\$175,530,319	0	121,512	63,177	184,689
ACA Off Exchange Self-Employed or Sole Proprietor	\$5,336,830	\$4,711,304	\$442,138	332	333	288	621
Grandfathered (In-State and Out-of-State)	\$451,948	\$680,738	\$0	0	214	32	246
Transitional (In-State and Out-of-State)	\$331,912	\$353,238	\$0	0	16	4	20
Subtotal	\$18,703,174,317	\$15,975,837,175	\$8,453,436,970	332	2,091,009	724,692	2,815,701
<b><u>Individually Underwritten</u></b>							
Grandfathered (In-State and Out-of-State)	\$196,782,090	\$150,978,359	\$0	0	15,266	12,068	27,334
Transitional (In-State and Out-of-State)	\$337,867,456	\$306,123,234	\$2,653,847	0	30,533	26,670	57,203
Subtotal	\$534,649,546	\$457,101,593	\$2,653,847	0	45,799	38,738	84,537
<b><u>Conversion</u></b>							
ACA Off Exchange	\$429,248	\$1,274,698	\$0	0	24	5	29
Grandfathered (In-State and Out-of-State)	\$427,695	\$2,624,653	\$0	0	44	2	46
Transitional (In-State and Out-of-State)	\$238,300	\$687,457	\$0	0	15	16	31
Subtotal	\$1,095,243	\$4,586,808	\$0	0	83	23	106
Total Individual	\$19,238,919,106	\$16,437,525,576	\$8,456,090,817	332	2,136,891	763,453	2,900,344

**CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment**

*Statewide Data: Summary by Other Accident and Health Business*

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only	\$619,732,357	\$0	\$1,126,280	13,628	2,135,507	1,361,601	3,497,108
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness	\$617,937,185	\$284,612,327	\$108,190,139	938,305	11,328,676	5,462,004	16,790,680
Dental	\$2,364,344,010	\$1,870,151,133	\$174,625,275	55,005	7,715,035	3,712,954	11,427,989
Prescription Drug	\$553,392,776	\$418,979,287	\$45,533,598	3,299	773,375	465	773,840
Vision	\$362,494,107	\$226,675,019	\$45,500,511	38,053	3,104,123	2,593,445	5,697,568
Disability Income	\$1,679,554,684	\$1,445,214,232	\$168,505,473	73,859	3,515,033	6,033	3,521,066
Excess/Stop Loss	\$1,561,987,454	\$1,273,525,637	\$221,198,076	21,515	1,691,831	1,317,514	3,009,345
Limited Benefit	\$962,613,683	\$399,307,850	\$206,220,744	36,452	1,971,798	985,804	2,957,602
Long Term Care-Comprehensive	\$721,350,415	\$1,081,234,005	\$5,087,128	4,473	319,219	12,606	331,825
Long Term Care-Facility Only	\$28,267,911	\$40,804,781	\$1,054,568	54	15,577	1,279	16,856
Long Term Care-Non-Facility Only	\$8,424,209	\$19,974,696	\$0	0	5,400	617	6,017
Long Term Care-Accelerated Benefit Rider	\$13,597,167	\$3,227,882	\$232,273	292	57,164	642	57,806
Short Term Care	\$176,226,231	\$88,545,830	\$109,022,979	0	31,579	20,006	51,585
Medicare Supplement	\$2,609,330,043	\$2,060,667,696	\$130,026,385	1,530	955,237	1,004	956,241
Medicare Advantage	\$40,160,913,014	\$34,548,715,776	\$2,852,088,746	121,833	2,450,864	3,152	2,454,016
Other	\$322,670,843	\$366,705,810	\$80,745,187	301	382,578	27,570	410,148
Misc.	\$26,127,479,358	\$21,919,022,046	\$891,466,554	24	4,874,049	211,749	5,085,798

***CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment  
Major Medical Market Share and Rankings***

<i>Rank</i>	<i>Company Name</i>	<i>NAIC Company Code</i>	<i>Direct Premiums Earned</i>	<i>Covered Lives</i>	<i>Market Share (By Premium)</i>
1	BLUE CROSS & BLUE SHIELD OF FLORIDA, INC.	98167	\$8,215,687,821	890,338	26.72%
2	HEALTH OPTIONS, INC.	95089	\$7,091,864,555	1,004,650	23.06%
3	OSCAR INSURANCE COMPANY OF FLORIDA	16374	\$2,679,623,735	683,749	8.71%
4	CELTIC INSURANCE COMPANY	80799	\$1,950,808,398	279,628	6.34%
5	UNITEDHEALTHCARE INSURANCE COMPANY	79413	\$1,682,659,161	279,618	5.47%
6	CIGNA HEALTH AND LIFE INSURANCE COMPANY	67369	\$1,554,710,398	252,303	5.06%
7	BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA	16501	\$1,158,010,099	262,351	3.77%
8	NEIGHBORHOOD HEALTH PARTNERSHIP, INC.	95123	\$963,846,511	173,759	3.13%
9	AETNA LIFE INSURANCE COMPANY	60054	\$949,890,820	144,308	3.09%
10	HUMANA MEDICAL PLAN, INC.	95270	\$707,591,681	102,122	2.30%
11	CAPITAL HEALTH PLAN, INC.	95112	\$673,173,812	103,514	2.19%
12	UNITEDHEALTHCARE OF FLORIDA, INC.	95264	\$563,148,371	96,240	1.83%
13	FLORIDA HEALTH CARE PLAN, INC.	13567	\$536,080,077	74,830	1.74%
14	AVMED, INC.	95263	\$455,926,384	78,294	1.48%
15	SUNSHINE STATE HEALTH PLAN, INC.	13148	\$329,229,285	58,283	1.07%
16	AETNA HEALTH INC.	95088	\$270,307,318	31,402	0.88%
17	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	70670	\$255,405,934	44,223	0.83%
18	HEALTH FIRST COMMERCIAL PLANS, INC.	16272	\$206,086,934	24,945	0.67%
19	MOLINA HEALTHCARE OF FLORIDA, INC.	13128	\$174,000,347	30,501	0.57%
20	GOLDEN RULE INSURANCE COMPANY	62286	\$118,215,143	18,486	0.38%
21	COVENTRY HEALTH PLAN OF FLORIDA, INC.	95266	\$62,887,640	12,474	0.20%
22	QCC INSURANCE COMPANY	93688	\$48,303,975	7,315	0.16%
23	METROPOLITAN LIFE INSURANCE COMPANY	65978	\$35,573,007	2,088	0.12%
24	STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY	25178	\$14,147,843	1,918	0.05%
25	BEHEALTHY FLORIDA, INC.	15118	\$12,681,606	3,672	0.04%
26	4 EVER LIFE INSURANCE COMPANY	80985	\$12,630,020	2,021	0.04%
27	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	69671	\$10,861,100	1,166	0.04%
28	ALL SAVERS INSURANCE COMPANY	82406	\$5,080,854	1,636	0.02%
29	FREEDOM LIFE INSURANCE COMPANY OF AMERICA	62324	\$3,149,391	70	0.01%
30	CIGNA HEALTHCARE OF FLORIDA, INC.	95136	\$3,091,688	475	0.01%
31	UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK	70106	\$2,292,887	3,212	0.01%
32	EQUITABLE FINANCIAL LIFE INSURANCE COMPANY	62944	\$1,152,298	344	0.00%
33	CONNECTICUT GENERAL LIFE INSURANCE COMPANY	62308	\$585,208	61	0.00%
34	UNITED AMERICAN INSURANCE COMPANY	92916	\$526,547	720	0.00%
35	WILCAC LIFE INSURANCE COMPANY	62413	\$268,346	7	0.00%
36	TRUSTMARK INSURANCE COMPANY	61425	\$138,454	21	0.00%
37	AMERICAN NATIONAL LIFE INS. CO. OF TEXAS	71773	\$104,189	6	0.00%
38	PRUDENTIAL INSURANCE COMPANY OF AMERICA (THE)	68241	\$96,672	225	0.00%

39 DELAWARE AMERICAN LIFE INSURANCE COMPANY	62634	\$96,391	19	0.00%
40 AMERICAN NATIONAL INSURANCE COMPANY	60739	\$85,292	19	0.00%
41 BCS INSURANCE COMPANY	38245	\$66,985	2	0.00%
42 THRIVENT FINANCIAL FOR LUTHERANS	56014	\$61,617	4	0.00%
43 AMERICAN GENERAL LIFE INSURANCE COMPANY	60488	\$49,081	220	0.00%
44 RESERVE NATIONAL INSURANCE COMPANY	68462	\$40,729	12	0.00%
45 PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY	67784	\$39,678	40	0.00%
46 MUTUAL OF OMAHA INSURANCE COMPANY	71412	\$25,126	69	0.00%
47 GLOBE LIFE AND ACCIDENT INSURANCE COMPANY	91472	\$24,801	10	0.00%
48 AMERICAN REPUBLIC INSURANCE COMPANY	60836	\$22,901	4	0.00%
49 NEW ERA LIFE INSURANCE COMPANY	78743	\$20,535	12	0.00%
50 WASHINGTON NATIONAL INSURANCE COMPANY	70319	\$18,493	3	0.00%
51 GUARDIAN LIFE INSURANCE COMPANY OF AMERICA	64246	\$18,335	21	0.00%
52 CONTINENTAL GENERAL INSURANCE COMPANY	71404	\$16,952	39	0.00%
53 UNITED OF OMAHA LIFE INSURANCE COMPANY	69868	\$14,684	2	0.00%
54 NEW YORK LIFE INSURANCE COMPANY	66915	\$9,468	8	0.00%
55 TRANSAMERICA LIFE INSURANCE COMPANY	86231	\$7,571	43	0.00%
56 NATIONAL BENEFIT LIFE INSURANCE COMPANY	61409	\$6,992	20	0.00%
57 MONY LIFE INSURANCE COMPANY	66370	\$6,562	7	0.00%
58 THE CINCINNATI LIFE INSURANCE COMPANY	76236	\$3,932	7	0.00%
59 CENTRE LIFE INSURANCE COMPANY	80896	\$3,674	33	0.00%
60 UNIFIED LIFE INSURANCE COMPANY	11121	\$3,324	11	0.00%
61 STANDARD LIFE AND ACCIDENT INSURANCE COMPANY	86355	\$2,278	7	0.00%
62 PRINCIPAL LIFE INSURANCE COMPANY	61271	\$1,654	1	0.00%
63 LOYAL AMERICAN LIFE INSURANCE COMPANY	65722	\$1,625	64	0.00%
64 WILTON REASSURANCE LIFE COMPANY OF NEW YORK	60704	\$1,576	4	0.00%
65 STATE LIFE INSURANCE COMPANY	69116	\$1,468	1	0.00%
66 KANSAS CITY LIFE INSURANCE COMPANY	65129	\$1,286	1	0.00%
67 UNION FIDELITY LIFE INSURANCE COMPANY	62596	\$1,074	2	0.00%
68 TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY	70688	\$973	1	0.00%
69 SECURITY MUTUAL LIFE INSURANCE COMPANY OF NEW YORK	68772	\$426	2	0.00%
70 PRIMERICA LIFE INSURANCE COMPANY	65919	\$360	1	0.00%
71 PAN-AMERICAN LIFE INSURANCE COMPANY	67539	\$345	1	0.00%
72 CONTINENTAL CASUALTY COMPANY	20443	\$296	1	0.00%
73 ASSURITY LIFE INSURANCE COMPANY	71439	\$205	1	0.00%

***CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment  
List of Companies and all Health Business***

<b>21ST CENTURY CENTENNIAL INSURANCE COMPANY</b> <b>NAIC Company Code 34789</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$5	\$60	\$0	0	0	0	0
Limited Benefit	\$228	\$59	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$233</b>	<b>\$119</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

<b>21ST CENTURY PREMIER INSURANCE COMPANY</b> <b>NAIC Company Code 20796</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$404	\$108	\$0	0	6	0	6
Limited Benefit	\$368	\$97	\$0	0	2	0	2
Medicare Supplement	\$421	\$-3,811	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,193</b>	<b>\$-3,606</b>	<b>\$0</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>8</b>

<b>4 EVER LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 80985</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$8,282,350	\$4,270,057	\$0	125	999	216	1,215
ACA Off Exchange 51-100 Member Groups	\$4,347,670	\$3,802,543	\$0	56	561	245	806
Disability Income	\$120,073	\$12,111	\$0	40	783	0	783
Other	\$195,691	\$53,646	\$0	43	43	0	43
<b>TOTAL</b>	<b>\$12,945,784</b>	<b>\$8,138,357</b>	<b>\$0</b>	<b>264</b>	<b>2,386</b>	<b>461</b>	<b>2,847</b>

***CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment  
List of Companies and all Health Business***

<b>5 STAR LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 77879</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$54,676	\$50,450	\$41,649	5	249	0	249
Limited Benefit	\$499,094	\$132,928	\$384,458	5	559	4	563
<b>TOTAL</b>	<b>\$553,770</b>	<b>\$183,378</b>	<b>\$426,107</b>	<b>10</b>	<b>808</b>	<b>4</b>	<b>812</b>

<b>AAA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 71854</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$8,724,220	\$4,719,483	\$1,040,567	2	42,927	34,356	77,283
Limited Benefit	\$85,312	\$55,206	\$-5,087	0	463	0	463
<b>TOTAL</b>	<b>\$8,809,532</b>	<b>\$4,774,689</b>	<b>\$1,035,480</b>	<b>2</b>	<b>43,390</b>	<b>34,356</b>	<b>77,746</b>

<b>ACCENDO INSURANCE COMPANY</b> <b>NAIC Company Code 63444</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$3,366,779	\$2,345,011	\$1,016,551	0	2,627	0	2,627
<b>TOTAL</b>	<b>\$3,366,779</b>	<b>\$2,345,011</b>	<b>\$1,016,551</b>	<b>0</b>	<b>2,627</b>	<b>0</b>	<b>2,627</b>



***CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment  
List of Companies and all Health Business***

<b>ACE AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 22667</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,609,203	\$2,890,632	\$505,136	439	251,679	110,739	362,418
Limited Benefit	\$1,406,176	\$324,317	\$1	2	10	15	25
Other	\$9,478	\$101,727	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$8,024,857</b>	<b>\$3,316,676</b>	<b>\$505,137</b>	<b>441</b>	<b>251,689</b>	<b>110,754</b>	<b>362,443</b>

<b>ACE PROPERTY AND CASUALTY INSURANCE COMPANY</b> <b>NAIC Company Code 20699</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,431,604	\$379,259	\$0	1	36,964	0	36,964
<b>TOTAL</b>	<b>\$1,431,604</b>	<b>\$379,259</b>	<b>\$0</b>	<b>1</b>	<b>36,964</b>	<b>0</b>	<b>36,964</b>

<b>AEGIS SECURITY INSURANCE COMPANY</b> <b>NAIC Company Code 33898</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$319,318	\$46,635	\$319,318	464	29,854	0	29,854
<b>TOTAL</b>	<b>\$319,318</b>	<b>\$46,635</b>	<b>\$319,318</b>	<b>464</b>	<b>29,854</b>	<b>0</b>	<b>29,854</b>

***CY 2022 Accident and Health Report of Gross Annual Premium and Enrollment  
List of Companies and all Health Business***

<b>AETNA BETTER HEALTH OF FLORIDA INC. NAIC Company Code 95114</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$-11,298	\$1,496,618	\$0	0	0	0	0
Transitional (In-State and Out-of-State) Self-Employed or Sole Proprietor (FS 627.6699)	\$0	\$-37,600	\$0	0	0	0	0
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$0	\$-426,015	\$0	0	0	0	0
Misc.	\$978,846,002	\$824,819,472	\$0	0	255,400	0	255,400
<b>TOTAL</b>	<b>\$978,834,704</b>	<b>\$825,852,475</b>	<b>\$0</b>	<b>0</b>	<b>255,400</b>	<b>0</b>	<b>255,400</b>

<b>AETNA HEALTH AND LIFE INSURANCE COMPANY NAIC Company Code 78700</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$6,655,886	\$6,861,780	\$0	1	3,572	0	3,572
<b>TOTAL</b>	<b>\$6,655,886</b>	<b>\$6,861,780</b>	<b>\$0</b>	<b>1</b>	<b>3,572</b>	<b>0</b>	<b>3,572</b>

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<b>AETNA HEALTH INC.</b> <b>NAIC Company Code 95088</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Self-Employed or Sole Proprietor (FS 627.6699)	\$1,282,922	\$978,305	\$0	76	76	48	124
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$13,571,685	\$10,140,884	\$0	223	687	366	1,053
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$250,332,813	\$197,565,813	\$37,549,922	55	16,353	13,296	29,649
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$-8,119	\$-34,228	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$5,128,017	\$4,047,095	\$769,202	1	318	258	576
Medicare Advantage (Medicare+Choice)	\$1,221,936,146	\$937,245,511	\$274,935,633	32	68,929	0	68,929
<b>TOTAL</b>	<b>\$1,492,243,464</b>	<b>\$1,149,943,380</b>	<b>\$313,254,757</b>	<b>387</b>	<b>86,363</b>	<b>13,968</b>	<b>100,331</b>

<b>AETNA HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 72052</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$2,162,137	\$2,662,069	\$0	0	2,192	0	2,192
<b>TOTAL</b>	<b>\$2,162,137</b>	<b>\$2,662,069</b>	<b>\$0</b>	<b>0</b>	<b>2,192</b>	<b>0</b>	<b>2,192</b>

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<b>AETNA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60054</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Self-Employed or Sole Proprietor (FS 627.6699)	\$2,622,867	\$2,179,060	\$368,458	185	185	177	362
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$3,848,667	\$3,975,386	\$371,700	84	283	200	483
ACA Off Exchange 51-100 Member Groups	\$62,668,072	\$57,488,341	\$8,595,404	416	8,649	3,526	12,175
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$880,751,214	\$774,451,674	\$155,072,096	2,046	80,108	51,180	131,288
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$-30,771	\$0	0	0	0	0
Dental	\$101,389,900	\$68,721,356	\$0	2,541	281,478	119,545	401,023
Vision	\$16,319,662	\$8,016,517	\$0	1,446	270,511	121,434	391,945
Disability Income	\$0	\$4,594,837	\$0	0	0	0	0
Excess/Stop Loss	\$153,086,133	\$127,850,469	\$0	3,052	112,003	87,694	199,697
Long Term Care-Comprehensive	\$2,738,830	\$15,139,645	\$0	0	1,679	693	2,372
Medicare Supplement	\$4,267,147	\$3,330,013	\$0	1	1,155	0	1,155
Medicare Advantage (Medicare+Choice)	\$2,414,196,899	\$2,049,757,058	\$0	121,627	121,627	0	121,627
Other	\$135,305,717	\$8,920,290	\$0	22	10,405	226	10,631
Misc.	\$67,885,125	\$55,034,515	\$0	6	3,445	2,029	5,474
<b>TOTAL</b>	<b>\$3,845,080,233</b>	<b>\$3,179,428,390</b>	<b>\$164,407,658</b>	<b>131,426</b>	<b>891,528</b>	<b>386,704</b>	<b>1,278,232</b>

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**AFLAC BENEFITS SOLUTIONS, INC.**  
**NAIC Company Code**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$140,090	\$90,661	\$0	396	9,604	6,841	16,445
Vision	\$24,896	\$4,117	\$0	304	4,991	3,759	8,750
Medicare Advantage (Medicare+Choice)	\$108,113,963	\$111,452,638	\$0	0	0	0	0
Other	\$9,806	\$0	\$0	0	0	0	0
Misc.	\$2,667,286	\$2,485,854	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$110,956,041</b>	<b>\$114,033,270</b>	<b>\$0</b>	<b>700</b>	<b>14,595</b>	<b>10,600</b>	<b>25,195</b>

**AHF MCO OF FLORIDA, INC.**  
**NAIC Company Code 12973**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$92,971,192	\$87,171,436	\$0	0	1,331	0	1,331
Misc.	\$112,209	\$1,025,529	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$93,083,401</b>	<b>\$88,196,965</b>	<b>\$0</b>	<b>0</b>	<b>1,331</b>	<b>0</b>	<b>1,331</b>

**ALIGN SENIOR CARE FLORIDA, INC.**  
**NAIC Company Code 16778**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$5,134,431	\$4,745,102	\$0	0	133	0	133
<b>TOTAL</b>	<b>\$5,134,431</b>	<b>\$4,745,102</b>	<b>\$0</b>	<b>0</b>	<b>133</b>	<b>0</b>	<b>133</b>

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<b>ALL SAVERS INSURANCE COMPANY</b> <b>NAIC Company Code 82406</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$553,534	\$158,323	\$0	14	44	19	63
ACA Off Exchange 51-100 Member Groups	\$683,073	\$493,818	\$683,073	2	118	22	140
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$3,844,247	\$3,046,777	\$3,694,247	8	1,020	413	1,433
Excess/Stop Loss	\$233,468,005	\$262,196,126	\$85,815,752	3,535	60,534	32,817	93,351
<b>TOTAL</b>	<b>\$238,548,859</b>	<b>\$265,895,044</b>	<b>\$90,193,072</b>	<b>3,559</b>	<b>61,716</b>	<b>33,271</b>	<b>94,987</b>

<b>ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA</b> <b>NAIC Company Code 90611</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$145	\$0	\$0	0	0	0	0
Limited Benefit	\$7,869	\$3,400	\$0	3	33	0	33
Long Term Care-Comprehensive	\$11,127,110	\$13,371,029	\$0	2	6,428	0	6,428
Medicare Supplement	\$2,174	\$371	\$0	2	2	0	2
<b>TOTAL</b>	<b>\$11,137,298</b>	<b>\$13,374,800</b>	<b>\$0</b>	<b>7</b>	<b>6,463</b>	<b>0</b>	<b>6,463</b>

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**AMALGAMATED LIFE INSURANCE COMPANY**  
**NAIC Company Code 60216**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$24,164	\$957	\$2,277	0	118	0	118
Disability Income	\$171,276	\$194,649	\$47,275	0	194	0	194
Excess/Stop Loss	\$1,905,835	\$2,355,000	\$0	2	2,069	0	2,069
Limited Benefit	\$19,927	\$123	\$1,149	0	81	0	81
<b>TOTAL</b>	<b>\$2,121,202</b>	<b>\$2,550,729</b>	<b>\$50,701</b>	<b>2</b>	<b>2,462</b>	<b>0</b>	<b>2,462</b>

**AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA**  
**NAIC Company Code 10111**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$12,071	\$-871	\$0	1	101	0	101
Disability Income	\$46	\$-62	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$12,117</b>	<b>\$-933</b>	<b>\$0</b>	<b>2</b>	<b>102</b>	<b>0</b>	<b>102</b>

**AMERICAN BANKERS LIFE ASSURANCE COMPANY OF FLORIDA**  
**NAIC Company Code 60275**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$36,653	\$-30,211	\$0	1	3,419	185	3,604
Disability Income	\$4,798	\$-171	\$0	1	9	0	9
<b>TOTAL</b>	<b>\$41,451</b>	<b>\$-30,382</b>	<b>\$0</b>	<b>2</b>	<b>3,428</b>	<b>185</b>	<b>3,613</b>

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AMERICAN BENEFIT LIFE INSURANCE COMPANY NAIC Company Code 66001							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$78	\$0	\$0	0	0	0	0
Medicare Supplement	\$25,450	\$22,497	\$16,839	0	32	0	32
<b>TOTAL</b>	<b>\$25,528</b>	<b>\$22,497</b>	<b>\$16,839</b>	<b>0</b>	<b>32</b>	<b>0</b>	<b>32</b>

AMERICAN CASUALTY COMPANY OF READING, PENNSYLVANIA NAIC Company Code 20427							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$88	\$0	\$0	0	3	0	3
Limited Benefit	\$76	\$-1	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$164</b>	<b>\$-1</b>	<b>\$0</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>10</b>

AMERICAN CONTINENTAL INSURANCE COMPANY NAIC Company Code 12321							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$3,568,845	\$3,551,589	\$406	0	1,399	0	1,399
<b>TOTAL</b>	<b>\$3,568,845</b>	<b>\$3,551,589</b>	<b>\$406</b>	<b>0</b>	<b>1,399</b>	<b>0</b>	<b>1,399</b>



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<b>AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS</b> <b>NAIC Company Code 60380</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$67,708,137	\$23,965,160	\$11,897,888	0	184,069	176,538	360,607
Dental	\$9,645,365	\$4,199,454	\$2,565,350	457	19,008	11,495	30,503
Vision	\$2,437,624	\$721,907	\$649,622	379	12,758	8,677	21,435
Disability Income	\$60,797,924	\$26,622,481	\$14,872,887	0	100,185	0	100,185
Limited Benefit	\$153,157,160	\$69,191,749	\$20,729,764	0	296,923	271,076	567,999
Long Term Care-Comprehensive	\$1,194,020	\$1,022,946	\$0	0	932	123	1,055
Medicare Supplement	\$563,071	\$555,158	\$0	0	233	0	233
<b>TOTAL</b>	<b>\$295,503,301</b>	<b>\$126,278,855</b>	<b>\$50,715,511</b>	<b>836</b>	<b>614,108</b>	<b>467,909</b>	<b>1,082,017</b>

<b>AMERICAN FIDELITY ASSURANCE COMPANY</b> <b>NAIC Company Code 60410</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,344,116	\$1,602,974	\$355,949	5	6,664	6,033	12,697
Disability Income	\$7,226,191	\$4,240,722	\$834,774	66	9,920	203	10,123
Excess/Stop Loss	\$783,735	\$133,220	\$0	3	413	166	579
Limited Benefit	\$6,293,503	\$3,510,937	\$725,509	33	14,874	8,966	23,840
Long Term Care-Comprehensive	\$391,748	\$162,907	\$0	1	193	44	237
<b>TOTAL</b>	<b>\$17,039,293</b>	<b>\$9,650,760</b>	<b>\$1,916,232</b>	<b>108</b>	<b>32,064</b>	<b>15,412</b>	<b>47,476</b>

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<b>AMERICAN GENERAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60488</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)</b>	\$49,081	\$-36,804	\$0	0	156	64	220
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$1,780,573	\$1,653,316	\$0	5	18,555	3,062	21,617
<b>Disability Income</b>	\$347,015	\$1,316,890	\$0	1	707	38	745
<b>Limited Benefit</b>	\$1,780,159	\$1,339,570	\$0	5	10,218	3,112	13,330
<b>Long Term Care-Comprehensive</b>	\$663,924	\$1,288,016	\$0	1	206	42	248
<b>Medicare Supplement</b>	\$20,957	\$33,728	\$0	0	22	0	22
<b>TOTAL</b>	<b>\$4,641,709</b>	<b>\$5,594,716</b>	<b>\$0</b>	<b>12</b>	<b>29,864</b>	<b>6,318</b>	<b>36,182</b>

<b>AMERICAN HEALTH AND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60518</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$375,863	\$145,679	\$0	3	2,290	1,620	3,910
<b>Limited Benefit</b>	\$6,717	\$-3,910	\$0	1	18	3	21
<b>Long Term Care-Comprehensive</b>	\$-12,148	\$70,018	\$0	1	3	0	3
<b>TOTAL</b>	<b>\$370,432</b>	<b>\$211,787</b>	<b>\$0</b>	<b>5</b>	<b>2,311</b>	<b>1,623</b>	<b>3,934</b>

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<b>AMERICAN HERITAGE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60534</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$30,464,501	\$18,545,498	\$5,703,329	1,459	133,586	131,537	265,123
Dental	\$-1,742	\$986	\$0	0	0	0	0
Disability Income	\$11,232,752	\$2,361,228	\$1,429,858	592	10,761	0	10,761
Limited Benefit	\$49,328,512	\$37,788,734	\$10,061,105	1,883	186,859	181,903	368,762
Long Term Care-Comprehensive	\$152,310	\$1,162,156	\$0	0	105	0	105
<b>TOTAL</b>	<b>\$91,176,334</b>	<b>\$59,858,602</b>	<b>\$17,194,291</b>	<b>3,934</b>	<b>331,311</b>	<b>313,440</b>	<b>644,751</b>

<b>AMERICAN HOME ASSURANCE COMPANY</b> <b>NAIC Company Code 19380</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$40,633	\$558	\$3,925	0	61	0	61
<b>TOTAL</b>	<b>\$40,633</b>	<b>\$558</b>	<b>\$3,925</b>	<b>0</b>	<b>61</b>	<b>0</b>	<b>61</b>

<b>AMERICAN HOME LIFE INSURANCE COMPANY (THE)</b> <b>NAIC Company Code 60542</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$413	\$0	\$50	0	0	0	0
<b>TOTAL</b>	<b>\$413</b>	<b>\$0</b>	<b>\$50</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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<b>AMERICAN INCOME LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60577</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,175,543	\$3,728,816	\$1,103,698	198	56,436	298,854	355,290
Disability Income	\$716	\$-40	\$0	0	2	0	2
Limited Benefit	\$2,781,134	\$1,431,911	\$526,000	0	25,823	35,602	61,425
Medicare Supplement	\$5,284	\$16,669	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$8,962,677</b>	<b>\$5,177,356</b>	<b>\$1,629,698</b>	<b>198</b>	<b>82,264</b>	<b>334,456</b>	<b>416,720</b>

<b>AMERICAN MODERN HOME INSURANCE COMPANY</b> <b>NAIC Company Code 23469</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$0	\$26,793	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$26,793</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>AMERICAN NATIONAL INSURANCE COMPANY</b> <b>NAIC Company Code 60739</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$85,292	\$359,421	\$0	0	15	4	19
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,284	\$13	\$0	0	66	5	71
Disability Income	\$5,065	\$83,491	\$0	0	9	0	9
Limited Benefit	\$36,259	\$521,186	\$0	0	108	38	146
<b>TOTAL</b>	<b>\$129,900</b>	<b>\$964,111</b>	<b>\$0</b>	<b>0</b>	<b>198</b>	<b>47</b>	<b>245</b>

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<b>AMERICAN NATIONAL LIFE INS. CO. OF TEXAS</b> <b>NAIC Company Code 71773</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$56,134	\$7,141	\$0	0	4	0	4
Grandfathered (In-State and Out-of-State) Conversion	\$48,055	\$236	\$0	0	2	0	2
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$135	\$49	\$0	0	1	0	1
Dental	\$2,689	\$316	\$0	1	1	0	1
Medicare Supplement	\$146,745	\$114,062	\$0	1	46	0	46
<b>TOTAL</b>	<b>\$253,758</b>	<b>\$121,804</b>	<b>\$0</b>	<b>2</b>	<b>54</b>	<b>0</b>	<b>54</b>

<b>AMERICAN PUBLIC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60801</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$216,017	\$67,862	\$140,935	0	1,662	2,569	4,231
Dental	\$289,022	\$107,202	\$65,645	0	517	773	1,290
Disability Income	\$538,767	\$143,284	\$380,460	0	985	1,001	1,986
Limited Benefit	\$26,325,771	\$12,135,142	\$10,028,957	0	26,806	40,052	66,858
<b>TOTAL</b>	<b>\$27,369,577</b>	<b>\$12,453,490</b>	<b>\$10,615,997</b>	<b>0</b>	<b>29,970</b>	<b>44,395</b>	<b>74,365</b>

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<b>AMERICAN REPUBLIC INSURANCE COMPANY</b> <b>NAIC Company Code 60836</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$22,901	\$12,648	\$0	0	4	0	4
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$46	\$0	\$0	0	3	0	3
Dental	\$21,445	\$21,964	\$0	0	23	0	23
Limited Benefit	\$26,052	\$14,201	\$0	0	106	21	127
Long Term Care-Comprehensive	\$37,950	\$30,208	\$0	1	23	0	23
Medicare Supplement	\$576,767	\$378,951	\$0	1	136	1	137
<b>TOTAL</b>	<b>\$685,161</b>	<b>\$457,972</b>	<b>\$0</b>	<b>2</b>	<b>295</b>	<b>22</b>	<b>317</b>

<b>AMERICAN RETIREMENT LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 88366</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$15,952,037	\$10,468,483	\$266,210	0	5,020	0	5,020
<b>TOTAL</b>	<b>\$15,952,037</b>	<b>\$10,468,483</b>	<b>\$266,210</b>	<b>0</b>	<b>5,020</b>	<b>0</b>	<b>5,020</b>

<b>AMERICAN UNITED LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60895</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$62,557	\$11,248	\$13,151	91	4,821	844	5,665
Disability Income	\$1,905,755	\$1,157,397	\$258,794	129	6,004	0	6,004
<b>TOTAL</b>	<b>\$1,968,312</b>	<b>\$1,168,645</b>	<b>\$271,945</b>	<b>220</b>	<b>10,825</b>	<b>844</b>	<b>11,669</b>

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**AMERICO FINANCIAL LIFE AND ANNUITY INSURANCE COMPANY**  
**NAIC Company Code 61999**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$82,343	\$0	\$0	0	33	0	33
Medicare Supplement	\$315,828	\$209,425	\$0	0	78	0	78
<b>TOTAL</b>	<b>\$398,171</b>	<b>\$209,425</b>	<b>\$0</b>	<b>0</b>	<b>111</b>	<b>0</b>	<b>111</b>

**AMERIHEALTH CARITAS FLORIDA, INC.**  
**NAIC Company Code 14378**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Misc.	\$396,300,311	\$319,453,758	\$0	0	126,382	0	126,382
<b>TOTAL</b>	<b>\$396,300,311</b>	<b>\$319,453,758</b>	<b>\$0</b>	<b>0</b>	<b>126,382</b>	<b>0</b>	<b>126,382</b>

**AMERITAS LIFE INSURANCE CORP.**  
**NAIC Company Code 61301**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$66,137,892	\$41,462,154	\$7,840,314	794	89,471	134,207	223,678
Vision	\$5,281,702	\$3,013,743	\$1,089,277	494	52,960	79,440	132,400
Disability Income	\$5,580,548	\$3,972,570	\$488,239	0	1,663	0	1,663
<b>TOTAL</b>	<b>\$77,000,142</b>	<b>\$48,448,467</b>	<b>\$9,417,830</b>	<b>1,288</b>	<b>144,094</b>	<b>213,647</b>	<b>357,741</b>

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<b>AMEX ASSURANCE COMPANY</b> <b>NAIC Company Code 27928</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,747,984	\$373,768	\$3,742,837	0	166,075	309,381	475,456
Other	\$1,728,029	\$365,971	\$1,720,663	0	39,984	10,862	50,846
<b>TOTAL</b>	<b>\$5,476,013</b>	<b>\$739,739</b>	<b>\$5,463,500</b>	<b>0</b>	<b>206,059</b>	<b>320,243</b>	<b>526,302</b>

<b>AMFIRST INSURANCE COMPANY</b> <b>NAIC Company Code 60250</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$29,412	\$7,800	\$6,731	5	48	39	87
Disability Income	\$0	\$68	\$0	0	0	0	0
Limited Benefit	\$2,131,330	\$772,627	\$1,021,452	72	1,874	1,069	2,943
<b>TOTAL</b>	<b>\$2,160,742</b>	<b>\$780,495</b>	<b>\$1,028,183</b>	<b>77</b>	<b>1,922</b>	<b>1,108</b>	<b>3,030</b>

<b>ANTHEM LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61069</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$12,882,710	\$4,165,104	\$1,772,926	7	21,733	0	21,733
<b>TOTAL</b>	<b>\$12,882,710</b>	<b>\$4,165,104</b>	<b>\$1,772,926</b>	<b>7</b>	<b>21,733</b>	<b>0</b>	<b>21,733</b>



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<b>ARCH INSURANCE COMPANY</b> <b>NAIC Company Code 11150</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$41,624,350	\$11,437,270	\$0	0	86,956	0	86,956
<b>TOTAL</b>	<b>\$41,624,350</b>	<b>\$11,437,270</b>	<b>\$0</b>	<b>0</b>	<b>86,956</b>	<b>0</b>	<b>86,956</b>

<b>ASPEN AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 43460</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) Individually Underwritten	\$-173,513	\$2,019,640	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$-173,513</b>	<b>\$2,019,640</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>ASSURED LIFE ASSOCIATION</b> <b>NAIC Company Code 56499</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$282,308	\$140,423	\$0	0	60	0	60
<b>TOTAL</b>	<b>\$282,308</b>	<b>\$140,423</b>	<b>\$0</b>	<b>0</b>	<b>60</b>	<b>0</b>	<b>60</b>

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<b>ASSURITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 71439</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Grandfathered (In-State and Out-of-State) Individually Underwritten</b>	\$205	\$-12	\$0	0	1	0	1
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$369,587	\$-402,756	\$68,656	0	2,324	278	2,602
<b>Disability Income</b>	\$1,966,332	\$1,858,256	\$207,152	0	1,820	919	2,739
<b>Limited Benefit</b>	\$578,267	\$218,528	\$114,552	0	1,313	588	1,901
<b>Long Term Care-Comprehensive</b>	\$7,712	\$90,383	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$2,922,103</b>	<b>\$1,764,399</b>	<b>\$390,360</b>	<b>0</b>	<b>5,458</b>	<b>1,785</b>	<b>7,243</b>

<b>ATHENE ANNUITY &amp; LIFE ASSURANCE COMPANY</b> <b>NAIC Company Code 61492</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$104,908	\$119,340	\$0	0	34	719	753
<b>Disability Income</b>	\$59,365	\$0	\$0	0	90	2	92
<b>Limited Benefit</b>	\$13,267	\$3,521	\$0	0	176	0	176
<b>TOTAL</b>	<b>\$177,540</b>	<b>\$122,861</b>	<b>\$0</b>	<b>0</b>	<b>300</b>	<b>721</b>	<b>1,021</b>

<b>ATHENE ANNUITY &amp; LIFE ASSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 68039</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Disability Income</b>	\$5,899	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$5,899</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

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<b>ATHENE ANNUITY AND LIFE COMPANY</b> <b>NAIC Company Code 61689</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$131,887	\$276,804	\$0	0	141	0	141
<b>TOTAL</b>	<b>\$131,887</b>	<b>\$276,804</b>	<b>\$0</b>	<b>0</b>	<b>141</b>	<b>0</b>	<b>141</b>

<b>ATHENE LIFE INSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 63932</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$2,657	\$119,521	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$2,657</b>	<b>\$119,521</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>ATLANTA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61093</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,513	\$5,285	\$0	1	0	0	0
<b>TOTAL</b>	<b>\$2,513</b>	<b>\$5,285</b>	<b>\$0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>ATLANTIC AMBULANCE SERVICES ACQUISITION, INC.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$287,207	\$110,437	\$0	49	15,596	0	15,596
<b>TOTAL</b>	<b>\$287,207</b>	<b>\$110,437</b>	<b>\$0</b>	<b>49</b>	<b>15,596</b>	<b>0</b>	<b>15,596</b>

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<b>ATLANTIC COAST LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61115</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$3,376,778	\$2,825,899	\$0	2	329	0	329
Medicare Supplement	\$42,320	\$24,688	\$42,320	0	20	0	20
<b>TOTAL</b>	<b>\$3,419,098</b>	<b>\$2,850,587</b>	<b>\$42,320</b>	<b>2</b>	<b>349</b>	<b>0</b>	<b>349</b>

<b>ATLANTIC SPECIALTY INSURANCE COMPANY</b> <b>NAIC Company Code 27154</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$848,933	\$165,224	\$0	3	4,788	0	4,788
<b>TOTAL</b>	<b>\$848,933</b>	<b>\$165,224</b>	<b>\$0</b>	<b>3</b>	<b>4,788</b>	<b>0</b>	<b>4,788</b>

<b>AUTO-OWNERS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61190</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$108,767	\$-22,800	\$0	0	168	0	168
Long Term Care-Comprehensive	\$100,902	\$20,556	\$0	0	57	0	57
Medicare Supplement	\$1,838	\$2,160	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$211,507</b>	<b>\$-84</b>	<b>\$0</b>	<b>0</b>	<b>227</b>	<b>0</b>	<b>227</b>

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<b>AVMED, INC.</b> <b>NAIC Company Code 95263</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$216,432,411	\$232,373,699	\$134,800,628	0	29,562	12,446	42,008
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$63,720,378	\$63,263,306	\$6,896,190	0	5,343	4,401	9,744
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$35,516,064	\$34,464,206	\$1,782,081	786	3,385	1,697	5,082
ACA Off Exchange 51-100 Member Groups	\$23,570,923	\$24,553,757	\$4,429,134	135	6,217	2,545	8,762
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$105,114,874	\$94,630,885	\$3,947,209	25	6,359	5,059	11,418
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$11,571,734	\$6,833,461	\$0	257	814	466	1,280
Administrative Services Only (ASO)	\$50,131,673	\$0	\$0	5	65,995	60,732	126,727
Excess/Stop Loss	\$2,025,339	\$0	\$0	1	1,661	906	2,567
Medicare Advantage (Medicare+Choice)	\$295,911,901	\$321,446,305	\$0	1	19,994	0	19,994
Misc.	\$13,679,567	\$14,125,267	\$0	1	936	690	1,626
<b>TOTAL</b>	<b>\$817,674,865</b>	<b>\$791,690,886</b>	<b>\$151,855,242</b>	<b>1,211</b>	<b>140,266</b>	<b>88,942</b>	<b>229,208</b>

<b>AXIS INSURANCE COMPANY</b> <b>NAIC Company Code 37273</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$840,085	\$893,994	\$308,481	660	121,341	21,413	142,754
Dental	\$19,718	\$7,870	\$7,241	4	56	10	66
Vision	\$2,371	\$1,530	\$870	3	41	7	48
Disability Income	\$377	\$49	\$139	1	2	0	2

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<b>AXIS INSURANCE COMPANY</b> <b>NAIC Company Code 37273</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$682,132	\$638,953	\$250,479	63	2,978	525	3,503
<b>TOTAL</b>	<b>\$1,544,683</b>	<b>\$1,542,396</b>	<b>\$567,210</b>	<b>731</b>	<b>124,418</b>	<b>21,955</b>	<b>146,373</b>

<b>BALTIMORE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61212</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$618	\$0	\$0	0	5	0	5
Disability Income	\$336	\$89,300	\$0	0	0	0	0
Limited Benefit	\$14,599	\$0	\$0	6	67	40	107
<b>TOTAL</b>	<b>\$15,553</b>	<b>\$89,300</b>	<b>\$0</b>	<b>6</b>	<b>72</b>	<b>40</b>	<b>112</b>

<b>BANKERS FIDELITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61239</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$13,887	\$-421	\$0	0	114	0	114
Disability Income	\$372,487	\$52,228	\$0	0	1,289	0	1,289
Limited Benefit	\$76,794	\$23,645	\$0	0	373	0	373
Medicare Supplement	\$70,656	\$56,949	\$0	0	23	0	23
<b>TOTAL</b>	<b>\$533,824</b>	<b>\$132,401</b>	<b>\$0</b>	<b>0</b>	<b>1,799</b>	<b>0</b>	<b>1,799</b>

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<b>BANKERS LIFE AND CASUALTY COMPANY</b> <b>NAIC Company Code 61263</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$21,430	\$-1,793	\$391	0	153	0	153
Disability Income	\$131,614	\$-25,799	\$0	0	188	0	188
Limited Benefit	\$2,953,082	\$632,004	\$210,389	0	5,041	182	5,223
Long Term Care-Comprehensive	\$11,114,771	\$9,282,496	\$515,672	0	6,064	565	6,629
Long Term Care-Facility Only	\$22,694,139	\$24,859,268	\$1,052,900	0	12,381	1,154	13,535
Long Term Care-Non-Facility Only	\$5,756,360	\$12,506,354	\$0	0	3,764	552	4,316
Short Term Care	\$708,310	\$556,401	\$3,611	0	611	27	638
Medicare Supplement	\$25,402,721	\$22,139,920	\$0	0	7,216	49	7,265
<b>TOTAL</b>	<b>\$68,782,427</b>	<b>\$69,948,851</b>	<b>\$1,782,963</b>	<b>0</b>	<b>35,418</b>	<b>2,529</b>	<b>37,947</b>

<b>BANNER LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 94250</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$688,437	\$0	\$127,998	0	3,158	0	3,158
<b>TOTAL</b>	<b>\$688,437</b>	<b>\$0</b>	<b>\$127,998</b>	<b>0</b>	<b>3,158</b>	<b>0</b>	<b>3,158</b>

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<b>BAYCARE SELECT HEALTH PLANS, INC. NAIC Company Code 16282</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$125,162,297	\$133,503,276	\$0	0	13,317	0	13,317
<b>TOTAL</b>	<b>\$125,162,297</b>	<b>\$133,503,276</b>	<b>\$0</b>	<b>0</b>	<b>13,317</b>	<b>0</b>	<b>13,317</b>

<b>BCS INSURANCE COMPANY NAIC Company Code 38245</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$66,985	\$278,747	\$0	12	2	0	2
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$953,170	\$436,956	\$0	6,289	14	12,232	12,246
Dental	\$358,709	\$36,799	\$0	123	1,538	302	1,840
Vision	\$113,574	\$-1,093	\$0	111	1,041	222	1,263
Excess/Stop Loss	\$922,798	\$922,643	\$0	10	782	848	1,630
Limited Benefit	\$1,443,128	\$394,967	\$0	133	1,699	342	2,041
Long Term Care-Comprehensive	\$5,578	\$-596	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$3,863,942</b>	<b>\$2,068,423</b>	<b>\$0</b>	<b>6,678</b>	<b>5,076</b>	<b>13,946</b>	<b>19,022</b>

<b>BEAZLEY INSURANCE COMPANY, INC. NAIC Company Code 37540</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$585,361	\$155,027	\$157,004	24	641	37	678
<b>TOTAL</b>	<b>\$585,361</b>	<b>\$155,027</b>	<b>\$157,004</b>	<b>24</b>	<b>641</b>	<b>37</b>	<b>678</b>



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<b>BEHEALTHY FLORIDA, INC.</b> <b>NAIC Company Code 15118</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$1,068,296	\$805,594	\$824,114	58	308	82	390
ACA Off Exchange 51-100 Member Groups	\$4,547,991	\$1,942,584	\$598,664	73	1,019	227	1,246
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$7,065,319	\$3,788,335	\$1,866,603	69	1,650	386	2,036
Medicare Advantage (Medicare+Choice)	\$-2,377	\$2,110	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$12,679,229</b>	<b>\$6,538,623</b>	<b>\$3,289,381</b>	<b>200</b>	<b>2,977</b>	<b>695</b>	<b>3,672</b>

<b>BENCHMARK INSURANCE COMPANY</b> <b>NAIC Company Code 41394</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$352,950	\$434,024	\$352,950	3	207	0	207
<b>TOTAL</b>	<b>\$352,950</b>	<b>\$434,024</b>	<b>\$352,950</b>	<b>3</b>	<b>207</b>	<b>0</b>	<b>207</b>

<b>BERKLEY LIFE AND HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 64890</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$596,146	\$34,749	\$401,512	287	178,029	0	178,029
Excess/Stop Loss	\$26,905,169	\$24,265,981	\$2,582,067	59	16,320	0	16,320
<b>TOTAL</b>	<b>\$27,501,315</b>	<b>\$24,300,730</b>	<b>\$2,983,579</b>	<b>346</b>	<b>194,349</b>	<b>0</b>	<b>194,349</b>

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<b>BERKSHIRE HATHAWAY SPECIALTY INSURANCE COMPANY</b> <b>NAIC Company Code 22276</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$-5	\$0	0	0	0	0
Excess/Stop Loss	\$13,425,986	\$15,832,407	\$6,025,223	22	18,203	19,339	37,542
<b>TOTAL</b>	<b>\$13,425,986</b>	<b>\$15,832,402</b>	<b>\$6,025,223</b>	<b>22</b>	<b>18,203</b>	<b>19,339</b>	<b>37,542</b>

<b>BERKSHIRE LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 71714</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$40,660,076	\$24,294,788	\$3,423,919	0	15,454	0	15,454
Long Term Care-Comprehensive	\$1,963,530	\$2,123,471	\$0	0	739	358	1,097
<b>TOTAL</b>	<b>\$42,623,606</b>	<b>\$26,418,259</b>	<b>\$3,423,919</b>	<b>0</b>	<b>16,193</b>	<b>358</b>	<b>16,551</b>

<b>BEST LIFE AND HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 90638</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$1,952,765	\$1,104,315	\$54,167	23	3,479	1,277	4,756
Vision	\$8,538	\$3,532	\$0	9	85	24	109
<b>TOTAL</b>	<b>\$1,961,303</b>	<b>\$1,107,847</b>	<b>\$54,167</b>	<b>32</b>	<b>3,564</b>	<b>1,301</b>	<b>4,865</b>

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<b>BLUE CROSS &amp; BLUE SHIELD OF FLORIDA, INC. NAIC Company Code 98167</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$4,142,437,747	\$3,369,790,977	\$888,103,220	0	249,095	105,245	354,340
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$948,082,633	\$702,839,808	\$125,565,765	0	54,037	30,847	84,884
ACA Off Exchange Self-Employed or Sole Proprietor (FS 627.6699)	\$681,685	\$981,962	\$50,454	26	26	25	51
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$763,643,434	\$617,913,672	\$82,146,163	11,523	64,087	41,416	105,503
ACA Off Exchange 51-100 Member Groups	\$420,065,724	\$350,733,344	\$301,145,098	1,555	36,937	21,230	58,167
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$1,178,100,032	\$975,420,776	\$106,376,238	1,449	112,406	63,432	175,838
Grandfathered (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$0	\$-63	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$141,381,776	\$105,844,279	\$0	0	10,126	7,981	18,107
Grandfathered (In-State and Out-of-State) Self-Employed or Sole Proprietor (FS 627.6699)	\$68,251	\$12,812	\$0	2	2	3	5
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$65,450,331	\$48,950,295	\$0	921	4,756	3,668	8,424
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$21,387,879	\$15,280,882	\$0	38	1,609	1,211	2,820
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$52,449,448	\$37,733,068	\$0	32	4,107	2,922	7,029
Transitional (In-State and Out-of-State) Individually Underwritten	\$269,175,933	\$222,474,242	\$0	0	24,809	21,292	46,101
Transitional (In-State and Out-of-State) Self-Employed or Sole Proprietor (FS 627.6699)	\$229,140	\$325,253	\$0	9	9	8	17
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$212,533,808	\$158,666,081	\$0	2,999	16,993	12,059	29,052

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**BLUE CROSS & BLUE SHIELD OF FLORIDA, INC.**  
**NAIC Company Code 98167**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$114,561,206	\$0	\$1,108,475	259	275,297	242,135	517,432
Vision	\$6,000,441	\$4,082,533	\$0	1,261	39,211	26,977	66,188
Excess/Stop Loss	\$115,074,689	\$76,309,387	\$0	84	104,987	73,524	178,511
Long Term Care-Comprehensive	\$11,759,760	\$9,381,790	\$0	0	4,999	0	4,999
Medicare Supplement	\$451,913,769	\$370,407,449	\$13,538,567	8	166,366	0	166,366
Medicare Advantage (Medicare+Choice)	\$930,575,500	\$921,191,655	\$165,370,852	0	93,260	0	93,260
Misc.	\$3,004,673,964	\$2,842,786,353	\$0	1	219,059	203,741	422,800
<b>TOTAL</b>	<b>\$12,850,247,150</b>	<b>\$10,831,126,555</b>	<b>\$1,683,404,832</b>	<b>20,167</b>	<b>1,482,178</b>	<b>857,716</b>	<b>2,339,894</b>

**BOSTON MUTUAL LIFE INSURANCE COMPANY**  
**NAIC Company Code 61476**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$85,088	\$4,485	\$11,908	232	881	17	898
Disability Income	\$84,916	\$280,013	\$7,178	50	213	0	213
Limited Benefit	\$239,882	\$623	\$23,638	310	892	0	892
<b>TOTAL</b>	<b>\$409,886</b>	<b>\$285,121</b>	<b>\$42,724</b>	<b>592</b>	<b>1,986</b>	<b>17</b>	<b>2,003</b>

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<b>BRIGHT HEALTH INSURANCE COMPANY OF FLORIDA</b> <b>NAIC Company Code 16501</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$1,154,725,486	\$1,001,543,994	\$648,081,557	0	195,123	66,412	261,535
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$3,284,613	\$5,564,261	\$2,594,704	0	591	225	816
Medicare Advantage (Medicare+Choice)	\$30,976,071	\$34,317,599	\$21,378,630	0	3,209	0	3,209
<b>TOTAL</b>	<b>\$1,188,986,170</b>	<b>\$1,041,425,854</b>	<b>\$672,054,891</b>	<b>0</b>	<b>198,923</b>	<b>66,637</b>	<b>265,560</b>

<b>BRIGHTHOUSE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 87726</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$161,432	\$-1,400,967	\$0	0	111	0	111
Limited Benefit	\$26,970	\$70,089	\$0	0	43	4	47
Long Term Care-Comprehensive	\$26,020,381	\$86,515,455	\$0	4	6,496	372	6,868
<b>TOTAL</b>	<b>\$26,208,783</b>	<b>\$85,184,577</b>	<b>\$0</b>	<b>4</b>	<b>6,650</b>	<b>376</b>	<b>7,026</b>

<b>CANADA LIFE ASSURANCE COMPANY (US BUSINESS OF THE)</b> <b>NAIC Company Code 80659</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,202	\$0	\$0	0	1	0	1
Disability Income	\$155,585	\$566,709	\$0	0	87	0	87
Limited Benefit	\$71,457	\$44,395	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$229,244</b>	<b>\$611,104</b>	<b>\$0</b>	<b>0</b>	<b>98</b>	<b>0</b>	<b>98</b>

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<b>CAPITAL HEALTH PLAN, INC. NAIC Company Code 95112</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$30,049,611	\$27,615,980	\$30,049,611	0	3,243	975	4,218
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$1,115,907	\$963,924	\$1,115,907	0	177	74	251
ACA Off Exchange Self-Employed or Sole Proprietor (FS 627.6699)	\$642,690	\$553,972	\$7,877	39	39	28	67
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$63,969,098	\$61,219,083	\$815,078	1,061	5,951	3,618	9,569
ACA Off Exchange 51-100 Member Groups	\$25,814,658	\$24,591,627	\$0	77	2,407	1,273	3,680
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$540,307,395	\$519,339,716	\$412,487	75	39,716	44,338	84,054
Transitional (In-State and Out-of-State) Self-Employed or Sole Proprietor (FS 627.6699)	\$242,912	\$187,807	\$0	13	13	17	30
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$10,793,241	\$9,954,499	\$0	199	888	726	1,614
Transitional (In-State and Out-of-State) Conversion	\$238,300	\$687,457	\$0	0	15	16	31
Medicare Advantage (Medicare+Choice)	\$314,495,716	\$273,680,400	\$8,568,285	0	21,344	2,279	23,623
Misc.	\$22,441,486	\$22,071,911	\$0	1	1,513	1,502	3,015
<b>TOTAL</b>	<b>\$1,010,111,014</b>	<b>\$940,866,376</b>	<b>\$40,969,245</b>	<b>1,465</b>	<b>75,306</b>	<b>54,846</b>	<b>130,152</b>

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<b>CAPITOL INDEMNITY CORPORATION</b> <b>NAIC Company Code 10472</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$74	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$74</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>CAPITOL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61581</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$675,316	\$521,802	\$108,006	0	327	0	327
<b>TOTAL</b>	<b>\$675,316</b>	<b>\$521,802</b>	<b>\$108,006</b>	<b>0</b>	<b>327</b>	<b>0</b>	<b>327</b>

<b>CARE IMPROVEMENT PLUS SOUTH CENTRAL INSURANCE COMPANY</b> <b>NAIC Company Code 12567</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$5,226,111,369	\$4,365,605,898	\$290,822,500	0	348,318	0	348,318
Misc.	\$68,816,909	\$84,708,095	\$68,816,909	0	0	0	0
<b>TOTAL</b>	<b>\$5,294,928,278</b>	<b>\$4,450,313,993</b>	<b>\$359,639,409</b>	<b>0</b>	<b>348,318</b>	<b>0</b>	<b>348,318</b>

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<b>CAREPLUS HEALTH PLANS, INC. NAIC Company Code 95092</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$3,625,930,317	\$3,171,133,360	\$28,828,235	0	212,995	0	212,995
<b>TOTAL</b>	<b>\$3,625,930,317</b>	<b>\$3,171,133,360</b>	<b>\$28,828,235</b>	<b>0</b>	<b>212,995</b>	<b>0</b>	<b>212,995</b>

<b>CATHOLIC FINANCIAL LIFE NAIC Company Code 56030</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$15	\$0	\$0	0	1	0	1
Disability Income	\$1	\$503	\$0	0	0	0	0
Limited Benefit	\$15	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$31</b>	<b>\$503</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

<b>CATHOLIC ORDER OF FORESTERS NAIC Company Code 57487</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$232	\$0	\$0	0	44	0	44
Long Term Care-Comprehensive	\$26,557	\$0	\$0	0	15	0	15
<b>TOTAL</b>	<b>\$26,789</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>59</b>	<b>0</b>	<b>59</b>



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<b>CATLIN INSURANCE COMPANY, INC.</b> <b>NAIC Company Code 19518</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$839	\$282,859	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$839</b>	<b>\$282,859</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>CELTIC INSURANCE COMPANY</b> <b>NAIC Company Code 80799</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$1,950,808,398	\$1,446,520,150	\$701,715,910	0	204,062	75,566	279,628
Medicare Supplement	\$2,409,460	\$2,228,104	\$0	0	578	0	578
Misc.	\$1,419	\$0	\$0	0	5	0	5
<b>TOTAL</b>	<b>\$1,953,219,277</b>	<b>\$1,448,748,254</b>	<b>\$701,715,910</b>	<b>0</b>	<b>204,645</b>	<b>75,566</b>	<b>280,211</b>

<b>CENTENE VENTURE COMPANY FLORIDA</b> <b>NAIC Company Code 16499</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$25,008,850	\$21,278,549	\$0	0	2,217	0	2,217
<b>TOTAL</b>	<b>\$25,008,850</b>	<b>\$21,278,549</b>	<b>\$0</b>	<b>0</b>	<b>2,217</b>	<b>0</b>	<b>2,217</b>

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<b>CENTRAL STATES HEALTH &amp; LIFE COMPANY OF OMAHA</b> <b>NAIC Company Code 61751</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$31	\$10,687	\$0	0	1	0	1
Limited Benefit	\$17,667	\$516,490	\$0	0	11	3	14
Long Term Care-Facility Only	\$31,392	\$526,380	\$0	0	20	0	20
Medicare Supplement	\$2,134,928	\$1,892,345	\$26,377	0	635	0	635
Other	\$1,231	\$538	\$1,315	0	6	0	6
<b>TOTAL</b>	<b>\$2,185,249</b>	<b>\$2,946,440</b>	<b>\$27,692</b>	<b>0</b>	<b>673</b>	<b>3</b>	<b>676</b>

<b>CENTRAL STATES INDEMNITY COMPANY OF OMAHA</b> <b>NAIC Company Code 34274</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$54	\$0	\$0	1	3	0	3
Disability Income	\$1,326	\$0	\$0	1	12	0	12
Medicare Supplement	\$60,357	\$26,932	\$0	0	21	0	21
<b>TOTAL</b>	<b>\$61,737</b>	<b>\$26,932</b>	<b>\$0</b>	<b>2</b>	<b>36</b>	<b>0</b>	<b>36</b>

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<b>CENTRE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 80896</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Grandfathered (In-State and Out-of-State) Individually Underwritten</b>	\$3,674	\$47,216	\$0	0	23	10	33
<b>Disability Income</b>	\$334,432	\$474,261	\$0	0	250	0	250
<b>TOTAL</b>	\$338,106	\$521,478	\$0	0	273	10	283

<b>CHRISTIAN FIDELITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61859</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Medicare Supplement</b>	\$93,445	\$51,304	\$0	1	19	0	19
<b>TOTAL</b>	\$93,445	\$51,304	\$0	1	19	0	19

<b>CICA LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 71463</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$5,462	\$0	\$0	0	48	0	48
<b>Limited Benefit</b>	\$2,488	\$308,065	\$0	0	7	0	7
<b>TOTAL</b>	\$7,950	\$308,065	\$0	0	55	0	55

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<b>CIGNA DENTAL HEALTH OF FLORIDA, INC. NAIC Company Code 52021</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$38,001,159	\$19,773,771	\$843,554	307	108,020	85,018	193,038
<b>TOTAL</b>	<b>\$38,001,159</b>	<b>\$19,773,771</b>	<b>\$843,554</b>	<b>307</b>	<b>108,020</b>	<b>85,018</b>	<b>193,038</b>

<b>CIGNA HEALTH AND LIFE INSURANCE COMPANY NAIC Company Code 67369</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$451,311,185	\$417,130,087	\$0	0	0	0	0
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$17,226,972	\$10,010,491	\$0	0	48,913	21,311	70,224
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$2,574,954	\$2,327,585	\$0	0	0	0	0
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$1,048,317,988	\$797,891,262	\$0	2,308	102,492	76,336	178,828
ACA Off Exchange Conversion	\$-12	\$0	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$35,274,345	\$33,498,615	\$0	38	1,690	1,561	3,251
Grandfathered (In-State and Out-of-State) Conversion	\$4,966	\$68,508	\$0	0	0	0	0
Administrative Services Only (ASO)	\$343,458,596	\$0	\$0	9,379	1,133,655	880,651	2,014,306
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$-495	\$0	\$0	1	62	0	62
Dental	\$168,977,472	\$130,300,409	\$0	3,649	266,717	207,876	474,593
Prescription Drug	\$62,494,503	\$48,719,337	\$0	3,222	60,555	0	60,555
Vision	\$8,457,531	\$5,203,860	\$0	1,529	65,216	50,865	116,081

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<b>CIGNA HEALTH AND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67369</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$13,118	\$0	0	0	0	0
Excess/Stop Loss	\$383,203,589	\$321,023,824	\$0	4,654	281,141	226,246	507,387
Medicare Supplement	\$24,433,351	\$18,829,153	\$0	12	11,203	0	11,203
Other	\$2,081,276	\$1,942,900	\$0	18	837	32	869
<b>TOTAL</b>	<b>\$2,547,816,221</b>	<b>\$1,786,959,149</b>	<b>\$0</b>	<b>24,810</b>	<b>1,972,481</b>	<b>1,464,878</b>	<b>3,437,359</b>

<b>CIGNA HEALTHCARE OF FLORIDA, INC.</b> <b>NAIC Company Code 95136</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Conversion	\$6,175	\$69,729	\$0	0	1	0	1
Transitional (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$3,085,513	\$2,507,314	\$189,230	20	306	168	474
<b>TOTAL</b>	<b>\$3,091,688</b>	<b>\$2,577,043</b>	<b>\$189,230</b>	<b>20</b>	<b>307</b>	<b>168</b>	<b>475</b>

<b>CITIZENS NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 82082</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$1,668	\$0	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$1,668</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>7</b>	<b>0</b>	<b>7</b>

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<b>CITIZENS SECURITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61921</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$103,163	\$67,885	\$0	0	71	0	71
Vision	\$277,457	\$140,940	\$256,296	0	1,995	0	1,995
Limited Benefit	\$251,212	\$118,315	\$242,205	0	2,428	0	2,428
<b>TOTAL</b>	<b>\$631,832</b>	<b>\$327,140</b>	<b>\$498,501</b>	<b>0</b>	<b>4,494</b>	<b>0</b>	<b>4,494</b>

<b>CLEAR SPRING HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 78301</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Prescription Drug	\$11,495,974	\$7,838,440	\$0	0	20,735	0	20,735
<b>TOTAL</b>	<b>\$11,495,974</b>	<b>\$7,838,440</b>	<b>\$0</b>	<b>0</b>	<b>20,735</b>	<b>0</b>	<b>20,735</b>

<b>CLEAR SPRING LIFE AND ANNUITY COMPANY</b> <b>NAIC Company Code 83607</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$8,148	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$8,148</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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<b>CMFG LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62626</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$17,331,275	\$14,828,005	\$2,666,387	882,803	884,297	946,553	1,830,850
Disability Income	\$335	\$68,579	\$0	0	2	0	2
Limited Benefit	\$12,647	\$555	\$0	74	80	0	80
Long Term Care-Comprehensive	\$4,257,098	\$1,885,879	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$21,601,355</b>	<b>\$16,783,018</b>	<b>\$2,666,387</b>	<b>882,877</b>	<b>884,379</b>	<b>946,553</b>	<b>1,830,932</b>

<b>COLONIAL LIFE AND ACCIDENT INSURANCE COMPANY</b> <b>NAIC Company Code 62049</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$37,397,631	\$14,122,618	\$13,402,996	560	124,296	95,649	219,945
Dental	\$6,227,002	\$2,266,930	\$4,077,373	0	10,426	4,989	15,415
Disability Income	\$38,850,244	\$15,329,943	\$15,024,842	188	69,680	0	69,680
Limited Benefit	\$47,808,810	\$19,165,243	\$15,024,842	1,529	127,203	93,359	220,562
Long Term Care-Accelerated Benefit Rider	\$752	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$130,284,439</b>	<b>\$50,884,734</b>	<b>\$47,530,053</b>	<b>2,277</b>	<b>331,607</b>	<b>193,997</b>	<b>525,604</b>

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<b>COLONIAL PENN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62065</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,053	\$-223	\$0	0	8	0	8
Disability Income	\$2,818	\$125,749	\$0	0	2	0	2
Limited Benefit	\$163	\$42	\$0	0	1	0	1
Long Term Care-Facility Only	\$1,313	\$-102	\$0	0	1	0	1
Short Term Care	\$735	\$-4	\$0	0	1	0	1
Medicare Supplement	\$106,594,093	\$70,493,971	\$5,260,305	0	34,036	0	34,036
<b>TOTAL</b>	<b>\$106,600,175</b>	<b>\$70,619,433</b>	<b>\$5,260,305</b>	<b>0</b>	<b>34,049</b>	<b>0</b>	<b>34,049</b>

<b>COLUMBIAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 76023</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$307	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$307</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>



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<b>COLUMBIAN MUTUAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62103</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$597	\$0	\$0	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,380	\$1,656	\$0	0	20	0	20
Medicare Supplement	\$18,831	\$2,732	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$20,808</b>	<b>\$4,388</b>	<b>\$0</b>	<b>0</b>	<b>20</b>	<b>0</b>	<b>20</b>

<b>COLUMBUS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 99937</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$22,800	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$22,800</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>COMBINED INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 62146</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,623,888	\$1,768,195	\$59,193	0	15,206	2,640	17,846
Vision	\$2,371,560	\$1,908,073	\$0	7	13,603	24,352	37,955
Disability Income	\$6,856,656	\$2,129,330	\$143,150	0	16,371	37	16,408
Limited Benefit	\$30,912,405	\$7,796,715	\$4,297,853	0	79,058	13,743	92,801
Medicare Supplement	\$769,551	\$417,795	\$0	1	244	0	244

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<b>COMBINED INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 62146</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$1,334	\$1,754	\$0	0	10	2	12
<b>TOTAL</b>	<b>\$47,535,394</b>	<b>\$14,021,861</b>	<b>\$4,500,196</b>	<b>8</b>	<b>124,492</b>	<b>40,774</b>	<b>165,266</b>

<b>COMMERCIAL TRAVELERS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 81426</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,072	\$0	\$3,072	0	35	0	35
Disability Income	\$2,414	\$-10,611	\$0	0	77	0	77
Limited Benefit	\$4,941	\$1,205	\$0	0	50	0	50
<b>TOTAL</b>	<b>\$10,427</b>	<b>\$-9,406</b>	<b>\$3,072</b>	<b>0</b>	<b>162</b>	<b>0</b>	<b>162</b>

<b>COMMONWEALTH ANNUITY AND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 84824</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$10,128	\$579,439	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$10,128</b>	<b>\$579,439</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

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<b>COMPANION LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 77828</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,432,929	\$2,714,959	\$3,458,069	1	1,393	1,000	2,393
Dental	\$1,448,661	\$999,163	\$1,430	7	928	2,065	2,993
Prescription Drug	\$806,551	\$581,511	\$0	34	810	0	810
Vision	\$10,856	\$5,484	\$0	3	12	10	22
Disability Income	\$408,317	\$244,982	\$0	2	986	0	986
Excess/Stop Loss	\$6,045,263	\$4,954,693	\$2,334,789	23	4,825	1,756	6,581
Limited Benefit	\$590,679	\$194,056	\$35,867	19	647	527	1,174
<b>TOTAL</b>	<b>\$15,743,256</b>	<b>\$9,694,848</b>	<b>\$5,830,155</b>	<b>89</b>	<b>9,601</b>	<b>5,358</b>	<b>14,959</b>

<b>COMPBENEFITS COMPANY</b> <b>NAIC Company Code 52015</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$39,641,601	\$23,412,203	\$0	2,349	179,012	105,994	285,006
Vision	\$13,160,035	\$9,257,630	\$0	5	188,164	0	188,164
<b>TOTAL</b>	<b>\$52,801,636</b>	<b>\$32,669,833</b>	<b>\$0</b>	<b>2,354</b>	<b>367,176</b>	<b>105,994</b>	<b>473,170</b>

<b>COMPBENEFITS INSURANCE COMPANY</b> <b>NAIC Company Code 60984</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$298,324	\$72,983	\$0	5	2,661	0	2,661
<b>TOTAL</b>	<b>\$298,324</b>	<b>\$72,983</b>	<b>\$0</b>	<b>5</b>	<b>2,661</b>	<b>0</b>	<b>2,661</b>

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CONNECTICUT GENERAL LIFE INSURANCE COMPANY NAIC Company Code 62308							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$138,731	\$-584,058	\$0	2	34	6	40
ACA Off Exchange Conversion	\$159,260	\$-420,899	\$0	0	16	5	21
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$10,598	\$1,324	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) Conversion	\$276,270	\$1,435,826	\$0	0	0	0	0
Transitional (In-State and Out-of-State) Individually Underwritten	\$0	\$-5,210,996	\$0	0	0	0	0
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$349	\$0	\$0	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$29,519	\$14,854	\$0	1	568	0	568
Dental	\$767,499	\$462,619	\$0	2	1,149	908	2,057
Vision	\$-8	\$0	\$0	0	0	0	0
Disability Income	\$95,692	\$540,383	\$0	0	93	0	93
Excess/Stop Loss	\$-9,156	\$-20,231	\$0	0	0	0	0
Long Term Care-Comprehensive	\$64,380	\$137,977	\$0	9	139	0	139
Medicare Supplement	\$54,414	\$29,604	\$0	1	26	0	26
Other	\$6,306	\$1,429	\$0	1	2	0	2
<b>TOTAL</b>	<b>\$1,593,854</b>	<b>\$-3,612,168</b>	<b>\$0</b>	<b>16</b>	<b>2,027</b>	<b>919</b>	<b>2,946</b>

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<b>CONTINENTAL AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 71730</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$14,628,522	\$5,202,821	\$0	796	60,350	33,251	93,601
Dental	\$108,491	\$11,323	\$0	8	297	88	385
Disability Income	\$8,415,486	\$4,541,395	\$0	148	11,390	36	11,426
Limited Benefit	\$32,367,825	\$14,396,268	\$0	1,292	79,094	26,179	105,273
<b>TOTAL</b>	<b>\$55,520,324</b>	<b>\$24,151,807</b>	<b>\$0</b>	<b>2,244</b>	<b>151,131</b>	<b>59,554</b>	<b>210,685</b>

<b>CONTINENTAL CASUALTY COMPANY</b> <b>NAIC Company Code 20443</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$296	\$-4,132	\$0	0	1	0	1
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$33,679	\$0	0	0	0	0
Disability Income	\$26	\$374,248	\$0	0	1	0	1
Limited Benefit	\$12	\$0	\$0	0	3	0	3
Long Term Care-Comprehensive	\$34,455,776	\$68,495,524	\$0	400	18,106	0	18,106
Long Term Care-Facility Only	\$528,160	\$1,824,162	\$0	0	396	0	396
Long Term Care-Non-Facility Only	\$4,773	\$17,809	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$34,989,043</b>	<b>\$70,741,290</b>	<b>\$0</b>	<b>400</b>	<b>18,510</b>	<b>0</b>	<b>18,510</b>

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<b>CONTINENTAL GENERAL INSURANCE COMPANY</b> <b>NAIC Company Code 71404</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$16,952	\$9,987	\$0	0	34	5	39
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$26,146	\$23,239	\$0	0	18	0	18
Dental	\$2,087	\$828	\$0	0	4	1	5
Disability Income	\$255,225	\$-430,894	\$0	0	135	11	146
Limited Benefit	\$750,215	\$494,710	\$0	0	899	307	1,206
Long Term Care-Comprehensive	\$17,578,380	\$44,465,242	\$0	0	5,742	59	5,801
Long Term Care-Facility Only	\$75,489	\$507,282	\$0	0	23	0	23
Long Term Care-Non-Facility Only	\$197,216	\$313,029	\$0	0	386	9	395
Medicare Supplement	\$5,156,385	\$4,446,035	\$0	0	1,221	0	1,221
<b>TOTAL</b>	<b>\$24,058,095</b>	<b>\$49,829,458</b>	<b>\$0</b>	<b>0</b>	<b>8,462</b>	<b>392</b>	<b>8,854</b>

<b>CONTINENTAL LIFE INS. CO. OF BRENTWOOD, TENNESSEE</b> <b>NAIC Company Code 68500</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$4,186,783	\$1,450,947	\$559,042	0	12,421	0	12,421
Long Term Care-Facility Only	\$9,573	\$21,820	\$0	0	12	0	12
Long Term Care-Non-Facility Only	\$2,050	\$0	\$0	0	2	0	2
Medicare Supplement	\$26,998,130	\$21,546,590	\$3,665,776	2	12,847	0	12,847
<b>TOTAL</b>	<b>\$31,196,536</b>	<b>\$23,019,357</b>	<b>\$4,224,818</b>	<b>2</b>	<b>25,282</b>	<b>0</b>	<b>25,282</b>

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<b>COUNTRY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62553</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$55,221	\$-133,370	\$0	0	58	11	69
Long Term Care-Comprehensive	\$570,088	\$813,472	\$0	0	249	36	285
Long Term Care-Facility Only	\$42,827	\$133,014	\$0	0	24	0	24
Long Term Care-Accelerated Benefit Rider	\$5,332	\$0	\$0	0	86	0	86
Medicare Supplement	\$1,015,971	\$696,113	\$2,689	0	283	0	283
<b>TOTAL</b>	<b>\$1,689,439</b>	<b>\$1,509,229</b>	<b>\$2,689</b>	<b>0</b>	<b>700</b>	<b>47</b>	<b>747</b>

<b>COVENTRY HEALTH AND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 81973</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$0	\$-38,897	\$0	0	0	0	0
Transitional (In-State and Out-of-State) Individually Underwritten	\$0	\$-9,709	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$-48,606</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>COVENTRY HEALTH PLAN OF FLORIDA, INC.</b> <b>NAIC Company Code 95266</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$62,887,640	\$60,192,065	\$0	0	12,474	0	12,474
Misc.	\$144,432	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$63,032,072</b>	<b>\$60,192,065</b>	<b>\$0</b>	<b>0</b>	<b>12,474</b>	<b>0</b>	<b>12,474</b>

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<b>CROATIAN FRATERNAL UNION OF AMERICA</b> <b>NAIC Company Code 56634</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$16	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$16</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

<b>DEARBORN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 71129</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$0	\$0	29	374	26	400
Vision	\$0	\$360,972	\$0	0	0	0	0
Disability Income	\$132,745	\$352,099	\$0	16	215	0	215
<b>TOTAL</b>	<b>\$132,745</b>	<b>\$713,071</b>	<b>\$0</b>	<b>45</b>	<b>589</b>	<b>26</b>	<b>615</b>

<b>DELAWARE AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62634</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$96,391	\$31,071	\$0	4	5	14	19
Dental	\$4,289	\$1,383	\$0	10	4	17	21
Vision	\$39	\$1,329	\$0	1	1	0	1
Long Term Care-Accelerated Benefit Rider	\$20,595	\$0	\$0	3	3	32	35
<b>TOTAL</b>	<b>\$121,314</b>	<b>\$33,783</b>	<b>\$0</b>	<b>18</b>	<b>13</b>	<b>63</b>	<b>76</b>



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<b>DELTA DENTAL INSURANCE COMPANY</b> <b>NAIC Company Code 81396</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$354,623,517	\$260,881,813	\$11,087,166	2,734	616,945	422,283	1,039,228
<b>TOTAL</b>	<b>\$354,623,517</b>	<b>\$260,881,813</b>	<b>\$11,087,166</b>	<b>2,734</b>	<b>616,945</b>	<b>422,283</b>	<b>1,039,228</b>

<b>DENTAL CONCERN, INC., THE</b> <b>NAIC Company Code 54739</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$16,237	\$4,675	\$0	4	35	41	76
<b>TOTAL</b>	<b>\$16,237</b>	<b>\$4,675</b>	<b>\$0</b>	<b>4</b>	<b>35</b>	<b>41</b>	<b>76</b>

<b>DENTAQUEST OF FLORIDA, INC.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$171,100,560	\$144,865,058	\$0	0	1,937,261	1,169	1,938,430
Misc.	\$8,353,850	\$7,090,821	\$0	0	42,504	0	42,504
<b>TOTAL</b>	<b>\$179,454,410</b>	<b>\$151,955,879</b>	<b>\$0</b>	<b>0</b>	<b>1,979,765</b>	<b>1,169</b>	<b>1,980,934</b>

<b>DENTEGRA INSURANCE COMPANY</b> <b>NAIC Company Code 73474</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$28,575,821	\$25,168,024	\$328,599	9	28,540	35,415	63,955
<b>TOTAL</b>	<b>\$28,575,821</b>	<b>\$25,168,024</b>	<b>\$328,599</b>	<b>9</b>	<b>28,540</b>	<b>35,415</b>	<b>63,955</b>

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<b>DEVOTED HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 16385</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$5,449,261	\$4,423,073	\$5,449,261	0	551	0	551
<b>TOTAL</b>	<b>\$5,449,261</b>	<b>\$4,423,073</b>	<b>\$5,449,261</b>	<b>0</b>	<b>551</b>	<b>0</b>	<b>551</b>

<b>DEVOTED HEALTH PLAN OF FLORIDA, INC.</b> <b>NAIC Company Code 16358</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$481,630,837	\$460,526,176	\$175,028,659	0	32,454	0	32,454
<b>TOTAL</b>	<b>\$481,630,837</b>	<b>\$460,526,176</b>	<b>\$175,028,659</b>	<b>0</b>	<b>32,454</b>	<b>0</b>	<b>32,454</b>

<b>DOCTORS HEALTHCARE PLANS, INC.</b> <b>NAIC Company Code 16271</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$207,327,316	\$207,216,412	\$36,112,594	0	12,076	0	12,076
<b>TOTAL</b>	<b>\$207,327,316</b>	<b>\$207,216,412</b>	<b>\$36,112,594</b>	<b>0</b>	<b>12,076</b>	<b>0</b>	<b>12,076</b>

<b>EDUCATORS HEALTH PLANS LIFE, ACCIDENT AND HEALTH, INC.</b> <b>NAIC Company Code 12515</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$1,102,275	\$641,921	\$820,843	0	4,294	1,629	5,923
Vision	\$1,914	\$1,551	\$1,425	0	13	4	17
<b>TOTAL</b>	<b>\$1,104,189</b>	<b>\$643,472</b>	<b>\$822,268</b>	<b>0</b>	<b>4,307</b>	<b>1,633</b>	<b>5,940</b>

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<b>ELIPS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 85561</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,639	\$1,884	\$0	0	17	0	17
Medicare Supplement	\$22,908	\$22,673	\$0	0	25	0	25
<b>TOTAL</b>	<b>\$25,547</b>	<b>\$24,557</b>	<b>\$0</b>	<b>0</b>	<b>42</b>	<b>0</b>	<b>42</b>

<b>ELIXIR INSURANCE COMPANY</b> <b>NAIC Company Code 12747</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Prescription Drug	\$4,435,726	\$4,132,659	\$0	4	1,659	0	1,659
<b>TOTAL</b>	<b>\$4,435,726</b>	<b>\$4,132,659</b>	<b>\$0</b>	<b>4</b>	<b>1,659</b>	<b>0</b>	<b>1,659</b>

<b>EMC NATIONAL LIFE COMPANY</b> <b>NAIC Company Code 62928</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$4,150	\$0	\$0	0	5	0	5
<b>TOTAL</b>	<b>\$4,150</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>5</b>

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<b>EMPHEYSYS INSURANCE COMPANY</b> <b>NAIC Company Code 88595</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$5,518,786	\$5,088,476	\$5,518,786	16	441	0	441
<b>TOTAL</b>	<b>\$5,518,786</b>	<b>\$5,088,476</b>	<b>\$5,518,786</b>	<b>16</b>	<b>441</b>	<b>0</b>	<b>441</b>

<b>EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 68322</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$2,738,577	\$434,583	\$0	1	42	0	42
Limited Benefit	\$89,049	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$2,827,626</b>	<b>\$434,583</b>	<b>\$0</b>	<b>1</b>	<b>42</b>	<b>0</b>	<b>42</b>

<b>ENVOLVE DENTAL OF FLORIDA, INC.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$0	\$97,818,783	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$97,818,783</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>EPIC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 64149</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$4,671,172	\$3,834,044	\$0	0	2,047	0	2,047
<b>TOTAL</b>	<b>\$4,671,172</b>	<b>\$3,834,044</b>	<b>\$0</b>	<b>0</b>	<b>2,047</b>	<b>0</b>	<b>2,047</b>

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<b>EQUITABLE FINANCIAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62944</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$1,146,148	\$3,893,215	\$0	0	213	126	339
Grandfathered (In-State and Out-of-State) Conversion	\$6,150	\$469	\$0	0	4	1	5
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,457	\$0	\$187	2	7	0	7
Dental	\$13,736	\$33,719	\$4,155	19	62	107	169
Vision	\$2,617	\$7,714	\$478	22	83	164	247
Disability Income	\$1,999,933	\$16,955,212	\$2,984	69	838	0	838
Limited Benefit	\$188	\$0	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$3,176,229</b>	<b>\$20,890,329</b>	<b>\$7,804</b>	<b>113</b>	<b>1,208</b>	<b>398</b>	<b>1,606</b>

<b>EQUITABLE FINANCIAL LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 78077</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,258	\$50	\$7,030	2	95	0	95
Dental	\$962,539	\$578,313	\$494,857	215	1,862	3,178	5,040
Vision	\$123,775	\$90,307	\$23,298	211	1,698	2,872	4,570
Disability Income	\$695,051	\$343,686	\$148,034	33	2,417	0	2,417
Limited Benefit	\$9,159	\$50	\$8,872	2	86	0	86
<b>TOTAL</b>	<b>\$1,797,782</b>	<b>\$1,012,406</b>	<b>\$682,091</b>	<b>463</b>	<b>6,158</b>	<b>6,050</b>	<b>12,208</b>

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<b>EVERENCE ASSOCIATION, INC.</b> <b>NAIC Company Code 57991</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$883,239	\$656,001	\$0	0	297	12	309
<b>TOTAL</b>	<b>\$883,239</b>	<b>\$656,001</b>	<b>\$0</b>	<b>0</b>	<b>297</b>	<b>12</b>	<b>309</b>

<b>EVEREST REINSURANCE COMPANY</b> <b>NAIC Company Code 26921</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$8,957,104	\$9,034,284	\$2,509,650	35	4,963	1,783	6,746
Limited Benefit	\$912,499	\$25,699	\$233,838	919	919	535	1,454
Medicare Supplement	\$114,100	\$47,717	\$0	95	95	0	95
<b>TOTAL</b>	<b>\$9,983,703</b>	<b>\$9,107,700</b>	<b>\$2,743,488</b>	<b>1,049</b>	<b>5,977</b>	<b>2,318</b>	<b>8,295</b>

<b>EVERLAKE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60186</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,275,427	\$1,114,555	\$0	0	12,484	0	12,484
Disability Income	\$99	\$0	\$0	0	0	0	0
Limited Benefit	\$48,445	\$60,664	\$0	0	200	0	200
Long Term Care-Comprehensive	\$106,665	\$426,688	\$0	0	70	0	70
<b>TOTAL</b>	<b>\$1,430,636</b>	<b>\$1,601,907</b>	<b>\$0</b>	<b>0</b>	<b>12,754</b>	<b>0</b>	<b>12,754</b>

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<b>EVERLY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 97241</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Disability Income</b>	<b>\$230</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>TOTAL</b>	<b>\$230</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>FAIR AMERICAN INSURANCE AND REINSURANCE COMPANY</b> <b>NAIC Company Code 35157</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Excess/Stop Loss</b>	<b>\$2,007,313</b>	<b>\$1,022,376</b>	<b>\$1,780,232</b>	<b>6</b>	<b>921</b>	<b>533</b>	<b>1,454</b>
<b>TOTAL</b>	<b>\$2,007,313</b>	<b>\$1,022,376</b>	<b>\$1,780,232</b>	<b>6</b>	<b>921</b>	<b>533</b>	<b>1,454</b>

<b>FAMILY HERITAGE LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 77968</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	<b>\$7,015,289</b>	<b>\$961,652</b>	<b>\$1,347,317</b>	<b>0</b>	<b>13,167</b>	<b>8,733</b>	<b>21,900</b>
<b>Limited Benefit</b>	<b>\$6,932,450</b>	<b>\$1,570,827</b>	<b>\$779,194</b>	<b>0</b>	<b>14,508</b>	<b>11,860</b>	<b>26,368</b>
<b>TOTAL</b>	<b>\$13,947,739</b>	<b>\$2,532,479</b>	<b>\$2,126,511</b>	<b>0</b>	<b>27,675</b>	<b>20,593</b>	<b>48,268</b>

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<b>FAMILY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63053</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$145,299	\$3,132	\$49,900	0	710	381	1,091
Dental	\$1,886,520	\$1,096,632	\$478,179	0	4,142	383	4,525
Disability Income	\$1,258,641	\$304,590	\$86,232	0	1,102	31	1,133
Limited Benefit	\$5,689,000	\$3,056,260	\$1,725,284	0	4,748	2,474	7,222
Long Term Care-Comprehensive	\$2,689	\$0	\$0	0	2	0	2
Medicare Supplement	\$257,304	\$194,619	\$0	0	58	3	61
Misc.	\$27,862	\$22,604	\$0	0	27	10	37
<b>TOTAL</b>	<b>\$9,267,315</b>	<b>\$4,677,837</b>	<b>\$2,339,595</b>	<b>0</b>	<b>10,789</b>	<b>3,282</b>	<b>14,071</b>

<b>FARMERS NEW WORLD LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63177</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$49,692	\$0	\$0	0	336	0	336
Long Term Care-Comprehensive	\$74,338	\$197,946	\$0	0	56	0	56
<b>TOTAL</b>	<b>\$124,030</b>	<b>\$197,946</b>	<b>\$0</b>	<b>0</b>	<b>392</b>	<b>0</b>	<b>392</b>



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<b>FEDERAL INSURANCE COMPANY</b> <b>NAIC Company Code 20281</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,510,144	\$337,910	\$194,821	467	851,008	7,393	858,401
<b>TOTAL</b>	<b>\$6,510,144</b>	<b>\$337,910</b>	<b>\$194,821</b>	<b>467</b>	<b>851,008</b>	<b>7,393</b>	<b>858,401</b>

<b>FEDERAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63223</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$167	\$0	\$0	0	33	0	33
Disability Income	\$7,171	\$704	\$0	0	22	0	22
Limited Benefit	\$103,102	\$25,445	\$103,101	1	806	0	806
Medicare Supplement	\$56,203	\$25,113	\$44,732	0	49	0	49
Other	\$33,776	\$7,206	\$33,776	1	26	0	26
<b>TOTAL</b>	<b>\$200,419</b>	<b>\$58,468</b>	<b>\$181,609</b>	<b>2</b>	<b>936</b>	<b>0</b>	<b>936</b>

<b>FEDERATED LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63258</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$1,067,128	\$777,426	\$97,707	0	800	0	800
<b>TOTAL</b>	<b>\$1,067,128</b>	<b>\$777,426</b>	<b>\$97,707</b>	<b>0</b>	<b>800</b>	<b>0</b>	<b>800</b>

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<b>FIDELITY &amp; GUARANTY LIFE INSURANCE COMPANY</b> NAIC Company Code 63274							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$2,304	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$2,304</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>FIDELITY LIFE ASSOCIATION, A LEGAL RESERVE LIFE INSURANCE COMPANY</b> NAIC Company Code 63290							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Accelerated Benefit Rider	\$34,306	\$33	\$0	3	426	0	426
<b>TOTAL</b>	<b>\$34,306</b>	<b>\$33</b>	<b>\$0</b>	<b>3</b>	<b>426</b>	<b>0</b>	<b>426</b>

<b>FIDELITY SECURITY LIFE INSURANCE COMPANY</b> NAIC Company Code 71870							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$82,520	\$33,552	\$67,973	2	956	402	1,358
Dental	\$2,448,775	\$1,781,068	\$1,053,881	0	0	0	0
Prescription Drug	\$25,238	\$4,239	\$8,090	6	69	26	95
Vision	\$50,177,983	\$36,314,052	\$7,448,079	620	406,068	321,646	727,714
Disability Income	\$425,400	\$-71,419	\$21,357	0	132	0	132
Excess/Stop Loss	\$5,060,391	\$7,515,489	\$2,967,670	55	6,454	1,731	8,185
Limited Benefit	\$4,303,674	\$1,522,305	\$3,318,438	183	13,121	16,117	29,238
<b>TOTAL</b>	<b>\$62,523,981</b>	<b>\$47,099,286</b>	<b>\$14,885,488</b>	<b>866</b>	<b>426,800</b>	<b>339,922</b>	<b>766,722</b>

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**FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY**  
**NAIC Company Code 69140**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$526,470	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$526,470</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**FIRST HEALTH LIFE & HEALTH INSURANCE COMPANY**  
**NAIC Company Code 90328**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$0	\$-10,049	\$0	0	0	0	0
Medicare Supplement	\$106,151	\$258,539	\$0	0	0	0	0
Medicare Advantage (Medicare+Choice)	\$20,640	\$19,765	\$0	0	0	0	0
Other	\$-26,707	\$-36,312	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$100,084</b>	<b>\$231,943</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**FLORIDA BLUE MEDICARE, INC.**  
**NAIC Company Code 16490**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$1,144,484,056	\$1,073,091,099	\$280,398,594	0	90,156	0	90,156
<b>TOTAL</b>	<b>\$1,144,484,056</b>	<b>\$1,073,091,099</b>	<b>\$280,398,594</b>	<b>0</b>	<b>90,156</b>	<b>0</b>	<b>90,156</b>

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<b>FLORIDA COMBINED LIFE INSURANCE COMPANY, INC</b> <b>NAIC Company Code 76031</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$142,912,972	\$86,686,488	\$49,083,570	2,443	278,710	148,997	427,707
Disability Income	\$279,814	\$1,855,311	\$991	2	1,348	0	1,348
Limited Benefit	\$64,184	\$11,052	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$143,256,971</b>	<b>\$88,552,850</b>	<b>\$49,084,561</b>	<b>2,445</b>	<b>280,058</b>	<b>148,997</b>	<b>429,055</b>

<b>FLORIDA DENTAL BENEFITS, INC.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$6,744,121	\$6,638,117	\$0	14	16,773	132	16,905
<b>TOTAL</b>	<b>\$6,744,121</b>	<b>\$6,638,117</b>	<b>\$0</b>	<b>14</b>	<b>16,773</b>	<b>132</b>	<b>16,905</b>

<b>FLORIDA HEALTH CARE PLAN, INC.</b> <b>NAIC Company Code 13567</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$316,244,073	\$283,651,044	\$66,896,128	0	29,386	11,078	40,464
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$13,373,275	\$10,135,149	\$1,346,283	0	1,213	659	1,872
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$23,838,060	\$19,594,770	\$1,559,877	506	3,392	1,053	4,445
ACA Off Exchange 51-100 Member Groups	\$25,132,297	\$17,735,879	\$1,599,512	80	3,099	1,009	4,108
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$142,474,802	\$126,016,084	\$0	35	14,814	7,553	22,367

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<b>FLORIDA HEALTH CARE PLAN, INC.</b> <b>NAIC Company Code 13567</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$2,430,622	\$2,267,896	\$0	52	165	51	216
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$942,588	\$624,819	\$0	2	77	16	93
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$7,068,499	\$6,922,587	\$0	1	390	306	696
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$4,575,861	\$3,224,426	\$0	72	386	183	569
Medicare Advantage (Medicare+Choice)	\$193,803	\$-49,324	\$0	0	0	0	0
Other	\$0	\$189,529,180	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$536,273,880</b>	<b>\$659,652,510</b>	<b>\$71,401,800</b>	<b>748</b>	<b>52,922</b>	<b>21,908</b>	<b>74,830</b>

<b>FLORIDA PREVENTIVE SOLUTIONS CORP.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$3,381,782	\$2,030,608	\$1,078,458	0	1,518	0	1,518
<b>TOTAL</b>	<b>\$3,381,782</b>	<b>\$2,030,608</b>	<b>\$1,078,458</b>	<b>0</b>	<b>1,518</b>	<b>0</b>	<b>1,518</b>

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<b>FORETHOUGHT LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 91642</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Accelerated Benefit Rider	\$4,628,322	\$0	\$0	0	2,285	610	2,895
Medicare Supplement	\$560,123	\$304,974	\$0	0	115	0	115
<b>TOTAL</b>	<b>\$5,188,445</b>	<b>\$304,974</b>	<b>\$0</b>	<b>0</b>	<b>2,400</b>	<b>610</b>	<b>3,010</b>

<b>FREEDOM HEALTH, INC.</b> <b>NAIC Company Code 10119</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$1,280,523,055	\$1,093,019,412	\$0	0	67,821	0	67,821
<b>TOTAL</b>	<b>\$1,280,523,055</b>	<b>\$1,093,019,412</b>	<b>\$0</b>	<b>0</b>	<b>67,821</b>	<b>0</b>	<b>67,821</b>

<b>FREEDOM LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 62324</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$495,544	\$234,397	\$0	0	42	28	70
Transitional (In-State and Out-of-State) Individually Underwritten	\$2,653,847	\$31,960,477	\$2,653,847	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$26,217,841	\$7,366,706	\$10,558,958	0	88,824	62,358	151,182
Dental	\$12,052,772	\$4,869,324	\$5,680,410	0	17,601	10,853	28,454
Vision	\$2,402,959	\$954,419	\$0	0	14,649	8,322	22,971
Limited Benefit	\$173,739,226	\$48,577,192	\$75,226,407	0	73,690	46,609	120,299
<b>TOTAL</b>	<b>\$217,562,189</b>	<b>\$93,962,515</b>	<b>\$94,119,622</b>	<b>0</b>	<b>194,806</b>	<b>128,170</b>	<b>322,976</b>

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<b>GARDEN STATE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63657</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,806	\$0	\$0	1	9	0	9
Medicare Supplement	\$17,502	\$29,822	\$0	0	9	0	9
<b>TOTAL</b>	<b>\$19,308</b>	<b>\$29,822</b>	<b>\$0</b>	<b>1</b>	<b>18</b>	<b>0</b>	<b>18</b>

<b>GENESIS INSURANCE COMPANY</b> <b>NAIC Company Code 38962</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$91,761	\$-79,747	\$0	0	44	0	44
<b>TOTAL</b>	<b>\$91,761</b>	<b>\$-79,747</b>	<b>\$0</b>	<b>0</b>	<b>44</b>	<b>0</b>	<b>44</b>

<b>GENWORTH LIFE AND ANNUITY INSURANCE COMPANY</b> <b>NAIC Company Code 65536</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$326	\$3,633	\$0	0	1	0	1
Limited Benefit	\$419	\$1,831	\$0	0	2	0	2
Long Term Care-Comprehensive	\$7,884	\$5,950	\$0	0	5	0	5
Medicare Supplement	\$2,852,996	\$2,256,397	\$0	0	836	0	836
<b>TOTAL</b>	<b>\$2,861,625</b>	<b>\$2,267,811</b>	<b>\$0</b>	<b>0</b>	<b>844</b>	<b>0</b>	<b>844</b>

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<b>GENWORTH LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 70025</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$161,695,103	\$188,821,324	\$138,957	231	61,868	6,324	68,192
Long Term Care-Facility Only	\$510,064	\$2,134,404	\$0	0	325	0	325
Long Term Care-Accelerated Benefit Rider	\$0	\$246,553	\$0	0	602	0	602
Medicare Supplement	\$43,259	\$28,041	\$0	0	8	0	8
<b>TOTAL</b>	<b>\$162,248,426</b>	<b>\$191,230,322</b>	<b>\$138,957</b>	<b>231</b>	<b>62,803</b>	<b>6,324</b>	<b>69,127</b>

<b>GENWORTH LIFE INSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 72990</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$14,200,743	\$26,241,667	\$259	17	5,334	306	5,640
<b>TOTAL</b>	<b>\$14,200,743</b>	<b>\$26,241,667</b>	<b>\$259</b>	<b>17</b>	<b>5,334</b>	<b>306</b>	<b>5,640</b>

<b>GERBER LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 70939</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,989,316	\$1,673,534	\$0	434	465,650	45	465,695
Excess/Stop Loss	\$9,661,554	\$6,509,961	\$0	187	26,383	38,789	65,172
Limited Benefit	\$149	\$0	\$0	0	19	0	19
Long Term Care-Non-Facility Only	\$5,405	\$43,660	\$0	0	3	0	3
Medicare Supplement	\$9,973,344	\$8,432,260	\$0	0	2,904	0	2,904
<b>TOTAL</b>	<b>\$23,629,768</b>	<b>\$16,659,415</b>	<b>\$0</b>	<b>621</b>	<b>494,959</b>	<b>38,834</b>	<b>533,793</b>



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<b>GLEANER LIFE INSURANCE SOCIETY</b> <b>NAIC Company Code 56154</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$0	\$0	0	100	0	100
Disability Income	\$233	\$7,282	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$233</b>	<b>\$7,282</b>	<b>\$0</b>	<b>0</b>	<b>100</b>	<b>0</b>	<b>100</b>

<b>GLOBE LIFE AND ACCIDENT INSURANCE COMPANY</b> <b>NAIC Company Code 91472</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$24,801	\$5,303	\$0	0	9	1	10
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,446,844	\$295,834	\$193,643	0	14,057	8	14,065
Limited Benefit	\$6,557	\$26,003	\$0	0	71	30	101
Medicare Supplement	\$406,919	\$204,862	\$93,575	0	129	0	129
<b>TOTAL</b>	<b>\$2,885,121</b>	<b>\$532,002</b>	<b>\$287,218</b>	<b>0</b>	<b>14,266</b>	<b>39</b>	<b>14,305</b>

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<b>GOLDEN RULE INSURANCE COMPANY</b> <b>NAIC Company Code 62286</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$355,733	\$509,819	\$0	0	15	5	20
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$51,327,638	\$37,219,563	\$0	0	3,783	3,565	7,348
Grandfathered (In-State and Out-of-State) Conversion	\$5,067	\$63	\$0	0	1	0	1
Transitional (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$317,228	\$310,198	\$0	0	14	4	18
Transitional (In-State and Out-of-State) Individually Underwritten	\$66,209,477	\$54,896,514	\$0	0	5,722	5,377	11,099
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$4,982,791	\$1,156,335	\$2,592,115	0	15,375	8,934	24,309
Dental	\$19,939,143	\$10,068,772	\$6,712,087	0	33,392	16,584	49,976
Vision	\$4,116,375	\$1,920,424	\$1,400,476	0	27,383	12,820	40,203
Disability Income	\$23,334	\$0	\$0	0	26	0	26
Limited Benefit	\$16,879,505	\$7,447,811	\$6,448,520	0	13,997	4,994	18,991
Short Term Care	\$170,397,468	\$86,377,944	\$106,732,333	0	30,575	19,950	50,525
Medicare Supplement	\$632,290	\$514,285	\$0	0	210	0	210
<b>TOTAL</b>	<b>\$335,186,049</b>	<b>\$200,421,728</b>	<b>\$123,885,531</b>	<b>0</b>	<b>130,493</b>	<b>72,233</b>	<b>202,726</b>

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<b>GOVERNMENT EMPLOYEES INSURANCE COMPANY</b> <b>NAIC Company Code 22063</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,801	\$30	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,801</b>	<b>\$30</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>GOVERNMENT PERSONNEL MUTUAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 63967</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$723,764	\$720,972	\$0	0	173	0	173
<b>TOTAL</b>	<b>\$723,764</b>	<b>\$720,972</b>	<b>\$0</b>	<b>0</b>	<b>173</b>	<b>0</b>	<b>173</b>

<b>GPM HEALTH AND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67059</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$535,482	\$646,101	\$2,253	0	275	0	275
<b>TOTAL</b>	<b>\$535,482</b>	<b>\$646,101</b>	<b>\$2,253</b>	<b>0</b>	<b>275</b>	<b>0</b>	<b>275</b>

<b>GRANULAR INSURANCE COMPANY</b> <b>NAIC Company Code 93521</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$5,455,776	\$6,813,403	\$5,325,197	8	9,104	17,298	26,402
<b>TOTAL</b>	<b>\$5,455,776</b>	<b>\$6,813,403</b>	<b>\$5,325,197</b>	<b>8</b>	<b>9,104</b>	<b>17,298</b>	<b>26,402</b>

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<b>GREAT AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 16691</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,201,236	\$215,691	\$800,610	0	346,038	0	346,038
Excess/Stop Loss	\$204,968	\$218,040	\$0	4	77	47	124
<b>TOTAL</b>	<b>\$1,406,204</b>	<b>\$433,731</b>	<b>\$800,610</b>	<b>4</b>	<b>346,115</b>	<b>47</b>	<b>346,162</b>

<b>GREAT AMERICAN SPIRIT INSURANCE COMPANY</b> <b>NAIC Company Code 33723</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,522,013	\$926,122	\$0	0	1,130	0	1,130
<b>TOTAL</b>	<b>\$1,522,013</b>	<b>\$926,122</b>	<b>\$0</b>	<b>0</b>	<b>1,130</b>	<b>0</b>	<b>1,130</b>

<b>GREAT MIDWEST INSURANCE COMPANY</b> <b>NAIC Company Code 18694</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$8,410,156	\$4,485,621	\$1,429,727	22	3,342	4,615	7,957
<b>TOTAL</b>	<b>\$8,410,156</b>	<b>\$4,485,621</b>	<b>\$1,429,727</b>	<b>22</b>	<b>3,342</b>	<b>4,615</b>	<b>7,957</b>

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<b>GREAT SOUTHERN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 90212</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$94,731	\$0	\$0	0	51	0	51
Medicare Supplement	\$981,637	\$756,486	\$35,008	0	428	0	428
<b>TOTAL</b>	<b>\$1,076,368</b>	<b>\$756,486</b>	<b>\$35,008</b>	<b>0</b>	<b>479</b>	<b>0</b>	<b>479</b>

<b>GREENWICH INSURANCE COMPANY</b> <b>NAIC Company Code 22322</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$108,791	\$215,121	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$108,791</b>	<b>\$215,121</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>GUARANTEE TRUST LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 64211</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$501,062	\$65,065	\$137,249	31	4,582	1,657	6,239
Dental	\$2,666	\$903	\$0	0	4	0	4
Disability Income	\$1,240	\$0	\$0	0	14	0	14
Limited Benefit	\$3,443,292	\$1,517,888	\$359,797	0	6,535	135	6,670
Long Term Care-Comprehensive	\$145,846	\$-155,469	\$2,851	0	104	3	107
Short Term Care	\$87,636	\$53,188	\$3,815	0	112	0	112
Medicare Supplement	\$361,887	\$217,062	\$2,482	0	121	6	127

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<b>GUARANTEE TRUST LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 64211</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$375,541	\$216,761	\$6,869	0	93	1	94
<b>TOTAL</b>	<b>\$4,919,170</b>	<b>\$1,915,398</b>	<b>\$513,063</b>	<b>31</b>	<b>11,565</b>	<b>1,802</b>	<b>13,367</b>

<b>GUARDIAN LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 64246</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$6,836	\$157,875	\$0	0	12	5	17
Grandfathered (In-State and Out-of-State) Conversion	\$11,499	\$964,858	\$0	0	4	0	4
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$16,621,031	\$27,582,258	\$1,691,081	4,501	264,595	238,236	502,831
Dental	\$220,607,895	\$169,342,845	\$28,196,673	7,920	406,756	358,076	764,832
Vision	\$19,002,653	\$11,160,496	\$3,485,137	5,449	166,605	149,945	316,550
Disability Income	\$50,264,672	\$26,864,719	\$8,544,237	4,179	164,784	0	164,784
Limited Benefit	\$10,355,490	\$3,104,522	\$1,922,854	985	32,149	28,935	61,084
<b>TOTAL</b>	<b>\$316,870,076</b>	<b>\$239,177,573</b>	<b>\$43,839,982</b>	<b>23,034</b>	<b>1,034,905</b>	<b>775,197</b>	<b>1,810,102</b>

<b>GUIDEWELL SIMPLIFI, INC.</b> <b>NAIC Company Code 17029</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$15,397	\$15,116	\$15,397	0	7	1	8
<b>TOTAL</b>	<b>\$15,397</b>	<b>\$15,116</b>	<b>\$15,397</b>	<b>0</b>	<b>7</b>	<b>1</b>	<b>8</b>

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<b>GULF GUARANTY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 77976</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Misc.	\$164,153	\$111,504	\$0	1	88	69	157
<b>TOTAL</b>	<b>\$164,153</b>	<b>\$111,504</b>	<b>\$0</b>	<b>1</b>	<b>88</b>	<b>69</b>	<b>157</b>

<b>HARTFORD FIRE INSURANCE COMPANY</b> <b>NAIC Company Code 19682</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,465,265	\$267,285	\$976,704	291	422,559	0	422,559
<b>TOTAL</b>	<b>\$1,465,265</b>	<b>\$267,285</b>	<b>\$976,704</b>	<b>291</b>	<b>422,559</b>	<b>0</b>	<b>422,559</b>

<b>HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY</b> <b>NAIC Company Code 70815</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$10,345,143	\$9,553,125	\$1,530,201	1,474	284,383	80,582	364,965
Disability Income	\$164,395,202	\$162,972,139	\$37,229,543	1,015	568,922	0	568,922
Limited Benefit	\$11,869,755	\$7,006,482	\$2,561,007	123	38,720	480	39,200
Medicare Supplement	\$1,270,285	\$1,226,241	\$32,436	165	438	755	1,193
Other	\$4,915,539	\$2,359,235	\$7,711	62	44,239	7,146	51,385
<b>TOTAL</b>	<b>\$192,795,924</b>	<b>\$183,117,222</b>	<b>\$41,360,898</b>	<b>2,839</b>	<b>936,702</b>	<b>88,963</b>	<b>1,025,665</b>

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<b>HCC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 92711</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$35,000	\$3,908	\$0	0	0	0	0
Excess/Stop Loss	\$43,725,941	\$34,383,353	\$12,190,110	85	91,859	205,586	297,445
Limited Benefit	\$665,234	\$439,199	\$35,887	23	4,309	9,652	13,961
Other	\$0	\$1,420	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$44,426,175</b>	<b>\$34,827,880</b>	<b>\$12,225,997</b>	<b>108</b>	<b>96,168</b>	<b>215,238</b>	<b>311,406</b>

<b>HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY</b> <b>NAIC Company Code 70670</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$1,048,695	\$1,742,012	\$0	0	153	89	242
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$254,357,239	\$248,701,671	\$0	4,732	25,092	18,889	43,981
Administrative Services Only (ASO)	\$38,957,230	\$0	\$0	3,119	152,516	142,980	295,496
Dental	\$6,389,188	\$4,076,484	\$0	1,317	10,288	7,529	17,817
Excess/Stop Loss	\$1,265,424	\$1,134,307	\$0	3	1,795	645	2,440
Medicare Supplement	\$13,775,885	\$16,982,409	\$0	0	6,358	0	6,358
Other	\$0	\$251,246	\$0	9	105	1	106
<b>TOTAL</b>	<b>\$315,793,661</b>	<b>\$272,888,129</b>	<b>\$0</b>	<b>9,180</b>	<b>196,307</b>	<b>170,133</b>	<b>366,440</b>



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<b>HEALTH FIRST COMMERCIAL PLANS, INC.</b> <b>NAIC Company Code 16272</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$177,097,890	\$139,616,733	\$59,913,579	0	16,228	7,115	23,343
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$11,485,430	\$8,521,492	\$3,734,493	0	982	620	1,602
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$7,972,231	\$5,404,402	\$0	0	0	0	0
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$164,086	\$124,836	\$0	0	0	0	0
Transitional (In-State and Out-of-State) 51-100 Member Groups	\$3,794,560	\$3,141,095	\$0	0	0	0	0
Transitional (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$5,572,737	\$4,299,649	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$206,086,934</b>	<b>\$161,108,207</b>	<b>\$63,648,072</b>	<b>0</b>	<b>17,210</b>	<b>7,735</b>	<b>24,945</b>

<b>HEALTH FIRST HEALTH PLANS, INC</b> <b>NAIC Company Code 15880</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$427,464,346	\$349,630,825	\$34,746,990	0	34,904	0	34,904
<b>TOTAL</b>	<b>\$427,464,346</b>	<b>\$349,630,825</b>	<b>\$34,746,990</b>	<b>0</b>	<b>34,904</b>	<b>0</b>	<b>34,904</b>

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<b>HEALTH OPTIONS, INC. NAIC Company Code 95089</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$5,668,459,136	\$4,835,800,569	\$2,230,266,778	0	586,846	204,350	791,196
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$91,102,417	\$89,159,365	\$17,718,600	0	8,494	4,189	12,683
ACA Off Exchange Self-Employed or Sole Proprietor (FS 627.6699)	\$106,666	\$18,005	\$15,349	6	7	10	17
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$467,913,430	\$382,804,856	\$56,094,312	9,446	55,584	23,202	78,786
ACA Off Exchange 51-100 Member Groups	\$238,317,520	\$171,815,623	\$24,598,617	1,116	23,090	8,979	32,069
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$554,628,290	\$444,680,203	\$24,655,820	948	56,354	23,575	79,929
Grandfathered (In-State and Out-of-State) Self-Employed or Sole Proprietor (FS 627.6699)	\$36,974	\$631,138	\$0	3	3	2	5
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$5,550,343	\$3,788,444	\$0	69	342	223	565
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$606,909	\$1,006,179	\$0	1	25	37	62
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$19,892,185	\$19,600,073	\$0	3	1,371	1,368	2,739
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$45,250,685	\$33,637,367	\$0	642	4,306	2,293	6,599
Administrative Services Only (ASO)	\$19,745,497	\$0	\$0	96	41,764	25,292	67,056
Medicare Advantage (Medicare+Choice)	\$1,332,984	\$-814,817	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$7,112,943,036</b>	<b>\$5,982,127,005</b>	<b>\$2,353,349,476</b>	<b>12,330</b>	<b>778,186</b>	<b>293,520</b>	<b>1,071,706</b>

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<b>HEALTHPLEX DENTAL SERVICES, INC.</b> NAIC Company Code							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$74,962	\$59,829	\$0	0	212	81	293
TOTAL	\$74,962	\$59,829	\$0	0	212	81	293

<b>HEALTHSPRING OF FLORIDA, INC</b> NAIC Company Code 11532							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$594,890,532	\$591,255,950	\$43,566,328	0	33,589	0	33,589
TOTAL	\$594,890,532	\$591,255,950	\$43,566,328	0	33,589	0	33,589

<b>HEALTHSUN HEALTH PLANS, INC.</b> NAIC Company Code 10122							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$1,224,219,067	\$1,017,181,164	\$0	0	55,148	0	55,148
TOTAL	\$1,224,219,067	\$1,017,181,164	\$0	0	55,148	0	55,148

<b>HEARTLAND NATIONAL LIFE INSURANCE COMPANY</b> NAIC Company Code 66214							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$2,750,888	\$636,146	\$263,844	0	4,687	0	4,687
TOTAL	\$2,750,888	\$636,146	\$263,844	0	4,687	0	4,687

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<b>HM LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 93440</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Vision	\$8,571,840	\$6,166,190	\$0	67	53,735	40,610	94,345
Disability Income	\$0	\$141,192	\$0	0	0	0	0
Excess/Stop Loss	\$10,343,332	\$8,743,277	\$0	68	176,313	176,313	352,626
<b>TOTAL</b>	<b>\$18,915,172</b>	<b>\$15,050,659</b>	<b>\$0</b>	<b>135</b>	<b>230,048</b>	<b>216,923</b>	<b>446,971</b>

<b>HORACE MANN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 64513</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$337	\$-14	\$0	0	7	0	7
Disability Income	\$47,037	\$-1,915	\$0	3	87	0	87
Limited Benefit	\$0	\$0	\$0	0	5	3	8
<b>TOTAL</b>	<b>\$47,374</b>	<b>\$-1,929</b>	<b>\$0</b>	<b>3</b>	<b>99</b>	<b>3</b>	<b>102</b>

<b>HPMP OF FLORIDA, INC.</b> <b>NAIC Company Code 16982</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$17,755,697	\$24,728,294	\$17,755,697	0	873	873	1,746
<b>TOTAL</b>	<b>\$17,755,697</b>	<b>\$24,728,294</b>	<b>\$17,755,697</b>	<b>0</b>	<b>873</b>	<b>873</b>	<b>1,746</b>

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<b>HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.</b> <b>NAIC Company Code 69671</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$0	\$-17,793	\$0	0	0	0	0
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$7,412,785	\$6,349,464	\$0	126	441	294	735
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$115,883	\$53,921	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$3,332,433	\$3,771,627	\$0	58	259	172	431
Excess/Stop Loss	\$79,778,110	\$73,345,587	\$0	7,835	48,092	0	48,092
Medicare Supplement	\$9,212,556	\$7,069,868	\$0	0	3,948	0	3,948
Medicare Advantage (Medicare+Choice)	\$234,281,484	\$213,249,813	\$194,817,641	0	20,025	0	20,025
<b>TOTAL</b>	<b>\$334,133,250</b>	<b>\$303,822,486</b>	<b>\$194,817,641</b>	<b>8,019</b>	<b>72,765</b>	<b>466</b>	<b>73,231</b>

<b>HUMANA INSURANCE COMPANY</b> <b>NAIC Company Code 73288</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$0	\$-25,973	\$0	0	0	0	0
Administrative Services Only (ASO)	\$7,516,197	\$0	\$0	460	5,916	2,170	8,086
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$50	\$0	\$0	0	0	0	0
Dental	\$115,855,665	\$82,235,621	\$6,774,421	7,025	210,469	104,680	315,149
Prescription Drug	\$90,768,793	\$71,004,881	\$0	4	158,305	0	158,305
Vision	\$40,703,280	\$25,762,730	\$1,237,774	7,070	341,370	225,896	567,266
Disability Income	\$29,907	\$19,505	\$0	5	34	0	34

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<b>HUMANA INSURANCE COMPANY NAIC Company Code 73288</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$573	\$0	\$0	0	0	0	0
Medicare Supplement	\$36,533,907	\$29,697,498	\$0	0	13,278	0	13,278
Medicare Advantage (Medicare+Choice)	\$1,825,471,716	\$1,535,210,522	\$0	64	142,057	0	142,057
Other	\$170	\$0	\$0	0	0	0	0
Misc.	\$6,455,002	\$4,643,550	\$0	0	25,251	0	25,251
<b>TOTAL</b>	<b>\$2,123,335,260</b>	<b>\$1,748,548,334</b>	<b>\$8,012,195</b>	<b>14,628</b>	<b>896,680</b>	<b>332,746</b>	<b>1,229,426</b>

<b>HUMANA MEDICAL PLAN, INC. NAIC Company Code 95270</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$-17,943	\$-1,737,977	\$0	0	0	0	0
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$127,269,135	\$106,943,967	\$0	805	8,768	5,846	14,614
ACA Off Exchange 51-100 Member Groups	\$753,419	\$-8,247,442	\$0	5	20	14	34
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$24,292,313	\$17,113,524	\$0	154	1,786	1,190	2,976
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$555,294,757	\$523,724,786	\$0	3,514	50,699	33,799	84,498
Medicare Advantage (Medicare+Choice)	\$7,619,204,321	\$6,229,548,374	\$80,826,841	23	403,614	0	403,614
Misc.	\$3,844,698,796	\$3,241,042,818	\$394,673,383	1	830,124	855	830,979
<b>TOTAL</b>	<b>\$12,171,494,798</b>	<b>\$10,108,388,050</b>	<b>\$475,500,224</b>	<b>4,502</b>	<b>1,295,011</b>	<b>41,704</b>	<b>1,336,715</b>

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<b>HUMANADENTAL INSURANCE COMPANY</b> <b>NAIC Company Code 70580</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$0	\$0	\$0	6	0	0	0
Limited Benefit	\$9,834	\$320	\$0	0	43	0	43
Medicare Supplement	\$73,166	\$76,462	\$0	0	25	0	25
Other	\$0	\$0	\$0	0	794	0	794
<b>TOTAL</b>	<b>\$83,000</b>	<b>\$76,782</b>	<b>\$0</b>	<b>6</b>	<b>862</b>	<b>0</b>	<b>862</b>

<b>IA AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 91693</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$23	\$0	\$0	0	1	0	1
Limited Benefit	\$1,135	\$0	\$0	0	20	0	20
<b>TOTAL</b>	<b>\$1,158</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>21</b>	<b>0</b>	<b>21</b>

<b>IDEALIFE INSURANCE COMPANY</b> <b>NAIC Company Code 97764</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$61,432	\$42,294	\$0	0	23	0	23
<b>TOTAL</b>	<b>\$61,432</b>	<b>\$42,294</b>	<b>\$0</b>	<b>0</b>	<b>23</b>	<b>0</b>	<b>23</b>

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<b>ILLINOIS MUTUAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 64580</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Grandfathered (In-State and Out-of-State) Individually Underwritten</b>	\$-12,673	\$-153,097	\$0	0	0	0	0
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$34,164	\$22,552	\$767	0	131	55	186
<b>Disability Income</b>	\$2,633,840	\$2,325,978	\$82,002	0	2,863	0	2,863
<b>Limited Benefit</b>	\$2,065	\$167	\$0	0	8	2	10
<b>TOTAL</b>	\$2,657,396	\$2,195,600	\$82,769	0	3,002	57	3,059

<b>INDEPENDENCE AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 26581</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$1,238,413	\$209,914	\$0	4,473	5,454	1,182	6,636
<b>Dental</b>	\$3,493,748	\$917,299	\$0	0	10,944	2,394	13,338
<b>Vision</b>	\$54,400	\$12,693	\$0	0	475	309	784
<b>Limited Benefit</b>	\$1,337,159	\$125,669	\$0	7	461	73	534
<b>Medicare Supplement</b>	\$6,986	\$3,231	\$0	0	3	0	3
<b>Other</b>	\$2,617,111	\$380,636	\$0	0	729	198	927
<b>TOTAL</b>	\$8,747,817	\$1,649,442	\$0	4,480	18,066	4,156	22,222



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<b>INDEPENDENCE LIFE AND ANNUITY COMPANY</b> <b>NAIC Company Code 64602</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$723,349	\$148,710	\$723,349	1	430	171	601
<b>TOTAL</b>	<b>\$723,349</b>	<b>\$148,710</b>	<b>\$723,349</b>	<b>1</b>	<b>430</b>	<b>171</b>	<b>601</b>

<b>INSURANCE COMPANY OF NORTH AMERICA</b> <b>NAIC Company Code 22713</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$152,423	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$152,423</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA</b> <b>NAIC Company Code 19429</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$43	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$43</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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**INTEGON INDEMNITY CORPORATION**  
**NAIC Company Code 22772**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,814,561	\$1,020,198	\$4,193,769	0	30,705	13,917	44,622
Dental	\$582,414	\$485,245	\$374,255	0	2,442	840	3,282
Excess/Stop Loss	\$11,583,562	\$8,560,262	\$4,128,151	383	4,898	2,621	7,519
Limited Benefit	\$2,594,645	\$587,650	\$1,267,795	0	7,980	4,140	12,120
Other	\$-583,047	\$435,068	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$21,992,135</b>	<b>\$11,088,423</b>	<b>\$9,963,970</b>	<b>383</b>	<b>46,025</b>	<b>21,518</b>	<b>67,543</b>

**IRONSHORE INDEMNITY INC.**  
**NAIC Company Code 23647**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$4,021,594	\$2,608,672	\$0	0	4,075	0	4,075
<b>TOTAL</b>	<b>\$4,021,594</b>	<b>\$2,608,672</b>	<b>\$0</b>	<b>0</b>	<b>4,075</b>	<b>0</b>	<b>4,075</b>

**JACKSON NATIONAL LIFE INSURANCE COMPANY**  
**NAIC Company Code 65056**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,819	\$0	\$0	0	19	0	19
Disability Income	\$50,083	\$4,778,397	\$0	0	127	0	127
Limited Benefit	\$91,849	\$14,806	\$0	0	790	0	790

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<b>JACKSON NATIONAL LIFE INSURANCE COMPANY</b> NAIC Company Code 65056							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$769,303	\$2,504,172	\$0	0	371	0	371
<b>TOTAL</b>	<b>\$914,054</b>	<b>\$7,297,375</b>	<b>\$0</b>	<b>0</b>	<b>1,307</b>	<b>0</b>	<b>1,307</b>

<b>JEFFERSON NATIONAL LIFE INSURANCE COMPANY</b> NAIC Company Code 64017							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$2,521	\$166,459	\$0	0	7	0	7
Limited Benefit	\$2,069	\$64,551	\$0	0	5	0	5
Medicare Supplement	\$2,664	\$28,327	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$7,254</b>	<b>\$259,337</b>	<b>\$0</b>	<b>0</b>	<b>12</b>	<b>0</b>	<b>12</b>

<b>JOHN ALDEN LIFE INSURANCE COMPANY</b> NAIC Company Code 65080							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$850	\$0	\$0	0	5	4	9
Dental	\$1,413	\$0	\$0	0	3	1	4
Disability Income	\$27,299	\$0	\$0	0	44	2	46
Limited Benefit	\$8,573	\$0	\$0	0	19	9	28
Long Term Care-Comprehensive	\$429,281	\$318,251	\$0	0	194	65	259
Long Term Care-Facility Only	\$27,794	\$819,042	\$0	0	16	6	22

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JOHN ALDEN LIFE INSURANCE COMPANY NAIC Company Code 65080							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$155,994	\$0	\$0	0	42	0	42
TOTAL	\$651,204	\$1,137,293	\$0	0	323	87	410

JOHN HANCOCK LIFE & HEALTH INSURANCE COMPANY NAIC Company Code 93610							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$12,316,449	\$23,432,679	\$0	149	4,269	0	4,269
TOTAL	\$12,316,449	\$23,432,679	\$0	149	4,269	0	4,269

JOHN HANCOCK LIFE INSURANCE COMPANY U.S.A. NAIC Company Code 65838							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$168,245	\$1,006,706	\$0	0	97	0	97
Long Term Care-Comprehensive	\$117,031,433	\$271,161,294	\$0	444	54,618	0	54,618
TOTAL	\$117,199,678	\$272,168,000	\$0	444	54,715	0	54,715

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<b>KANSAS CITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65129</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) Individually Underwritten	\$1,286	\$100	\$0	0	1	0	1
Dental	\$76,100	\$29,456	\$0	9	97	63	160
Vision	\$2,376	\$0	\$0	1	9	12	21
Disability Income	\$132,127	\$139,785	\$0	33	378	0	378
Limited Benefit	\$5,974	\$1,176	\$0	1	18	0	18
<b>TOTAL</b>	<b>\$217,863</b>	<b>\$170,517</b>	<b>\$0</b>	<b>44</b>	<b>503</b>	<b>75</b>	<b>578</b>

<b>KNIGHTS OF COLUMBUS</b> <b>NAIC Company Code 58033</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$221,987	\$-94,336	\$0	0	280	0	280
Limited Benefit	\$4,179	\$-167	\$0	0	14	3	17
Long Term Care-Comprehensive	\$3,202,812	\$2,447,204	\$75,193	0	1,742	0	1,742
Long Term Care-Facility Only	\$474,755	\$521,987	\$1,668	0	454	0	454
<b>TOTAL</b>	<b>\$3,903,733</b>	<b>\$2,874,688</b>	<b>\$76,861</b>	<b>0</b>	<b>2,490</b>	<b>3</b>	<b>2,493</b>

<b>LAFAYETTE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65242</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$13,413	\$28,500	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$13,413</b>	<b>\$28,500</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

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<b>LAKEVIEW CENTER, INC.</b> <b>NAIC Company Code</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$34,818,326	\$0	\$0	0	144,028	0	144,028
<b>TOTAL</b>	<b>\$34,818,326</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>144,028</b>	<b>0</b>	<b>144,028</b>

<b>LASSO HEALTHCARE INSURANCE COMPANY</b> <b>NAIC Company Code 76503</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$405,644	\$95,467	\$1,153	0	113	0	113
<b>TOTAL</b>	<b>\$405,644</b>	<b>\$95,467</b>	<b>\$1,153</b>	<b>0</b>	<b>113</b>	<b>0</b>	<b>113</b>

<b>LEON HEALTH, INC.</b> <b>NAIC Company Code 16757</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$541,096,267	\$503,219,529	\$541,096,267	0	36,346	0	36,346
<b>TOTAL</b>	<b>\$541,096,267</b>	<b>\$503,219,529</b>	<b>\$541,096,267</b>	<b>0</b>	<b>36,346</b>	<b>0</b>	<b>36,346</b>

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<b>LIBERTY BANKERS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68543</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$624	\$22	\$295	0	4	2	6
Limited Benefit	\$3,600	\$10,124	\$44	0	2	1	3
Medicare Supplement	\$66,263	\$49,982	\$0	0	32	0	32
<b>TOTAL</b>	<b>\$70,487</b>	<b>\$60,128</b>	<b>\$339</b>	<b>0</b>	<b>38</b>	<b>3</b>	<b>41</b>

<b>LIBERTY DENTAL PLAN OF FLORIDA, INC.</b> <b>NAIC Company Code 13761</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$3,524,650	\$0	\$0	4	194,020	0	194,020
Dental	\$137,568,788	\$111,604,933	\$0	2	1,574,432	0	1,574,432
Other	\$0	\$45,920,863	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$141,093,438</b>	<b>\$157,525,796</b>	<b>\$0</b>	<b>6</b>	<b>1,768,452</b>	<b>0</b>	<b>1,768,452</b>

<b>LIBERTY INSURANCE UNDERWRITERS INC.</b> <b>NAIC Company Code 19917</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$526,689	\$239,564	\$0	0	292,276	0	292,276
Excess/Stop Loss	\$0	\$-1,518,996	\$0	0	0	0	0
Limited Benefit	\$22,231	\$50,350	\$0	0	49	32	81
<b>TOTAL</b>	<b>\$548,920</b>	<b>\$-1,229,082</b>	<b>\$0</b>	<b>0</b>	<b>292,325</b>	<b>32</b>	<b>292,357</b>

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<b>LIBERTY MUTUAL INSURANCE COMPANY</b> <b>NAIC Company Code 23043</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Disability Income</b>	<b>\$0</b>	<b>\$-4,134</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>TOTAL</b>	<b>\$0</b>	<b>\$-4,134</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>LIBERTY NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65331</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	<b>\$3,061,376</b>	<b>\$1,381,158</b>	<b>\$358,069</b>	<b>0</b>	<b>44,215</b>	<b>0</b>	<b>44,215</b>
<b>Dental</b>	<b>\$2,493</b>	<b>\$214</b>	<b>\$0</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>10</b>
<b>Vision</b>	<b>\$13,091</b>	<b>\$5,437</b>	<b>\$5,341</b>	<b>0</b>	<b>173</b>	<b>0</b>	<b>173</b>
<b>Disability Income</b>	<b>\$144</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Limited Benefit</b>	<b>\$12,932,955</b>	<b>\$6,858,156</b>	<b>\$721,243</b>	<b>0</b>	<b>38,721</b>	<b>5,419</b>	<b>44,140</b>
<b>Medicare Supplement</b>	<b>\$321,016</b>	<b>\$276,672</b>	<b>\$0</b>	<b>0</b>	<b>208</b>	<b>0</b>	<b>208</b>
<b>TOTAL</b>	<b>\$16,331,075</b>	<b>\$8,521,637</b>	<b>\$1,084,653</b>	<b>0</b>	<b>83,327</b>	<b>5,419</b>	<b>88,746</b>



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<b>LIFE INSURANCE COMPANY OF ALABAMA</b> <b>NAIC Company Code 65412</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,266	\$609	\$1,893	0	16	6	22
Dental	\$5,331	\$3,927	\$1,139	0	12	9	21
Vision	\$65	\$0	\$65	0	0	0	0
Disability Income	\$1,477	\$0	\$445	0	6	0	6
Limited Benefit	\$263,311	\$230,479	\$10,826	0	324	234	558
<b>TOTAL</b>	<b>\$277,450</b>	<b>\$235,015</b>	<b>\$14,368</b>	<b>0</b>	<b>358</b>	<b>249</b>	<b>607</b>

<b>LIFE INSURANCE COMPANY OF NORTH AMERICA</b> <b>NAIC Company Code 65498</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$17,676,654	\$9,808,810	\$0	3,104	545,449	0	545,449
Disability Income	\$157,997,442	\$158,785,020	\$0	5,290	208,129	0	208,129
Limited Benefit	\$13,490,013	\$5,012,203	\$0	2,360	58,306	0	58,306
<b>TOTAL</b>	<b>\$189,164,109</b>	<b>\$173,606,033</b>	<b>\$0</b>	<b>10,754</b>	<b>811,884</b>	<b>0</b>	<b>811,884</b>

<b>LIFE INSURANCE COMPANY OF THE SOUTHWEST</b> <b>NAIC Company Code 65528</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$211	\$0	\$0	0	4	0	4
<b>TOTAL</b>	<b>\$211</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>4</b>

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<b>LIFE OF THE SOUTH INSURANCE COMPANY</b> <b>NAIC Company Code 97691</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$11,818	\$9,595	\$11,818	0	48	48	96
Limited Benefit	\$1,834	\$-277	\$1,834	0	17	17	34
<b>TOTAL</b>	<b>\$13,652</b>	<b>\$9,318</b>	<b>\$13,652</b>	<b>0</b>	<b>65</b>	<b>65</b>	<b>130</b>

<b>LIFESECURE INSURANCE COMPANY</b> <b>NAIC Company Code 77720</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$117,276	\$116,457	\$16,086	8	285	195	480
Disability Income	\$11	\$0	\$0	0	1	0	1
Limited Benefit	\$258,788	\$31,988	\$24,813	3	503	88	591
Long Term Care-Comprehensive	\$4,734,760	\$2,019,699	\$9,751	0	2,450	0	2,450
<b>TOTAL</b>	<b>\$5,110,835</b>	<b>\$2,168,144</b>	<b>\$50,650</b>	<b>11</b>	<b>3,239</b>	<b>283</b>	<b>3,522</b>

<b>LINCOLN BENEFIT LIFE COMPANY</b> <b>NAIC Company Code 65595</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$3,539,291	\$22,905,455	\$0	0	1,851	740	2,591
Long Term Care-Facility Only	\$114,726	\$707,231	\$0	0	60	20	80
Long Term Care-Non-Facility Only	\$724,685	\$3,845,571	\$0	0	379	56	435
<b>TOTAL</b>	<b>\$4,378,702</b>	<b>\$27,458,257</b>	<b>\$0</b>	<b>0</b>	<b>2,290</b>	<b>816</b>	<b>3,106</b>

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<b>LINCOLN HERITAGE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65927</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$931	\$0	\$0	0	7	0	7
Medicare Supplement	\$218,331	\$127,975	\$0	0	63	0	63
<b>TOTAL</b>	<b>\$219,262</b>	<b>\$127,975</b>	<b>\$0</b>	<b>0</b>	<b>70</b>	<b>0</b>	<b>70</b>

<b>LINCOLN LIFE &amp; ANNUITY COMPANY OF NEW YORK</b> <b>NAIC Company Code 62057</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$10,111	\$64	\$6,624	0	194	0	194
Dental	\$27,729	\$103,422	\$0	0	0	0	0
Disability Income	\$810,942	\$356,000	\$318,138	52	30,543	0	30,543
Limited Benefit	\$1,014	\$0	\$505	0	0	0	0
<b>TOTAL</b>	<b>\$849,796</b>	<b>\$459,486</b>	<b>\$325,267</b>	<b>52</b>	<b>30,737</b>	<b>0</b>	<b>30,737</b>

<b>LINCOLN NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65676</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$8,809,050	\$2,635,623	\$1,319,442	1,141	415,027	0	415,027
Dental	\$13,333,099	\$9,601,241	\$2,746,520	257	25,488	0	25,488
Disability Income	\$130,348,754	\$133,436,728	\$10,634,253	1,637	707,627	0	707,627
Limited Benefit	\$3,392,098	\$705,475	\$1,640,363	63	12,039	0	12,039

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<b>LINCOLN NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65676</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$161,836	\$685,535	\$0	0	73	0	73
<b>TOTAL</b>	<b>\$156,044,837</b>	<b>\$147,064,602</b>	<b>\$16,340,578</b>	<b>3,098</b>	<b>1,160,254</b>	<b>0</b>	<b>1,160,254</b>

<b>LIO INSURANCE COMPANY</b> <b>NAIC Company Code 40550</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$72	\$28	\$72	3	350	0	350
<b>TOTAL</b>	<b>\$72</b>	<b>\$28</b>	<b>\$72</b>	<b>3</b>	<b>350</b>	<b>0</b>	<b>350</b>

<b>LONGEVITY HEALTH PLAN OF FLORIDA, INC.</b> <b>NAIC Company Code 16567</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$23,575,936	\$22,783,903	\$0	0	782	0	782
<b>TOTAL</b>	<b>\$23,575,936</b>	<b>\$22,783,903</b>	<b>\$0</b>	<b>0</b>	<b>782</b>	<b>0</b>	<b>782</b>

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<b>LOYAL AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65722</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$1,625	\$-193	\$0	0	64	0	64
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$838,368	\$264,985	\$184,411	0	2,393	868	3,261
Disability Income	\$5,884	\$-3,560	\$0	0	8	0	8
Limited Benefit	\$15,623,083	\$5,630,641	\$3,081,729	0	34,636	10,051	44,687
Long Term Care-Comprehensive	\$6,419	\$142	\$0	0	2	0	2
Medicare Supplement	\$3,030,920	\$1,491,533	\$0	0	581	0	581
<b>TOTAL</b>	<b>\$19,506,299</b>	<b>\$7,383,549</b>	<b>\$3,266,139</b>	<b>0</b>	<b>37,684</b>	<b>10,919</b>	<b>48,603</b>

  

<b>LUMICO LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 73504</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$55,348	\$116,059	\$0	0	327	0	327
Medicare Supplement	\$65,328	\$33,207	\$0	0	213	0	213
<b>TOTAL</b>	<b>\$120,676</b>	<b>\$149,266</b>	<b>\$0</b>	<b>0</b>	<b>540</b>	<b>0</b>	<b>540</b>

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**MADISON NATIONAL LIFE INSURANCE COMPANY INC.**  
**NAIC Company Code 65781**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$234,020	\$-36,023	\$234,020	5	2,240	401	2,641
Dental	\$101,896	\$38,766	\$101,896	1	219	116	335
Vision	\$3,184	\$847	\$3,184	1	18	9	27
Disability Income	\$1,640,958	\$1,079,731	\$1,640,958	39	7,708	0	7,708
Limited Benefit	\$373,183	\$-7,470	\$373,183	16	4,290	742	5,032
<b>TOTAL</b>	<b>\$2,353,241</b>	<b>\$1,075,851</b>	<b>\$2,353,241</b>	<b>62</b>	<b>14,475</b>	<b>1,268</b>	<b>15,743</b>

**MAGNA INSURANCE COMPANY**  
**NAIC Company Code 61018**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Prescription Drug	\$8,670	\$305	\$0	2	12	0	12
<b>TOTAL</b>	<b>\$8,670</b>	<b>\$305</b>	<b>\$0</b>	<b>2</b>	<b>12</b>	<b>0</b>	<b>12</b>

**MANHATTAN LIFE INSURANCE COMPANY**  
**NAIC Company Code 65870**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,712	\$0	\$0	0	4	6	10
Disability Income	\$666,092	\$258,640	\$50,981	23	844	0	844
Limited Benefit	\$192,764	\$55,733	\$0	0	251	72	323

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<b>MANHATTAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65870</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$1,907,548	\$1,560,619	\$0	0	409	0	409
<b>TOTAL</b>	<b>\$2,769,116</b>	<b>\$1,874,992</b>	<b>\$50,981</b>	<b>23</b>	<b>1,508</b>	<b>78</b>	<b>1,586</b>

<b>MANHATTAN NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67083</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$255	\$0	\$0	0	1	0	1
Long Term Care-Comprehensive	\$62,456	\$68,927	\$0	0	122	0	122
<b>TOTAL</b>	<b>\$62,711</b>	<b>\$68,927</b>	<b>\$0</b>	<b>0</b>	<b>123</b>	<b>0</b>	<b>123</b>

<b>MANHATTANLIFE INSURANCE AND ANNUITY COMPANY</b> <b>NAIC Company Code 61883</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,159	\$58	\$674	0	232	24	256
Dental	\$291,025	\$235,457	\$5,962	0	703	0	703
Disability Income	\$3,371,300	\$1,145,675	\$581,528	9	185	0	185
Limited Benefit	\$955,637	\$919,861	\$7,255	0	1,194	408	1,602
Long Term Care-Comprehensive	\$3,918	\$0	\$0	0	5	1	6
Medicare Supplement	\$115,180	\$81,711	\$11,966	0	91	2	93
Misc.	\$0	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$4,743,219</b>	<b>\$2,382,762</b>	<b>\$607,385</b>	<b>9</b>	<b>2,412</b>	<b>435</b>	<b>2,847</b>

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<b>MANHATTANLIFE OF AMERICA INSURANCE COMPANY</b> <b>NAIC Company Code 16755</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$1,828	\$0	\$1,828	0	6	0	6
<b>TOTAL</b>	<b>\$1,828</b>	<b>\$0</b>	<b>\$1,828</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>6</b>

<b>MARKEL INSURANCE COMPANY</b> <b>NAIC Company Code 38970</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$526,852	\$30,627	\$30,693	0	184,073	0	184,073
<b>TOTAL</b>	<b>\$526,852</b>	<b>\$30,627</b>	<b>\$30,693</b>	<b>0</b>	<b>184,073</b>	<b>0</b>	<b>184,073</b>

<b>MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65935</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$33,368	\$5,503	\$10,754	2	71	43	114
Disability Income	\$23,262,285	\$9,258,954	\$2,021,874	0	5,466	0	5,466
Limited Benefit	\$108	\$39	\$0	1	1	0	1
Long Term Care-Comprehensive	\$14,684,959	\$5,977,409	\$0	0	3,261	436	3,697
Long Term Care-Accelerated Benefit Rider	\$664,123	\$0	\$39,643	0	511	0	511
Medicare Supplement	\$11,253	\$2,750	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$38,656,096</b>	<b>\$15,244,655</b>	<b>\$2,072,271</b>	<b>3</b>	<b>9,310</b>	<b>479</b>	<b>9,789</b>



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**MASSMUTUAL ASCEND LIFE INSURANCE COMPANY**  
**NAIC Company Code 63312**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$282	\$0	\$0	0	4	0	4
Disability Income	\$164	\$2,754	\$0	0	0	0	0
Limited Benefit	\$-84	\$0	\$0	0	0	0	0
Long Term Care-Comprehensive	\$50,127	\$202,448	\$0	0	22	0	22
Medicare Supplement	\$264,474	\$205,502	\$0	0	80	0	80
<b>TOTAL</b>	<b>\$314,963</b>	<b>\$410,704</b>	<b>\$0</b>	<b>0</b>	<b>106</b>	<b>0</b>	<b>106</b>

**MEDAMERICA INSURANCE COMPANY OF FLORIDA**  
**NAIC Company Code 12967**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Accelerated Benefit Rider	\$3,972,120	\$2,853,484	\$0	30	1,862	0	1,862
<b>TOTAL</b>	<b>\$3,972,120</b>	<b>\$2,853,484</b>	<b>\$0</b>	<b>30</b>	<b>1,862</b>	<b>0</b>	<b>1,862</b>

**MEDICAL AIR SERVICES ASSOCIATION OF FLORIDA, INC.**  
**NAIC Company Code 52008**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$4,421,662	\$536,558	\$4,421,662	0	198,309	0	198,309
<b>TOTAL</b>	<b>\$4,421,662</b>	<b>\$536,558</b>	<b>\$4,421,662</b>	<b>0</b>	<b>198,309</b>	<b>0</b>	<b>198,309</b>

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<b>MEDICO CORP LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 79987</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$6,058	\$0	\$0	0	7	1	8
Medicare Supplement	\$1,375,281	\$1,147,228	\$0	0	580	0	580
<b>TOTAL</b>	<b>\$1,381,339</b>	<b>\$1,147,228</b>	<b>\$0</b>	<b>0</b>	<b>587</b>	<b>1</b>	<b>588</b>

<b>MEDICO INSURANCE COMPANY</b> <b>NAIC Company Code 31119</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$16,826	\$0	\$0	0	22	6	28
Dental	\$707,971	\$435,238	\$22,500	1	1,247	7	1,254
Disability Income	\$2,191	\$12,820	\$0	0	4	0	4
Limited Benefit	\$757,892	\$529,083	\$55,145	0	2,006	204	2,210
Long Term Care-Comprehensive	\$182	\$0	\$0	0	0	0	0
Short Term Care	\$25,036	\$0	\$0	0	24	0	24
Medicare Supplement	\$2,580,347	\$2,156,695	\$0	1	712	0	712
<b>TOTAL</b>	<b>\$4,090,445</b>	<b>\$3,133,836</b>	<b>\$77,645</b>	<b>2</b>	<b>4,015</b>	<b>217</b>	<b>4,232</b>

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<b>MERIT LIFE INSURANCE CO.</b> <b>NAIC Company Code 65951</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$-54	\$4,207	\$0	0	27,683	4,790	32,473
<b>TOTAL</b>	<b>\$-54</b>	<b>\$4,207</b>	<b>\$0</b>	<b>0</b>	<b>27,683</b>	<b>4,790</b>	<b>32,473</b>

<b>METROPOLITAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65978</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$334,607	\$297,499	\$0	0	47	37	84
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$3,203,290	\$117,139	\$0	17	17	66	83
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$32,035,110	\$7,207,638	\$0	32	1,921	0	1,921
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$22,656,448	\$16,173,933	\$0	1,012	649,533	0	649,533
Dental	\$305,890,078	\$282,047,964	\$0	1,481	637,741	1,403,030	2,040,771
Vision	\$19,319,839	\$10,420,017	\$0	678	148,972	327,738	476,710
Disability Income	\$184,156,353	\$166,984,494	\$0	13,338	0	0	0
Limited Benefit	\$22,258,853	\$5,847,523	\$0	87	176,232	0	176,232
Long Term Care-Comprehensive	\$30,864,904	\$31,188,929	\$0	159	19,840	0	19,840
Long Term Care-Facility Only	\$1,120,032	\$3,047,802	\$0	33	0	0	0
<b>TOTAL</b>	<b>\$621,839,514</b>	<b>\$523,332,938</b>	<b>\$0</b>	<b>16,837</b>	<b>1,634,303</b>	<b>1,730,871</b>	<b>3,365,174</b>

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**METROPOLITAN TOWER LIFE INSURANCE COMPANY**  
**NAIC Company Code 97136**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$110,469	\$1,879,120	\$0	0	76	0	76
<b>TOTAL</b>	<b>\$110,469</b>	<b>\$1,879,120</b>	<b>\$0</b>	<b>0</b>	<b>76</b>	<b>0</b>	<b>76</b>

**MID-WEST NATIONAL LIFE INSURANCE COMPANY OF TN**  
**NAIC Company Code 66087**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,622	\$4	\$0	0	33	12	45
Dental	\$16,708	\$3,570	\$0	0	68	51	119
Vision	\$46,248	\$22,461	\$0	0	845	550	1,395
Disability Income	\$24,476	\$2,779	\$0	0	90	0	90
Limited Benefit	\$268,891	\$20,683	\$0	0	750	289	1,039
Medicare Supplement	\$1,472	\$0	\$0	0	1	2	3
<b>TOTAL</b>	<b>\$361,417</b>	<b>\$49,497</b>	<b>\$0</b>	<b>0</b>	<b>1,787</b>	<b>904</b>	<b>2,691</b>

**MIDLAND NATIONAL LIFE INSURANCE COMPANY**  
**NAIC Company Code 66044**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,114	\$0	\$0	0	1	1	2
<b>TOTAL</b>	<b>\$2,114</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>

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<b>MINNESOTA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66168</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$28,875,958	\$10,080,207	\$36,938	7	333,252	0	333,252
Disability Income	\$987,370	\$8,571,239	\$0	0	347	0	347
Long Term Care-Comprehensive	\$84,847	\$0	\$0	0	9	5	14
<b>TOTAL</b>	<b>\$29,948,175</b>	<b>\$18,651,446</b>	<b>\$36,938</b>	<b>7</b>	<b>333,608</b>	<b>5</b>	<b>333,613</b>

<b>MMM OF FLORIDA, INC.</b> <b>NAIC Company Code 16177</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$28,952,347	\$34,231,570	\$0	0	1,128	0	1,128
<b>TOTAL</b>	<b>\$28,952,347</b>	<b>\$34,231,570</b>	<b>\$0</b>	<b>0</b>	<b>1,128</b>	<b>0</b>	<b>1,128</b>

<b>MODERN WOODMEN OF AMERICA</b> <b>NAIC Company Code 57541</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$6,153	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$6,153</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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<b>MOLINA HEALTHCARE OF FLORIDA, INC.</b> <b>NAIC Company Code 13128</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$174,000,347	\$133,762,806	\$66,594,614	0	25,265	5,236	30,501
Medicare Advantage (Medicare+Choice)	\$28,763,433	\$31,289,290	\$8,130,877	0	1,902	0	1,902
Misc.	\$832,129,055	\$667,766,613	\$122,612,348	0	178,346	0	178,346
<b>TOTAL</b>	<b>\$1,034,892,835</b>	<b>\$832,818,709</b>	<b>\$197,337,839</b>	<b>0</b>	<b>205,513</b>	<b>5,236</b>	<b>210,749</b>

<b>MONY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66370</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$6,562	\$19,595	\$0	0	7	0	7
Disability Income	\$971,163	\$1,436,417	\$0	0	664	0	664
Limited Benefit	\$56	\$230	\$0	0	15	0	15
<b>TOTAL</b>	<b>\$977,781</b>	<b>\$1,456,242</b>	<b>\$0</b>	<b>0</b>	<b>686</b>	<b>0</b>	<b>686</b>

<b>MUTUAL OF AMERICA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 88668</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$60,469	\$333,959	\$0	11	17	0	17
<b>TOTAL</b>	<b>\$60,469</b>	<b>\$333,959</b>	<b>\$0</b>	<b>11</b>	<b>17</b>	<b>0</b>	<b>17</b>

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<b>MUTUAL OF OMAHA INSURANCE COMPANY</b> <b>NAIC Company Code 71412</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$24,876	\$40,918	\$0	0	60	9	69
Grandfathered (In-State and Out-of-State) Conversion	\$250	\$107	\$0	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$11,111,654	\$5,467,233	\$1,896,641	389	614,920	9,442	624,362
Dental	\$1,128,662	\$656,065	\$369,123	0	2,921	3	2,924
Disability Income	\$1,708,151	\$2,963,927	\$161,891	35	3,037	0	3,037
Limited Benefit	\$3,556,301	\$1,959,152	\$701,708	0	14,081	2,866	16,947
Long Term Care-Comprehensive	\$22,069,948	\$7,717,804	\$1,018,613	1	9,328	0	9,328
Long Term Care-Facility Only	\$419,577	\$972,550	\$0	0	172	0	172
Long Term Care-Non-Facility Only	\$443,900	\$761,258	\$0	0	182	0	182
Medicare Supplement	\$24,048,841	\$19,452,245	\$0	0	7,113	0	7,113
Other	\$16,277	\$12	\$0	0	792	12	804
<b>TOTAL</b>	<b>\$64,528,437</b>	<b>\$39,991,270</b>	<b>\$4,147,976</b>	<b>425</b>	<b>652,606</b>	<b>12,332</b>	<b>664,938</b>

<b>MUTUAL SAVINGS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66397</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$623	\$0	\$0	0	77	0	77
Limited Benefit	\$8,101	\$24,830	\$0	0	118	0	118
<b>TOTAL</b>	<b>\$8,724</b>	<b>\$24,830</b>	<b>\$0</b>	<b>0</b>	<b>195</b>	<b>0</b>	<b>195</b>

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<b>NASSAU LIFE AND ANNUITY COMPANY</b> <b>NAIC Company Code 93734</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$0	\$0	\$0	0	13	0	13
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$296	\$6,274	\$0	0	168	0	168
Dental	\$19,069	\$7,572	\$0	0	63	0	63
Disability Income	\$239,843	\$608,981	\$0	0	653	0	653
Limited Benefit	\$128,625	\$55,206	\$0	0	249	0	249
Long Term Care-Comprehensive	\$527,979	\$3,103,175	\$0	0	404	0	404
Long Term Care-Non-Facility Only	\$670,028	\$1,164,209	\$0	0	111	0	111
Medicare Supplement	\$14,361,765	\$11,705,805	\$0	0	3,909	0	3,909
<b>TOTAL</b>	<b>\$15,947,605</b>	<b>\$16,651,222</b>	<b>\$0</b>	<b>0</b>	<b>5,570</b>	<b>0</b>	<b>5,570</b>

<b>NASSAU LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67814</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$11,985	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$11,985</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>



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<b>NASSAU LIFE INSURANCE COMPANY OF KANSAS</b> <b>NAIC Company Code 68284</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$780	\$193	\$0	0	3	0	3
Disability Income	\$799	\$10,917	\$0	0	0	0	0
Limited Benefit	\$36,846	\$75,902	\$0	0	79	0	79
Long Term Care-Comprehensive	\$83,781	\$489,566	\$0	0	23	0	23
Long Term Care-Non-Facility Only	\$4,093	\$33,280	\$0	0	8	0	8
Medicare Supplement	\$421,178	\$486,515	\$0	0	121	0	121
<b>TOTAL</b>	<b>\$547,477</b>	<b>\$1,096,373</b>	<b>\$0</b>	<b>0</b>	<b>234</b>	<b>0</b>	<b>234</b>

<b>NATIONAL BENEFIT LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61409</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$6,992	\$0	\$0	0	13	7	20
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$21	\$0	\$0	0	1	0	1
Disability Income	\$155	\$-1,709	\$0	0	1	0	1
Limited Benefit	\$13,635	\$-9,012	\$0	0	84	0	84
<b>TOTAL</b>	<b>\$20,803</b>	<b>\$-10,721</b>	<b>\$0</b>	<b>0</b>	<b>99</b>	<b>7</b>	<b>106</b>

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<b>NATIONAL CASUALTY COMPANY</b> <b>NAIC Company Code 11991</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$892	\$0	\$0	0	78	2	80
Limited Benefit	\$320	\$65,147	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$1,212</b>	<b>\$65,147</b>	<b>\$0</b>	<b>0</b>	<b>81</b>	<b>2</b>	<b>83</b>

<b>NATIONAL GUARDIAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66583</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$-28	\$1,551	\$-28	0	0	0	0
Dental	\$1,770,737	\$1,598,573	\$1,770,737	261	7,551	3,005	10,556
Vision	\$16,973,172	\$7,794,891	\$16,973,172	463	75,754	55,046	130,800
Disability Income	\$10,501	\$51,106	\$0	0	23	0	23
Limited Benefit	\$591,977	\$84,012	\$0	5	766	284	1,050
Long Term Care-Comprehensive	\$456,532	\$0	\$456,532	0	196	0	196
Medicare Supplement	\$107,539	\$59,392	\$107,539	0	98	49	147
Misc.	\$0	\$546	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$19,910,430</b>	<b>\$9,590,071</b>	<b>\$19,307,952</b>	<b>729</b>	<b>84,388</b>	<b>58,384</b>	<b>142,772</b>

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<b>NATIONAL HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 82538</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$-350,982	\$-558,755	\$0	0	3,553	2,235	5,788
Dental	\$5,598,006	\$2,515,466	\$4,142,286	0	11,580	4,273	15,853
Disability Income	\$11,230	\$3,804	\$0	0	14	2	16
Limited Benefit	\$2,129,296	\$451,411	\$1,445,242	0	1,957	898	2,855
Medicare Supplement	\$347,966	\$222,331	\$183,869	0	128	0	128
Other	\$63,184,224	\$26,682,191	\$57,808,030	0	10,279	6,618	16,897
<b>TOTAL</b>	<b>\$70,919,740</b>	<b>\$29,316,448</b>	<b>\$63,579,427</b>	<b>0</b>	<b>27,511</b>	<b>14,026</b>	<b>41,537</b>

<b>NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66680</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$1,006,582	\$4,649,281	\$0	0	339	0	339
<b>TOTAL</b>	<b>\$1,006,582</b>	<b>\$4,649,281</b>	<b>\$0</b>	<b>0</b>	<b>339</b>	<b>0</b>	<b>339</b>

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<b>NATIONAL TEACHERS ASSOCIATES LIFE INSURANCE CO. NAIC Company Code 87963</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,315,587	\$102,683	\$0	0	4,084	3,824	7,908
Disability Income	\$1,992,985	\$493,202	\$0	0	2,542	0	2,542
Limited Benefit	\$4,230,422	\$1,107,288	\$0	0	12,162	13,747	25,909
<b>TOTAL</b>	<b>\$7,538,994</b>	<b>\$1,703,173</b>	<b>\$0</b>	<b>0</b>	<b>18,788</b>	<b>17,571</b>	<b>36,359</b>

<b>NATIONAL UNION FIRE INSURANCE CO. OF PITTSBURGH, PA NAIC Company Code 19445</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,922,520	\$2,038,897	\$1,164,897	213	370,194	1	370,195
Limited Benefit	\$912,580	\$1,139,024	\$0	0	1,995	248	2,243
Other	\$0	\$10,672	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$8,835,100</b>	<b>\$3,188,593</b>	<b>\$1,164,897</b>	<b>213</b>	<b>372,189</b>	<b>249</b>	<b>372,438</b>

<b>NATIONAL WESTERN LIFE INSURANCE COMPANY NAIC Company Code 66850</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$858	\$1,140	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$858</b>	<b>\$1,140</b>	<b>\$0</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>10</b>

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NATIONWIDE LIFE AND ANNUITY INSURANCE COMPANY NAIC Company Code 92657							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$143	\$0	\$0	0	1	0	1
TOTAL	\$143	\$0	\$0	0	1	0	1

NATIONWIDE LIFE INSURANCE COMPANY NAIC Company Code 66869							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,974	\$2,312	\$0	29	1,071	671	1,742
Dental	\$2,167,809	\$1,745,014	\$0	0	4,998	1,533	6,531
Prescription Drug	\$155,263	\$49,412	\$0	27	1,353	439	1,792
Vision	\$4	\$-69	\$0	0	165	127	292
Disability Income	\$-1	\$3,183	\$0	0	6	0	6
Excess/Stop Loss	\$10,559,913	\$4,915,129	\$0	33	0	0	0
Limited Benefit	\$4,494,949	\$3,043,600	\$0	74	3,328	1,069	4,397
Medicare Supplement	\$278,548	\$285,038	\$0	0	127	4	131
Other	\$840,574	\$413,189	\$0	20	466	257	723
TOTAL	\$18,500,033	\$10,456,808	\$0	183	11,514	4,100	15,614

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<b>NATIONWIDE MUTUAL INSURANCE COMPANY</b> <b>NAIC Company Code 23787</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$0	\$5	\$0	0	0	0	0
Medicare Supplement	\$0	\$-39,449	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$-39,444</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>NEIGHBORHOOD HEALTH PARTNERSHIP, INC.</b> <b>NAIC Company Code 95123</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$289,643,353	\$220,943,413	\$38,648,271	7,768	33,707	15,039	48,746
ACA Off Exchange 51-100 Member Groups	\$165,530,811	\$151,847,827	\$33,780,833	1,787	25,414	9,586	35,000
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$451,445,788	\$362,538,767	\$83,375,160	1,762	54,700	27,571	82,271
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$1,749,158	\$342,243	\$0	0	120	108	228
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$1,230,539	\$523,829	\$0	0	80	22	102
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$54,246,862	\$62,803,052	\$0	880	4,481	2,931	7,412
<b>TOTAL</b>	<b>\$963,846,511</b>	<b>\$798,999,131</b>	<b>\$155,804,264</b>	<b>12,197</b>	<b>118,502</b>	<b>55,257</b>	<b>173,759</b>

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<b>NEW ENGLAND LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 91626</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$99,030	\$369,961	\$0	0	126	0	126
<b>TOTAL</b>	<b>\$99,030</b>	<b>\$369,961</b>	<b>\$0</b>	<b>0</b>	<b>126</b>	<b>0</b>	<b>126</b>

<b>NEW ERA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 78743</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$20,535	\$-1,602	\$0	0	8	4	12
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$30	\$128	\$0	0	1	0	1
Disability Income	\$316,245	\$157,900	\$0	1	405	606	1,011
Limited Benefit	\$12,810	\$4,601	\$0	0	46	20	66
Medicare Supplement	\$1,572,769	\$1,092,696	\$64,339	0	582	0	582
<b>TOTAL</b>	<b>\$1,922,389</b>	<b>\$1,253,723</b>	<b>\$64,339</b>	<b>1</b>	<b>1,042</b>	<b>630</b>	<b>1,672</b>

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<b>NEW YORK LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 66915</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$9,468	\$-6,293	\$0	0	8	0	8
Administrative Services Only (ASO)	\$0	\$0	\$0	62	876	22	898
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$910,122	\$514,110	\$73,396	120	18,650	1,119	19,769
Disability Income	\$8,588,357	\$8,243,532	\$365,212	120	5,213	22	5,235
Limited Benefit	\$629,036	\$298,509	\$13,648	27	846	124	970
Long Term Care-Comprehensive	\$19,814,262	\$11,940,083	\$433,677	1	6,484	0	6,484
Long Term Care-Facility Only	\$284,030	\$-45,297	\$0	0	38	0	38
Medicare Supplement	\$60,091	\$31,440	\$0	0	13	0	13
<b>TOTAL</b>	<b>\$30,295,366</b>	<b>\$20,976,084</b>	<b>\$885,933</b>	<b>330</b>	<b>32,128</b>	<b>1,287</b>	<b>33,415</b>

<b>NIPPON LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 81264</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$273,712	\$108,387	\$57,644	63	449	264	713
Vision	\$53,642	\$24,536	\$9,925	11	420	262	682
Disability Income	\$44,631	\$15,154	\$3,619	12	113	0	113
<b>TOTAL</b>	<b>\$371,985</b>	<b>\$148,077</b>	<b>\$71,188</b>	<b>86</b>	<b>982</b>	<b>526</b>	<b>1,508</b>



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<b>NORTH AMERICAN COMPANY FOR LIFE AND HEALTH INSURANCE</b> <b>NAIC Company Code 66974</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Disability Income</b>	<b>\$131</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>
<b>TOTAL</b>	<b>\$131</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>

<b>NORTH RIVER INSURANCE COMPANY</b> <b>NAIC Company Code 21105</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	<b>\$639,921</b>	<b>\$260,466</b>	<b>\$0</b>	<b>0</b>	<b>204</b>	<b>0</b>	<b>204</b>
<b>Excess/Stop Loss</b>	<b>\$2,153,324</b>	<b>\$1,507,086</b>	<b>\$0</b>	<b>0</b>	<b>570</b>	<b>0</b>	<b>570</b>
<b>TOTAL</b>	<b>\$2,793,245</b>	<b>\$1,767,552</b>	<b>\$0</b>	<b>0</b>	<b>774</b>	<b>0</b>	<b>774</b>

<b>NORTHWESTERN LONG TERM CARE INSURANCE COMPANY</b> <b>NAIC Company Code 69000</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Long Term Care-Comprehensive</b>	<b>\$56,805,090</b>	<b>\$10,374,902</b>	<b>\$1,179,572</b>	<b>0</b>	<b>17,847</b>	<b>0</b>	<b>17,847</b>
<b>TOTAL</b>	<b>\$56,805,090</b>	<b>\$10,374,902</b>	<b>\$1,179,572</b>	<b>0</b>	<b>17,847</b>	<b>0</b>	<b>17,847</b>

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<b>NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67091</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$94,851,733	\$72,858,808	\$13,869,022	15,839	44,273	0	44,273
<b>TOTAL</b>	<b>\$94,851,733</b>	<b>\$72,858,808</b>	<b>\$13,869,022</b>	<b>15,839</b>	<b>44,273</b>	<b>0</b>	<b>44,273</b>

<b>OCCIDENTAL LIFE INSURANCE COMPANY OF N CAROLINA</b> <b>NAIC Company Code 67148</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,506	\$4,989	\$0	0	14	0	14
Disability Income	\$1,002	\$1,425	\$0	0	4	0	4
Limited Benefit	\$20,536	\$29,223	\$0	0	82	0	82
<b>TOTAL</b>	<b>\$25,044</b>	<b>\$35,637</b>	<b>\$0</b>	<b>0</b>	<b>100</b>	<b>0</b>	<b>100</b>

<b>OHIO NATIONAL LIFE ASSURANCE CORPORATION</b> <b>NAIC Company Code 89206</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$7,271,841	\$2,772,820	\$1,159,672	0	2,385	0	2,385
<b>TOTAL</b>	<b>\$7,271,841</b>	<b>\$2,772,820</b>	<b>\$1,159,672</b>	<b>0</b>	<b>2,385</b>	<b>0</b>	<b>2,385</b>

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<b>OHIO NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67172</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$314,120	\$363,539	\$0	0	183	0	183
<b>TOTAL</b>	<b>\$314,120</b>	<b>\$363,539</b>	<b>\$0</b>	<b>0</b>	<b>183</b>	<b>0</b>	<b>183</b>

<b>OHIO STATE LIFE INSURANCE COMPANY (THE)</b> <b>NAIC Company Code 67180</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) Individually Underwritten	\$0	\$-7,034	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$-7,034</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>OLD AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 67199</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,083	\$7	\$0	0	37	0	37
Limited Benefit	\$1,581	\$16	\$0	0	29	0	29
Long Term Care-Comprehensive	\$12,794	\$274,095	\$0	0	4	0	4
Short Term Care	\$24,870	\$286,515	\$0	0	18	0	18
<b>TOTAL</b>	<b>\$40,328</b>	<b>\$560,633</b>	<b>\$0</b>	<b>0</b>	<b>88</b>	<b>0</b>	<b>88</b>

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<b>OLD REPUBLIC INSURANCE COMPANY</b> <b>NAIC Company Code 24147</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$-10	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$-10</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>OLD REPUBLIC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67261</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$62	\$0	\$0	0	45,406	0	45,406
<b>TOTAL</b>	<b>\$62</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>45,406</b>	<b>0</b>	<b>45,406</b>

<b>OMAHA HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 88080</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Prescription Drug	\$3,596,112	\$3,594,479	\$603,241	0	4,161	0	4,161
<b>TOTAL</b>	<b>\$3,596,112</b>	<b>\$3,594,479</b>	<b>\$603,241</b>	<b>0</b>	<b>4,161</b>	<b>0</b>	<b>4,161</b>

<b>OPTIMUM HEALTHCARE, INC.</b> <b>NAIC Company Code 12259</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$985,393,575	\$853,792,772	\$0	0	57,347	0	57,347
<b>TOTAL</b>	<b>\$985,393,575</b>	<b>\$853,792,772</b>	<b>\$0</b>	<b>0</b>	<b>57,347</b>	<b>0</b>	<b>57,347</b>

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<b>ORDER OF UNITED COMMERCIAL TRAVELERS OF AMERICA (THE) NAIC Company Code 56383</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,609	\$687	\$0	0	36	9	45
Dental	\$41,293	\$0	\$0	0	67	0	67
Disability Income	\$8,307	\$13,653	\$0	0	167	0	167
Limited Benefit	\$1,643	\$8,747	\$0	0	12	4	16
Short Term Care	\$7,733	\$0	\$0	0	7	0	7
Medicare Supplement	\$1,502,817	\$1,498,259	\$0	0	443	0	443
<b>TOTAL</b>	<b>\$1,564,402</b>	<b>\$1,521,346</b>	<b>\$0</b>	<b>0</b>	<b>732</b>	<b>13</b>	<b>745</b>

<b>OSCAR INSURANCE COMPANY OF FLORIDA NAIC Company Code 16374</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$2,666,068,195	\$2,690,502,282	\$3,256,658,189	0	522,497	158,639	681,136
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$13,555,540	\$13,679,775	\$16,558,377	0	1,762	851	2,613
<b>TOTAL</b>	<b>\$2,679,623,735</b>	<b>\$2,704,182,057</b>	<b>\$3,273,216,566</b>	<b>0</b>	<b>524,259</b>	<b>159,490</b>	<b>683,749</b>

<b>OSCAR MANAGED CARE OF SOUTH FLORIDA, INC. NAIC Company Code 16854</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$13,358,046	\$11,949,781	\$13,376,593	0	1,456	0	1,456
<b>TOTAL</b>	<b>\$13,358,046</b>	<b>\$11,949,781</b>	<b>\$13,376,593</b>	<b>0</b>	<b>1,456</b>	<b>0</b>	<b>1,456</b>

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<b>OXFORD LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 76112</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$2,045,596	\$2,066,445	\$0	1	537	0	537
<b>TOTAL</b>	<b>\$2,045,596</b>	<b>\$2,066,445</b>	<b>\$0</b>	<b>1</b>	<b>537</b>	<b>0</b>	<b>537</b>

<b>OZARK NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67393</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$1,553	\$0	\$0	0	27	19	46
<b>TOTAL</b>	<b>\$1,553</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>27</b>	<b>19</b>	<b>46</b>

<b>PACIFIC INDEMNITY COMPANY</b> <b>NAIC Company Code 20346</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$11,964	\$-1,733	\$4,185	118	283	827	1,110
<b>TOTAL</b>	<b>\$11,964</b>	<b>\$-1,733</b>	<b>\$4,185</b>	<b>118</b>	<b>283</b>	<b>827</b>	<b>1,110</b>

<b>PACIFICARE LIFE AND HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 70785</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$311,884	\$381,955	\$0	119	119	0	119
<b>TOTAL</b>	<b>\$311,884</b>	<b>\$381,955</b>	<b>\$0</b>	<b>119</b>	<b>119</b>	<b>0</b>	<b>119</b>

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<b>PAN-AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67539</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Grandfathered (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))</b>	\$345	\$0	\$0	0	1	0	1
<b>Accident, Accidental Death &amp; Dismemberment, Blanket Accident/Sickness, and Sickness.</b>	\$1,165,105	\$410,374	\$38,979	31	4,458	0	4,458
<b>Dental</b>	\$107,320	\$41,642	\$2,784	0	0	0	0
<b>Prescription Drug</b>	\$340,561	\$66,435	\$1,163	0	0	0	0
<b>Vision</b>	\$871	\$0	\$0	20	17	10	27
<b>Disability Income</b>	\$409,360	\$1,025,351	\$2,488	0	175	0	175
<b>Excess/Stop Loss</b>	\$5,975,375	\$5,026,652	\$33,182	33	2,138	1,047	3,185
<b>Limited Benefit</b>	\$5,176,995	\$3,601,859	\$16,050	116	1,578	248	1,826
<b>Medicare Supplement</b>	\$9,193	\$3,710	\$2,171	0	3	0	3
<b>TOTAL</b>	\$13,185,125	\$10,176,023	\$96,817	200	8,370	1,305	9,675

<b>PARTNERRE AMERICA INSURANCE COMPANY</b> <b>NAIC Company Code 11835</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
<b>Excess/Stop Loss</b>	\$1,208,885	\$555,566	\$1,208,885	3	8,113	6,213	14,326
<b>TOTAL</b>	\$1,208,885	\$555,566	\$1,208,885	3	8,113	6,213	14,326

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**PAUL REVERE LIFE INSURANCE COMPANY**  
**NAIC Company Code 67598**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$22,739	\$1,670	\$0	31	96	79	175
Dental	\$8,224	\$2,713	\$1,822	0	14	28	42
Disability Income	\$6,873,199	\$31,875,869	\$1,867	23	4,848	0	4,848
Limited Benefit	\$105,484	\$-43,219	\$1,851	78	316	139	455
<b>TOTAL</b>	<b>\$7,009,646</b>	<b>\$31,837,033</b>	<b>\$5,540</b>	<b>132</b>	<b>5,274</b>	<b>246</b>	<b>5,520</b>

**PAVONIA LIFE INSURANCE COMPANY OF MICHIGAN**  
**NAIC Company Code 93777**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$1	\$0	0	245	0	245
Limited Benefit	\$20,921	\$-8,996	\$0	2	195	0	195
<b>TOTAL</b>	<b>\$20,921</b>	<b>\$-8,995</b>	<b>\$0</b>	<b>2</b>	<b>440</b>	<b>0</b>	<b>440</b>

**PENN MUTUAL LIFE INSURANCE COMPANY**  
**NAIC Company Code 67644**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$525,460	\$3,823,009	\$0	228	228	0	228
<b>TOTAL</b>	<b>\$525,460</b>	<b>\$3,823,009</b>	<b>\$0</b>	<b>228</b>	<b>228</b>	<b>0</b>	<b>228</b>



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<b>PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67784</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$15,349	\$2,189	\$0	0	15	2	17
Grandfathered (In-State and Out-of-State) Conversion	\$24,329	\$32,316	\$0	0	23	0	23
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,506,277	\$529,339	\$381,083	2,791	2,792	1,800	4,592
Dental	\$362,988	\$109,934	\$100,740	959	959	686	1,645
Disability Income	\$116,628	\$80,621	\$0	5	323	148	471
Limited Benefit	\$22,118,669	\$15,201,971	\$5,189,619	10,938	10,938	6,724	17,662
Medicare Supplement	\$-2,547	\$13,527	\$0	4	4	0	4
<b>TOTAL</b>	<b>\$24,141,693</b>	<b>\$15,969,897</b>	<b>\$5,671,442</b>	<b>14,697</b>	<b>15,054</b>	<b>9,360</b>	<b>24,414</b>

<b>PHILADELPHIA INDEMNITY INSURANCE COMPANY</b> <b>NAIC Company Code 18058</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,306,979	\$170,810	\$1,169,677	0	4,280	2,518,453	2,522,733
<b>TOTAL</b>	<b>\$2,306,979</b>	<b>\$170,810</b>	<b>\$1,169,677</b>	<b>0</b>	<b>4,280</b>	<b>2,518,453</b>	<b>2,522,733</b>

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<b>PHYSICIANS LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 72125</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$742,598	\$472,595	\$141,746	0	318	0	318
<b>TOTAL</b>	<b>\$742,598</b>	<b>\$472,595</b>	<b>\$141,746</b>	<b>0</b>	<b>318</b>	<b>0</b>	<b>318</b>

<b>PHYSICIANS MUTUAL INSURANCE COMPANY</b> <b>NAIC Company Code 80578</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,817	\$333	\$0	0	9	3	12
Dental	\$8,627,008	\$5,331,782	\$1,649,530	1	14,261	2,756	17,017
Disability Income	\$1,487	\$1,291	\$0	0	4	0	4
Limited Benefit	\$736,360	\$394,336	\$540	1	2,102	401	2,503
Long Term Care-Comprehensive	\$1,131,638	\$1,529,457	\$0	0	469	0	469
Short Term Care	\$1,119	\$87,876	\$0	0	19	0	19
Medicare Supplement	\$2,001,651	\$1,610,143	\$0	1	667	2	669
<b>TOTAL</b>	<b>\$12,501,080</b>	<b>\$8,955,218</b>	<b>\$1,650,070</b>	<b>3</b>	<b>17,531</b>	<b>3,162</b>	<b>20,693</b>

<b>PLATEAU INSURANCE COMPANY</b> <b>NAIC Company Code 97152</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$1,328,242	\$1,016,982	\$1,328,242	0	520	0	520
Misc.	\$9,613	\$-2,279	\$0	0	121	0	121
<b>TOTAL</b>	<b>\$1,337,855</b>	<b>\$1,014,703</b>	<b>\$1,328,242</b>	<b>0</b>	<b>641</b>	<b>0</b>	<b>641</b>

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<b>PREFERRED CARE NETWORK, INC.</b> <b>NAIC Company Code 12155</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$792,937,340	\$710,903,129	\$67,911,752	0	41,722	0	41,722
Misc.	\$9,177,642	\$4,133,152	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$802,114,982</b>	<b>\$715,036,281</b>	<b>\$67,911,752</b>	<b>0</b>	<b>41,722</b>	<b>0</b>	<b>41,722</b>

<b>PREFERRED CARE PARTNERS, INC.</b> <b>NAIC Company Code 11176</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$3,975,224,944	\$3,393,004,235	\$445,860,471	0	261,099	0	261,099
Misc.	\$35,441,365	\$39,720,169	\$4,039,751	0	0	0	0
<b>TOTAL</b>	<b>\$4,010,666,309</b>	<b>\$3,432,724,404</b>	<b>\$449,900,222</b>	<b>0</b>	<b>261,099</b>	<b>0</b>	<b>261,099</b>

<b>PRIMERICA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65919</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$360	\$-8	\$0	0	1	0	1
Disability Income	\$2,148	\$18,608	\$0	0	9	0	9
Limited Benefit	\$9,285	\$11,965	\$0	0	15	0	15
Long Term Care-Comprehensive	\$4,771	\$266,960	\$0	0	14	0	14
<b>TOTAL</b>	<b>\$16,564</b>	<b>\$297,525</b>	<b>\$0</b>	<b>0</b>	<b>39</b>	<b>0</b>	<b>39</b>

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<b>PRINCIPAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61271</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Conversion	\$1,654	\$1,079,340	\$0	0	1	0	1
Administrative Services Only (ASO)	\$0	\$0	\$0	3	2,506	299	2,805
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,219,059	\$199,503	\$224,981	389	4,969	0	4,969
Dental	\$60,870,787	\$41,903,423	\$6,179,269	4,681	109,139	80,102	189,241
Vision	\$9,119,740	\$5,015,915	\$1,189,088	3,600	80,936	28,469	109,405
Disability Income	\$67,755,233	\$41,196,098	\$3,344,223	18,779	99,791	0	99,791
Limited Benefit	\$919,933	\$153,782	\$0	323	3,499	0	3,499
Long Term Care-Comprehensive	\$45,899	\$93,947	\$0	0	56	0	56
Medicare Supplement	\$4,175,561	\$3,681,860	\$0	1,106	1,106	0	1,106
<b>TOTAL</b>	<b>\$144,107,866</b>	<b>\$93,323,868</b>	<b>\$10,937,561</b>	<b>28,881</b>	<b>302,003</b>	<b>108,870</b>	<b>410,873</b>

<b>PROFESSIONAL INSURANCE COMPANY</b> <b>NAIC Company Code 68047</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$435,587	\$218,457	\$0	880	880	244	1,124
Limited Benefit	\$454,394	\$294,350	\$0	1,650	1,650	1,075	2,725
<b>TOTAL</b>	<b>\$889,981</b>	<b>\$512,807</b>	<b>\$0</b>	<b>2,530</b>	<b>2,530</b>	<b>1,319</b>	<b>3,849</b>

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<b>PROMINENCE HEALTHFIRST OF FLORIDA, INC.</b> <b>NAIC Company Code 16734</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$30,902,474	\$32,934,155	\$30,902,474	0	2,537	0	2,537
Misc.	\$4,928,931	\$3,961,654	\$4,928,931	0	367	0	367
<b>TOTAL</b>	<b>\$35,831,405</b>	<b>\$36,895,809</b>	<b>\$35,831,405</b>	<b>0</b>	<b>2,904</b>	<b>0</b>	<b>2,904</b>

<b>PROTECTIVE LIFE AND ANNUITY INSURANCE COMPANY</b> <b>NAIC Company Code 88536</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$93	\$22,621	\$0	1	2	0	2
<b>TOTAL</b>	<b>\$93</b>	<b>\$22,621</b>	<b>\$0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>2</b>

<b>PROTECTIVE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68136</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$1,019,129	\$2,420,170	\$938,665	1	1,996	750	2,746
Limited Benefit	\$3,726,377	\$3,774,047	\$4,491	1	2,318	887	3,205
Medicare Supplement	\$1,430	\$1,322	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$4,746,936</b>	<b>\$6,195,539</b>	<b>\$943,156</b>	<b>2</b>	<b>4,314</b>	<b>1,637</b>	<b>5,951</b>

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<b>PROVIDENT AMERICAN LIFE AND HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 67903</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$14,181	\$3,965	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$14,181</b>	<b>\$3,965</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

<b>PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY</b> <b>NAIC Company Code 68195</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$867,436	\$652,620	\$54,413	0	3,202	60	3,262
Disability Income	\$36,979,669	\$76,893,636	\$4,326,120	4	24,027	0	24,027
Limited Benefit	\$1,722,867	\$645,101	\$9,622	26	6,839	1,644	8,483
Long Term Care-Comprehensive	\$4,713,262	\$5,952,672	\$9,098	0	3,269	0	3,269
<b>TOTAL</b>	<b>\$44,283,234</b>	<b>\$84,144,029</b>	<b>\$4,399,253</b>	<b>30</b>	<b>37,337</b>	<b>1,704</b>	<b>39,041</b>

<b>PRUDENTIAL INSURANCE COMPANY OF AMERICA (THE)</b> <b>NAIC Company Code 68241</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$96,672	\$170,982	\$0	0	198	27	225
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,776,137	\$8,026,616	\$696,843	193	39,002	0	39,002
Disability Income	\$51,787,257	\$71,130,101	\$3,487,228	311	36,585	0	36,585
Limited Benefit	\$2,174,628	\$892,909	\$308,050	42	3,959	1	3,960
Long Term Care-Comprehensive	\$27,733,420	\$23,394,860	\$0	2,785	2,785	0	2,785

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<b>PRUDENTIAL INSURANCE COMPANY OF AMERICA (THE)</b> <b>NAIC Company Code 68241</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Facility Only	\$23,905	\$99,511	\$0	21	21	0	21
<b>TOTAL</b>	<b>\$89,592,019</b>	<b>\$103,714,979</b>	<b>\$4,492,121</b>	<b>3,352</b>	<b>82,550</b>	<b>28</b>	<b>82,578</b>

<b>PURITAN LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 71390</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$4,913	\$0	\$0	0	6,220	0	6,220
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$380	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$5,293</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>6,221</b>	<b>0</b>	<b>6,221</b>

<b>QBE INSURANCE CORPORATION</b> <b>NAIC Company Code 39217</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$5,208,511	\$2,032,861	\$320,323	142	31,050	0	31,050
Excess/Stop Loss	\$11,280,532	\$4,367,802	\$3,567,201	10	18,361	11,795	30,156
Limited Benefit	\$38,364	\$0	\$38,364	2	287	115	402
<b>TOTAL</b>	<b>\$16,527,407</b>	<b>\$6,400,663</b>	<b>\$3,925,888</b>	<b>154</b>	<b>49,698</b>	<b>11,910</b>	<b>61,608</b>

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<b>QCC INSURANCE COMPANY</b> <b>NAIC Company Code 93688</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$13,924,702	\$11,943,765	\$0	572	1,079	822	1,901
Transitional (In-State and Out-of-State) 51-100 Member Groups	\$7,690,254	\$7,027,755	\$0	218	724	606	1,330
Transitional (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$26,689,020	\$19,346,757	\$0	149	2,325	1,759	4,084
Administrative Services Only (ASO)	\$2,439,240	\$0	\$0	147	5,147	4,040	9,187
<b>TOTAL</b>	<b>\$50,743,216</b>	<b>\$38,318,277</b>	<b>\$0</b>	<b>1,086</b>	<b>9,275</b>	<b>7,227</b>	<b>16,502</b>

<b>RELIABLE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68357</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$25	\$0	\$0	0	2	0	2
Limited Benefit	\$18	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$43</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>



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<b>RELIANCE STANDARD LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68381</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,211,582	\$675,423	\$600,905	478	39,641	0	39,641
Dental	\$6,041,827	\$4,250,816	\$290,365	154	10,551	0	10,551
Vision	\$421,627	\$185,007	\$37,100	101	3,649	0	3,649
Disability Income	\$34,573,161	\$24,774,241	\$5,558,005	1,054	119,174	0	119,174
Limited Benefit	\$7,554,092	\$1,494,645	\$2,104,115	436	23,866	0	23,866
Other	\$4,037,354	\$1,390,826	\$4,037,354	0	0	0	0
<b>TOTAL</b>	<b>\$55,839,643</b>	<b>\$32,770,958</b>	<b>\$12,627,844</b>	<b>2,223</b>	<b>196,881</b>	<b>0</b>	<b>196,881</b>

<b>RELIASTAR LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 67105</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$6,178,727	\$2,357,379	\$990,075	229	44,737	614	45,351
Disability Income	\$7,090,236	\$3,653,541	\$1,922,847	185	22,620	0	22,620
Excess/Stop Loss	\$69,893,473	\$47,564,559	\$17,887,345	185	189,842	52,528	242,370
Limited Benefit	\$16,102,732	\$20,707,793	\$2,757,387	275	64,243	24,664	88,907
<b>TOTAL</b>	<b>\$99,265,168</b>	<b>\$74,283,272</b>	<b>\$23,557,654</b>	<b>874</b>	<b>321,442</b>	<b>77,806</b>	<b>399,248</b>

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<b>RELIASTAR LIFE INSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 61360</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$-862	\$21,749	\$0	1	10	0	10
Excess/Stop Loss	\$1,976,059	\$0	\$-43,864	19	4,568	310	4,878
Limited Benefit	\$197,477	\$775,032	\$0	82	83	242	325
<b>TOTAL</b>	<b>\$2,172,674</b>	<b>\$796,781</b>	<b>\$-43,864</b>	<b>102</b>	<b>4,661</b>	<b>552</b>	<b>5,213</b>

<b>RENAISSANCE LIFE &amp; HEALTH INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 61700</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$37,833	\$-11,561	\$1,834	125	2,840	675	3,515
Dental	\$8,661,165	\$5,312,993	\$0	293	16,135	5,121	21,256
Vision	\$412,462	\$226,042	\$0	280	3,686	2,312	5,998
Disability Income	\$495,558	\$243,075	\$45,076	50	1,648	496	2,144
Medicare Supplement	\$74,418	\$101,189	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$9,681,436</b>	<b>\$5,871,738</b>	<b>\$46,910</b>	<b>748</b>	<b>24,309</b>	<b>8,604</b>	<b>32,913</b>

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<b>RESERVE NATIONAL INSURANCE COMPANY</b> <b>NAIC Company Code 68462</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$40,729	\$3,161	\$0	0	8	4	12
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$29,684	\$115,073	\$1,443	2	50	73	123
Dental	\$21,219	\$13,761	\$472	0	27	11	38
Limited Benefit	\$104,542	\$265,427	\$952	2	119	47	166
Short Term Care	\$106,170	\$42,456	\$3,824	0	165	24	189
Medicare Supplement	\$306,703	\$241,570	\$3,952	0	96	2	98
<b>TOTAL</b>	<b>\$609,047</b>	<b>\$681,448</b>	<b>\$10,643</b>	<b>4</b>	<b>465</b>	<b>161</b>	<b>626</b>

<b>RIVERSOURCE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 65005</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$7,485,288	\$4,345,063	\$199,561	0	4,383	0	4,383
Long Term Care-Comprehensive	\$10,756,449	\$15,492,759	\$0	0	5,627	0	5,627
<b>TOTAL</b>	<b>\$18,241,737</b>	<b>\$19,837,822</b>	<b>\$199,561</b>	<b>0</b>	<b>10,010</b>	<b>0</b>	<b>10,010</b>

<b>ROYAL NEIGHBORS OF AMERICA</b> <b>NAIC Company Code 57657</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$162,189	\$97,949	\$0	0	38	0	38
<b>TOTAL</b>	<b>\$162,189</b>	<b>\$97,949</b>	<b>\$0</b>	<b>0</b>	<b>38</b>	<b>0</b>	<b>38</b>

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<b>S.USA LIFE INSURANCE COMPANY, INC. NAIC Company Code 60183</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,365,833	\$812,605	\$0	58	58	0	58
Medicare Supplement	\$525,204	\$214,363	\$291,268	0	425	0	425
<b>TOTAL</b>	<b>\$2,891,037</b>	<b>\$1,026,968</b>	<b>\$291,268</b>	<b>58</b>	<b>483</b>	<b>0</b>	<b>483</b>

<b>SAFEGUARD HEALTH PLANS, INC. NAIC Company Code 52009</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$8,724,715	\$5,359,755	\$142,923	533	33,781	23,918	57,699
<b>TOTAL</b>	<b>\$8,724,715</b>	<b>\$5,359,755</b>	<b>\$142,923</b>	<b>533</b>	<b>33,781</b>	<b>23,918</b>	<b>57,699</b>

<b>SAVINGS BANK MUTUAL LIFE INSURANCE COMPANY OF MASSACHUSETTS (THE) NAIC Company Code 70435</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$105,670	\$0	\$0	0	348	0	348
<b>TOTAL</b>	<b>\$105,670</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>348</b>	<b>0</b>	<b>348</b>

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<b>SECURIAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 93742</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,415,176	\$3,963,507	\$1,835,777	9	84,569	0	84,569
Limited Benefit	\$6,061,598	\$2,464,058	\$1,625,167	7	33,054	0	33,054
<b>TOTAL</b>	<b>\$13,476,774</b>	<b>\$6,427,565</b>	<b>\$3,460,944</b>	<b>16</b>	<b>117,623</b>	<b>0</b>	<b>117,623</b>

<b>SECURITY MUTUAL LIFE INSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 68772</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) Individually Underwritten	\$426	\$0	\$0	0	1	1	2
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$32	\$0	\$0	0	1	0	1
Disability Income	\$18,150	\$4,550	\$0	0	34	0	34
<b>TOTAL</b>	<b>\$18,608</b>	<b>\$4,550</b>	<b>\$0</b>	<b>0</b>	<b>36</b>	<b>1</b>	<b>37</b>

<b>SECURITY NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69485</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,211	\$0	\$60	0	90	0	90
Limited Benefit	\$4,843	\$0	\$0	0	14	0	14
<b>TOTAL</b>	<b>\$6,054</b>	<b>\$0</b>	<b>\$60</b>	<b>0</b>	<b>104</b>	<b>0</b>	<b>104</b>

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<b>SENTRY INSURANCE COMPANY</b> <b>NAIC Company Code 24988</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$4,800	\$0	1	1	0	1
Long Term Care-Comprehensive	\$608,593	\$301,414	\$0	5	116	0	116
<b>TOTAL</b>	<b>\$608,593</b>	<b>\$306,214</b>	<b>\$0</b>	<b>6</b>	<b>117</b>	<b>0</b>	<b>117</b>

<b>SENTRY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68810</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$495,203	\$0	6	31	0	31
Long Term Care-Comprehensive	\$685	\$80,751	\$0	4	9	0	9
<b>TOTAL</b>	<b>\$685</b>	<b>\$575,954</b>	<b>\$0</b>	<b>10</b>	<b>40</b>	<b>0</b>	<b>40</b>

<b>SHELTERPOINT INSURANCE COMPANY</b> <b>NAIC Company Code 89958</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$287,822	\$175,399	\$287,822	7	102	79	181
<b>TOTAL</b>	<b>\$287,822</b>	<b>\$175,399</b>	<b>\$287,822</b>	<b>7</b>	<b>102</b>	<b>79</b>	<b>181</b>

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<b>SHENANDOAH LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 68845</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$40,307	\$0	0	1	0	1
Medicare Supplement	\$189,487	\$168,571	\$89,301	0	85	0	85
<b>TOTAL</b>	<b>\$189,487</b>	<b>\$208,878</b>	<b>\$89,301</b>	<b>0</b>	<b>86</b>	<b>0</b>	<b>86</b>

<b>SIERRA HEALTH AND LIFE INSURANCE COMPANY, INC.</b> <b>NAIC Company Code 71420</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$246,124,564	\$208,669,376	\$49,351,330	70	11,348	0	11,348
<b>TOTAL</b>	<b>\$246,124,564</b>	<b>\$208,669,376</b>	<b>\$49,351,330</b>	<b>70</b>	<b>11,348</b>	<b>0</b>	<b>11,348</b>

<b>SILAC INSURANCE COMPANY</b> <b>NAIC Company Code 62952</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$7,110	\$-1,439	\$0	0	15	0	15
Long Term Care-Comprehensive	\$297,608	\$407,387	\$0	0	114	16	130
Short Term Care	\$19,319	\$25,668	\$0	0	23	1	24
Medicare Supplement	\$861,229	\$588,016	\$0	0	217	0	217
<b>TOTAL</b>	<b>\$1,185,266</b>	<b>\$1,019,632</b>	<b>\$0</b>	<b>0</b>	<b>369</b>	<b>17</b>	<b>386</b>

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<b>SIMPLY HEALTHCARE PLANS, INC.</b> <b>NAIC Company Code 13726</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$1,308,998,409	\$1,192,996,376	\$0	0	66,732	0	66,732
Misc.	\$3,502,706,844	\$2,948,539,030	\$0	0	858,007	0	858,007
<b>TOTAL</b>	<b>\$4,811,705,253</b>	<b>\$4,141,535,406</b>	<b>\$0</b>	<b>0</b>	<b>924,739</b>	<b>0</b>	<b>924,739</b>

<b>SIRIUSPOINT AMERICA INSURANCE COMPANY</b> <b>NAIC Company Code 38776</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$0	\$-23,704	\$0	6	1,831	0	1,831
Excess/Stop Loss	\$2,878,901	\$1,191,789	\$234,635	33	9,007	134	9,141
Limited Benefit	\$3,301,783	\$2,306,282	\$662,916	34	297	79	376
<b>TOTAL</b>	<b>\$6,180,684</b>	<b>\$3,474,367</b>	<b>\$897,551</b>	<b>73</b>	<b>11,135</b>	<b>213</b>	<b>11,348</b>

<b>SKYMED INTERNATIONAL (FLORIDA) INC.</b> <b>NAIC Company Code 52038</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Other	\$1,314,424	\$170,531	\$862,681	0	3,078	2,178	5,256
<b>TOTAL</b>	<b>\$1,314,424</b>	<b>\$170,531</b>	<b>\$862,681</b>	<b>0</b>	<b>3,078</b>	<b>2,178</b>	<b>5,256</b>



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<b>SLOVENE NATIONAL BENEFIT SOCIETY</b> <b>NAIC Company Code 57673</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$166	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$166</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>SOLIS HEALTH PLANS, INC.</b> <b>NAIC Company Code 16313</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$31,332,303	\$27,634,491	\$31,332,303	0	1,596	0	1,596
Misc.	\$1,089,267	\$0	\$1,089,267	0	0	0	0
<b>TOTAL</b>	<b>\$32,421,570</b>	<b>\$27,634,491</b>	<b>\$32,421,570</b>	<b>0</b>	<b>1,596</b>	<b>0</b>	<b>1,596</b>

<b>SOLSTICE BENEFITS, INC.</b> <b>NAIC Company Code 12341</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$16,761,628	\$14,621,564	\$753,337	637	172,166	34,789	206,955
Vision	\$1,387,394	\$539,690	\$42,876	454	12,139	6,568	18,707
<b>TOTAL</b>	<b>\$18,149,022</b>	<b>\$15,161,254</b>	<b>\$796,213</b>	<b>1,091</b>	<b>184,305</b>	<b>41,357</b>	<b>225,662</b>

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**SOLSTICE HEALTHPLANS, INC.**  
**NAIC Company Code**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$8,570,633	\$3,990,475	\$274,556	1,540	39,100	20,784	59,884
TOTAL	\$8,570,633	\$3,990,475	\$274,556	1,540	39,100	20,784	59,884

**SONS OF NORWAY**  
**NAIC Company Code 57142**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$471	\$0	\$0	0	0	0	0
TOTAL	\$471	\$0	\$0	0	0	0	0

**SOUTHERN FARM BUREAU LIFE INSURANCE COMPANY**  
**NAIC Company Code 68896**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$24,538	\$16,707	\$0	0	152	0	152
Limited Benefit	\$14,848	\$17,193	\$0	0	547	265	812
Long Term Care-Comprehensive	\$201,909	\$205,009	\$0	0	483	0	483
Long Term Care-Facility Only	\$8,594	\$22,124	\$0	0	56	0	56
TOTAL	\$249,889	\$261,033	\$0	0	1,238	265	1,503

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<b>SOUTHERN GUARANTY INSURANCE COMPANY</b> <b>NAIC Company Code 19178</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$305,658	\$119,674	\$28,193	0	1,596	130	1,726
Medicare Supplement	\$129,358	\$138,265	\$0	0	89	0	89
<b>TOTAL</b>	<b>\$435,016</b>	<b>\$257,939</b>	<b>\$28,193</b>	<b>0</b>	<b>1,685</b>	<b>130</b>	<b>1,815</b>

<b>STANDARD INSURANCE COMPANY</b> <b>NAIC Company Code 69019</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$9,394,910	\$3,313,768	\$1,239,520	812	407,836	32,099	439,935
Dental	\$26,051,175	\$20,061,799	\$2,536,048	346	50,381	20,348	70,729
Vision	\$3,902,765	\$2,080,297	\$494,434	272	38,666	15,725	54,391
Disability Income	\$120,333,535	\$107,506,457	\$10,073,066	686	217,675	0	217,675
Limited Benefit	\$3,586,494	\$1,362,563	\$1,426,925	146	15,726	4,740	20,466
<b>TOTAL</b>	<b>\$163,268,879</b>	<b>\$134,324,884</b>	<b>\$15,769,993</b>	<b>2,262</b>	<b>730,284</b>	<b>72,912</b>	<b>803,196</b>

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<b>STANDARD LIFE AND ACCIDENT INSURANCE COMPANY</b> <b>NAIC Company Code 86355</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$2,278	\$2,691	\$0	0	5	2	7
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$356	\$2,787	\$28	0	747	67	814
Dental	\$6,642	\$661	\$0	0	9	0	9
Disability Income	\$-5,202	\$5,403	\$42	0	52	1	53
Limited Benefit	\$288,877	\$120,779	\$62,685	2	1,064	240	1,304
Long Term Care-Comprehensive	\$34,083	\$-291,937	\$0	0	12	0	12
Short Term Care	\$87,816	\$2,748	\$52,113	0	17	4	21
Medicare Supplement	\$4,012,433	\$3,306,329	\$0	0	1,088	0	1,088
<b>TOTAL</b>	<b>\$4,427,283</b>	<b>\$3,149,461</b>	<b>\$114,868</b>	<b>2</b>	<b>2,994</b>	<b>314</b>	<b>3,308</b>

<b>STANDARD LIFE AND CASUALTY INSURANCE COMPANY</b> <b>NAIC Company Code 71706</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$6,652	\$11,313	\$0	0	3	1	4
Short Term Care	\$4,760,019	\$1,113,038	\$2,227,283	0	7	0	7
<b>TOTAL</b>	<b>\$4,766,671</b>	<b>\$1,124,351</b>	<b>\$2,227,283</b>	<b>0</b>	<b>10</b>	<b>1</b>	<b>11</b>

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STANDARD SECURITY LIFE INSURANCE CO. OF NEW YORK NAIC Company Code 69078							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$16,525	\$6,518	\$16,525	0	12	13	25
Disability Income	\$904	\$70,013	\$904	0	8	0	8
Excess/Stop Loss	\$0	\$-9,315	\$0	0	0	0	0
Limited Benefit	\$28,849	\$1,087	\$28,849	1	92	37	129
TOTAL	\$46,277	\$68,303	\$46,277	1	112	50	162

STARMOUNT LIFE INSURANCE COMPANY NAIC Company Code 68985							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$8,441,148	\$5,917,831	\$1,323,231	225	16,107	10,291	26,398
Vision	\$1,001,999	\$608,414	\$261,850	208	10,088	7,206	17,294
Limited Benefit	\$120	\$0	\$0	0	0	0	0
TOTAL	\$9,443,267	\$6,526,245	\$1,585,081	433	26,195	17,497	43,692

STARNET INSURANCE COMPANY NAIC Company Code 40045							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$25,239	\$-2,833	\$9,501	683	9,043	0	9,043
TOTAL	\$25,239	\$-2,833	\$9,501	683	9,043	0	9,043

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<b>STARR INDEMNITY &amp; LIABILITY COMPANY</b> <b>NAIC Company Code 38318</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,164,496	\$784,746	\$26,390	0	33,113	0	33,113
Other	\$288,419	\$1,175	\$287,757	0	5,497	0	5,497
<b>TOTAL</b>	<b>\$1,452,915</b>	<b>\$785,921</b>	<b>\$314,147</b>	<b>0</b>	<b>38,610</b>	<b>0</b>	<b>38,610</b>

<b>STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY</b> <b>NAIC Company Code 25178</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$7,199	\$415,314	\$0	0	1	0	1
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$14,140,644	\$22,364,813	\$0	1	761	1,156	1,917
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$79,968	\$17,226	\$0	2	1,803	2,311	4,114
Disability Income	\$4,517,785	\$557,872	\$273,828	0	9,603	0	9,603
Limited Benefit	\$18,771,928	\$8,647,014	\$1,761,110	0	94,305	8,515	102,820
Long Term Care-Comprehensive	\$13,089,406	\$16,780,201	\$0	0	5,883	0	5,883
Medicare Supplement	\$9,902,942	\$7,526,741	\$176,166	0	2,947	0	2,947
<b>TOTAL</b>	<b>\$60,509,872</b>	<b>\$56,309,181</b>	<b>\$2,211,104</b>	<b>3</b>	<b>115,303</b>	<b>11,982</b>	<b>127,285</b>

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STATE LIFE INSURANCE COMPANY NAIC Company Code 69116							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$1,468	\$-1,239	\$0	0	1	0	1
Disability Income	\$5,288	\$0	\$0	0	6	0	6
Long Term Care-Comprehensive	\$611,220	\$1,819,487	\$0	0	213	0	213
TOTAL	\$617,976	\$1,818,248	\$0	0	220	0	220

STATE MUTUAL INSURANCE COMPANY NAIC Company Code 69132							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$47,514	\$21,909	\$0	0	22	0	22
Medicare Supplement	\$1,211,704	\$977,766	\$0	0	460	0	460
TOTAL	\$1,259,218	\$999,675	\$0	0	482	0	482

STERLING INVESTORS LIFE INSURANCE COMPANY NAIC Company Code 89184							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$433,290	\$480,947	\$0	0	97	0	97
TOTAL	\$433,290	\$480,947	\$0	0	97	0	97

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<b>STERLING LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 77399</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$283	\$2	\$0	0	1	0	1
Long Term Care-Comprehensive	\$3,829	\$187	\$0	0	2	0	2
Medicare Supplement	\$208,266	\$131,347	\$0	0	52	0	52
<b>TOTAL</b>	<b>\$212,379</b>	<b>\$131,536</b>	<b>\$0</b>	<b>0</b>	<b>55</b>	<b>0</b>	<b>55</b>

<b>SUN LIFE AND HEALTH INSURANCE COMPANY (U.S.)</b> <b>NAIC Company Code 80926</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$80,338	\$308,468	\$0	12	42	35	77
Disability Income	\$345,844	\$1,346,114	\$0	90	555	0	555
<b>TOTAL</b>	<b>\$426,182</b>	<b>\$1,654,582</b>	<b>\$0</b>	<b>102</b>	<b>597</b>	<b>35</b>	<b>632</b>

<b>SUN LIFE ASSURANCE COMPANY OF CANADA</b> <b>NAIC Company Code 80802</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$126,836	\$0	\$0	16	3,644	3,280	6,924
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$2,876,387	\$221,642	\$424,554	292	15,487	13,938	29,425
Dental	\$30,698,471	\$19,673,694	\$10,707,495	1,300	75,478	71,201	146,679
Vision	\$3,760,872	\$2,138,023	\$1,106,865	785	38,378	34,540	72,918
Disability Income	\$33,169,439	\$28,145,310	\$4,121,579	1,628	134,575	0	134,575
Excess/Stop Loss	\$165,312,765	\$100,630,443	\$37,619,482	185	194,965	166,091	361,056



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**SUN LIFE ASSURANCE COMPANY OF CANADA**  
**NAIC Company Code 80802**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$4,999,431	\$832,710	\$1,227,107	415	18,443	10,592	29,035
<b>TOTAL</b>	<b>\$240,944,201</b>	<b>\$151,641,822</b>	<b>\$55,207,082</b>	<b>4,621</b>	<b>480,970</b>	<b>299,642</b>	<b>780,612</b>

**SUNSHINE HEALTH COMMUNITY SOLUTIONS, INC.**  
**NAIC Company Code 15927**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$-19,547	\$373,052	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$-19,547</b>	<b>\$373,052</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

**SUNSHINE STATE HEALTH PLAN, INC.**  
**NAIC Company Code 13148**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$329,229,285	\$277,224,364	\$0	0	58,283	0	58,283
Medicare Advantage (Medicare+Choice)	\$2,368,552,149	\$2,051,327,318	\$0	0	143,488	0	143,488
Misc.	\$11,567,834,441	\$9,333,048,890	\$0	0	1,922,499	0	1,922,499
<b>TOTAL</b>	<b>\$14,265,615,875</b>	<b>\$11,661,600,572</b>	<b>\$0</b>	<b>0</b>	<b>2,124,270</b>	<b>0</b>	<b>2,124,270</b>

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SUPREME COUNCIL OF THE ROYAL ARCANUM NAIC Company Code 58181							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$1,882	\$646	\$1,882	0	5	0	5
TOTAL	\$1,882	\$646	\$1,882	0	5	0	5

SURETY LIFE INSURANCE COMPANY NAIC Company Code 69310							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$1,610	\$0	\$0	0	3	0	3
TOTAL	\$1,610	\$0	\$0	0	3	0	3

SWISS RE CORPORATE SOLUTIONS AMERICA INSURANCE CORPORATION NAIC Company Code 29874							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$4,949,393	\$3,516,124	\$2,008,618	165	4,799	41,162	45,961
TOTAL	\$4,949,393	\$3,516,124	\$2,008,618	165	4,799	41,162	45,961

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**SYMETRA LIFE INSURANCE COMPANY**  
**NAIC Company Code 68608**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$833,659	\$841,308	\$83,366	58	25,118	5,848	30,966
Disability Income	\$8,703,028	\$6,956,603	\$522,182	52	32,233	0	32,233
Excess/Stop Loss	\$61,209,490	\$29,670,841	\$13,303,884	59	87,201	92,228	179,429
Limited Benefit	\$2,070,345	\$905,522	\$144,199	8	1,775	939	2,714
<b>TOTAL</b>	<b>\$72,816,523</b>	<b>\$38,374,274</b>	<b>\$14,053,631</b>	<b>177</b>	<b>146,327</b>	<b>99,015</b>	<b>245,342</b>

**TALCOTT RESOLUTION LIFE AND ANNUITY INSURANCE COMPANY**  
**NAIC Company Code 71153**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$2,022	\$1,291	\$0	46	46	0	46
Limited Benefit	\$8,435	\$5,384	\$0	91	91	0	91
<b>TOTAL</b>	<b>\$10,457</b>	<b>\$6,675</b>	<b>\$0</b>	<b>137</b>	<b>137</b>	<b>0</b>	<b>137</b>

**TALCOTT RESOLUTION LIFE INSURANCE COMPANY**  
**NAIC Company Code 88072**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$53,217	\$196,608	\$0	0	810	175	985
Disability Income	\$145,430	\$663,667	\$0	8	179	0	179
Limited Benefit	\$188,497	\$43,282	\$0	0	77	13	90
Long Term Care-Non-Facility Only	\$94,436	\$0	\$0	0	69	0	69

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<b>TALCOTT RESOLUTION LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 88072</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$155,027	\$212,560	\$0	3	59	35	94
Other	\$674,345	\$883,422	\$0	0	2,358	0	2,358
<b>TOTAL</b>	<b>\$1,310,952</b>	<b>\$1,999,539</b>	<b>\$0</b>	<b>11</b>	<b>3,552</b>	<b>223</b>	<b>3,775</b>

<b>TEACHERS INS. &amp; ANNUITY ASSOCIATION OF AMERICA</b> <b>NAIC Company Code 69345</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$747,942	\$1,984,827	\$0	0	245	0	245
<b>TOTAL</b>	<b>\$747,942</b>	<b>\$1,984,827</b>	<b>\$0</b>	<b>0</b>	<b>245</b>	<b>0</b>	<b>245</b>

<b>THE CHESAPEAKE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 61832</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$3,409,283	\$657,172	\$652,571	0	13,982	5,789	19,771
Dental	\$7,469,487	\$4,502,768	\$1,662,525	0	16,526	6,571	23,097
Vision	\$1,152,860	\$451,047	\$145,513	0	8,473	3,752	12,225
Disability Income	\$15,131	\$10,668	\$0	0	36	0	36
Limited Benefit	\$11,459,927	\$3,957,524	\$2,122,077	0	19,117	6,672	25,789
<b>TOTAL</b>	<b>\$23,506,688</b>	<b>\$9,579,179</b>	<b>\$4,582,686</b>	<b>0</b>	<b>58,134</b>	<b>22,784</b>	<b>80,918</b>

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<b>THE CINCINNATI LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 76236</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$3,932	\$2,019	\$0	0	7	0	7
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$79	\$185	\$0	0	5	0	5
Disability Income	\$16,166	\$19,794	\$0	0	12	0	12
Limited Benefit	\$733	\$0	\$0	0	10	0	10
Long Term Care-Comprehensive	\$100,984	\$413,074	\$0	0	54	0	54
<b>TOTAL</b>	<b>\$121,894</b>	<b>\$435,072</b>	<b>\$0</b>	<b>0</b>	<b>88</b>	<b>0</b>	<b>88</b>

<b>THRIVENT FINANCIAL FOR LUTHERANS</b> <b>NAIC Company Code 56014</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$61,617	\$116,893	\$0	0	4	0	4
Disability Income	\$833,150	\$-388,980	\$26,884	0	991	1	992
Limited Benefit	\$5,547	\$3,869	\$0	0	42	7	49
Long Term Care-Comprehensive	\$5,654,157	\$4,046,342	\$579,473	0	2,370	273	2,643
Long Term Care-Facility Only	\$1,164,002	\$1,719,552	\$0	0	957	71	1,028
Medicare Supplement	\$1,586,537	\$922,944	\$0	0	619	0	619
<b>TOTAL</b>	<b>\$9,305,010</b>	<b>\$6,420,621</b>	<b>\$606,358</b>	<b>0</b>	<b>4,983</b>	<b>352</b>	<b>5,335</b>

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<b>TIAA-CREF LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 60142</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$971,832	\$2,353,249	\$0	0	332	0	332
<b>TOTAL</b>	<b>\$971,832</b>	<b>\$2,353,249</b>	<b>\$0</b>	<b>0</b>	<b>332</b>	<b>0</b>	<b>332</b>

<b>TIER ONE INSURANCE COMPANY</b> <b>NAIC Company Code 92908</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,119,699	\$579,754	\$830,081	0	2,244	1,584	3,828
Dental	\$24,500	\$8,786	\$24,500	0	264	103	367
Limited Benefit	\$912,435	\$417,791	\$686,367	0	1,898	1,154	3,052
Medicare Supplement	\$278	\$164	\$278	0	2	0	2
<b>TOTAL</b>	<b>\$2,056,912</b>	<b>\$1,006,495</b>	<b>\$1,541,226</b>	<b>0</b>	<b>4,408</b>	<b>2,841</b>	<b>7,249</b>

<b>TRANS-OCEANIC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69523</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$1,977	\$0	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$1,977</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>7</b>	<b>0</b>	<b>7</b>

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<b>TRANS-OCEANIC LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 16715</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,649,177	\$214,103	\$1,618,816	0	9,273	4,688	13,961
Limited Benefit	\$220,048	\$0	\$183,798	0	1,337	642	1,979
<b>TOTAL</b>	<b>\$1,869,225</b>	<b>\$214,103</b>	<b>\$1,802,614</b>	<b>0</b>	<b>10,610</b>	<b>5,330</b>	<b>15,940</b>

<b>TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 70688</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$973	\$0	\$0	1	1	0	1
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$518,741	\$297,055	\$0	44	23,762	3,134	26,896
Disability Income	\$27,003	\$28,653	\$0	5	27	30	57
Limited Benefit	\$152,621	\$59,803	\$0	30	236	76	312
Long Term Care-Comprehensive	\$344,863	\$17,020	\$0	0	132	0	132
Medicare Supplement	\$1,441,846	\$2,009	\$0	0	426	4	430
<b>TOTAL</b>	<b>\$2,486,047</b>	<b>\$404,540</b>	<b>\$0</b>	<b>80</b>	<b>24,584</b>	<b>3,244</b>	<b>27,828</b>

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<b>TRANSAMERICA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 86231</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$3,056	\$24,010	\$0	0	15	7	22
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$4,515	\$2,241	\$0	1	15	6	21
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$12,853,442	\$5,542,499	\$265,781	1,010	247,648	75,981	323,629
Dental	\$488,844	\$4,013	\$0	7	858	167	1,025
Disability Income	\$640,506	\$575,170	\$170,272	88	1,011	940	1,951
Limited Benefit	\$73,333,641	\$24,411,875	\$7,900,892	2,076	26,334	23,084	49,418
Long Term Care-Comprehensive	\$33,014,817	\$43,052,321	\$70,980	0	14,296	42	14,338
Long Term Care-Facility Only	\$617,092	\$2,164,132	\$0	0	490	28	518
Long Term Care-Non-Facility Only	\$208,317	\$1,023,331	\$0	0	226	0	226
Medicare Supplement	\$29,645,554	\$23,749,509	\$489,913	3	10,623	77	10,700
Other	\$0	\$1,223	\$0	0	33	26	59
<b>TOTAL</b>	<b>\$150,809,784</b>	<b>\$100,550,324</b>	<b>\$8,897,838</b>	<b>3,185</b>	<b>301,549</b>	<b>100,358</b>	<b>401,907</b>

<b>TRAVELERS PROTECTIVE ASSOCIATION OF AMERICA</b> <b>NAIC Company Code 56006</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$680	\$327	\$0	0	43	0	43
<b>TOTAL</b>	<b>\$680</b>	<b>\$327</b>	<b>\$0</b>	<b>0</b>	<b>43</b>	<b>0</b>	<b>43</b>



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<b>TRUASSURE INSURANCE COMPANY</b> <b>NAIC Company Code 92525</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$38,584	\$24,858	\$3,997	1	60	23	83
<b>TOTAL</b>	<b>\$38,584</b>	<b>\$24,858</b>	<b>\$3,997</b>	<b>1</b>	<b>60</b>	<b>23</b>	<b>83</b>

<b>TRUSTMARK INSURANCE COMPANY</b> <b>NAIC Company Code 61425</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$95,096	\$55,212	\$0	0	13	2	15
Grandfathered (In-State and Out-of-State) Conversion	\$43,358	\$52,541	\$0	0	5	1	6
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$8,959,784	\$3,237,765	\$524,557	18	24,833	21,073	45,906
Disability Income	\$1,855,599	\$2,433,701	\$152,035	2	2,930	0	2,930
Limited Benefit	\$7,936,491	\$3,601,276	\$672,707	0	16,616	5,648	22,264
Long Term Care-Comprehensive	\$1,896	\$0	\$0	0	4	0	4
Long Term Care-Accelerated Benefit Rider	\$4,265,831	\$127,812	\$192,630	256	51,383	0	51,383
Medicare Supplement	\$4,162	\$1,593	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$23,162,217</b>	<b>\$9,509,900</b>	<b>\$1,541,929</b>	<b>276</b>	<b>95,785</b>	<b>26,724</b>	<b>122,509</b>

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<b>TRUSTMARK LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62863</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$-6	\$0	\$0	1	1	0	1
Dental	\$0	\$6,894	\$0	0	0	0	0
Disability Income	\$0	\$50,828	\$0	0	0	0	0
Excess/Stop Loss	\$2,847,296	\$2,245,139	\$1,330,042	33	876	331	1,207
<b>TOTAL</b>	<b>\$2,847,290</b>	<b>\$2,302,861</b>	<b>\$1,330,042</b>	<b>34</b>	<b>877</b>	<b>331</b>	<b>1,208</b>

<b>U.S. SPECIALTY INSURANCE COMPANY</b> <b>NAIC Company Code 29599</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$-67,500	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$-67,500</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>ULTIMATE HEALTH PLANS, INC.</b> <b>NAIC Company Code 14243</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$137,996,470	\$117,881,923	\$0	0	9,843	0	9,843
<b>TOTAL</b>	<b>\$137,996,470</b>	<b>\$117,881,923</b>	<b>\$0</b>	<b>0</b>	<b>9,843</b>	<b>0</b>	<b>9,843</b>

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<b>UNICARE LIFE &amp; HEALTH INSURANCE COMPANY</b> <b>NAIC Company Code 80314</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$3,851	\$3,013	\$0	0	12	0	12
Disability Income	\$59,967	\$52,990	\$0	0	702	0	702
<b>TOTAL</b>	<b>\$63,818</b>	<b>\$56,003</b>	<b>\$0</b>	<b>0</b>	<b>714</b>	<b>0</b>	<b>714</b>

<b>UNIFIED LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 11121</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$3,324	\$74,143	\$0	0	11	0	11
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$81,042	\$0	\$49,357	0	318	86	404
Disability Income	\$4,079	\$13,983	\$0	0	73	0	73
Limited Benefit	\$680,500	\$284,066	\$51,425	0	1,276	625	1,901
Medicare Supplement	\$63,307	\$57,633	\$0	0	32	0	32
Other	\$6,382	\$7,652	\$0	0	7	1	8
<b>TOTAL</b>	<b>\$838,634</b>	<b>\$437,477</b>	<b>\$100,782</b>	<b>0</b>	<b>1,717</b>	<b>712</b>	<b>2,429</b>

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<b>UNIMERICA INSURANCE COMPANY</b> <b>NAIC Company Code 91529</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$9,545,914	\$4,828,323	\$0	175	11,732	12,430	24,162
Other	\$2,737	\$4,248	\$0	2	12	7	19
<b>TOTAL</b>	<b>\$9,548,651</b>	<b>\$4,832,571</b>	<b>\$0</b>	<b>177</b>	<b>11,744</b>	<b>12,437</b>	<b>24,181</b>

<b>UNION FIDELITY LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62596</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$1,074	\$0	\$0	0	2	0	2
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$198,934	\$183,598	\$0	0	2,592	2,207	4,799
Disability Income	\$0	\$11,116	\$0	0	0	0	0
Limited Benefit	\$398,210	\$160,644	\$0	0	2,241	731	2,972
Medicare Supplement	\$1,008	\$8,629	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$599,226</b>	<b>\$363,987</b>	<b>\$0</b>	<b>0</b>	<b>4,835</b>	<b>2,938</b>	<b>7,773</b>

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<b>UNION LABOR LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69744</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$101,667	\$35,226	\$2,183	92	10,029	515	10,544
Dental	\$2,065	\$3,947	\$0	2	3	5	8
Disability Income	\$9,196	\$21,323	\$0	6	41	0	41
Excess/Stop Loss	\$166,078	\$-1,127	\$44,140	2	1,286	1,929	3,215
Limited Benefit	\$34,035	\$15,871	\$0	0	147	86	233
Long Term Care-Comprehensive	\$34,618	\$251,464	\$0	0	17	0	17
Medicare Supplement	\$5,362	\$28,306	\$0	0	6	0	6
<b>TOTAL</b>	<b>\$353,021</b>	<b>\$355,010</b>	<b>\$46,323</b>	<b>102</b>	<b>11,529</b>	<b>2,535</b>	<b>14,064</b>

  

<b>UNION NATIONAL LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69779</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$47	\$0	\$0	0	2	0	2
Disability Income	\$135	\$0	\$0	0	0	0	0
Limited Benefit	\$217	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$399</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

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<b>UNION SECURITY INSURANCE COMPANY</b> <b>NAIC Company Code 70408</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$248,176	\$332	\$0	1	987	1,449	2,436
Dental	\$145,406	\$0	\$0	6	740	740	1,480
Vision	\$310	\$0	\$0	0	0	0	0
Disability Income	\$471,124	\$0	\$0	8	742	1	743
Limited Benefit	\$8,562	\$0	\$0	5	0	0	0
Long Term Care-Comprehensive	\$4,297,602	\$25,761,761	\$0	0	3,807	0	3,807
Long Term Care-Facility Only	\$105,306	\$839,210	\$0	0	117	0	117
Medicare Supplement	\$53,796	\$12,550	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$5,330,282</b>	<b>\$26,613,853</b>	<b>\$0</b>	<b>20</b>	<b>6,403</b>	<b>2,190</b>	<b>8,593</b>

<b>UNITED AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 92916</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$-802	\$0	\$0	0	0	0	0
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$527,349	\$590,139	\$0	0	540	180	720
Transitional (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$0	\$-346	\$0	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$4,468	\$7,905	\$289	0	406	0	406
Disability Income	\$0	\$0	\$0	0	2	0	2
Limited Benefit	\$839,740	\$525,495	\$21,302	0	2,433	1,042	3,475

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UNITED AMERICAN INSURANCE COMPANY NAIC Company Code 92916							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$42,658	\$175,214	\$0	0	27	0	27
Long Term Care-Facility Only	\$15,141	\$-69,291	\$0	0	14	0	14
Medicare Supplement	\$238,009,747	\$157,791,517	\$16,356,134	0	105,457	0	105,457
Other	\$3,218,301	\$2,675,588	\$151,260	26	1,184	0	1,184
<b>TOTAL</b>	<b>\$242,656,602</b>	<b>\$161,696,221</b>	<b>\$16,528,985</b>	<b>26</b>	<b>110,063</b>	<b>1,222</b>	<b>111,285</b>

UNITED CONCORDIA INSURANCE COMPANY NAIC Company Code 85766							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Dental	\$4,903,289	\$3,540,710	\$26,521	311	7,033	5,369	12,402
Vision	\$104,456	\$37,966	\$2,156	41	570	371	941
<b>TOTAL</b>	<b>\$5,007,745</b>	<b>\$3,578,676</b>	<b>\$28,677</b>	<b>352</b>	<b>7,603</b>	<b>5,740</b>	<b>13,343</b>

UNITED HERITAGE LIFE INSURANCE COMPANY NAIC Company Code 63983							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$5	\$1	\$0	0	0	0	0
Disability Income	\$13,457	\$47,783	\$0	0	55	0	55
Limited Benefit	\$2	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$13,464</b>	<b>\$47,784</b>	<b>\$0</b>	<b>0</b>	<b>55</b>	<b>0</b>	<b>55</b>

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<b>UNITED INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 69930</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$310,429	\$66,419	\$0	0	2,819	2,961	5,780
Disability Income	\$19,348	\$1,594	\$0	0	388	440	828
Limited Benefit	\$629,590	\$233,189	\$0	0	3,571	4,604	8,175
<b>TOTAL</b>	<b>\$959,367</b>	<b>\$301,202</b>	<b>\$0</b>	<b>0</b>	<b>6,778</b>	<b>8,005</b>	<b>14,783</b>

<b>UNITED LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69973</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Accelerated Benefit Rider	\$5,786	\$0	\$0	0	4	0	4
<b>TOTAL</b>	<b>\$5,786</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>4</b>

<b>UNITED OF OMAHA LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 69868</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) Guarantee Issue (HIPAA, FS 627.6487(3))	\$14,684	\$43,040	\$0	0	2	0	2
Administrative Services Only (ASO)	\$245,739	\$0	\$17,805	53	5,646	0	5,646
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$7,616,286	\$2,428,308	\$1,075,318	2,788	360,579	36,336	396,915
Dental	\$17,151,407	\$11,818,330	\$3,750,470	356	31,484	22,432	53,916
Vision	\$2,179,725	\$1,219,596	\$654,030	301	23,492	15,423	38,915
Disability Income	\$73,912,560	\$48,285,183	\$7,521,667	3,134	274,867	0	274,867



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UNITED OF OMAHA LIFE INSURANCE COMPANY NAIC Company Code 69868							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$2,098,878	\$377,728	\$342,338	252	9,651	3,049	12,700
Long Term Care-Comprehensive	\$3,262,282	\$816,408	\$0	0	1,522	0	1,522
Medicare Supplement	\$40,412,123	\$27,040,485	\$4,248,553	0	15,026	0	15,026
TOTAL	\$146,893,684	\$92,029,078	\$17,610,182	6,884	722,269	77,240	799,509

UNITED SECURITY ASSURANCE COMPANY OF PENNSYLVANIA NAIC Company Code 42129							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$1,223,377	\$560,157	\$0	0	408	0	408
Long Term Care-Non-Facility Only	\$312,946	\$266,195	\$0	0	267	0	267
TOTAL	\$1,536,323	\$826,352	\$0	0	675	0	675

UNITED STATES BRANCH OF THE INDEPENDENT ORDER OF FORESTERS NAIC Company Code 58068							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$865,096	\$-190,148	\$247,743	0	3,447	0	3,447
TOTAL	\$865,096	\$-190,148	\$247,743	0	3,447	0	3,447

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<b>UNITED STATES FIRE INSURANCE COMPANY</b> <b>NAIC Company Code 21113</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$14,278,178	\$10,461,332	\$0	0	69,580	29,490	99,070
Excess/Stop Loss	\$13,885,702	\$16,346,467	\$0	0	109,360	681	110,041
Limited Benefit	\$10,530,742	\$-6,100,024	\$0	0	3,121	1,364	4,485
<b>TOTAL</b>	<b>\$38,694,622</b>	<b>\$20,707,775</b>	<b>\$0</b>	<b>0</b>	<b>182,061</b>	<b>31,535</b>	<b>213,596</b>

<b>UNITED STATES LETTER CARRIERS MUTUAL BENEFIT ASSOCIATION</b> <b>NAIC Company Code 56456</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$22,831	\$14,733	\$4,674	0	169	60	229
Limited Benefit	\$17,714	\$21,061	\$0	0	45	0	45
<b>TOTAL</b>	<b>\$40,545</b>	<b>\$35,794</b>	<b>\$4,674</b>	<b>0</b>	<b>214</b>	<b>60</b>	<b>274</b>

<b>UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK</b> <b>NAIC Company Code 70106</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$2,292,887	\$2,156,243	\$0	1	2,015	1,197	3,212
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$12,211	\$-307	\$0	1	8	1,054	1,062
Disability Income	\$-73,472	\$1,824,882	\$0	0	9	0	9
Limited Benefit	\$2,112	\$7,322	\$0	1	5	0	5

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<b>UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK</b> <b>NAIC Company Code 70106</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$93,970	\$635,464	\$0	0	25	5	30
<b>TOTAL</b>	<b>\$2,327,708</b>	<b>\$4,623,604</b>	<b>\$0</b>	<b>3</b>	<b>2,062</b>	<b>2,256</b>	<b>4,318</b>

<b>UNITED WORLD LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 72850</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Supplement	\$14,157,105	\$11,177,762	\$8,225,765	0	7,992	0	7,992
<b>TOTAL</b>	<b>\$14,157,105</b>	<b>\$11,177,762</b>	<b>\$8,225,765</b>	<b>0</b>	<b>7,992</b>	<b>0</b>	<b>7,992</b>

<b>UNITEDHEALTHCARE INSURANCE COMPANY</b> <b>NAIC Company Code 79413</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$312,765,762	\$254,112,787	\$20,699,844	12,214	25,989	18,448	44,437
ACA Off Exchange 51-100 Member Groups	\$240,416,769	\$208,725,513	\$18,929,393	4,377	25,224	15,823	41,047
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$150,117,303	\$133,373,551	\$11,739,943	4,024	14,881	10,748	25,629
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$7,406,691	\$5,501,818	\$0	97	425	327	752
Grandfathered (In-State and Out-of-State) 51-100 Member Groups	\$2,470,517	\$2,191,377	\$0	11	133	144	277
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$102,608,143	\$76,590,936	\$5,879,362	1,899	7,482	5,353	12,835

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UNITEDHEALTHCARE INSURANCE COMPANY NAIC Company Code 79413							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Transitional (In-State and Out-of-State) 51-100 Member Groups	\$4,642,442	\$4,010,484	\$261,101	23	338	232	570
Transitional (In-State and Out-of-State) 101+ Member Groups (FS 627.652)	\$862,231,534	\$704,163,187	\$70,575,707	3,195	89,578	64,493	154,071
Dental	\$150,015,855	\$117,388,172	\$7,002,758	9,185	292,433	198,240	490,673
Prescription Drug	\$267,818,787	\$201,899,617	\$44,921,104	0	301,723	0	301,723
Vision	\$33,020,602	\$20,328,796	\$7,399,427	11,293	318,751	199,716	518,467
Disability Income	\$20,747,332	\$9,466,820	\$1,109,999	1,431	77,776	0	77,776
Excess/Stop Loss	\$49,110,732	\$42,246,569	\$11,507,531	424	41,489	35,804	77,293
Limited Benefit	\$4,109,512	\$3,321,871	\$2,180,376	1	14,645	0	14,645
Medicare Supplement	\$1,397,627,389	\$1,129,770,302	\$73,674,076	1	494,849	0	494,849
Medicare Advantage (Medicare+Choice)	\$-13,556,422	\$-14,205,660	\$0	0	0	0	0
Other	\$91,948,617	\$78,674,814	\$6,685,097	35	44,902	0	44,902
Misc.	\$39,716,911	\$31,396,894	\$848,627	11	2,847	2,853	5,700
TOTAL	\$3,723,218,476	\$3,008,957,848	\$283,414,345	48,221	1,753,465	552,181	2,305,646

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<b>UNITEDHEALTHCARE LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 97179</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$0	\$-6,488	\$0	0	0	0	0
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$23,284	\$-1,709	\$0	0	118	55	173
Dental	\$1,365,648	\$787,508	\$0	0	2,526	1,050	3,576
Vision	\$98,644	\$45,793	\$0	0	1,286	532	1,818
Limited Benefit	\$35,653	\$18,216	\$0	0	78	8	86
<b>TOTAL</b>	<b>\$1,523,229</b>	<b>\$843,320</b>	<b>\$0</b>	<b>0</b>	<b>4,008</b>	<b>1,645</b>	<b>5,653</b>

<b>UNITEDHEALTHCARE OF FLORIDA, INC.</b> <b>NAIC Company Code 95264</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA On Exchange Guarantee Issue (HIPAA, FS 627.6487(3))	\$194,384,299	\$150,521,188	\$194,384,299	0	36,870	14,129	50,999
ACA Off Exchange 2 - 50 Member Groups (FS 627.6699)	\$200,863,864	\$131,408,200	\$14,057,542	3,924	15,502	8,510	24,012
ACA Off Exchange 51-100 Member Groups	\$78,519,038	\$68,524,601	\$6,847,513	657	8,436	4,385	12,821
ACA Off Exchange 101+ Member Groups (FS 627.652)	\$41,832,304	\$31,851,454	\$667,085	15	914	955	1,869
Grandfathered (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$247,692	\$617,718	\$0	2	7	5	12
Transitional (In-State and Out-of-State) 2 - 50 Member Groups (FS 627.6699)	\$47,301,174	\$57,482,763	\$0	765	4,165	2,362	6,527
Medicare Advantage (Medicare+Choice)	\$11,808,593	\$-11,036,321	\$0	0	0	0	0

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<b>UNITEDHEALTHCARE OF FLORIDA, INC.</b> <b>NAIC Company Code 95264</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Misc.	\$1,719,176,916	\$1,471,035,326	\$294,457,338	2	407,126	0	407,126
<b>TOTAL</b>	<b>\$2,294,133,880</b>	<b>\$1,900,404,929</b>	<b>\$510,413,777</b>	<b>5,365</b>	<b>473,020</b>	<b>30,346</b>	<b>503,366</b>

<b>UNUM INSURANCE COMPANY</b> <b>NAIC Company Code 67601</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,866,487	\$271,793	\$1,704,312	13,498	13,498	5,437	18,935
Limited Benefit	\$6,181,367	\$1,392,996	\$2,945,198	8,772	26,346	10,372	36,718
<b>TOTAL</b>	<b>\$8,047,854</b>	<b>\$1,664,789</b>	<b>\$4,649,510</b>	<b>22,270</b>	<b>39,844</b>	<b>15,809</b>	<b>55,653</b>

<b>UNUM LIFE INSURANCE COMPANY OF AMERICA</b> <b>NAIC Company Code 62235</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Administrative Services Only (ASO)	\$4,201,656	\$0	\$0	19	98,277	0	98,277
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$11,624,797	\$5,400,130	\$1,923,309	1,941	293,166	39,962	333,128
Disability Income	\$146,959,427	\$78,315,741	\$7,896,965	2,109	373,841	0	373,841
Excess/Stop Loss	\$2,390,302	\$1,702,836	\$2,252,004	7	2,183	0	2,183
Limited Benefit	\$6,716,695	\$776,565	\$1,648,772	224	20,686	8,434	29,120
Long Term Care-Comprehensive	\$23,355,269	\$64,562,175	\$596,500	248	33,506	2,098	35,604
<b>TOTAL</b>	<b>\$195,248,146</b>	<b>\$150,757,447</b>	<b>\$14,317,550</b>	<b>4,548</b>	<b>821,659</b>	<b>50,494</b>	<b>872,153</b>

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**USAA LIFE INSURANCE COMPANY**  
**NAIC Company Code 69663**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$13,882	\$0	\$0	1	90	0	90
Disability Income	\$102,871	\$-132,237	\$0	0	121	0	121
Limited Benefit	\$11,143	\$636	\$0	0	17	0	17
Medicare Supplement	\$34,323,071	\$25,455,780	\$1,099,179	0	11,156	0	11,156
<b>TOTAL</b>	<b>\$34,450,966</b>	<b>\$25,324,180</b>	<b>\$1,099,179</b>	<b>1</b>	<b>11,384</b>	<b>0</b>	<b>11,384</b>

**USABLE LIFE**  
**NAIC Company Code 94358**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$8,966,310	\$1,329,959	\$2,691,831	36	38,169	1,910	40,079
Disability Income	\$11,360,619	\$4,409,197	\$2,087,332	17	36,034	0	36,034
Limited Benefit	\$4,139,369	\$1,284,074	\$1,097,850	62	13,063	3,807	16,870
<b>TOTAL</b>	<b>\$24,466,298</b>	<b>\$7,023,230</b>	<b>\$5,877,013</b>	<b>115</b>	<b>87,266</b>	<b>5,717</b>	<b>92,983</b>

**VENERABLE INSURANCE AND ANNUITY COMPANY**  
**NAIC Company Code 80942**

<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$0	\$830	\$0	0	0	0	0
Limited Benefit	\$600	\$0	\$0	0	13	0	13
<b>TOTAL</b>	<b>\$600</b>	<b>\$830</b>	<b>\$0</b>	<b>0</b>	<b>13</b>	<b>0</b>	<b>13</b>

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<b>VIGILANT INSURANCE COMPANY</b> <b>NAIC Company Code 20397</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$16,336	\$-2,756	\$4,291	12	156	430	586
<b>TOTAL</b>	<b>\$16,336</b>	<b>\$-2,756</b>	<b>\$4,291</b>	<b>12</b>	<b>156</b>	<b>430</b>	<b>586</b>

<b>VISION SERVICE PLAN INSURANCE COMPANY</b> <b>NAIC Company Code 32395</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Vision	\$89,894,085	\$60,418,663	\$1,582,753	553	674,968	816,722	1,491,690
<b>TOTAL</b>	<b>\$89,894,085</b>	<b>\$60,418,663</b>	<b>\$1,582,753</b>	<b>553</b>	<b>674,968</b>	<b>816,722</b>	<b>1,491,690</b>

<b>VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY</b> <b>NAIC Company Code 86509</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Long Term Care-Comprehensive	\$3,105	\$174,345	\$0	0	6	0	6
<b>TOTAL</b>	<b>\$3,105</b>	<b>\$174,345</b>	<b>\$0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>6</b>



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<b>WASHINGTON NATIONAL INSURANCE COMPANY</b> <b>NAIC Company Code 70319</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Individually Underwritten	\$18,493	\$2,323	\$0	0	3	0	3
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$10,673,875	\$3,328,166	\$1,618,900	3	24,892	925	25,817
Disability Income	\$7,576	\$19,254	\$0	1	12	0	12
Limited Benefit	\$28,906,164	\$11,056,697	\$1,883,798	7	52,174	11,486	63,660
Long Term Care-Comprehensive	\$664,463	\$2,638,895	\$0	10	623	0	623
Medicare Supplement	\$1,489,691	\$1,231,869	\$701,878	0	1,432	1	1,433
Other	\$5,940	\$-24,924	\$0	1	5	0	5
<b>TOTAL</b>	<b>\$41,766,202</b>	<b>\$18,252,280</b>	<b>\$4,204,576</b>	<b>22</b>	<b>79,141</b>	<b>12,412</b>	<b>91,553</b>

<b>WELLCARE HEALTH INSURANCE OF ARIZONA, INC.</b> <b>NAIC Company Code 83445</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Medicare Advantage (Medicare+Choice)	\$162,776,313	\$145,015,279	\$0	0	13,042	0	13,042
<b>TOTAL</b>	<b>\$162,776,313</b>	<b>\$145,015,279</b>	<b>\$0</b>	<b>0</b>	<b>13,042</b>	<b>0</b>	<b>13,042</b>

<b>WELLCARE PRESCRIPTION INSURANCE, INC.</b> <b>NAIC Company Code 10155</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Prescription Drug	\$111,446,598	\$81,087,972	\$0	0	223,993	0	223,993
<b>TOTAL</b>	<b>\$111,446,598</b>	<b>\$81,087,972</b>	<b>\$0</b>	<b>0</b>	<b>223,993</b>	<b>0</b>	<b>223,993</b>

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<b>WELLFLEET INSURANCE COMPANY</b> <b>NAIC Company Code 32280</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,021,040	\$432,384	\$1,021,040	45	1,612	725	2,337
Other	\$5,737,172	\$4,672,730	\$4,705,615	12	2,780	2	2,782
<b>TOTAL</b>	<b>\$6,758,212</b>	<b>\$5,105,114</b>	<b>\$5,726,655</b>	<b>57</b>	<b>4,392</b>	<b>727</b>	<b>5,119</b>

<b>WESCO INSURANCE COMPANY</b> <b>NAIC Company Code 25011</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$1,037,298	\$1,443,173	\$0	15	1,054	0	1,054
<b>TOTAL</b>	<b>\$1,037,298</b>	<b>\$1,443,173</b>	<b>\$0</b>	<b>15</b>	<b>1,054</b>	<b>0</b>	<b>1,054</b>

<b>WEST COAST LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 70335</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$75	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$75</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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<b>WESTERN AND SOUTHERN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 70483</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$109,957	\$0	\$4,043	0	800	229	1,029
Limited Benefit	\$1,211,321	\$1,244,239	\$76,276	0	2,067	527	2,594
<b>TOTAL</b>	<b>\$1,321,278</b>	<b>\$1,244,239</b>	<b>\$80,319</b>	<b>0</b>	<b>2,867</b>	<b>756</b>	<b>3,623</b>

<b>WESTERN UNITED LIFE ASSURANCE COMPANY</b> <b>NAIC Company Code 85189</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Limited Benefit	\$291	\$4,586	\$0	0	7	3	10
Medicare Supplement	\$323,694	\$290,354	\$0	0	144	0	144
<b>TOTAL</b>	<b>\$323,985</b>	<b>\$294,940</b>	<b>\$0</b>	<b>0</b>	<b>151</b>	<b>3</b>	<b>154</b>

<b>WESTPORT INSURANCE CORPORATION</b> <b>NAIC Company Code 39845</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Excess/Stop Loss	\$3,704,085	\$2,576,155	\$108,103	0	0	0	0
<b>TOTAL</b>	<b>\$3,704,085</b>	<b>\$2,576,155</b>	<b>\$108,103</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

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<b>WILCAC LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 62413</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
ACA Off Exchange Conversion	\$268,346	\$616,257	\$0	0	7	0	7
Disability Income	\$11,994	\$13,188	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$280,341</b>	<b>\$629,446</b>	<b>\$0</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>8</b>

<b>WILLIAM PENN LIFE INSURANCE COMPANY OF NEW YORK</b> <b>NAIC Company Code 66230</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$10,865	\$0	\$83	0	50	0	50
Disability Income	\$456	\$5,385	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$11,321</b>	<b>\$5,385</b>	<b>\$83</b>	<b>0</b>	<b>51</b>	<b>0</b>	<b>51</b>

<b>WILTON REASSURANCE LIFE COMPANY OF NEW YORK</b> <b>NAIC Company Code 60704</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Grandfathered (In-State and Out-of-State) Conversion	\$1,576	\$0	\$0	0	4	0	4
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$334	\$0	\$0	0	6	0	6
Limited Benefit	\$144,792	\$153,264	\$0	0	336	0	336
<b>TOTAL</b>	<b>\$146,702</b>	<b>\$153,264</b>	<b>\$0</b>	<b>0</b>	<b>346</b>	<b>0</b>	<b>346</b>

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<b>WOODMEN OF THE WORLD LIFE INSURANCE SOCIETY/OMAHA WOODMEN</b> <b>NAIC Company Code 57320</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$4,382	\$8,812	\$0	0	2	0	2
Limited Benefit	\$396,957	\$157,780	\$0	0	1,680	0	1,680
Long Term Care-Comprehensive	\$46,758	\$29,431	\$0	0	20	0	20
<b>TOTAL</b>	<b>\$448,097</b>	<b>\$196,023</b>	<b>\$0</b>	<b>0</b>	<b>1,702</b>	<b>0</b>	<b>1,702</b>

<b>ZURICH AMERICAN INSURANCE COMPANY</b> <b>NAIC Company Code 16535</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Accident, Accidental Death & Dismemberment, Blanket Accident/Sickness, and Sickness.	\$19,189,653	\$12,165,659	\$10,783,356	301	621,193	11,869	633,062
Excess/Stop Loss	\$1,557,271	\$1,002,481	\$199,095	2	1,730	1,384	3,114
<b>TOTAL</b>	<b>\$20,746,924</b>	<b>\$13,168,140</b>	<b>\$10,982,451</b>	<b>303</b>	<b>622,923</b>	<b>13,253</b>	<b>636,176</b>

<b>ZURICH AMERICAN LIFE INSURANCE COMPANY</b> <b>NAIC Company Code 90557</b>							
<i>Market Segment</i>	<i>Direct Premiums Earned for New and Renewal Business</i>	<i>Direct Losses Incurred</i>	<i>Direct Premiums Earned for New Business Only</i>	<i>Employer Groups</i>	<i>Primary Insureds</i>	<i>Covered Dependents</i>	<i>Covered Lives</i>
Disability Income	\$4,948,707	\$972,085	\$578,616	37	17,617	0	17,617
Other	\$560	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$4,949,267</b>	<b>\$972,085</b>	<b>\$578,616</b>	<b>37</b>	<b>17,617</b>	<b>0</b>	<b>17,617</b>

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<i>Rank</i>	<i>Company Name</i>	<i>NAIC Company Code</i>
1	ACCELERANT NATIONAL INSURANCE COMPANY	10220
2	ACCREDITED SURETY AND CASUALTY COMPANY, INC.	26379
3	ACE FIRE UNDERWRITERS INSURANCE COMPANY	20702
4	ACE LIFE INSURANCE COMPANY	60348
5	AIG PROPERTY CASUALTY COMPANY	19402
6	ALIGNMENT HEALTH PLAN OF FLORIDA, INC.	17258
7	ALLIED INSURANCE COMPANY OF AMERICA	10127
8	ALLSTATE INSURANCE COMPANY	19232
9	AMERICAN ALTERNATIVE INSURANCE CORPORATION	19720
10	AMERICAN AUTOMOBILE INSURANCE COMPANY	21849
11	AMERICAN COMMERCE INSURANCE COMPANY	19941
12	AMERICAN FAMILY CONNECT PROPERTY & CASUALTY INSURANCE COMPANY	29068
13	AMERICAN GUARANTEE AND LIABILITY INSURANCE COMPANY	26247
14	AMERICAN HEALTH PLAN OF FLORIDA, INC.	16821
15	AMERICAN RELIABLE INSURANCE COMPANY	19615
16	AMERICAN SECURITY INSURANCE COMPANY	42978
17	AMERICAN SOUTHERN HOME INSURANCE COMPANY	41998
18	AMERICAN SOUTHERN INSURANCE COMPANY	10235
19	AMERICAN SPECIALTY HEALTH INSURANCE COMPANY	84697
20	AMERICAN STATES INSURANCE COMPANY	19704
21	AMERICAN ZURICH INSURANCE COMPANY	40142
22	ANTHEM INSURANCE COMPANIES, INC.	28207
23	ARCH LIFE INSURANCE COMPANY OF AMERICA	71455
24	ARGONAUT INSURANCE COMPANY	19801
25	ARROWOOD INDEMNITY COMPANY	24678
26	ASISTENSI GLOBAL INSURANCE, INC.	17252
27	AVEMCO INSURANCE COMPANY	10367
28	AXIS REINSURANCE COMPANY	20370
29	AXIS SPECIALTY INSURANCE COMPANY	15610
30	BANKERS INSURANCE COMPANY	33162
31	BANKERS STANDARD INSURANCE COMPANY	18279

<b>32 BERKLEY INSURANCE COMPANY</b>	<b>32603</b>
<b>33 BESTOW LIFE INSURANCE COMPANY</b>	<b>62383</b>
<b>34 BROTHERHOOD MUTUAL INSURANCE COMPANY</b>	<b>13528</b>
<b>35 CANADA LIFE REINSURANCE COMPANY</b>	<b>76694</b>
<b>36 CAROLINA CASUALTY INSURANCE COMPANY</b>	<b>10510</b>
<b>37 CENTRE INSURANCE COMPANY</b>	<b>34649</b>
<b>38 CENTURION CASUALTY COMPANY</b>	<b>42765</b>
<b>39 CHEROKEE INSURANCE COMPANY</b>	<b>10642</b>
<b>40 CITY NATIONAL INSURANCE COMPANY</b>	<b>41335</b>
<b>41 CLARENDON NATIONAL INSURANCE COMPANY</b>	<b>20532</b>
<b>42 CLEAR SPRING PROPERTY AND CASUALTY COMPANY</b>	<b>15563</b>
<b>43 CLOVER INSURANCE COMPANY</b>	<b>86371</b>
<b>44 CONCERT INSURANCE COMPANY</b>	<b>10891</b>
<b>45 CONTINENTAL INSURANCE COMPANY</b>	<b>35289</b>
<b>46 DAILY UNDERWRITERS OF AMERICA</b>	<b>35483</b>
<b>47 DIRECT GENERAL INSURANCE COMPANY</b>	<b>42781</b>
<b>48 DISCOVER PROPERTY &amp; CASUALTY INSURANCE COMPANY</b>	<b>36463</b>
<b>49 EDUCATORS LIFE INSURANCE COMPANY OF AMERICA</b>	<b>62790</b>
<b>50 EMPIRE FIRE AND MARINE INSURANCE COMPANY</b>	<b>21326</b>
<b>51 EMPLOYERS REASSURANCE CORPORATION</b>	<b>68276</b>
<b>52 ENDURANCE AMERICAN INSURANCE COMPANY</b>	<b>10641</b>
<b>53 ENDURANCE ASSURANCE CORPORATION</b>	<b>11551</b>
<b>54 EVEREST DENALI INSURANCE COMPANY</b>	<b>16044</b>
<b>55 EVEREST PREMIER INSURANCE COMPANY</b>	<b>16045</b>
<b>56 EVERSPAN INSURANCE COMPANY</b>	<b>24961</b>
<b>57 FEDERATED MUTUAL INSURANCE COMPANY</b>	<b>13935</b>
<b>58 FIDELITY AND GUARANTY INSURANCE UNDERWRITERS, INC.</b>	<b>25879</b>
<b>59 FIREMAN'S FUND INSURANCE COMPANY</b>	<b>21873</b>
<b>60 FIRST CARE, INC.</b>	<b>60113</b>
<b>61 FIRST CONTINENTAL LIFE &amp; ACCIDENT INSURANCE CO</b>	<b>64696</b>
<b>62 FIRST LIBERTY INSURANCE CORPORATION (THE)</b>	<b>33588</b>
<b>63 FMH AG RISK INSURANCE COMPANY</b>	<b>36781</b>
<b>64 FRESENIUS HEALTH PLANS INSURANCE COMPANY</b>	<b>85286</b>
<b>65 GRANITE STATE INSURANCE COMPANY</b>	<b>23809</b>
<b>66 GREAT DIVIDE INSURANCE COMPANY</b>	<b>25224</b>
<b>67 GUIDEONE INSURANCE COMPANY</b>	<b>15032</b>
<b>68 HARTFORD ACCIDENT AND INDEMNITY COMPANY</b>	<b>22357</b>
<b>69 HARTFORD CASUALTY INSURANCE COMPANY</b>	<b>29424</b>

<b>70 HARTFORD UNDERWRITERS INSURANCE COMPANY</b>	<b>30104</b>
<b>71 HCSC INSURANCE SERVICES COMPANY</b>	<b>78611</b>
<b>72 HEALTH NET LIFE INSURANCE COMPANY</b>	<b>66141</b>
<b>73 HEALTHSPRING LIFE &amp; HEALTH INSURANCE COMPANY, INC.</b>	<b>12902</b>
<b>74 HERITAGE LIFE INSURANCE COMPANY</b>	<b>64394</b>
<b>75 HISCOX INSURANCE COMPANY INC.</b>	<b>10200</b>
<b>76 HORACE MANN INSURANCE COMPANY</b>	<b>22578</b>
<b>77 HUDSON INSURANCE COMPANY</b>	<b>25054</b>
<b>78 HUMANA BENEFIT PLAN OF ILLINOIS, INC.</b>	<b>60052</b>
<b>79 IMPERIUM INSURANCE COMPANY</b>	<b>35408</b>
<b>80 INDIVIDUAL ASSURANCE CO., LIFE, HEALTH &amp; ACCIDENT</b>	<b>81779</b>
<b>81 INSURANCE COMPANY OF THE WEST</b>	<b>27847</b>
<b>82 INVERIN INSURANCE COMPANY</b>	<b>36153</b>
<b>83 INVESTORS PREFERRED LIFE INSURANCE COMPANY</b>	<b>15313</b>
<b>84 LIFESHIELD NATIONAL INSURANCE CO.</b>	<b>99724</b>
<b>85 LM INSURANCE CORPORATION</b>	<b>33600</b>
<b>86 MARKEL AMERICAN INSURANCE COMPANY</b>	<b>28932</b>
<b>87 MUNICH RE US LIFE CORPORATION</b>	<b>69604</b>
<b>88 NATIONAL FIRE INSURANCE COMPANY OF HARTFORD</b>	<b>20478</b>
<b>89 NATIONAL INDEMNITY COMPANY</b>	<b>20087</b>
<b>90 NATIONAL SPECIALTY INSURANCE COMPANY</b>	<b>22608</b>
<b>91 NATIONAL SURETY CORPORATION</b>	<b>21881</b>
<b>92 NATIONWIDE AFFINITY INSURANCE COMPANY OF AMERICA</b>	<b>26093</b>
<b>93 NAVIGATORS INSURANCE COMPANY</b>	<b>42307</b>
<b>94 NEW ERA LIFE INSURANCE COMPANY OF THE MIDWEST</b>	<b>69698</b>
<b>95 NEW HAMPSHIRE INSURANCE COMPANY</b>	<b>23841</b>
<b>96 OHIO CASUALTY INSURANCE COMPANY</b>	<b>24074</b>
<b>97 PAN-AMERICAN ASSURANCE COMPANY INTERNATIONAL, INC.</b>	<b>13602</b>
<b>98 PARTNERRE LIFE REINSURANCE COMPANY OF AMERICA</b>	<b>74900</b>
<b>99 PENNSYLVANIA MANUFACTURERS' ASSOCIATION INS. CO.</b>	<b>12262</b>
<b>100 PENNSYLVANIA NATIONAL MUTUAL CASUALTY INSURANCE CO</b>	<b>14990</b>
<b>101 PIE INSURANCE COMPANY (THE)</b>	<b>21857</b>
<b>102 PINNACLE NATIONAL INSURANCE COMPANY</b>	<b>21296</b>
<b>103 PROSELECT INSURANCE COMPANY</b>	<b>10638</b>
<b>104 PROTECTIVE INSURANCE COMPANY</b>	<b>12416</b>
<b>105 QBE REINSURANCE CORPORATION</b>	<b>10219</b>
<b>106 R.V.I. AMERICA INSURANCE COMPANY</b>	<b>23132</b>
<b>107 REGENT INSURANCE COMPANY</b>	<b>24449</b>



108 RESOURCE LIFE INSURANCE COMPANY	61506
109 RGA REINSURANCE COMPANY	93572
110 RIVERPORT INSURANCE COMPANY	36684
111 RLI INSURANCE COMPANY	13056
112 SAFEHEALTH LIFE INSURANCE COMPANY	79014
113 SCOR GLOBAL LIFE AMERICAS REINSURANCE COMPANY	64688
114 SENTRY CASUALTY COMPANY	28460
115 SENTRY SELECT INSURANCE COMPANY	21180
116 SILVERSCRIPT INSURANCE COMPANY	12575
117 SOUTHERN LIFE AND HEALTH INSURANCE COMPANY	88323
118 SPARTA INSURANCE COMPANY	20613
119 STAR INSURANCE COMPANY	18023
120 TESLA INSURANCE COMPANY	24813
121 THE AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CONNECTICUT	19062
122 THE CINCINNATI INDEMNITY COMPANY	23280
123 THE CINCINNATI INSURANCE COMPANY	10677
124 THE TRAVELERS CASUALTY COMPANY	41769
125 TRANSPORTATION INSURANCE COMPANY	20494
126 TRANSVERSE INSURANCE COMPANY	21075
127 TRAVELERS CASUALTY AND SURETY COMPANY	19038
128 TRAVELERS CASUALTY COMPANY OF CONNECTICUT	36170
129 TRAVELERS COMMERCIAL CASUALTY COMPANY	40282
130 TRAVELERS COMMERCIAL INSURANCE COMPANY	36137
131 TUFTS INSURANCE COMPANY	60117
132 U.S. FINANCIAL LIFE INSURANCE COMPANY	84530
133 UKRAINIAN NATIONAL ASSOCIATION, INC.	57215
134 UNITEDHEALTHCARE INSURANCE COMPANY OF AMERICA	84549
135 USABLE MUTUAL INSURANCE COMPANY	83470
136 VALLEY FORGE INSURANCE COMPANY	20508
137 VIRGINIA SURETY COMPANY, INC.	40827
138 VISION BENEFITS OF AMERICA II, INC.	13750
139 WCF SELECT INSURANCE COMPANY	21865
140 WILTON REASSURANCE COMPANY	66133
141 WISCONSIN PHYSICIANS SERVICE INSURANCE CORPORATION	53139
142 ZENITH INSURANCE COMPANY	13269