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HEALTH COMPANIES – ASSOCIATION EDITION

QUARTERLY STATEMENT
AS OF SEPTEMBER 30, 2021
OF THE CONDITION AND AFFAIRS OF THE
TRUE HEALTH NEW MEXICO, INC.

NAIC Group Code 4887 0000 NAIC Company Code 16281 Employers ID Number 82-2885824
(Current) (Prior)

Organized under the Laws of NM State of Domicile or Port of Entry NM
Country of Domicile US
Licensed as business type: Health Maintenance Organization Is HMO Federally Qualified? N/A
Incorporated/Organized 09/22/2017 Commenced Business 01/01/2018
Statutory Home Office 2440 Louisiana Blvd NE Suite 601 Albuquerque, NM, US 87110
Main Administrative Office 2440 Louisiana Blvd NE Suite 601
Albuquerque, NM, US 87110 505-633-8020
(Telephone)
Mail Address 2440 Louisiana Blvd NE Suite 601 Albuquerque, NM, US 87110
Primary Location of Books and
Records 2440 Louisiana Blvd NE Suite 601
Albuquerque, NM, US 87110 505-633-8020
(Telephone)
Internet Website Address www.truehealthnewmexico.com
Statutory Statement Contact Greg Theobald 505-633-8020
(Telephone)
GTheobald@TruehealthNewMexico.com 866-231-1344
(E-Mail) (Fax)

OFFICERS

Mark Epstein, CEO and President George Lyford#, Secretary
Todd Pilger, Chief Financial Officer and Treasurer

DIRECTORS OR TRUSTEES

Simeon Schindelman# Keith Nelsen#
Nicolas Alvin Christianson#

State of New Mexico
County of Bernalillo SS

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

x Mark Epstein CEO and President
x Todd Pilger Chief Financial Officer and Treasurer
x George Lyford Secretary

Subscribed and sworn to before me
this _____ day of

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

x _____

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	12,757,104		12,757,104	15,229,662
2. Stocks:				
2.1 Preferred stocks.....				
2.2 Common stocks.....				
3. Mortgage loans on real estate:				
3.1 First liens.....				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances).....				
4.2 Properties held for the production of income (less \$ encumbrances).....				
4.3 Properties held for sale (less \$ encumbrances).....				
5. Cash (\$ 7,666,873), cash equivalents (\$ 7,612,846) and short-term investments (\$ 999,820).....	16,279,538		16,279,538	21,551,162
6. Contract loans (including \$ premium notes).....				
7. Derivatives.....				
8. Other invested assets.....				
9. Receivables for securities.....				
10. Securities lending reinvested collateral assets.....				
11. Aggregate write-ins for invested assets.....				
12. Subtotals, cash and invested assets (Lines 1 to 11).....	29,036,642		29,036,642	36,780,824
13. Title plants less \$ charged off (for Title insurers only).....				
14. Investment income due and accrued.....	59,686		59,686	68,865
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	2,057,295	381,911	1,675,384	2,180,486
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$ 407,090).....	407,090		407,090	389,128
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....				699,587
16.2 Funds held by or deposited with reinsured companies.....				
16.3 Other amounts receivable under reinsurance contracts.....				
17. Amounts receivable relating to uninsured plans.....	17,052		17,052	13,032
18.1 Current federal and foreign income tax recoverable and interest thereon.....	512,942		512,942	839,088
18.2 Net deferred tax asset.....				675,003
19. Guaranty funds receivable or on deposit.....				
20. Electronic data processing equipment and software.....				
21. Furniture and equipment, including health care delivery assets (\$).....				
22. Net adjustment in assets and liabilities due to foreign exchange rates.....				
23. Receivables from parent, subsidiaries and affiliates.....	8,100,000		8,100,000	535,157
24. Health care (\$ 3,364,433) and other amounts receivable.....	5,855,502	2,491,069	3,364,433	1,660,469
25. Aggregate write-ins for other-than-invested assets.....	2,897,298	210,918	2,686,380	2,550,547
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	48,943,508	3,083,899	45,859,609	46,392,186
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27).....	48,943,508	3,083,899	45,859,609	46,392,186
Details of Write-Ins				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....				
2501. NMMIP Premium Tax Credit.....	2,001,921		2,001,921	1,866,088
2502. Deposits.....	46,511	46,511	-	
2503. Premium Tax Overpayment.....	684,459		684,459	684,459
2598. Summary of remaining write-ins for Line 25 from overflow page.....	164,407	164,407	-	
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	2,897,298	210,918	2,686,380	2,550,547

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	16,200,329		16,200,329	11,445,675
2. Accrued medical incentive pool and bonus amounts	79,800		79,800	326,734
3. Unpaid claims adjustment expenses	688,898		688,898	462,553
4. Aggregate health policy reserves, including the liability of \$4,611,571 for medical loss ratio rebate per the Public Health Service Act	6,329,559		6,329,559	7,984,025
5. Aggregate life policy reserves				
6. Property/casualty unearned premium reserve				
7. Aggregate health claim reserves				
8. Premiums received in advance	3,228,119		3,228,119	4,139,659
9. General expenses due or accrued	5,310,727		5,310,727	4,226,927
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))				
10.2 Net deferred tax liability	48,935		48,935	
11. Ceded reinsurance premiums payable				
12. Amounts withheld or retained for the account of others				
13. Remittances and items not allocated				
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)				
15. Amounts due to parent, subsidiaries and affiliates	1,125,766		1,125,766	
16. Derivatives				
17. Payable for securities				
18. Payable for securities lending				
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)				
20. Reinsurance in unauthorized and certified (\$) companies				
21. Net adjustments in assets and liabilities due to foreign exchange rates				
22. Liability for amounts held under uninsured plans	62,070		62,070	63,099
23. Aggregate write-ins for other liabilities (including \$ current)				
24. Total liabilities (Lines 1 to 23)	33,074,202		33,074,202	28,648,672
25. Aggregate write-ins for special surplus funds	XXX	XXX		
26. Common capital stock	XXX	XXX	10	10
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	38,282,022	27,751,490
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX		
31. Unassigned funds (surplus)	XXX	XXX	(25,496,625)	(10,007,986)
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	12,785,407	17,743,514
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	45,859,609	46,392,186
Details of Write-Ins				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	Current Year to Date		Prior Year To Date	Prior Year Ended December 31
	1	2	3	4
	Uncovered	Total	Total	Total
1. Member Months.....	XXX	290,661	208,655	278,282
2. Net premium income (including \$ non-health premium income)	XXX	125,954,417	91,180,986	122,275,140
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	972,809	(5,019,870)	(5,584,380)
4. Fee-for-service (net of \$ medical expenses).....	XXX			
5. Risk revenue.....	XXX			
6. Aggregate write-ins for other health care related revenues.....	XXX			
7. Aggregate write-ins for other non-health revenues.....	XXX			
8. Total revenues (Lines 2 to 7).....	XXX	126,927,226	86,161,117	116,690,759
Hospital and Medical:				
9. Hospital/medical benefits.....		87,831,927	44,462,752	61,963,857
10. Other professional services.....				
11. Outside referrals.....				
12. Emergency room and out-of-area.....		5,189,276	7,134,208	10,097,949
13. Prescription drugs.....		22,888,518	13,235,598	17,107,119
14. Aggregate write-ins for other hospital and medical.....				
15. Incentive pool, withhold adjustments and bonus amounts.....		(100,900)		326,734
16. Subtotal (Lines 9 to 15).....		115,808,821	64,832,558	89,495,659
Less:				
17. Net reinsurance recoveries.....		12,305	1,836,029	1,690,626
18. Total hospital and medical (Lines 16 minus 17).....		115,796,516	62,996,529	87,805,033
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$4,667,509 cost containment expenses.....		11,643,091	8,146,725	13,698,661
21. General administrative expenses.....		18,879,531	19,444,854	22,164,615
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....		(90,000)		850,000
23. Total underwriting deductions (Lines 18 through 22).....		146,229,138	90,588,108	124,518,308
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX	(19,301,912)	(4,426,991)	(7,827,548)
25. Net investment income earned.....		438,440	397,122	532,227
26. Net realized capital gains (losses) less capital gains tax of \$.....		(12,804)	(8,748)	(16,285)
27. Net investment gains (losses) (Lines 25 plus 26).....		425,635	388,374	515,942
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$379,102)].....		(379,102)	(290,052)	(259,737)
29. Aggregate write-ins for other income or expenses.....				
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX	(19,255,379)	(4,328,669)	(7,571,342)
31. Federal and foreign income taxes incurred.....	XXX		(772,007)	(828,228)
32. Net income (loss) (Lines 30 minus 31).....	XXX	(19,255,379)	(3,556,662)	(6,743,114)
Details of Write-Ins				
0601.....	XXX			
0602.....	XXX			
0603.....	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX			
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above).....	XXX			
0701.....	XXX			
0702.....	XXX			
0703.....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX			
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above).....	XXX			
1401.....				
1402.....				
1403.....				
1498. Summary of remaining write-ins for Line 14 from overflow page.....				
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above).....				
2901.....				
2902.....				
2903.....				
2998. Summary of remaining write-ins for Line 29 from overflow page.....				
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above).....				

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
33. Capital and surplus prior reporting year.....	17,743,514	23,595,929	23,595,929
34. Net income or (loss) from Line 32.....	(19,255,379)	(3,556,662)	(6,743,114)
35. Change in valuation basis of aggregate policy and claim reserves.....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....			
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....	(723,938)	137,014	(1,427,251)
39. Change in nonadmitted assets.....	4,490,678	675,237	2,317,951
40. Change in unauthorized and certified reinsurance.....			
41. Change in treasury stock.....			
42. Change in surplus notes.....			
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in.....			
44.2 Transferred from surplus (Stock Dividend).....			
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in.....	10,530,532		
45.2 Transferred to capital (Stock Dividend).....			
45.3 Transferred from capital.....			
46. Dividends to stockholders.....			
47. Aggregate write-ins for gains or (losses) in surplus.....			
48. Net change in capital and surplus (Lines 34 to 47).....	(4,958,107)	(2,744,410)	(5,852,415)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	12,785,407	20,851,519	17,743,514
Details of Write-Ins			
4701.....			
4702.....			
4703.....			
4798. Summary of remaining write-ins for Line 47 from overflow page.....			
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above).....			

CASH FLOW

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	124,635,293	90,121,933	122,697,048
2. Net investment income	447,440	393,588	553,551
3. Miscellaneous income	-		
4. Total (Lines 1 to 3)	125,082,734	90,515,521	123,250,600
5. Benefit and loss related payments	113,735,204	59,737,308	84,270,545
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	29,596,629	23,843,578	32,881,934
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	(326,146)	252,399	252,399
10. Total (Lines 5 through 9)	143,005,687	83,833,285	117,404,878
11. Net cash from operations (Line 4 minus Line 10)	(17,922,954)	6,682,236	5,845,721
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	4,453,041	2,257,543	3,947,990
12.2 Stocks			
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds	-		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,453,041	2,257,543	3,947,990
13. Cost of investments acquired (long-term only):			
13.1 Bonds	1,993,109	1,338,473	1,338,473
13.2 Stocks			
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,993,109	1,338,473	1,338,473
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	2,459,932	919,070	2,609,517
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock	9,000,000		
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)	1,191,398	1,248,157	1,033,658
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	10,191,398	1,248,157	1,033,658
Reconciliation of Cash, Cash Equivalents and Short-Term Investments			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(5,271,623)	8,849,463	9,488,896
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	21,551,161	12,062,265	12,062,265
19.2 End of period (Line 18 plus Line 19.1)	16,279,538	20,911,728	21,551,161
Note: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0001.			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year.....	23,373	6,686	16,129				558			
2. First Quarter.....	31,868	14,600	16,631				637			
3. Second Quarter.....	32,303	14,896	16,752				655			
4. Third Quarter.....	33,062	15,395	16,998				669			
5. Current Year.....										
6. Current Year Member Months.....	290,661	133,832	150,970				5,859			
Total Member Ambulatory Encounters for Period:										
7. Physician.....	206,923	107,693	95,852				3,378			
8. Non-Physician.....	60,010	29,801	29,934				275			
9. Total.....	266,933	137,494	125,786				3,653			
10. Hospital Patient Days Incurred.....	2,967	1,338	1,515				114			
11. Number of Inpatient Admissions.....	862	381	449				32			
12. Health Premiums Written (a).....	128,176,978	52,516,423	73,452,558				2,207,998			
13. Life Premiums Direct.....										
14. Property/Casualty Premiums Written.....										
15. Health Premiums Earned.....	129,149,787	52,516,423	74,425,367				2,207,998			
16. Property/Casualty Premiums Earned.....										
17. Amount Paid for Provision of Health Care Services.....	114,447,096	57,903,498	54,683,619				1,859,979			
18. Amount Incurred for Provision of Health Care Services.....	115,808,822	62,313,271	51,527,428				1,968,123			

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

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

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0399999 – Aggregate accounts not individually listed-covered.....	1,031,653	213,350	33,001	87,177	21,347	1,386,528
0499999 – Subtotals.....	1,031,653	213,350	33,001	87,177	21,347	1,386,528
0599999 – Unreported claims and other claim reserves.....						14,813,801
0799999 – Total claims unpaid.....						16,200,329
0899999 – Accrued medical incentive pool and bonus amounts.....						79,800

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
1. Comprehensive (hospital and medical).....	7,945,379	104,483,399	106,022	15,374,936	8,051,401	10,819,409
2. Medicare Supplement.....						
3. Dental only.....						
4. Vision only.....						
5. Federal Employees Health Benefits Plan.....	247,307	1,612,672	29,423	689,948	276,730	626,266
6. Title XVIII – Medicare.....						
7. Title XIX – Medicaid.....						
8. Other health.....						
9. Health subtotal (Lines 1 to 8).....	8,192,686	106,096,071	135,445	16,064,884	8,328,131	11,445,674
10. Health care receivables (a).....		5,155,502				2,009,507
11. Other non-health.....						
12. Medical incentive pools and bonus amounts.....	146,034		79,800		225,834	326,734
13. Totals (Lines 9-10+11+12).....	8,338,720	100,940,569	215,245	16,064,884	8,553,965	9,762,901

(a) Excludes \$700,000 loans or advances to providers not yet expensed.

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of True Health New Mexico, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the New Mexico Office of Superintendent of Insurance.

The New Mexico Office of Superintendent of Insurance recognizes only statutory accounting practices prescribed or permitted by the State of New Mexico for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the New Mexico Insurance Law. The National Association of Insurance Commissioners’ (NAIC) Accounting Practices and Procedures Manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of New Mexico. New Mexico does not allow for admission of Goodwill, however, NAIC SSAP No. 68 allows for goodwill to be admitted up to 3% of prior reported capital and surplus excluding any admitted goodwill, EDP equipment and DTAs.

The prescribed practices described above has an impact on the Company's Risk Based Capital Ratio and without these practices a regulatory action would not have been triggered. A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of New Mexico is shown below:

	SSAP #	F/S Page	F/S Line #	09/30/2021	12/31/2020
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (19,255,379)	\$ (6,743,114)
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ (19,255,379)</u>	<u>\$ (6,743,114)</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 12,785,407	\$ 17,743,514
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
Admission of Goodwill	68	2, 3	25, 31		(2,085,152)
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$ 12,785,407</u>	<u>\$ 19,828,666</u>

B. Use of Estimates in the Preparation of the Financial Statements - No Significant Changes

C. Accounting Policy

- (1) Short-term investments - No Significant Changes
- (2) Bonds are stated at amortized cost using the scientific interest method. The Company does not own any mandatory convertible securities or SVO-Identified bond ETFs.
- (3) Common stocks - No Significant Changes
- (4) Preferred stocks - No Significant Changes
- (5) Mortgage loans - No Significant Changes
- (6) The Company had no Loan-backed securities.
- (7) Investments in subsidiaries, controlled and affiliated entities - No Significant Changes
- (8) Investments in joint ventures, partnerships and limited liability companies - No Significant Changes
- (9) Derivatives - No Significant Changes
- (10) Investment income as a factor in the premium deficiency calculation - No Significant Changes
- (11) Liabilities for losses and loss/claim adjustment expenses - No Significant Changes
- (12) Changes in capitalization policy - No Significant Changes
- (13) Pharmaceutical rebate receivables - No Significant Changes

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern. There is no substantial doubt in its ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors - No Significant Changes

3. Business Combinations and Goodwill - No Significant Changes

4. Discontinued Operations - No Significant Changes

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans - No Significant Changes
- B. Debt Restructuring - No Significant Changes
- C. Reverse Mortgages - No Significant Changes
- D. Loan-Backed Securities - None

Notes to the Financial Statements

5. Investments (Continued)

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - No Significant Changes
- K. Low-Income Housing Tax Credits (LIHTC) - No Significant Changes
- L. Restricted Assets - No Significant Changes
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - No Significant Changes
- P. Short Sales - No Significant Changes
- Q. Prepayment Penalty and Acceleration Fees

General Account

(1) Number of CUSIPs.....	1
(2) Aggregate amount of investment income.....	\$ 5,771

- R. Reporting Entity's Share of Cash Pool by Asset type - None

6. Joint Ventures, Partnerships and Limited Liability Companies - No Significant Changes

7. Investment Income - No Significant Changes

8. Derivative Instruments

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

9. Income Taxes - No Significant Changes

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

- A. On January 11, 2021 the Company's parent, Evolent Health, Inc. entered into a Stock Purchase Agreement with Bright Health Management, Inc., where the equity interest in the Company will be sold to Bright Health Management. On March 30, 2021, the New Mexico Office of Superintendent of Insurance approved the sale of the Company to Bright Health Management, effective March 31, 2021. At the time of sale, Evolent Health will continue to provide many of the third party administrative services to the Company through a Health Plan Services Agreement and a Transition Services Agreement.

The Company booked \$9,000,000 contribution from its parent, Bright Health Management, Inc. for surplus infusion received in August 2021. The Company booked \$8,100,000 receivable from its parent, Bright Health Management, Inc. for surplus infusion received in November 2021.

- B. Detail of Related Party Transactions - No Significant Changes
- C. Transactions With Related Party Who Are Not Reported on Schedule Y - No Significant Changes
- D. Amounts Due To or From Related Parties - No Significant Changes
- E. Material Management Contracts

April 1, 2021 the Company entered into a management service agreement with Bright Health Management, Inc. to provide specific administrative services for the Company in return for a specified fee.

- F. Guarantees or Contingencies - No Significant Changes
- G. Nature of Relationships that Could Affect Operations - No Significant Changes
- H. Amount Deducted for Investment in Upstream Company - No Significant Changes
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - No Significant Changes
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - No Significant Changes
- K. Foreign Subsidiary Value Using CARVM - No Significant Changes
- L. Downstream Holding Company Value Using Look-Through Method - No Significant Changes
- M. All SCA Investments - No Significant Changes
- N. Investment in Insurance SCAs - No Significant Changes
- O. SCA and SSAP No. 48 Entity Loss Tracking - No Significant Changes

11. Debt

- A. Debt, Including Capital Notes - No Significant Changes
- B. FHLB (Federal Home Loan Bank) Agreements - None

Notes to the Financial Statements

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

- A. Defined Benefit Plan - None
- B. Investment Policies and Strategies of Plan Assets - No Significant Changes
- C. Fair Value of Each Class of Plan Assets - No Significant Changes
- D. Expected Long-Term Rate of Return for the Plan Assets - No Significant Changes
- E. Defined Contribution Plans - No Significant Changes
- F. Multiemployer Plans - No Significant Changes
- G. Consolidated/Holding Company Plans - No Significant Changes
- H. Postemployment Benefits and Compensated Absences - No Significant Changes
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - No Significant Changes

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations - No Significant Changes

14. Liabilities, Contingencies and Assessments - No Significant Changes

15. Leases - No Significant Changes

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - No Significant Changes

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

- A. Transfers of Receivables Reported as Sales - No Significant Changes
- B. Transfers and Servicing of Financial Assets - None
- C. Wash Sales - None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - No Significant Changes

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - No Significant Changes

20. Fair Value Measurements

A. Fair Value Measurement

(1) Fair value measurements at reporting date

The Company's financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on a hierarchy that prioritizes the inputs to valuation techniques used to measure fair value into three broad levels. The hierarchy gives the highest priority to fair values determined using unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to fair values determined using unobservable inputs (Level 3). An asset's or liability's classification is determined based on the lowest level input that is significant to its measurement.

For example, a Level 3 fair value measurement may include inputs that are both observable (Levels 1 and 2) and unobservable (Level 3). The levels of the fair value hierarchy are as follows:

- Level 1: Inputs are unadjusted, quoted prices for identical assets or liabilities in active markets at the measurement date.
- Level 2: Inputs are other than quoted prices included in level 1 that are observable for the asset or liability through corroboration with market data at the measurement date.
- Level 3: Inputs are unobservable and reflect management's best estimate of what market participants would use in pricing the asset or liability at the measurement date.

Fair value of actively traded fixed-income and equity securities is based on quoted market prices. Fair value of inactive traded fixed-income securities is based on quoted market prices of identical or similar securities based on observable inputs like interest rates using a market valuation approach is generally classified as Level 2. Investments measured based on the practical expedient being net asset value (NAV), based on the NAV of the fund as provided for in the audited financial statements and other fund reporting, are generally classified as Level 3.

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Cash Equivalents - Exempt Money Market Funds	\$	7,612,846	\$	\$	\$ 7,612,846
Total assets at fair value/NAV	\$	7,612,846	\$	\$	\$ 7,612,846
b. Liabilities at fair value					
Total liabilities at fair value	\$		\$	\$	\$

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

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

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

(5) Derivatives - None

B. Other Fair Value Disclosures - None

Notes to the Financial Statements

20. Fair Value Measurements (Continued)

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 13,214,877	\$ 12,757,104	\$	\$ 13,214,877	\$	\$	\$
Short-term Investments	999,880	999,820		999,880			
Cash Equivalents	7,612,846	7,612,846		7,612,846			

D. Not Practicable to Estimate Fair Value - None

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

21. Other Items - No Significant Changes

22. Events Subsequent

Type I. – Recognized Subsequent Events

The Company booked \$8,100,000 receivable from its parent, Bright Health Management, Inc. for surplus infusion received in November 2021.

Type II. – Nonrecognized Subsequent Events

No Significant Changes

23. Reinsurance - No Significant Changes

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate - None

B. Method Used to Record - None

C. Amount and Percent of Net Retrospective Premiums - None

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

	(1) Individual	(2) Small Group Employer	(3) Large Group Employer	(4) Other Categories with Rebates	(5) Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$	\$ 5,584,380	\$	\$	\$ 5,584,380
(2) Medical loss ratio rebates paid					
(3) Medical loss ratio rebates unpaid		5,584,380			5,584,380
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	5,584,380
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$	\$ (972,809)	\$	\$	\$ (972,809)
(8) Medical loss ratio rebates paid					
(9) Medical loss ratio rebates unpaid		4,611,571			4,611,571
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,611,571

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

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

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

Notes to the Financial Statements

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

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

	<u>Amount</u>
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to the ACA risk adjustment (including high-risk pool payments).....	\$..... 407,090
Liabilities	
2. Risk adjustment user fees payable for ACA risk adjustment.....	\$..... 14,767
3. Premium adjustments payable due to ACA risk adjustment (including high-risk pool premium).....	957,988
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment.....	\$..... (8,543,073)
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid).....	30,987
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA reinsurance.....	\$.....
2. Amounts recoverable for claims unpaid due to ACA reinsurance (contra liability).....	\$.....
3. Amounts receivable relating to uninsured plans for contributions for ACA reinsurance.....	\$.....
Liabilities	
4. Liabilities for contributions payable due to ACA reinsurance – not reported as ceded premium.....	\$.....
5. Ceded reinsurance premiums payable due to ACA reinsurance.....	\$.....
6. Liabilities for amounts held under uninsured plans contributions for ACA reinsurance.....	\$.....
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA reinsurance.....	\$.....
8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments.....	\$.....
9. ACA reinsurance contributions - not reported as ceded premium.....	\$.....
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA risk corridors liabilities.....	\$.....
2. Reserve for rate credits or policy experience rating refunds due to ACA risk corridors.....	\$.....
Operations (Revenue & Expense)	
3. Effect of ACA risk corridors on net premium income (paid/received).....	\$.....
4. Effect of ACA risk corridors on change in reserves for rate credits.....	\$.....

Notes to the Financial Statements

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

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

	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	(1)	(2)	(3)	(4)	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	\$ 389,128	\$	\$	\$	\$ 389,128	\$	\$ 17,962	\$	A	\$ 407,090	\$
2. Premium adjustments payable (including high risk pool premium)		1,549,645		9,881,339		(8,331,694)		8,985,038	B		653,344
3. Subtotal ACA Permanent Risk Adjustment Program	\$ 389,128	\$ 1,549,645	\$	\$ 9,881,339	\$ 389,128	\$ (8,331,694)	\$ 17,962	\$ 8,985,038		\$ 407,090	\$ 653,344
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	\$	\$	\$	\$	\$	\$	\$	\$	C	\$	\$
2. Amounts recoverable for claims unpaid (contra liability)									D		
3. Amounts receivable relating to uninsured plans									E		
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium									F		
5. Ceded reinsurance premiums payable									G		
6. Liability for amounts held under uninsured plans									H		
7. Subtotal ACA Transitional Reinsurance Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	I	\$	\$
2. Reserve for rate credits or policy experience rating refunds									J		
3. Subtotal ACA Risk Corridors Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
d. Total for ACA risk sharing provisions	\$ 389,128	\$ 1,549,645	\$	\$ 9,881,339	\$ 389,128	\$ (8,331,694)	\$ 17,962	\$ 8,985,038		\$ 407,090	\$ 653,344

Explanations of Adjustments

- A: Adjusted amount based on notice received from United States Department of Health and Human Services.
- B: Adjusted amount based on notice received from United States Department of Health and Human Services.
- C: None
- D: None
- E: None
- F: None
- G: None
- H: None
- I: None
- J: None

(4) Roll-forward of risk corridors asset and liability balances by program benefit year - None

(5) ACA risk corridors receivable as of reporting date - None

25. Change in Incurred Claims and Claim Adjustment Expenses

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

Reserves for Losses and Loss and Adjustment Expense as of December 31, 2020 were \$12,234,961. As of September 30, 2021, \$10,440,147 has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$215,245 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$1,579,570 favorable prior-year development since December 31, 2020 to September 30, 2021. The increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses - None

26. Intercompany Pooling Arrangements - No Significant Changes

27. Structured Settlements - No Significant Changes

28. Health Care Receivables - No Significant Changes

29. Participating Policies - No Significant Changes

30. Premium Deficiency Reserves

- 1. Liability carried for premium deficiency reserves: \$760,000
- 2. Date of the most recent evaluation of this liability: 09/30/2021
- 3. Was anticipated investment income utilized in the calculation? YES

Notes to the Financial Statements

31. Anticipated Salvage and Subrogation - No Significant Changes

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?..... YES
- 1.2 If yes, has the report been filed with the domiciliary state?..... YES
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?..... NO
- 2.2 If yes, date of change:.....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?..... YES
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?..... YES
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
On July 1, 2021, Medical Practice Holding Company, LLC, an indirect subsidiary of Bright Health Group, Inc., acquired 75% of the outstanding equity interests of Centrum Medical Holdings, LLC ("Centrum"), a value-based primary care focused, multi-specialty medical group based in Florida.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group?..... YES
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group..... 0001671284
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO
If yes, complete and file the merger history data file with the NAIC.
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

- 5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?..... YES
If yes, attach an explanation.
The Company entered into a Management Agreement with Bright Health Management Inc. effective April 1, 2021.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made..... 12/31/2017
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released..... 12/31/2017
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date)..... 07/30/2019
- 6.4 By what department or departments?
Office of Superintendent of Insurance - State of New Mexico.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?..... N/A
- 6.6 Have all of the recommendations within the latest financial examination report been complied with?..... YES
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?..... NO
- 7.2 If yes, give full information.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... NO
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... NO
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliates primary federal regulator.

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

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... YES
 - (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - (c) Compliance with applicable governmental laws, rules and regulations;
 - (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:.....
- 9.2 Has the code of ethics for senior managers been amended?..... NO
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s)......
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?..... NO
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s)......

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... YES
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:..... \$ 8,100,000

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) NO
- 11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? NO
- 14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book / Adjusted Carrying Value	Current Quarter Book / Adjusted Carrying Value
14.21 Bonds	\$	\$
14.22 Preferred Stock		
14.23 Common Stock		
14.24 Short-Term Investments		
14.25 Mortgage Loans on Real Estate		
14.26 All Other		
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)		
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above		

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? NO
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? N/A
If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
- 16.3 Total payable for securities lending reported on the liability page \$

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

- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:
- | 1 | 2 |
|----------------------|-------------------|
| Name of Custodian(s) | Custodian Address |
| BOK Financial | Albuquerque, NM |

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:
- | 1 | 2 | 3 |
|---------|-------------|-------------------------|
| Name(s) | Location(s) | Complete Explanation(s) |
| | | |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? NO
- 17.4 If yes, give full and complete information relating thereto:

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

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

1	2
Name of Firm or Individual	Affiliation
BOK Financial	U

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? YES
- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? YES

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
17530	BOK Financial	5493008UZFTI4G7UQ733	SEC	NO

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?.....YES.....
- 18.2 If no, list exceptions:
-
- 19 By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities?.....NO.....
- 20 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities?.....NO.....
- 21 By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?.....NO.....

GENERAL INTERROGATORIES

PART 2 – HEALTH

1.	Operating Percentages:	
1.1	A&H loss percent.....	94.837 %
1.2	A&H cost containment percent.....	3.677 %
1.3	A&H expense percent excluding cost containment expenses.....	20.370 %
2.1	Do you act as a custodian for health savings accounts?.....	NO.....
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.....	\$.....
2.3	Do you act as an administrator for health savings accounts?.....	NO.....
2.4	If yes, please provide the balance of the funds administered as of the reporting date.....	\$.....
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?.....	NO.....
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?.....	NO.....

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
Accident & Health - Non-Affiliates									
93572	43-1235868	01/01/2021	RGA REINS CO	MO	SSL/G	CMM	Authorized		

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, Etc.		Active Status (a)	Accident & Health Premiums, Including Policy, Membership and Other Fees	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	N								
2.	Alaska	AK	N								
3.	Arizona	AZ	N								
4.	Arkansas	AR	N								
5.	California	CA	N								
6.	Colorado	CO	N								
7.	Connecticut	CT	N								
8.	Delaware	DE	N								
9.	District of Columbia	DC	N								
10.	Florida	FL	N								
11.	Georgia	GA	N								
12.	Hawaii	HI	N								
13.	Idaho	ID	N								
14.	Illinois	IL	N								
15.	Indiana	IN	N								
16.	Iowa	IA	N								
17.	Kansas	KS	N								
18.	Kentucky	KY	N								
19.	Louisiana	LA	N								
20.	Maine	ME	N								
21.	Maryland	MD	N								
22.	Massachusetts	MA	N								
23.	Michigan	MI	N								
24.	Minnesota	MN	N								
25.	Mississippi	MS	N								
26.	Missouri	MO	N								
27.	Montana	MT	N								
28.	Nebraska	NE	N								
29.	Nevada	NV	N								
30.	New Hampshire	NH	N								
31.	New Jersey	NJ	N								
32.	New Mexico	NM	L	125,968,980			2,207,998			128,176,978	
33.	New York	NY	N								
34.	North Carolina	NC	N								
35.	North Dakota	ND	N								
36.	Ohio	OH	N								
37.	Oklahoma	OK	N								
38.	Oregon	OR	N								
39.	Pennsylvania	PA	N								
40.	Rhode Island	RI	N								
41.	South Carolina	SC	N								
42.	South Dakota	SD	N								
43.	Tennessee	TN	N								
44.	Texas	TX	N								
45.	Utah	UT	N								
46.	Vermont	VT	N								
47.	Virginia	VA	N								
48.	Washington	WA	N								
49.	West Virginia	WV	N								
50.	Wisconsin	WI	N								
51.	Wyoming	WY	N								
52.	American Samoa	AS	N								
53.	Guam	GU	N								
54.	Puerto Rico	PR	N								
55.	US Virgin Islands	VI	N								
56.	Northern Mariana Islands	MP	N								
57.	Canada	CAN	N								
58.	Aggregate Other Alien	OT	XXX								
59.	Subtotal	XXX	125,968,980				2,207,998			128,176,978	
60.	Reporting entity contributions for employee benefits plans	XXX									
61.	Total (Direct Business)	XXX	125,968,980				2,207,998			128,176,978	
Details of Write-Ins											
58001.		XXX									
58002.		XXX									
58003.		XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX									

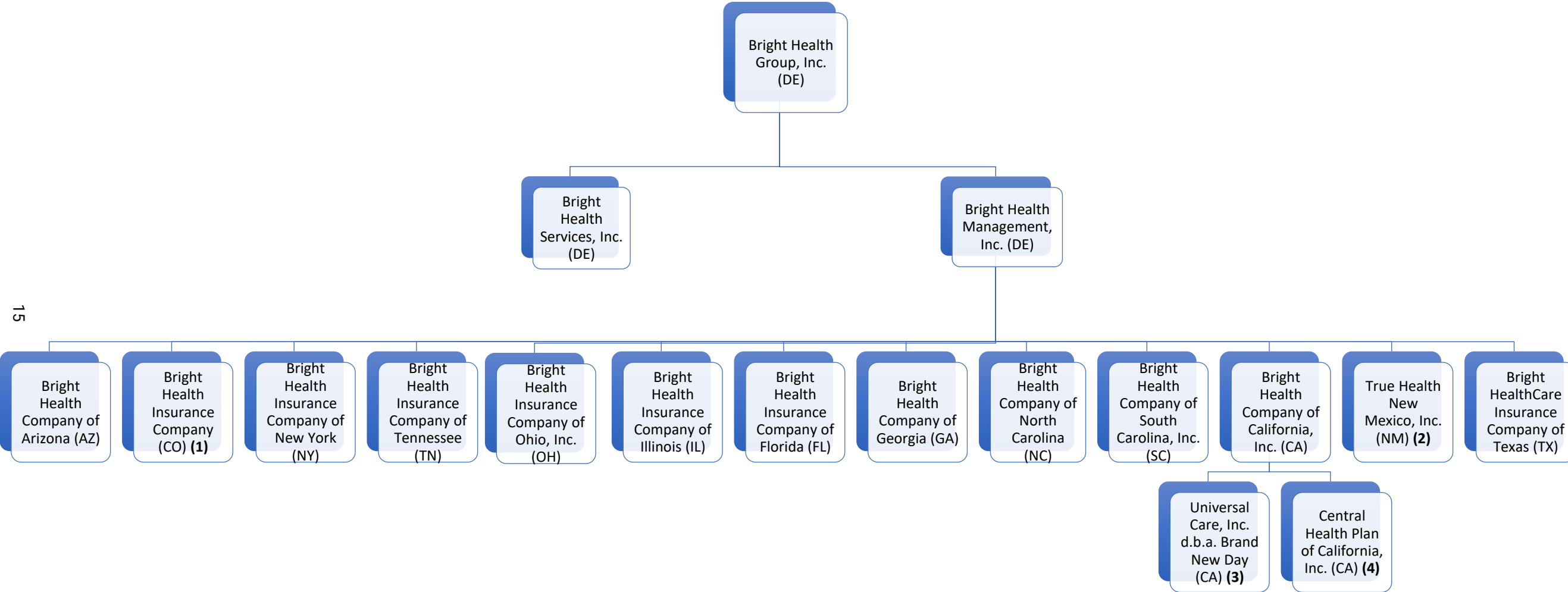
(a) Active Status Counts

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

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

PART 1 - ORGANIZATIONAL CHART

Bright Health Group (as of 9/30/21)



15

(1) Bright Health Insurance Company of Alabama, Inc. (AL) merged with and into Bright Health Insurance Company on 12/31/2020.

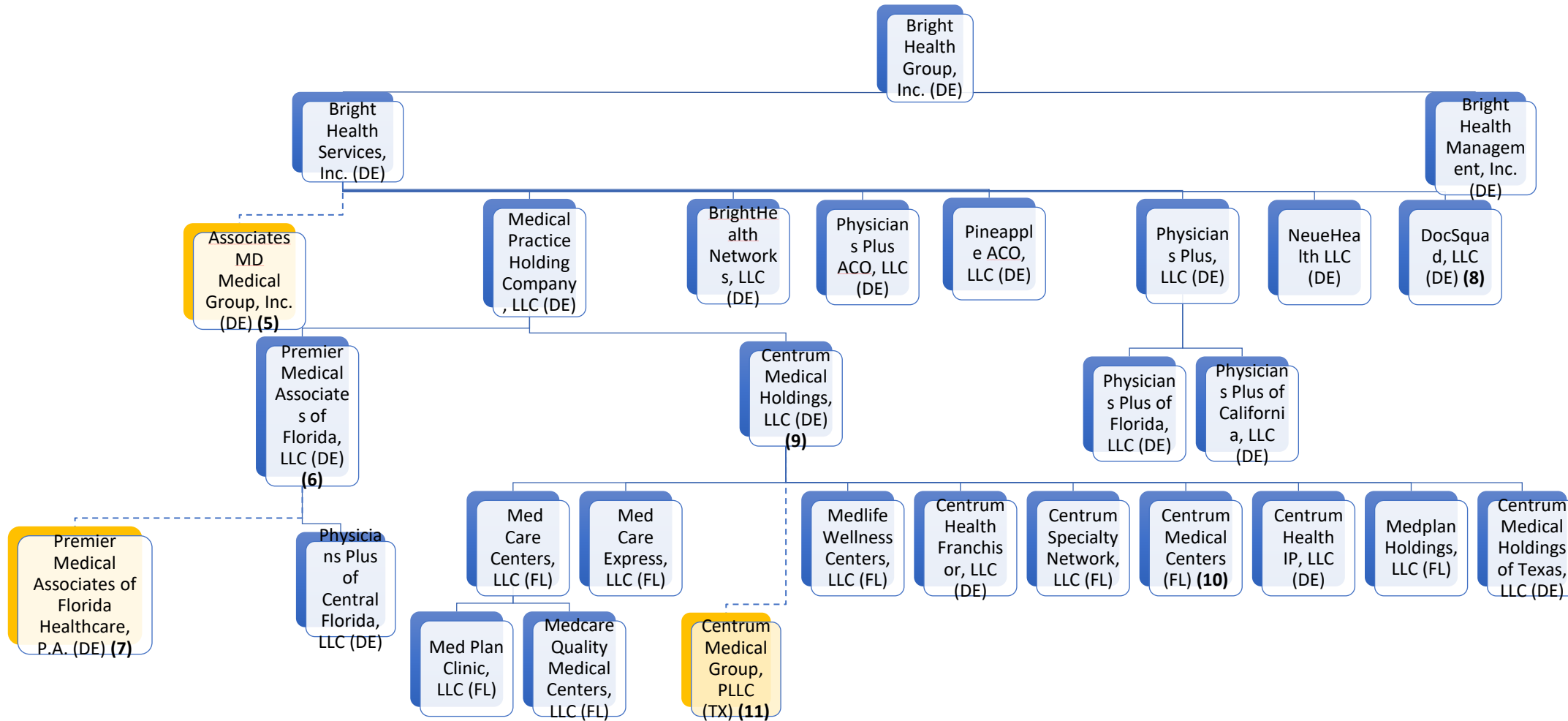
(2) 100% of stock of True Health New Mexico, Inc. acquired on 3/31/2021.

(3) 100% of stock of Universal Care, Inc. acquired on 4/30/2020.

(4) 100% of stock of Central Health Plan of California, Inc. acquired on 4/1/2021.

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

PART 1 - ORGANIZATIONAL CHART



15.1

(5) **NO OWNERSHIP INTEREST.** Entity owned by physician, Randeep Gadh, D.O., that is subject to Management Services Agreement and Stockholder Transfer Restriction Agreement with Bright Health Services, Inc.

(6) Medical Practice Holding Company, LLC owns 62% of membership interests. PMA II, LLC owns 38% of membership interest.

(7) **NO OWNERSHIP INTEREST.** Entity owned by physician, Dr. Dinesh Khanna, that is subject to Management Services Agreement and Succession Agreement with Premier Medical Associates of Florida, LLC.

(8) Zipnosis, Inc. merged with and into DocSquad, LLC on 3/31/2021.

(9) Medical Practice Holding Company, LLC owns 75% of membership interests. RRD Healthcare, LLC owns 25% membership interests.

(10) Includes: Centrum Medical Center – Airport, LLC; Centrum Medical Center – East Hialeah, LLC; Centrum Medical Center – West Hialeah, LLC; Centrum Medical Center – Miami Gardens, LLC; Centrum Medical Center – South Dade, LLC; Centrum Medical Center – Westchester, LLC; Centrum Medical Center – Little Havana 27 Ave, LLC; Centrum Medical Center – Little Havana 12 Ave, LLC; Centrum Medical Centers of Coral Springs, LLC; Centrum Medical Centers of Margate, LLC; Centrum Medical Centers of Davie, LLC; Centrum Medical Centers of Hallandale, LLC; Centrum Medical Centers of Lighthouse Point, LLC; Centrum Medical Centers of Fort Lauderdale, LLC; Centrum Medical Centers of Sheridan, LLC; Centrum Medical Centers of Miramar, LLC; Centrum Medical Center – Homestead, LLC

(11) **NO OWNERSHIP INTEREST.** Entity owned by physician, Dr. Manuel Lam, that is subject to Management Services Agreement and Succession Agreement with Centrum Medical Holdings, LLC.

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
4887	Bright Hlth Grp	00000	47-4991296		0001671284		Bright Health Group, Inc.	DE	UIP					N	
4887	Bright Hlth Grp	00000	81-1108911				Bright Health Management, Inc.	DE	UDP	Bright Health, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	15963	81-1078509				Bright Health Insurance Company	CO	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	1
4887	Bright Hlth Grp	16122	37-1844468				Bright Health Company of Arizona	AZ	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16388	32-0534235				Bright Health Insurance Company of New York	NY	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16341	35-2616469				Bright Health Insurance Company of Tennessee	TN	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16353	37-1873205				Bright Health Insurance Company of Ohio, Inc.	OH	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16501	83-3456438				Bright Health Insurance Company of Florida	FL	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16595	30-1154852				Bright Health Company of North Carolina	NC	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16545	83-3650545				Bright Health Insurance Company of Illinois	IL	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16544	35-2651212				Bright Health Company of South Carolina, Inc.	SC	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	16546	38-4106459				Bright Health Company of Georgia	GA	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	84-4428391				Bright Health Company of California	CA	NIA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	17041	86-3230389				Bright HealthCare Insurance Company of Texas	TX	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	15910	33-0012358				Universal Care, Inc	CA	IA	Bright Health Company of California	Ownership	100.000	Bright Health Group, Inc.	N	3
4887	Bright Hlth Grp	00000	84-3262809				Bright Health Services, Inc.	DE	NIA	Bright Health, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	84-3548530				AssociatesMD Medical Group, Inc.	DE	NIA	Bright Health Services, Inc.	Influence	-	Bright Health Group, Inc.	N	5
4887	Bright Hlth Grp	00000	86-2190965				Medical Practice Holding Company, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-3949537				Premier Medical Associates of Florida, LLC	DE	NIA	Medical Practice Holding Company, LLC	Ownership	62.000	Bright Health Group, Inc.	N	6
4887	Bright Hlth Grp	00000	86-2197193				BrightHealth Networks, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-1528100				Physicians Plus ACO, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-1676317				Pineapple ACO, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-1474761				Physicians Plus, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-1485390				Physicians Plus of Florida, LLC	DE	NIA	Physicians Plus, LLC	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	86-2212807				Physicians Plus of California, LLC	DE	NIA	Physicians Plus, LLC	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	85-3886892				Premier Medical Associates of Florida Healthcare, P.A.	DE	NIA	Bright Health Services, Inc.	Influence	-	Bright Health Group, Inc.	N	7
4887	Bright Hlth Grp	00000	86-2097242				NeueHealth LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	86-2408592				DocSquad, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	8

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
4887	Bright Hlth Grp	16281	82-2885824				True Health New Mexico, Inc.	NM	RE	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	2
4887	Bright Hlth Grp	00000	91-2155938				Central Health Plan of California, Inc.	CA	IA	Bright Health Management, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	4
4887	Bright Hlth Grp	00000	84-2640890				Centrum Medical Holdings, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	75.000	Bright Health Group, Inc.	N	9
4887	Bright Hlth Grp	00000	46-2536904				Med Care Centers, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	45-5087560				Med Plan Clinic, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	45-2799088				Medcare Quality Medical Centers, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	83-4221393				Med Care Express, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	87-2200070				Centrum Medical Group, PLLC	TX	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	11
4887	Bright Hlth Grp	00000	83-4075529				Med Wellness Centers, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	86-2094936				Centrum Health Franchisor, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	86-2291679				Centrum Specialty Network, LLC	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	87-3372083				Centrum Medical Centers	FL	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	10
4887	Bright Hlth Grp	00000	87-3372083				Centrum Health IP, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	
4887	Bright Hlth Grp	00000	87-2190282				Centrum Medical Holdings of Texas, LLC	DE	NIA	Bright Health Services, Inc.	Ownership	100.000	Bright Health Group, Inc.	N	

16.1

Asterisk	Explanation
1	Bright Health Insurance Company of Alabama, Inc. (AL) merged with and into Bright Health Insurance Company on 12/31/2020.
2	100% of stock of True Health New Mexico, Inc. acquired on 3/31/2021.
3	100% of stock of Universal Care, Inc. acquired on 4/30/2020.
4	100% of stock of Central Health Plan of California, Inc. acquired on 4/1/2021.
5	NO OWNERSHIP INTEREST. Entity owned by physician, Rundeep Gadh, D.O., that is subject to Management Services Agreement and Stockholder Transfer Restriction Agreement with Bright Health Services, Inc.
6	Medical Practice Holding Company, LLC owns 62% of membership interests. PMA II, LLC owns 38% of membership interest.
7	NO OWNERSHIP INTEREST. Entity owned by physician, Dr. Dinesh Khanna, that is subject to Management Services Agreement and Succession Agreement with Premier Medical Associates of Florida, LLC.
8	Zipnosis, Inc. merged with and into DocSquad, LLC on 3/31/2021.
9	Medical Practice Holding Company, LLC owns 75% of membership interests. RRD Healthcare, LLC owns 25% membership interests. Includes: Centrum Medical Center – Airport, LLC FEIN 84-2658490; Centrum Medical Center – East Hialeah, LLC FEIN 84-2827877; Centrum Medical Center – Miami Gardens FEIN 84-2754516, LLC; Centrum Medical Center – South Dade, LLC FEIN 84-2671249; Centrum Medical Center – Westchester, LLC FEIN 84-2780203; Centrum Medical Center – Little Havana 27 Ave, LLC FEIN 84-2839911; Centrum Medical Center – Little Havana 12 Ave, LLC FEIN 84-2764236; Centrum Medical Centers of Coral Springs, LLC FEIN 85-3478041; Centrum Medical Centers of Margate, LLC FEIN 85-3495242; Centrum Medical Centers of Davie, LLC FEIN 86-1218604; Centrum Medical Centers of Hallandale, LLC FEIN 86-2112975; Centrum Medical Centers of Lighthouse Point, LLC FEIN 86-2824921; Centrum Medical Centers of Fort Lauderdale, LLC FEIN 86-2856366; Centrum Medical Centers of Sheridan, LLC FEIN 86-2886898; Centrum Medical Centers of Miramar, LLC FEIN 86-2899974; Centrum Medical Center – Homestead, LLC FEIN 86-2932392
10	
11	NO OWNERSHIP INTEREST. Entity owned by physician, Dr. Manuel Lam, that is subject to Management Services Agreement and Succession Agreement with Centrum Medical Holdings, LLC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?.....	No.....

EXPLANATION:

1.

BARCODES:

1. 
1 6 2 8 1 2 0 2 1 3 6 5 0 0 0 0 3

OVERFLOW PAGE FOR WRITE-INS

ASSETS

	Current Statement Date			4
	1	2	3	December 31 Prior Year Net Admitted Assets
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1197. Summary of remaining write-ins for Line 11 from overflow page.....				
2504. Prepaid Expenses.....	145,644	145,644	-	
2505. Misc Receivable.....	18,763	18,763	-	
2597. Summary of remaining write-ins for Line 25 from overflow page.....	164,407	164,407	-	

SCHEDULE A – VERIFICATION

Real Estate

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

NONE

SCHEDULE B – VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	15,229,662	17,868,601
2.	Cost of bonds and stocks acquired.....	1,993,109	1,338,473
3.	Accrual of discount.....	11,530	17,532
4.	Unrealized valuation increase (decrease).....		
5.	Total gain (loss) on disposals.....	(12,131)	(16,285)
6.	Deduct consideration for bonds and stocks disposed of.....	4,458,812	3,961,345
7.	Deduct amortization of premium.....	12,024	30,668
8.	Total foreign exchange change in book / adjusted carrying value.....		
9.	Deduct current year's other-than-temporary impairment recognized.....		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	5,771	13,355
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	12,757,105	15,229,662
12.	Deduct total nonadmitted amounts.....		
13.	Statement value at end of current period (Line 11 minus Line 12).....	12,757,105	15,229,662

SCHEDULE D – PART 1B

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

NAIC Designation	1 Book / Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book / Adjusted Carrying Value End of First Quarter	6 Book / Adjusted Carrying Value End of Second Quarter	7 Book / Adjusted Carrying Value End of Third Quarter	8 Book / Adjusted Carrying Value December 31 Prior Year
Bonds								
1. NAIC 1 (a)	17,243,176		3,717,654	7,491	17,529,865	17,243,176	13,533,014	14,932,989
2. NAIC 2 (a)	223,685			225	223,465	223,685	223,910	296,673
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	17,466,861		3,717,654	7,716	17,753,331	17,466,861	13,756,923	15,229,662
Preferred Stock								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	17,466,861		3,717,654	7,716	17,753,331	17,466,861	13,756,923	15,229,662

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$ 999,820; NAIC 2 \$; NAIC 3 \$; NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book / Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999 Total	999,820	XXX	999,484		

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of short-term investments acquired	999,484	
3. Accrual of discount	336	
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals		
7. Deduct amortization of premium		
8. Total foreign exchange change in book / adjusted carrying value		
9. Deduct current year's other-than-temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	999,820	
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	999,820	

Quarterly Statement as of September 30, 2021 of the True Health New Mexico, Inc.

(SI-04) Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

(SI-04) Schedule DB - Part B - Verification - Futures Contracts

NONE

(SI-05) Schedule DB - Part C - Section 1

NONE

(SI-06) Schedule DB - Part C - Section 2

NONE

(SI-07) Schedule DB - Verification

NONE

SCHEDULE E – PART 2 – VERIFICATION
(Cash Equivalents)

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	5,869,270	3,383,461
2. Cost of cash equivalents acquired.....	4,748,414	3,840,110
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	3,004,838	1,354,300
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book / adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	7,612,846	5,869,270
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	7,612,846	5,869,270

(E-01) Schedule A - Part 2

NONE

(E-01) Schedule A - Part 3

NONE

(E-02) Schedule B - Part 2

NONE

(E-02) Schedule B - Part 3

NONE

(E-03) Schedule BA - Part 2

NONE

(E-03) Schedule BA - Part 3

NONE

(E-04) Schedule D - Part 3

NONE

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 Foreign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book / Adjusted Carrying Value	Change in Book / Adjusted Carrying Value					16 Book / Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
										11 Unrealized Valuation Increase / (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than- Temporary Impairment Recognized	14 Total Change in B. / A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.							
Bonds: U.S. Governments																					
38376M-3P-0	GNR 2017-096 MC - CMO/RMBS		09/01/2021	Paydown	XXX	48,138	48,138	48,244	48,265		(2)		(2)		48,263		(124)	(124)	766	08/20/2046	1.A
911760-TM-8	VENDE 2003-2 Z - CMO/RMBS		09/01/2021	Paydown	XXX	22,278	22,278	23,838	23,653		(8)		(8)		23,645		(1,367)	(1,367)	751	05/15/2033	1.A
912828-Y2-0	UNITED STATES TREASURY		07/15/2021	Maturity @ 100.00	XXX	3,500,000	3,500,000	3,487,285	3,497,318		2,682		2,682		3,500,000				91,875	07/15/2021	1.A
0599999 - Bonds: U.S. Governments						3,570,417	3,570,417	3,559,366	3,569,236		2,672		2,672		3,571,908		(1,491)	(1,491)	93,393	XXX	XXX
Bonds: U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
3136AF-WX-8	FNR 2013-66 KH - CMO/RMBS		09/01/2021	Paydown	XXX	39,500	39,500	40,308	40,308		27		27		40,336		(836)	(836)	772	03/25/2043	1.A
31393B-W7-6	FNW 2003-W6 6A - CMO/RMBS		09/01/2021	Paydown	XXX	18,554	18,554	19,174	18,968		(317)		(317)		18,651		(97)	(97)	424	08/25/2032	1.A
31393D-UG-4	FNW 2003-W10 2A - CMO/RMBS		09/01/2021	Paydown	XXX	14,374	14,374	14,760	14,627		(135)		(135)		14,492		(118)	(118)	324	06/25/2043	1.A
31393E-LU-1	FNW 2003-W12 3A - CMO/RMBS		09/01/2021	Paydown	XXX	23,597	23,597	24,423	24,204		(121)		(121)		24,083		(486)	(486)	640	03/25/2043	1.A
31393X-VJ-3	FNW 2004-W3 A7 - CMO/RMBS		09/01/2021	Paydown	XXX	22,321	22,321	24,720	24,010		(79)		(79)		23,931		(1,610)	(1,610)	817	05/25/2034	1.A
3199999 - Bonds: U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						118,346	118,346	123,386	122,117		(624)		(624)		121,492		(3,146)	(3,146)	2,976	XXX	XXX
Bonds: Industrial and Miscellaneous (Unaffiliated)																					
12649X-AQ-2	CSMC 2015-3 A9 - CMO/RMBS		09/25/2021	Paydown	XXX	15,279	15,279	15,302	15,331		(7)		(7)		15,325		(46)	(46)	343	03/25/2045	1.A FE
36242D-SW-9	GSR 2005-5F 2A2 - CMO/RMBS		09/01/2021	Paydown	XXX	8,754	8,754	9,268	8,930		(1)		(1)		8,929		(175)	(175)	305	06/25/2035	1.B FE
3899999 - Bonds: Industrial and Miscellaneous (Unaffiliated)						24,032	24,032	24,570	24,261		(8)		(8)		24,254		(221)	(221)	647	XXX	XXX
8399997 - Subtotals - Bonds - Part 4						3,712,795	3,712,795	3,707,323	3,715,614		2,039		2,039		3,717,654		(4,859)	(4,859)	97,016	XXX	XXX
8399999 - Subtotals - Bonds						3,712,795	3,712,795	3,707,323	3,715,614		2,039		2,039		3,717,654		(4,859)	(4,859)	97,016	XXX	XXX
9999999 - Totals						3,712,795	XXX	3,707,323	3,715,614		2,039		2,039		3,717,654		(4,859)	(4,859)	97,016	XXX	XXX

(E-06) Schedule DB - Part A - Section 1

NONE

(E-06) Schedule DB - Part A - Section 1 - Description of Hedged Risk(s)

NONE

(E-06) Schedule DB - Part A - Section 1 - Financial or Economic Impact of The Hedge

NONE

(E-07) Schedule DB - Part B - Section 1

NONE

(E-07) Schedule DB - Part B - Section 1 - Broker Name

NONE

(E-07) Schedule DB - Part B - Section 1 - Description of Hedged Risk(s)

NONE

(E-07) Schedule DB - Part B - Section 1 - Financial or Economic Impact of The Hedge

NONE

(E-08) Schedule DB - Part D - Section 1

NONE

(E-09) Schedule DB - Part D - Section 2 - By Reporting Entity

NONE

(E-09) Schedule DB - Part D - Section 2 - To Reporting Entity

NONE

(E-10) Schedule DB - Part E

NONE

(E-11) Schedule DL - Part 1

NONE

(E-12) Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6	7	8	
					First Month	Second Month	Third Month	
Wells Fargo Bank, N.A – San Francisco, CA					13,067,785	6,783,064	5,581,219	XXX
Wells Fargo Bank, N.A – San Francisco, CA					(1,113,422)	2,239,990	1,745,785	XXX
Sandia Area – Albuquerque, NM		.0.450	192		253,304	253,373	253,436	XXX
Wells Fargo Bank, N.A – Albuquerque, NM	C				40,731	93,373	62,070	XXX
0199998 – Deposits in 1 depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories							24,362	XXX
0199999 – Total Open Depositories			192		12,248,399	9,369,801	7,666,873	XXX
0299998 – Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Suspended Depositories								XXX
0299999 – Total Suspended Depositories								XXX
0399999 – Total Cash on Deposit			192		12,248,399	9,369,801	7,666,873	XXX
0499999 – Cash in Company's Office				XXX				XXX
0599999 – Total			192		12,248,399	9,369,801	7,666,873	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book / Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
All Other Money Market Mutual Funds								
14956P-81-0	CAVANAL HILL:GS MM SEL		09/29/2021	0.010	XXX	7,612,846		309
8699999 – All Other Money Market Mutual Funds						7,612,846		309
9999999 – Total Cash Equivalents						7,612,846		309