

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2019 OF THE CONDITION AND AFFAIRS OF THE

WPS Health Plan, Inc.

N	·		Code 10159 Employer's ID N	umber20-2660193
Organized under the Laws of	, , ,		, State of Domicile or Port of Entry	WI
Country of Domicile		United State	es of America	
Licensed as business type:		Health Maintena	ance Organization	
Is HMO Federally Qualified?	Yes[] No[X]			
Country of Domicile		Commenced Business	06/01/2005	
Statutory Home Office	1400 Lombardi Ave	Suite 50		1/
	(Street and Nun	nber)	(City or Tow	n, State, Country and Zip Code)
Main Administrative Office				
	Green Bay, WI, US 54304	(Street ar	nd Number)	920-490-6900
(City		de)	(Area C	
Mail Address	PO Box 14540		, М	adison, WI, US 53708
		D. Box)		
Primary Location of Books a	nd Records	1717 We	st Broadway	
.,				
(City		ida)	,(Δrea (
` ,	or rown, otate, country and zip oc	•	·	your (Telephone Number)
Internet Website Address		www.WeCareF	orWisconsin.com	
Statutory Statement Contact			. ,	608-977-6602
	•	lame)	A)	, , , ,
			_,	(FAX Number)
		OFF	ICEBS	
President	Michael Francis			Vicki Marie Bernards
Licensed as business type: Is HMO Foderally Qualified? Yes [] No [X] Incorporated/Organized OH192005 Statutory Home Office 1400 Lombards Ave. Sulte 50 (Street and Number) (City or Town, State, Country and Zip Code) Main Administrative Office Croen Bay, WL US 54304 (Street and Number) (City or Town, State, Country and Zip Code) (Street and Number) (City or Town, State, Country and Zip Code) (Ci				
James Francis Baird	#, Executive Vice President			
		DIDECTORS	OD TRUCTEES	
James F	rancis Baird #			Kristine Ann Euclide Chairman #
Michael F	rancis Hamerlik	Scott Tho	mas Kowalski	
· · · · · · · · · · · · · · · · · · ·		— SS:		
County of	Dalle			
all of the herein described a statement, together with relacondition and affairs of the sin accordance with the NAIO rules or regulations require respectively. Furthermore, exact copy (except for formal	assets were the absolute property ated exhibits, schedules and explantiated reporting entity as of the report. C Annual Statement Instructions are differences in reporting not relate scope of this attestation by the	of the said reporting enti- ations therein contained, ing period stated above, a ind Accounting Practices a ted to accounting practi- described officers also in	ty, free and clear from any liens or cannexed or referred to, is a full and trund of its income and deductions ther ind Procedures manual except to the ces and procedures, according to tacludes the related corresponding ele	laims thereon, except as herein stated, and that this ue statement of all the assets and liabilities and of the efform for the period ended, and have been completed extent that: (1) state law may differ; or, (2) that state he best of their information, knowledge and belief ctronic filing with the NAIC, when required, that is ar
			retary	Treasurer
		er, 2019	b. If no, 1. State the amendment n 2. Date filed	umber
Kathloon I Wilhalmaan			3. Number of pages attach	ned

My Commission Expires 03/26/2022

ASSETS

			Current Statement Date		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	19.447.564	Tronaariii Ca 7 loocto		21,058,897
		10,747,004			21,000,007
2.	Stocks:			0	0
	2.1 Preferred stocks				_
	2.2 Common stocks			0	0
3.	Mortgage loans on real estate:				
	3.1 First liens				0
	3.2 Other than first liens			0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$				
	encumbrances)			0	0
	4.2 Properties held for the production of income (less				
	\$ encumbrances)			0	0
	,				
	4.3 Properties held for sale (less \$			0	0
	encumbrances)			0	0
5.	Cash (\$709,774), cash equivalents				
	(\$1,623,946) and short-term				
	investments (\$	2,333,721		2,333,721	4,737,335
6.	Contract loans (including \$ premium notes)			0	0
7.	Derivatives				0
8.	Other invested assets				0
9.	Receivables for securities				0
•	Securities lending reinvested collateral assets				
10.					
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	21,781,285	0	21,781,285	25,796,232
13.	Title plants less \$ charged off (for Title insurers				
	only)				
14.	Investment income due and accrued	114,516		114,516	132,259
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	134 , 106		134 , 106	205,438
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$	1 770 565		1 770 565	0
		1,776,303		1,776,303	0
16.	Reinsurance:			242.247	
	16.1 Amounts recoverable from reinsurers				31,958
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans	677,513		677,513	658,521
18.1	Current federal and foreign income tax recoverable and interest thereon	31,564		31,564	14,280
18.2	Net deferred tax asset			0	0
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software				0
21.	Furniture and equipment, including health care delivery assets				
۷۱.		045 102	045 102	0	0
00					0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				0
24.	Health care (\$1,559,012) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets	144,068	132,934	11, 134	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and	07 407 400	4 400 044	00 000 540	00 440 045
	Protected Cell Accounts (Lines 12 to 25)	27,407,186	1,108,644	26,298,542	28,446,015
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
20				26,298,542	
28.	Total (Lines 26 and 27)	27,407,186	1,108,644	20,290,342	28,446,015
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)			0	0
2501.	State Income Tax Recoverable				0
	Deferred Charges		19,896	0	0
2502.			,		
2503.	Prepaid Expenses		113,038	0	
2598.	Summary of remaining write-ins for Line 25 from overflow page		0		0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	144,068	132,934	11,134	0

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP	117127110	Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$800,000 reinsurance ceded)	8,792,068	123,932	8,916,000	10,073,000
2.	Accrued medical incentive pool and bonus amounts	36,221		36,221	86,914
3.	Unpaid claims adjustment expenses	255,140		255,140	255, 140
4.	Aggregate health policy reserves, including the liability of				
	\$ for medical loss ratio rebate per the Public				
	Health Service Act	19,721		19,721	1,055,015
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve				0
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued				1,092,948
10.1	•				1,002,010
10.1	(including \$ on realized gains (losses))			0	98,029
40.0					
	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated	2/5,///		2/5,///	997,634
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$ current)				
15.	Amounts due to parent, subsidiaries and affiliates				895,713
16.	Derivatives	•		0	0
17.	Payable for securities			0	0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$				
	authorized reinsurers, \$ unauthorized				
	reinsurers and \$ certified reinsurers)			0	0
20.	Reinsurance in unauthorized and certified (\$				
	companies			0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				0
22.	Liability for amounts held under uninsured plans				53,054
23.	Aggregate write-ins for other liabilities (including \$				
20.	current)	48 840	0	48 840	46,796
24	Total liabilities (Lines 1 to 23)		123,932		
					_
25.	Aggregate write-ins for special surplus funds Common capital stock				
26.	· ·				100
27.	Preferred capital stock				
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	(60,659,982)	(55,002,262)
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	13,740,013	13,147,738
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	26,298,542	28,446,015
	DETAILS OF WRITE-INS				
2301.	Reserve of Escheatable Items	48 849		48 849	46,796
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page				0
		48,849	0		
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)			48,849	46,796
2501.	Section 9010 Fee		XXX		0
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	1,249,995	0
3001.			XXX		
3002.		xxx	XXX		
3003.					
		i l		_	•
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF NEV	Current \ To Da	Year te	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX		151,486	194,445
2.	Net premium income (including \$ non-health				
	premium income)	XXX	54,105,946	69,339,437	89,096,802
3.	Change in unearned premium reserves and reserve for rate credits	XXX	(8,032)	(20,680)	(7,542)
4.	Fee-for-service (net of \$ medical expenses)	XXX			
5.	Risk revenue				
6.	Aggregate write-ins for other health care related revenues			0	0
7.	Aggregate write-ins for other non-health revenues			0	0
8.	Total revenues (Lines 2 to 7)	XXX	54,097,914	69,318,757	89,089,260
	Hospital and Medical:				
9.	Hospital/medical benefits				56,500,293
10.	Other professional services				
11.	Outside referrals			, ,	2,099,174
12.	Emergency room and out-of-area			, ,	8,254,707
13.	Prescription drugs				11,319,471
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts			,	21,318
16.			22,070,040	00,567,266	70, 194,903
17.	Less: Net reinsurance recoveries		1 036 063	0	
17.	Total hospital and medical (Lines 16 minus 17)				78 , 194 , 963
19.	Non-health claims (net)				70, 194, 300
20.	Claims adjustment expenses, including \$				
20.	containment expenses		2 279 467	2 314 257	6 118 580
21.	·				9,314,929
22.	Increase in reserves for life and accident and health contracts				
	(including \$ increase in reserves for life only)				0
23.	Total underwriting deductions (Lines 18 through 22)		59,321,623		
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned				684,977
26.	Net realized capital gains (losses) less capital gains tax of		·		
	\$37,814		142,256	(26,898)	(156,497)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	599,961	490,662	528,480
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$)				
	(amount charged off \$)])]				
29.	Aggregate write-ins for other income or expenses	0	0	(270,403)	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	VVV	(4 622 749)	(4 142 096)	(4 010 722)
31.	Federal and foreign income taxes incurred				
32.	Net income (loss) (Lines 30 minus 31)	XXX	(3,630,676)	(3,632,439)	(3,535,314)
32.	DETAILS OF WRITE-INS	AAA	(0,000,070)	(0,002,400)	(0,000,014)
0601.	DETAILS OF WHITE-ING	VVV			
0602.		XXX			
0603.					
		XXX		0	
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)		-	-	0
0701.					
0702.					
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page			0	
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page		0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.	Loss on Sale of Fixed Assets			(270,403)	0
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page				0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	(270,403)	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

_	STATEMENT OF REVENUE AND EX	PENSES (C	ontinued	,
		Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year.	13, 147,738	16 , 130 , 187	16,130,187
34.	Net income or (loss) from Line 32	(3,630,676)	(3,632,439)	(3,535,314)
35.	Change in valuation basis of aggregate policy and claim reserves	22,563	(4, 129)	
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$			(20,075)
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax		(252,677)	(252,677)
39.	Change in nonadmitted assets	(799,612)	771,267	825,617
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles.			
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	5,000,000	0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	592,275	(3, 117, 978)	(2,982,449)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	13,740,013	13,012,209	13,147,738
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations	10 Date	10 Date	December 31
1.	Premiums collected net of reinsurance	52,213,786	68,405,741	89,062,009
2.		524,289	541,278	778,603
3.	Miscellaneous income	(34,715)	7,150	41,600
4.	Total (Lines 1 to 3)	52,703,360	68,954,169	89,882,212
5.	Benefit and loss related payments	53,226,862	60 , 159 , 748	78,436,277
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	7,691,884	13,816,433	16,876,154
8.				
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital			
	gains (losses)	(900,322)	(350,476)	(480,021)
10.	Total (Lines 5 through 9)	60,018,424	73,625,705	94,832,410
11.	Net cash from operations (Line 4 minus Line 10)	(7,315,064)	(4,671,536)	(4,950,198
	,	(1,010,111,	(1,111,001)	(1,001,101,
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	6 654 965	4 382 386	12 660 099
	12.2 Stocks			0
	12.3 Mortgage loans			0
		0		0
		0		0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			0
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	-		
13.	Cost of investments acquired (long-term only):		1,002,000	12,000,000
10.	13.1 Bonds	4 892 941	5 644 808	10 109 281
			0	0
		0		0
	13.4 Real estate		0	0
			0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	4,892,941	5,644,808	10,109,281
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,762,025	(1,262,422)	2,550,818
10.	Total sauri investinante (Eine 12.6 minue Eine 16.7 and Eine 17)	1,102,020	(1,202,122)	2,000,010
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
10.	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			0
	16.3 Borrowed funds			0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			0
	16.5 Dividends to stockholders			0
	16.6 Other cash provided (applied)	(1,850,575)	1,249,522	1,587,920
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,149,425	1,249,522	1,587,920
	F	2,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,00.,000
	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)	(2,403,614)	(4,684,436)	(811,460
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year			5,548,795
	19.2 End of period (Line 18 plus Line 19.1)	2,333,721	864,359	4,737,335

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

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehe (Hospital &	ensive Medical)	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	14,192	2,303	11,868	21	0	0	0	0	0	
2. First Quarter	11,754	1,410	10,323	21	0	0	0	0	0	
3. Second Quarter	11,745	1,374	10,351	20	0	0	0	0	0	
4. Third Quarter	11,688	1,308	10,361	19						
5. Current Year	0									
Current Year Member Months	105,639	12,465	92,992	182						
Total Member Ambulatory Encounters for Period:										
7 Physician	55,849	9,277	46,327	245						
8. Non-Physician	21,330	2,751	18,516	63						
9. Total	77,179	12,028	64,843	308	0	0	0	0	0	
10. Hospital Patient Days Incurred	16,557	378	16,133	46						
11. Number of Inpatient Admissions	584	75	503	6						
12. Health Premiums Written (a)	54,298,282	10,064,117	44, 134, 353	99,812						
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	54,290,250	10,064,117	44, 134, 353	91,780						
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	53,233,344	8,259,819	44,942,143	31,382						
18. Amount Incurred for Provision of Health Care Services	52,876,343	7,605,187	45,241,774	29,382						

⁽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	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
						
					+	
					+	
					+	
0299999 Aggregate accounts not individually listed-uncovered	8	2,999 20,956	16,439	8,094	6,566	135,05
0399999 Aggregate accounts not individually listed-covered	5,88	8,128 1,486,647	1,166,202	574,173	465,796	9,580,94
0499999 Subtotals		1,127 1,507,603			472,362	9,716,00
0599999 Unreported claims and other claim reserves	1 - 1/2		, ,	/	,	. ,
0699999 Total amounts withheld						
0799999 Total claims unpaid						9,716,00
0899999 Accrued medical incentive pool and bonus amounts						36.22

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE												
	Claims		Liab		5	6						
	Year to	Date	End of Curre	ent Quarter								
	1	2	3	4								
						Estimated Claim						
	On		On			Reserve and						
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability						
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of						
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year						
Line of business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior rear						
Comprehensive (hospital and medical)	8,613,737	44,393,716	55,204	8,847,796	8,668,941	10,058,000						
1. Competensive (nospital and necical)	5,010,707		50,204		0,000,041	10,000,000						
2. Medicare Supplement	5,279	26, 103	0	13,000	5,279	15,000						
	, , ,	, -		,	, ,	-,						
					_	_						
3. Dental Only					0	0						
					0							
4. Vision Only					0	0						
5. Federal Employees Health Benefits Plan					0	0						
5. Federal Employees health benefits Fiant					0	0						
6. Title XVIII - Medicare					0	0						
o. The Avii model												
7 Title XIX - Medicaid					0	0						
8. Other health					0	0						
	8,619,016	44.419.819	55.204	8.860.796	8.674.220	10,073,000						
9. Health subtotal (Lines 1 to 8)	8,019,010	44,419,619		8,860,796	8,074,220	10,073,000						
10. Healthcare receivables (a)		41.555			n	۸						
10. Healthcare receivables (a)		41,333	·									
11. Other non-health					0	0						
12. Medical incentive pools and bonus amounts	50,693		36,221		86,914	86,914						
			·									
	0 000 700	44 070 004	04 405	0.000.700	0.704.404	40 450 044						
13. Totals (Lines 9-10+11+12)	8,669,709	44,378,264	91,425	8,860,796	8,761,134	10,159,914						

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

Summary of Significant Accounting Policies and Going Concern NOTE 1

Accounting Practices

A. The accompanying financial statements of WPS Health Plan, Inc. (HPI) have been prepared in conformity with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manuals.

		F/S	F/S		
	SSAP#	Page	Line #	 2019	 2018
NET INCOME (1) State basis (Page 4, Line 32, Columns 2 & 4)	xxx	XXX	XXX	\$ (3,630,676)	\$ (3,535,314)
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:	n/a	N/A	n/a	\$ -	\$ -
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:	n/a	N/A	n/a	\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (3.630.676)	\$ (3.535.314)
SURPLUS					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 13,740,013	\$ 13,147,738
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:	n/a	N/A	n/a	\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:	n/a	N/A	n/a	\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 13.740.013	\$ 13.147.738

Use of Estimates in the Preparation of the Financial Statements

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

Accounting Policy

Health Premiums are earned ratably over the terms of the related insurance and reinsurance contracts or policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

In addition, HPI uses the following accounting policies:

- (1) (5) No Change from December 31, 2018
- (6) Loan-backed bonds and structured securities are stated at either amortized cost or fair value based on criteria set by the NAIC on structured security reporting of RMBS or CMBS securities
- (7) (13) No Change from December 31, 2018.

Going Concern

The management of HPI has no issues regarding HPI as a going concern.

NOTE 2

2 Accounting Changes and Corrections of Errors
HPI has no material changes in accounting principle and/or corrections of errors for the quarter ended September 30, 2019.

Business Combinations and Goodwill

HPI had no business combinations or goodwill for the quarter ended September 30, 2019.

Discontinued Operations

HPI had no discontinued operations for the quarter ended September 30, 2019.

NOTE 5 Investments

A. - C No Change from December 31, 2018.

D. Loan-Backed Securities

Significant changes in estimated cash flows from the original purchase assumptions are accounted for using the retrospective method

E. - I. Repurchase/Reverse Repurchase Agreements
For repurchase agreements, collateral is held by Associated Bank and is consistent with preservation of capital.

- J. L. No Change from December 31, 2018.

Working Capital Finance Investments
HPI has no working capital finance investments (WCFI) for the quarter ended September 30, 2019.

Offsetting and Netting of Assets and Liabilities HPI does not use offsetting and netting of assets and liabilities, except to the extent allowed under SSAP 64.

O. - RNo Change from December 31, 2018.

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies No Change from December 31, 2018.

NOTE 7 Investment Income
HPI did not have any investment income excluded from due and accrued for the quarter ended September 30, 2019.

NOTE 8

E 8 Derivative Instruments
HPI had no derivative instruments as of September 30, 2019.

NOTE 9

The components of the net deferred tax asset/(liability) at the end of current period are as follows:

	4	As o	f En	d of Current P	erio	d		12/31/2018		Change							
		(1) Ordinary		(2) Capital		(3) (Col. 1 + 2) Total	(4) Ordinary		(5) Capital	((6) Col. 4 + 5) Total		(7) Col. 1 - 4) Ordinary	((8) (Col. 2 - 5) Capital	(1	(9) Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$	332,657	\$	4,087	\$	336,744	\$ 157,435	\$	4,087	\$	161,522	\$	175,222	\$	1	\$	175,222
(b) Statutory Valuation Allowance Adjustment	\$	332,657	\$	3,914	\$	336,571	\$ 156,514	\$	(824)	\$	155,690	\$	176,143	\$	4,738	\$	180,881
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$	-	\$	173	\$	173	\$ 921	\$	4,911	\$	5,832	\$	(921)	\$	(4,738)	\$	(5,659
(d) Deferred Tax Assets Nonadmitted	\$	-	\$	-	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$	_	\$	173	\$	173	\$ 921	\$	4,911	\$	5,832	\$	(921)	\$	(4,738)	\$	(5,659
(f) Deferred Tax Liabilities	\$	-	\$	173	\$	173	\$ 921	\$	4,911	\$	5,832	\$	(921)	\$	(4,738)	\$	(5,659
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	s	_	s	_	\$	_	\$ 	s	_	\$	-	\$	_	\$	_	\$	_

	As o	f End of Current F	eriod		12/31/2018	_	Change				
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total		
Admission Calculation Components SSAP No. 101 (a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks (b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Below)	s -	s -	s -	s -	s -	s -	s -	s -	\$ -		

Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	xxx	xxx	\$ 2,061,002	xxx	xxx	\$ 1,314,774	xxx	xxx	\$ 746,228
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2 (b) above) Offset by Gross Deferred Tax Liabilities.	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

3.

a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.

339.138% 354.000%

b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.

13,740,013 13,147,738

	As of End of	Current Period	12/31	1/2018	Ch	ange
	(1)	(2)	(3)	(4)	(5) (Col. 1 - 3)	(6) (Col. 2 - 4)
	Ordinary	Capital	Ordinary	Capital	Ordinary	Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ -	\$ 173	\$ 921	\$ 4,911	\$ (921)	\$ (4,738)
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
 Net Admitted Adjusted Gross DTAs amount from Note 9A1('e) 	\$ -	\$ 173	\$ 921	\$ 4,911	\$ (921)	\$ (4,738)
Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

Current income taxes incurred consist of the following major components:

1.	Current Income Tax (a) Federal (b) Foreign (c) Subtotal (d) Federal income tax on net capital gains (e) Utilization of capital loss carry-forwards (f) Other (g) Federal and foreign income taxes incurred
2.	Deferred Tax Assets: (a) Ordinary: (1) Discounting of unpaid losses (2) Unearned premium reserve (3) Policyholder reserves (4) Investments (5) Deferred acquisition costs (6) Policyholder dividends accrual (7) Fixed Assets (8) Compensation and benefits accrual (9) Pension accrual (10) Receivables - nonadmitted (11) Net operating loss carry-forward (12) Tax credit carry-forward (13) Other (including items <5% of total ordinary tax assets) (99) Subtotal (b) Statutory valuation allowance adjustment (c) Nonadmitted (d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c) (e) Capital: (1) Investments (2) Net capital loss carry-forward (3) Real estate (4) Other (including items <5% of total ordinary tax assets) (99) Subtotal (f) Statutory valuation allowance adjustment (g) Nonadmitted (h) Admitted capital deferred tax assets (2e99 - 2f - 2g) (i) Admitted deferred tax assets (2d + 2h)
3.	Deferred Tax Liabilities: (a) Ordinary: (1) Investments (2) Fixed Assets (3) Deferred and uncollected premium (4) Policyholder reserves (5) Other (including items <5% of total ordinary tax liabilities)

	1)		(2)	(3)				
	of Current riod		12/31/2018		(Col. 1 - 2) Change			
\$	(993,072)	\$	(489,698)	\$	(503,374)			
\$	-	\$	-	\$	-			
\$	(993,072)	\$	(489,698)	\$	(503,374)			
\$	37,814	\$	(41,600)	\$	79,414			
\$	-	\$	-	\$	-			
\$ \$	(055 259)	\$	- (521 200)	\$ \$	(422.060)			
φ	(955,258)	φ	(531,298)	φ	(423,960)			
\$	12,860	\$	33,595	\$	(20,735)			
\$	62,949	\$	26,480	\$	36,469			
\$	-	\$	-	\$	-			
\$	457	\$	-	\$	457			
\$	17,748	\$	20,294	\$	(2,546)			
\$	-	\$	-	\$	- 1			
\$	211,416	\$	53,094	\$	158,322			
\$	9,002	\$	4,661	\$	4,341			
\$	-	\$	-	\$	-			
\$ \$	13,756	\$	13,725	\$	31			
\$	-	\$	-	\$	-			
\$	4,469	\$	5,586	\$	(1,117)			
\$	332,657	\$	157,435	\$	175,222			
\$	336,571	\$	155,690	\$	180,881			
\$	-	\$	-	\$	-			
\$	(3,914)	\$	1,745	\$	(5,659)			
\$	4,087	\$	4,087	\$	-			
\$	-	\$	-	\$	-			
\$	-	\$	-	\$	-			
\$	4.007	\$	4.007	\$	-			
\$ \$	4,087	\$	4,087	\$	-			
\$	-	\$	-	\$	-			
\$	4,087	\$	4,087	\$	_			
\$	173	\$	5,832	\$	(5,659)			
·		¢	024	œ	(004)			
\$ \$	-	\$ \$	921	\$ \$	(921)			
\$	-	\$	-	\$				
\$	-	\$	-	\$	-			
\$	-	\$	-	\$	-			
\$	-	\$	921	\$	(921)			
\$	173	\$	4,911	\$	(4,738)			
\$	-	\$	-	\$	-			
\$	- 170	\$	-	\$	- (4.700)			
\$ \$	173	\$	4,911	\$	(4,738)			
A 65	173	\$	5,832	\$	(5,659)			
¥			l		·			

(3) Other (including items <5% of total capital tax liabilities)
(99) Subtotal

(99) Subtotal

(c) Deferred tax liabilities (3a99 + 3b99) 4. Net deferred tax assets/liabilities (2i - 3c)

(1) Investments (2) Real estate

(b) Capital:

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

A. All outstanding shares of HPI are owned by the Parent Company, Wisconsin Physicians Service Insurance Corporation (WPSIC), an insurance holding company domiciled in the State of Wisconsin.

- В No Change from December 31, 2018.
- C. No Change from December 31, 2018.
- At September 30, 2019, HPI reported \$549,093 as amounts due to WPSIC. The terms of settlement require that these amounts be settled within 180 days. D.
- E. N No Change from December 31, 2018.

NOTE 11 Debt

No Change from December 31, 2018.

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

Defined Benefit Plan

HPI is a wholly-owned subsidiary of WPSIC, which sponsors a defined contribution plan covering substantially all WPS and HPI employees. Participants may contribute from 1% to 6% of their salary for contribution to their account in the plan. Such contributions are matched 100% by HPI. A member may elect to contribute an additional amount of their salary up to the legal amount allowed by law, but these additional contributions are not matched by HPI. Benefits are funded on an ongoing basis with investments maintained in trust with Matrix Financial Solutions. As of September 30, 2019, the unaudited fair market value of WPSIC plan assets was \$244,021,499. В

NOTE 13 Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations No Change from December 31, 2018.

NOTE 14 Liabilities, Contingencies and Assessments

Contingent Commitments

HPI has an intercompany line of credit in the amount of \$5,000,000. The interest on this is the 30-day LIBOR rate plus 150 basis points. As of September 30, 2019 there was no draw against the

B. - F.No Change from December 31, 2018.

NOTE 15 Leases

No Change from December 31, 2018.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk HPI is not involved with any financial instrument with off-balance sheet risk or financial instruments with concentrations of credit risk.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
No Change from December 31, 2018.

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

HPI does not engage in any ASO Plans.

ASC Plans

The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2019:

		1	2	3
		ASC	ed Portion of	
	Uni	nsured Plans	lly Insured Plans	 Total ASC
a. Gross reimbursement for medical cost incurred	\$	3,739,444	\$ -	\$ 3,739,444
b. Gross administrative fees accrued	\$	846,647	\$ -	\$ 846,647
c. Other income or expenses (including interest paid to or received from plans)	\$	267,956	\$ -	\$ 267,956
d. Gross expenses incurred (claims and administrative)	\$	4,865,949	\$ -	\$ 4,865,949
e. Total net gain or loss from operations	\$	(11,902)	\$ -	\$ (11,902)

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators
HPI had no direct premium written/produced by Managing General Agents/Third Party Administrators for the quarter ended September 30, 2019.

NOTE 20 Fair Value Measurements

(1) Fair Value Measurements at Reporting Date										
Description for each class of asset or liability	(Level 1)			(Level 2)	(Level 3)	Ne	et Asset Value (NAV)	Total		
a. Assets at fair value										
Bonds	\$	-	\$	-	\$ -	\$	-	\$	-	
U.S. Government	\$	6,806,380	\$	5,086,196	\$ -	\$	-	\$	11,892,576	
Industrial and Misc	\$	974,871	\$	7,393,867	\$ 25,826	\$	_	\$	8,394,564	
Total assets at fair value/NAV	\$	7,781,251	\$	12,480,063	\$ 25,826	\$	-	\$	20,287,140	

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

(Fair Value Measurements in (Lev	rel 3) of the Fair	Value hierarch	V							
	Description	Ending Balance as of Prior Quarter End	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance for Current Quarter End
	a. Assets										\$ -
П	otal Assets	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

N/A

Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall

		Aggregate						Not Practicable
J	Type of Financial Instrument	Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	(NAV)	(Carrying Value)
	Bonds	\$ 20,287,140	\$ 19,447,564	\$ 7,469,949	\$ 11,951,961	\$ 25,655	\$ -	\$ -

NOTE 21 Other Items

NOTE 22 Events Subsequent
Subsequent events have been considered through 11/8/2019 for the statutory statement issued on September 30, 2019.

HPI has one reinsurance agreement with Axis. The treaty applies to all fully insured business and covers claims in excess of \$1M.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination A. - D No Change from December 31, 2018.

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

Yes [X] No []

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

Amount

a. Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)

1.778.565

6,300

1.566.596

\$

- 2. Risk adjustment user fees payable for ACA Risk Adjustment
- 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)

Operations (Revenue & Expense)

- 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)
- b. Transitional ACA Reinsurance Program

- 1. Amounts recoverable for claims paid due to ACA Reinsurance
- Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)
 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
- Ceded reinsurance premiums payable due to ACA Reinsurance
 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

1. Accrued retrospective premium due to ACA Risk Corridors

2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors

- Operations (Revenue & Expense)

 3. Effect of ACA Risk Corridors on net premium income (paid/received)
 - 4. Effect of ACA Risk Corridors on change in reserves for rate credits

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

balance.																				
	Acc	rued During Busines	Prior Year on ritten	Received or Paid as of the Current Year on Business				Differ	enc	ces	Adjustments						Unsettled Balances as of Reporting Date			
		Before Dec		W	ritten Before the Pri			Ac F	Prior Year crued Less Payments Col 1 - 3)	Α	Prior Year Accrued Less Payments (Col 2 - 4)	Т	o Prior Year Balances	Т	o Prior Year Balances		Ba Prio	cumulative plance from or Years (Col 1 - 3 + 7)	Ba Prio	cumulative alance from or Years (Col 2 - 4 + 8)
		1	2		3		4		5		6		7		8			9		10
	Re	eceivable	Payable	F	Receivable		Payable	F	Receivable		Payable		Receivable		Payable	Ref	R	teceivable		Payable
a. Permanent ACA Risk Adjustment Program																				
Premium adjustments receivable (including high risk pool payments)	\$	36,674	\$ -			\$	-	\$	36,674	\$	-	\$	-	\$	-		\$	36,674	\$	-
Premium adjustments (payable) (including high risk pool premium)	\$	-	\$ (1,116,674)	\$	=	\$	(1,298,565)	\$	=	\$	181,891						\$	-	\$	181,891
Subtotal ACA Permanent Risk Adjustment Program	\$	36,674	\$ (1,116,674)	\$	-	\$	(1,298,565)	\$	36,674	\$	181,891	\$	-	\$	-		\$	36,674	\$	181,891
b. Transitional ACA Reinsurance Program																				
Amounts recoverable for claims paid	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
Amounts recoverable for claims unpaid (contra liability)	\$	-	\$ -	\$	-	\$	-	\$	-	\$	=	\$	-	\$	-		\$	-	\$	-
Amounts receivable relating to uninsured plans	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
Ceded reinsurance premiums payable	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	=	\$	-
Liability for amounts held under uninsured plans	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	=	\$	-
7. Subtotal ACA Transitional Reinsurance Program	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
c. Temporary ACA Risk Corridors Program																				
Accrued retrospective premium	\$	=	\$ =	\$	=	\$	-	\$	-	\$	=	\$	=	\$	=		\$	-	\$	=
Reserve for rate credits or policy experience rating refunds	\$	-	\$ -	\$	-	\$	-	\$	-	\$	-	\$	-	\$	-		\$	-	\$	-
Subtotal ACA Risk Corridors Program	\$	=	\$ =	\$	=	\$	-	\$	=	\$	=	\$	=	\$	=		\$	=	\$	=
d. Total for ACA Risk Sharing Provisions	s	36.674	\$ (1.116.674)	\$	_	\$	(1.298.565)	\$	36.674	\$	181.891	\$	-	s	-		s	36.674	\$	181.891

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

Reserves including claim adjustment expenses as of December 31, 2018 were \$10,043,691. As of September 30, 2019, \$8,669,709 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$91,425 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$1,282,557 favorable prior year development since December 31, 2018 to September 30, 2019. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims

NOTE 26

E 26 Intercompany Pooling Arrangements
HPI is not involved in an intercompany pooling arrangement.

NOTE 27 Structured Settlements

Not applicable as HPI is a health entity.

NOTE 28 Health Care Receivables

Pharmaceutical Rebate Receivable

Date	Phar as	Estimated macy Rebates Reported on icial Statements	armacy Rebates as Billed or erwise Confirmed	Re	Actual Rebates sceived Within 90 Days of Billing	Re	Actual Rebates ceived Within 91 80 Days of Billing	Red	Actual Rebates seived More Than 180 Days After Billing
09/30/2019	\$	709,358	\$ -	\$	-	\$	-	\$	-
06/30/2019	\$	700,806	\$ -	\$	-	\$	-	\$	-
12/31/2018	\$	820,049	\$ -	\$	-	\$	990,678	\$	8,398
09/30/2018	\$	828,219	\$ -	\$	-	\$	952,371	\$	18,209
06/30/2018	\$	838,963	\$ -	\$	-	\$	1,055,847	\$	47,504
03/31/2018	\$	850,266	\$ -	\$	-	\$	992,617	\$	56,337
12/31/2017	\$	816,871	\$ -	\$	-	\$	1,021,167	\$	14,252
09/30/2017	\$	747,066	\$ -	\$	-	\$	935,978	\$	18,243
06/30/2017	\$	564,698	\$ -	\$	-	\$	965,590	\$	8,119
03/31/2017	\$	545,583	\$ -	\$	-	\$	823,809	\$	11,804
12/31/2016	\$	1,196,167	\$ -	\$	-	\$	1,256,518	\$	205,053

	i	i			
09/30/2016	\$ 746,796	\$ -	\$ -	\$ 1,181,813	\$ 18,923
06/30/2016	\$ 730.460	\$ _	\$ _	\$ 1.113.082	\$ 32.415

В.

Risk-Sharing Receivables HPI has no risk-sharing receivables.

NOTE 29 Participating Policies

HPI does not issue participating policies.

NOTE 30 Premium Deficiency Reserves
1. Liability carried for premium deficiency reserves
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation?

09/30/2019

Yes [] No [X]

NOTE 31 Anticipated Salvage and Subrogation

HPI reserving lag factors take into account historical claim refunds received in the development of loss reserves but no specific reduction of the liability for unpaid claims/losses is calculated.

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?							No	[X]
1.2	If yes, has the report been filed with the domiciliary state?				Yes []	No	[]
2.1	Has any change been made during the year of this statement in the chart reporting entity?				Yes [.]	No	[X]
2.2	If yes, date of change:							
3.1	Is the reporting entity a member of an Insurance Holding Company Syste is an insurer?				Yes [X]	No	[]
3.2	Have there been any substantial changes in the organizational chart since	e the prior quarter end?			Yes [. 1	No	[X]
3.3	If the response to 3.2 is yes, provide a brief description of those changes.							
3.4	Is the reporting entity publicly traded or a member of a publicly traded gro	oup?			Yes []	No	[X]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code iss	sued by the SEC for the entity/group.		<u></u>				
4.1	Has the reporting entity been a party to a merger or consolidation during to the second second file the merger history data file with the NAIC for the				Yes [.]	No	[X]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	domicile (use two letter state abbrevi	iation) for any entity that	has				
	1 Name of Entity	2 NAIC Company Code	3 State of Domicile					
5.	If the reporting entity is subject to a management agreement, including th in-fact, or similar agreement, have there been any significant changes reall fyes, attach an explanation.] No	χ] c	.] N	/A [
6.1	State as of what date the latest financial examination of the reporting enti-	ity was made or is being made		<u>-</u>		12/31	1/2015	j
6.2	State the as of date that the latest financial examination report became a date should be the date of the examined balance sheet and not the date					12/31	1/2015	j
6.3	State as of what date the latest financial examination report became avail the reporting entity. This is the release date or completion date of the examination	amination report and not the date of the	he examination (balance	sheet	(05/18	3/2017	7
6.4	By what department or departments?							
6.5	Wisconsin Office of the Commissioner of Insurance Have all financial statement adjustments within the latest financial examir statement filed with Departments?			Yes [] No) c] N	/A [X]
6.6	Have all of the recommendations within the latest financial examination re	eport been complied with?		Yes [X]No	ງ [] N	/A [
7.1	Has this reporting entity had any Certificates of Authority, licenses or region revoked by any governmental entity during the reporting period?	strations (including corporate registra	ation, if applicable) suspe	nded or	Yes []	No	[X]
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?			Yes [.]	No	[X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding cor	mpany.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firms	s?			Yes []	No	[X]
8.4	If response to 8.3 is yes, please provide below the names and location (c regulatory services agency [i.e. the Federal Reserve Board (FRB), the Of Insurance Corporation (FDIC) and the Securities Exchange Commission	ffice of the Comptroller of the Current	cy (OCC), the Federal De	ı federal posit				
	1 Affiliate Name	2 Location (City, State)	3 4 FRB OC		6 SE			
		Location (Oily, State)				_		

GENERAL INTERROGATORIES

9.11	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	conal and professional		Yes [)	(]	No []
				V .			, 1
9.2 9.21	Has the code of ethics for senior managers been amended?			Yes [J	NO [)	(]
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes []	No [)	(]
	FINANCIAL						
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? If yes, indicate any amounts receivable from parent included in the Page 2 amount:						
	INVESTMENT						
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.)	erwise made available fo	r 	Yes []	No [)	(]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		.\$				
13.	Amount of real estate and mortgages held in short-term investments:						
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes []	No [)	(]
		1 Prior Year-End Book/Adjusted Carrying Value		В	ook/	2 nt Quar 'Adjust ing Val	ed
	Bonds			\$			
	Preferred Stock			\$			
	Common Stock Short-Term Investments			\$ \$			
	Mortgage Loans on Real Estate			\$			
	All Other			\$			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$			
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	3		\$			
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes [1	No [)	(1
	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?						
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date						
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		\$				0
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, P	arts 1 and 2	\$				0
	16.3 Total payable for securities lending reported on the liability page		Φ				0

GENERAL INTERROGATORIES

F		1				2			
Δ		me of Custodian(s)		8040 Events		ustodian Addre	SS		
					TOT DITVE, Maurs				
Fo	or all agreements that do no	ot comply with the requirement anation:	nts of the NAIC	Financial Cor	ndition Examiners	Handbook, pro	ovide the name,		
	1 Name(s)	Loc	2 eation(s)		C	3 omplete Explan	ation(s)		
	ave there been any change yes, give full information rel	s, including name changes, i lating thereto:	in the custodian	(s) identified in	n 17.1 during the	current quarter	?	Yes	[] N
	1 Old Custodian	New (2 Custodian	Date	3 e of Change		4 Reason		
m	nake investment decisions o	dentify all investment advisors to behalf of the reporting ention to the investment accounts";	ity. For assets th	nat are manag					
		1 ame of Firm or Individual			2 ation				
ΙB	Baird Advisors			1					
1	Flag 1/2								
W	Wells Fargo Asset Managemen 7.5097 For those firms/indiv	ntriduals listed in the table for (Question 17.5, d	UU. Udo any firms/in	dividuals unaffilia			Yes	s [X]
10 10	7.5097 For those firms/indiv designated with a "U 7.5098 For firms/individuals total assets under m	riduals listed in the table for ("") manage more than 10% of the table for an anagement aggregate to mo	Question 17.5, do f the reporting engrentity (i.e. despreads of the following than 50% of the fo	do any firms/in entity's assets signated with a the reporting	dividuals unaffilia? "U") listed in the entity's assets?	e table for Ques	tion 17.5, does the	. Ye:	s [X]
10 10	7.5097 For those firms/individesignated with a "U7.5098 For firms/individuals total assets under more those firms or individuals able below.	riduals listed in the table for ("") manage more than 10% of unaffiliated with the reporting anagement aggregate to mo	Question 17.5, do f the reporting engrentity (i.e. despreads of the following than 50% of the fo	do any firms/in entity's assets signated with a the reporting	dividuals unaffilia? "U") listed in the entity's assets? ffiliated) or "U" (u	e table for Ques	tion 17.5, does the	. Ye:	s []
117	7.5097 For those firms/individuals total assets under more those firms or individuals able below.	riduals listed in the table for ("") manage more than 10% of the table for an anagement aggregate to mo	Question 17.5, do f the reporting engrentity (i.e. despreads of the following than 50% of the fo	do any firms/in entity's assets signated with a the reporting	dividuals unaffilia? "U") listed in the entity's assets?	e table for Ques	tion 17.5, does the	. Ye:	5 Investr Manage
11. 11. Fo	7.5097 For those firms/individesignated with a "U7.5098 For firms/individuals total assets under more those firms or individuals able below.	riduals listed in the table for ("") manage more than 10% of unaffiliated with the reporting anagement aggregate to mo	Question 17.5, dof the reporting engrenative (i.e. desore than 50% of with an affiliation of	do any firms/in entity's assets signated with a the reporting	dividuals unaffilia? "U") listed in the entity's assets? ffiliated) or "U" (u	e table for Ques	tion 17.5, does the	. Ye:	5 Investr
11. 11. Fo	7.5097 For those firms/individesignated with a "U7.5098 For firms/individuals total assets under more those firms or individuals able below.	viduals listed in the table for (J") manage more than 10% of a unaffiliated with the reporting that aggregate to most listed in the table for 17.5 with the table for 17.5 wit	Question 17.5, dof the reporting engrentity (i.e. despore than 50% of with an affiliation of the properties of the prope	do any firms/in entity's assets signated with a the reporting code of "A" (a	dividuals unaffilia ? a "U") listed in the entity's assets? ffiliated) or "U" (L Legal Entity lo	unaffiliated), pro	vide the information for	the	5 Investr Manage Agreer (IMA) F
11 11 11 Fe ta	7.5097 For those firms/individesignated with a "U7.5098 For firms/individuals total assets under more those firms or individuals able below.	viduals listed in the table for ("") manage more than 10% of sunaffiliated with the reporting anagement aggregate to most listed in the table for 17.5 with a listed in the list	Question 17.5, dof the reporting engrenative (i.e. despore than 50% of with an affiliation of the properties of the prop	do any firms/in entity's assets signated with a the reporting code of "A" (a	dividuals unaffilia? a "U") listed in the entity's assets? ffiliated) or "U" (L	unaffiliated), pro	vide the information for 4 Registered With	the	5 Investr Manage Agreer (IMA) F
H. If	7.5097 For those firms/individuals designated with a "U. 7.5098 For firms/individuals total assets under many for those firms or individuals able below. 1 Central Registration Depository Number Lave all the filing requirement no, list exceptions: 1 1 2 3 3 4 4 5 5 5 7 5 7 7 7 7 7 7 7 7 7 7 7 7 7	nt	Question 17.5, dof the reporting engrentity (i.e. despore than 50% of with an affiliation of the certifying the foliolalysis of the section and principal payment of all control of the certifying the foliolalysis of the section and principal payment of all control payment of	do any firms/in entity's assets signated with a the reporting code of "A" (a code of "A" (a code of the NAIC Ir cowing elemen curity does not coayments.	dividuals unaffilia ? a "U") listed in the entity's assets? ffiliated) or "U" (u Legal Entity lo vestment Analys ts for each self-d exist or an NAIC est and principal.	e table for Ques unaffiliated), pro lentifier (LEI) is Office been for the sesignated 5GI sesign	rition 17.5, does the vide the information for 4 Registered With ollowed?	Yes	5 Investr Manage Agreer (IMA) F

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent					99.	1 %
	1.2 A&H cost containment percent					3.3	3 %
	1.3 A&H expense percent excluding cost containment expenses					10.5	; %
2.1	Do you act as a custodian for health savings accounts?		Yes []	No [X]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date	.\$					
2.3	Do you act as an administrator for health savings accounts?		Yes []	No [X]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date	.\$					
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes []	No [X]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes []	No [X]	

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

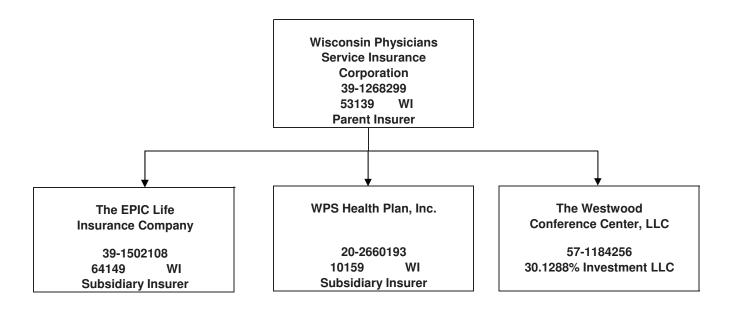
Showing All New Reinsurance Treaties - Current Year to Date 1 2 3 4 5 6 7 8 9										
1	2	3	4				8 Certified	9 Effective Date of		
NAIC Company Code 37273	ID Number .39-1338397	Effective Date	Name of Reinsurer Axis Insurance Company	Domiciliary	Type of Reinsurance Ceded SSL/A/G	Type of Reinsurer	Reinsurer Rating (1 through 6)	Certified Reinsurer Rating		
37273	.39-1338397	01/01/2019	Axis Insurance Company	IL.	SSL/A/G	Authorized	(: ::::::::::::::::::::::::::::::::::	raang		
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories Direct Business Only Federal Employees Life and Health Annuity Premiums & Other Property/ Casualty Total Columns 2 Active Accident and **Benefits** Health Status Medicaid Program Deposit-Type Premiums States, etc (a) Title XVIII Title XIX Premiums Consideration Premiums Through 7 Contracts 1. Alabama ALN. Alaska. 2. AK N 0 3. Arizona. ΑZ .N. 0 4. Arkansas AR N 0 California .. 5. CA N 0 6. Colorado. 0 CO N 7. Connecticut CT N 0 8. Delaware. 0 DE N District of Columbia . DC 9. N 0 10. Florida .. 0 FL .N. Georgia 11. .. GA N 0 12. Hawaii ... HI .N. 0 13. Idaho .. ID N 0 Illinois 14. Ш N 0 15. Indiana .. IN N 0 16. 0 lowa .. IΑ N 17. Kansas KS N. 0 18. Kentucky. ΚY N 0 Louisiana. 19. LA .N. 0 20. Maine. MF N 0 21. Maryland .. MD N. 0 22. Massachusetts ... MA N 0 23. Michigan. MI N 0 24. Minnesota 0 MN N 25. Mississippi .. MS N 0 26. Missouri . 0 MO N. 27. Montana. . MT N 0 28. Nebraska .. 0 NE .N. 29. Nevada ... - NV N 0 30. New Hampshire NH N 0 31. New Jersey NJ N 0 32. New Mexico .. 0 . NM N 33. New York .. - NY N 0 North Carolina ... 34. . NC N 0 35. North Dakota ND N. 0 36. Ohio. ОН N 0 37. Oklahoma -- OK .N. 0 38. Oregon .. OR N 0 39. Pennsylvania PA N 0 Rhode Island 40. RI 0 N South Carolina 41. .. SC N 0 42. South Dakota ... 0 SD N. Tennessee 43. TN N 0 44. Texas. 0 TX .N. 45. Utah ... UT N 0 46. Vermont .. VT .N. 0 47. Virginia .. . VA N 0 48. Washington. WA N 0 West Virginia .. 49. .. WV N 0 Wisconsin 54.298.282 54.298.282 50. WI L 51. Wyoming. . WY N. 0 American Samoa AS 52. N 0 53. Guam .. - GU .N. 0 Puerto Rico .. 54. PR N 0 U.S. Virgin Islands ... VI 55. N 0 Northern Mariana 56. N 0 Islands MP 57. Canada CAN N 0 Aggregate Other 58. 0 0 0 0 OT XXX 0 0 0 0 59. 54 298 282 54 298 282 Subtotal XXX 0 0 0 0 0 0 Reporting Entity 60. Contributions for Employee Benefit Plans XXX 61. Totals (Direct Business) 54,298,282 0 0 0 0 0 54,298,282 0 XXX DETAILS OF WRITE-INS 58001. XXX 58002. XXX 58003 58998. Summary of remaining write-ins for Line 58 from overflow page XXX ..0 ..0 ..0 .0 .0 .0 ..0 .0 Totals (Lines 58001 through 58003 plus 58998)(Line 58 58999 0 0 0 0 0 0 0 0 above) XXX

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

STATEMENT AS OF SEPTEMBER 30, 2019 OF WPS HEALTH PLAN, INC. SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
									D 1 11						
						Name of Securities		L .	Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary			Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
	•						Wisconsin Physicians Service Insurance			Wisconsin Physicians Service Insurance			Wisconsin Physicians Service Insurance		
0068		53139	39-1268299				Corporation	WI	UDP	Corporation	Board of Directors		Corporation Board of Directors	N	
										Wisconsin Physicians Service Insurance			Wisconsin Physicians Service Insurance		
8800		64149	39-1502108				The EPIC Life Insurance Company	WI	IA	Corporation	Ownership	100.000	Corporation	N	
										Wisconsin Physicians Service Insurance			Wisconsin Physicians Service Insurance		
8900		10159	20-2660193				WPS Health Plan, Inc.	WI	RE	CorporationAspirus Wausau Hospital	Ownership	100.000	Corporation	N	
8900			57-1184256				The Westwood Conference Center, LLC	WI	DTH	Aspirus Wausau Hospital	Other	30.128		N	
									·						
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Asterisk	Explanation
001	No partner in the Westwood LLC has more than 50% ownership. Major decisions are made based on the supermajority voting rights.

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?	YES
	Explanation:	
	Bar Code:	

OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
<u> </u>			
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 yil va		
7.	Deduct current year's other than temporary impaigent recognitions are seen and the second sec		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		'	Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	21,058,897	23,894,904
2.	Cost of bonds and stocks acquired		10,109,281
3.	Accrual of discount	16,650	20,902
4.	Unrealized valuation increase (decrease)	22,561	(20,071)
5.	Total gain (loss) on disposals		(198,097)
6.	Deduct consideration for bonds and stocks disposed of	6,654,965	12,660,099
7.	Deduct amortization of premium	68,590	87,922
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	3,099	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	19,447,564	21,058,897
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)	19,447,564	21,058,897

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

Daning ti	ne Current Quarter for	2	3	1 Designation	5	6	7	8
	Book/Adjusted	2	3	7	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
NAIC Designation	Beginning of Current Quarter	During Current Quarter	During Current Quarter	During Current Quarter	End of First Quarter	End of Second Quarter	End of Third Quarter	December 31 Prior Year
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	i nira Quarter	Prior Year
BONDS								
1. NAIC 1 (a)	15,091,439	1,467,859	2,256,705	(10,757)	15,208,527	15,091,439	14,291,837	15,063,396
2. NAIC 2 (a)	5,023,317	0	489.724	(3,645)	5,281,578	5,023,317	4,529,948	5,285,979
	687.911		75,985	1.380	609.780	687.911	613.307	694,427
3. NAIC 3 (a)	, ,	0	,	, -		, -		,
4. NAIC 4 (a)	14,122	0	1,547	(104)	14,322	14,122	12,472	15,096
5. NAIC 5 (a)	0	0	0	0	0	0	0	
6. NAIC 6 (a)	0				0	0	0	0
7. Total Bonds	20,816,789	1,467,859	2,823,960	(13, 125)	21,114,207	20,816,789	19,447,564	21,058,897
PREFERRED ATOMY								
PREFERRED STOCK								
8. NAIC 1	0				0	0	0	0
9. NAIC 2	0				0	0	0	0
10. NAIC 3	0				0	0	0	0
11. NAIC 4	0				0	0	0	۰
	0					0	0	
12. NAIC 5						0		0
13. NAIC 6	0				0	0	0	0
14. Total Preferred Stock	. 0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	20,816,789	1,467,859	2,823,960	(13, 125)	21, 114, 207	20,816,789	19,447,564	21,058,897

a)	Book/Ad	usted (Carrying	Value colum	n for the end	d of the current	reporting	period include	tes the follow	ing amount o	f short-term :	and cash ed	uivalent bonds b	v NAIC des	ignation

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open NONE

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

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	4,220,092	1,240,091
2.	Cost of cash equivalents acquired	10,704,979	9,429,853
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	13,301,125	6,449,853
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)	1,623,946	4,220,092
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	1,623,946	4,220,092

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

Schedule A - Part 3 - Real Estate Disposed **NONE**

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

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

NONE

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

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

SCHEDULE D - PART 3

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

	_	JIIOW All L	ong-remi bonds and Stock Acquired Duning the Current Quarte					
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation
								and
								Admini-
								strative
								Symbol/
				Number of			Paid for Accrued	Market
CUSIP		Date		Shares of			Interest and	Indicator
	F!		Name of Venden		A -+ 1 O+	Day Value	Dividends	
Identification Description 9128 10-RB-6 UNITED STATES TREAS BDS	Foreign	Acquired 08/22/2019	Name of Vendor	Stock	Actual Cost 57.662	Par Value	Dividends 402	(a)
912810-RB-6 UNITED STATES TREAS BOS UNITED STATES TREAS BOS UNITED STATES TREAS BOS		09/30/2019	Nomura		57,662	50,000 50,000		
912828-3F-5 UNITED STATES THEAS BUS		09/30/2019	Goldman Sachs				2.557	
912828-5M-8 UNITED STATES TREAS NTS	-	09/13/2019	Goldman Sachs		82,770	75.000		
912828-W8-9 UNITED STATES TREAS NTS	-	08/14/2019	Goldman Sachs		151.330	150.000	1.060	
912828-WJ-5 UNITED STATES TREAS NTS		09/30/2019	Nomura					1
912828-YB-0 UNITED STATES TREAS NTS		08/19/2019	Goldman Sachs		501,055	500,000	243	
0599999. Subtotal - Bonds - U.S. Governments					1,368,189	1,325,000	5,935	XXX
161630-BD-9 CHASE MORTGAGE FIN TR 2007-A1			Adjustment From Couselor		0	2	0	5FE
714046-AG-4 PERKINELMER INC		09/10/2019	Salomon		99,670	100,000	0	1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					99,670	100,002	0	XXX
8399997. Total - Bonds - Part 3					1,467,859	1,425,002	5,935	
8399998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
8399999. Total - Bonds					1,467,859	1,425,002	5,935	
8999997. Total - Preferred Stocks - Part 3					0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks					0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3					0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5			·		XXX	XXX	XXX	XXX
9799999. Total - Common Stocks		·			0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks					0	XXX	0	XXX
9999999 - Totals					1,467,859	XXX	5,935	XXX

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

SCHEDULE D - PART 4

					Show All Lo	ng-Term Bo	onds and Stock	k Sold, Red	deemed or (Otherwise	Disposed o	of During tl	he Current	Quarter							
1	2	3	4	5	6	7	8	9	10	C	nange In Boo	ok/Adjusted	Carrying Va	llue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
													Total	Total							nation
												Current	Change in	Foreign							and
												Year's	Book/	Exchange	Book/				Bond		Admini-
									Prior Year		Current	Other Than	Adjusted	Change in	Adjusted	Foreign			Interest/	Stated	strative
									Book/	Unrealized	Year's	Temporary	Carrying	Book	Carrying	Exchange	Realized		Stock	Con-	Symbol
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Dividends	tractual	/Market
ldent-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	,	nized	` 13)	Value	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
36179M-NH-9	GNMA PASS-THRU M SINGLE FAMILY		09/20/2019 _	PRINCIPAL RECEIPT		4,226	4,226	4,571	4,578	0	(352)	0	(352)		4,226	0	0	0	99	_09/20/2042	. 1
36179Q-PH-8	GNMA PASS-THRU M SINGLE FAMILY		09/20/2019 _	PRINCIPAL RECEIPT		3,900	3,900	4,037	0	0	(137)	0	(137)		3,900	0	0	0	65	_09/20/2044	. 1
	GNMA PASS-THRU M SINGLE FAMILY		09/20/2019 .	. PRINCIPAL RECEIPT		7,812	7,812	8,345	8,493	0	(682)	0	(682)		7,812	0	0	0	210	.08/20/2045	. 1
	GNMA PASS-THRU M SINGLE FAMILY		09/20/2019 . 09/20/2019 .	PRINCIPAL RECEIPT		5,633 6,359	5,633 6,359	5,863 6,598	5,881 6,600	0	(249)	0	(249)		5,633	0	0	0	152 192	_06/20/2047 _07/20/2047	. 1
36202F-HY-5	GNMA PASS-THRU M SINGLE FAMILY		09/20/2019 _	PRINCIPAL RECEIPT PRINCIPAL RECEIPT		1,374	1,374	1,462	1,478		(105)	n	(105)		1,374	0	0	0	46	_07/20/2047	1
	UNITED STATES TREAS BDS		08/21/2019 .	Nomura		116, 105	100,000	95,697	95,898	0	72	0	72	0	95,970	0	20 , 135	20 , 135	2,219	.05/15/2043	1
912828-5M-8	UNITED STATES TREAS NTS		09/10/2019 .	Goldman Sachs		111,953	100,000	104,875	Ω	0	(182)	0	(182)	0	104,693	0	7,260	7,260	2,582	11/15/2028	. 1
912828-U2-4	UNITED STATES TREAS NTS	. []	08/21/2019 .	Merrill Lynch		332,946	325,000	301,096	302,468	0	1,571	0	1,571	0	304,039	0	28,907	28,907	5,478	_11/15/2026	. 1
	UNITED STATES TREAS NTS	- []	08/19/2019 _	Goldman Sachs		656,119	650,000	638,236	389,606	0	2,038	0	2,038	0	641,303	0	14,817	14,817	8,457	_03/31/2022	- 1
	UNITED STATES TREAS NTSUNITED STATES TREAS NTS	- [08/21/2019 . 08/21/2019 .	Nomura			175,000	171,404	171,646 0	ļō	371	łō	371	ļ0	172,017	0	1, 125	1, 125	3,376 243	.05/15/2024 .08/15/2029	-
	Subtotal - Bonds - U.S. Governments		00/21/2019 .	_ GOTUMATI SACTIS		1,931,678	1,879,303	1,843,239	986,648		2,106	0	2,106		1,848,379	0	83,299	83,299		XXX	XXX
3130AB-3Q-7	FEDERAL HOME LOAN BANKS		07/15/2019 .	MATURITY		150,000	150,000	150,302	150,072	0	(72)	·	(72)		150,000	0	00,233	00,233	2,028	_07/15/2019	1
	FHLMC PC GOLD 15 YR		09/16/2019	PRINCIPAL RECEIPT		7,431	7,431	7,646	7,611	0	(180)	0	(180)		7,431	0	0	0	122	_03/01/2028	1
	FHLMC PC GOLD COMB 15		09/16/2019 .	PRINCIPAL RECEIPT		4, 150	4, 150	4,282	4,275	0	(124)	0	(124)		4 , 150	0	0	0	84	.02/01/2032	. 1
3132J4-JU-4	FHLMC PC GOLD COMB 20		09/16/2019 .	. PRINCIPAL RECEIPT		5,282	5,282	5,515	5,523	0	(241)	0	(241)		5,282	0	0	0	121	.01/01/2034	. 1
3128M6-AX-6 3128MJ-S3-5	FHLMC PC GOLD COMB 30		09/16/2019 . 09/16/2019 .	PRINCIPAL RECEIPT PRINCIPAL RECEIPT		1,211 3,386	1,211 3,386	1,282 3,398	1,354 3.398	0	(143)		(143)		1,211		0	0	45 68	_04/01/2038 _07/01/2043	
	FHLMC PC GOLD COMB 30		09/16/2019 _	PRINCIPAL RECEIPT		2,799	2,799	2,895	2,935	0	(136)	0	(136)		2,799	0	0	0	76	_03/01/2044	1
	FHLMC PC GOLD COMB 30		09/16/2019 .	PRINCIPAL RECEIPT		5,330	5,330	5,277	5,276	0	54	0	54	0	5,330	0	0	0	126	10/01/2044	1
3128MJ-XF-2			09/16/2019 .	PRINCIPAL RECEIPT		5,810	5,810	5,947	0	0	(137)	0	(137)		5,810	0	0	0	138	11/01/2045	. 1
3128MJ-XL-9			09/16/2019 .	PRINCIPAL RECEIPT		3, 159	3,159	3,203	3,204	0	(45)	0	(45)		3, 159	0	0	0	86	_12/01/2045	. 1
3128MJ-YC-8 312939-RG-8	FHLMC PC GOLD COMB 30		09/16/2019 . 09/16/2019 .	PRINCIPAL RECEIPT		5,574 1,240	5,574 1,240	5,693 1,359	5,700 1,402		(126)		(126)		5,574 1,240				131 40	_05/01/2046 _03/01/2040	
3132XC-RX-5	FHLMC PC GOLD COMB 30		09/16/2019 .	PRINCIPAL RECEIPT		4,853	4,853	4,982	4,985	0	(132)	0	(132)		4,853	0	0	0	131	_01/01/2040	1
31335A-2F-4	FHLMC PC GOLD COMB 30		09/16/2019	PRINCIPAL RECEIPT		2,070	2,070	2,068	2,068	0	2	0	2	0	2,070	0	0	0	42	_10/01/2045	1
31335A-BG-2	FHLMC PC GOLD COMB 30		09/16/2019 _	PRINCIPAL RECEIPT		2,663	2,663	2,619	2,619	0	<u>4</u> 5	0	45	0	2,663	0	0	0	54	_04/01/2043	. 1
	FHLMC PC GOLD COMB 30		09/16/2019 .	. PRINCIPAL RECEIPT		4,437	4,437	4,443	4,443	0	(6)	0	(6)		4,437	0	0	0	104	.06/01/2045	. 1
	FHLMC PC GOLD COMB 30 FHLMC PC GOLD COMB 30		09/16/2019 .	PRINCIPAL RECEIPT PRINCIPAL RECEIPT		8, 161 2, 862	8,161 2.862		8,583 2,942	0	(423)	0	(423)		8,161 2,862	0	0	0	193 67	_01/01/2046 _03/01/2046	. 1
	FHLMC PC GOLD COMB 30 FHLMC PC GOLD COMB 30		09/16/2019 _	PRINCIPAL RECEIPT		3,452	3,452	3,632	3,637		(184)	n	(184)		3,452	0	0	0	92	_06/01/2046	1
	FHLMC PC GOLD COMB 30		09/16/2019	PRINCIPAL RECEIPT		3,671	3,671	3,673	3,673	0	(2)	0	(2)		3,671	0	0	0	73	.05/01/2047	1
	FHLMC PC GOLD PC 30YR		09/16/2019 .	PRINCIPAL RECEIPT		3,388	3,388	3,589	3,607	0	(219)	0	(219)		3,388	0	0	0	79	_06/01/2042	. 1
3132HP-R2-2	FHLMC PC GOLD PC 30YR		09/16/2019 .	. PRINCIPAL RECEIPT		2,927	2,927	2,989	2,991	0	(64)	0	(64)		2,927	0	0	0	58	_11/01/2042	. 1
3132HR-MY-3	FHLMC PC GOLD PC 30YR		09/16/2019 _	PRINCIPAL RECEIPT		7, 198	7, 198	7,479	7,500	0	(302)	0	(302)		7,198	0	0	0	142	_01/01/2043	. 1
3138EQ-RG-9 3138WF-HA-7	FNMA PASS-THRU INT 15 YEARFNMA PASS-THRU INT 15 YEAR	[09/25/2019 . 09/25/2019 .	PRINCIPAL RECEIPT	-	1,849 2,357	1,849 2,357	1,937 2,456	1,924 2,441	0	(74)	ļ	(74)		1,849 2,357	0	10	0	36	.12/01/2030 .08/01/2030	- 1
	FNMA PASS-THRU INT 15 YEAR		09/25/2019 .	PRINCIPAL RECEIPT			3.981		3,914	0	67	0	67	0		0	0	0	67	_04/01/2030	1
31418A-AV-0	FNMA PASS-THRU INT 20 YEAR		09/25/2019 .	PRINCIPAL RECEIPT		3,526	3,526	3,619	0	0	(93)	0	(93)	0	3,526	0	0		30	_12/01/2031	1
31418B-G5-9	FNMA PASS-THRU INT 20 YEAR	. []	09/25/2019	PRINCIPAL RECEIPT		4,655	4,655	5,010	5,016	0	(361)	٥	(361)		4,655	0	٥	0	124	.09/01/2034	. 1
3138A2-BE-8	FNMA PASS-THRU LNG 30 YEAR	. [09/25/2019 .	. PRINCIPAL RECEIPT		2,564	2,564	2,592	2,598	0	(34)	٩	(34)		2,564	0	٩٥	0	60	12/01/2040	. 1
3138AS-R5-3 3138EK-D6-9	FNMA PASS-THRU LNG 30 YEARFNMA PASS-THRU LNG 30 YEAR		09/25/2019 . 09/25/2019 .	PRINCIPAL RECEIPT PRINCIPAL RECEIPT		1,960 1,889	1,960 1,889	2,046 1,973	2, 105 1, 976	0	(145)	ō	(145)	0	1,960 1,889	0	ļō	0	53 45	_09/01/2041 _10/01/2042	-
3138EK-D6-9	FNMA PASS-THRU LING 30 YEAR		09/25/2019 .	PRINCIPAL RECEIPT		10,100	10.100	1,973	1,9/6	u	(1, 114)	u	(1, 114)	n	10.100	n	n	0 n	301	10/01/2042	1
3138ER-TM-2	FNMA PASS-THRU LNG 30 YEAR		09/25/2019 .	PRINCIPAL RECEIPT		3,006	3,006	3, 178	3, 186	0	(180)	0	(180)	0	3,006	0	0	0	80	_02/01/2045	1
3138ET-YQ-3	FNMA PASS-THRU LNG 30 YEAR		09/25/2019 .	PRINCIPAL RECEIPT		4,330	4,330	4,582	4,597	0	(267)	0	(267)		4,330	0	0	0	101	_02/01/2045	. 1
3138LY-5E-3	FNMA PASS-THRU LNG 30 YEAR		09/25/2019 .	. PRINCIPAL RECEIPT		6,270	6,270	6, 177	6, 177	0	92	0	92	0	6,270	0	0	0	146	_07/01/2042	. 1
3138WG-5L-4	FNMA PASS-THRU LNG 30 YEAR	. [09/25/2019 .	PRINCIPAL RECEIPT	-	5,024	5,024	5, 181	5, 169	0	(146)	0	(146)		5,024	0	ļ	0	92	_05/01/2046	- 1
3138WH-U6-7 31402C-4J-8	FNMA PASS-THRU LNG 30 YEARFNMA PASS-THRU LNG 30 YEAR	[09/25/2019 . 09/25/2019 .	PRINCIPAL RECEIPT PRINCIPAL RECEIPT		4,999 1,645	4,999 1,645	5, 140 1,767	5, 148 1, 838	0	(149)		(149)		4,999 1,645	0	0	0	135	_08/01/2046 _04/01/2034	- 1
31402C-4J-8	FNMA PASS-THRU LING 30 YEAR	[09/25/2019 .	PRINCIPAL RECEIPT		1,645	1,726	1,767	1,888		(162)	n	(162)		1,726	0	n	n	51	_02/01/2034	1
3140J5-SS-9	FNMA PASS-THRU LNG 30 YEAR		09/25/2019 _	PRINCIPAL RECEIPT		3, 127	3, 127	3,230	3,232	0	(106)	0	(106)		3,127	0	0	0	73	_09/01/2043	1
3140JA-HE-1	FNMA PASS-THRU LNG 30 YEAR	.	09/25/2019 .	PRINCIPAL RECEIPT		7,616	7,616	7,935	0	0	(319)	0	(319)	0	7,616	0	0	0	146	.11/01/2048	. 1
	FNMA PASS-THRU LNG 30 YEAR		09/25/2019 .	. PRINCIPAL RECEIPT		6,520	6,520	6,928	0	0	(408)	0	(408)		6,520	0	0	0	54	_05/01/2047	. 1
3141/Y-11-4	FNMA PASS-THRU ING 30 YEAR	1	09/25/2019	PRINCIPAL RECEIPT	1	3 998	3 998	4 197	4 202		(204)		(204)		3 998				109	11/01/2040	13

SCHEDULE D - PART 4

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

					Show All Lo	ng-Term Bo	nds and Sto	ck Sold, Rec	leemed or C	Inerwise I	Jisposea d	of During ti	ne Current	Quarter							
1	2	3	4	5	6	7	8	9	10	Ch	nange In Boo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
													Total	Total							nation
												Current	Change in	Foreign							and
															Dools/				Dand		Admini-
									Dulan Vaan			Year's	Book/	Exchange	Book/	F			Bond	04-4-4	
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Interest/	Stated	strative
									Book/	Unrealized	Year's	Temporary		Book	Carrying	Exchange			Stock	Con-	Symbol
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain		tractual	/Market
ldent-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	Received	Maturity	Indicator
ification	Description	eign	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	DuringYear	Date	(a)
	FNMA PASS-THRU LNG 30 YEAR		09/25/2019	PRINCIPAL RECEIPT		3,455	3,455	3,445	3,445	0	10	0	10	0	3,455	0	0	0	71	_07/01/2043 _	. 1
	FNMA PASS-THRU LNG 30 YEAR			PRINCIPAL RECEIPT		629	629	679	704	0	(76)	0	(76)	0	629	0	0	0	24	04/01/2037 _	. 1
	NEW YORK ST DORM AUTH REVS NON REV		07/01/2019	Call		5,000	5,000	5,000	5,000	0	0	0	0	0	5,000	0	0	0	313	07/01/2020	1FE
	Subtotal - Bonds - U.S. Special Rever	nues				331,279	331,279	337,616	313,569	0	(6,718)	0	(6,718)	0	331,279	0	0	0	6,326	XXX	XXX
	HUTCHISON WHAMPOA INTERNATIONA	. C		MATURITY		50,000	50,000	49,724	49,974	0	26	0	26	0	50,000	0	0	0	2,875	09/11/2019	
	BEMIS INC	-	08/01/2019	MATURITY		125,000	125,000	140,495	127,775	0	(2,775)	0	(2,775)	0	125,000	0	0	0	8,625		2FE
	CAMPBELL SOUP CO			Credit Lyonnais Secs		110,510	100,000	99,527	99,533	0	5	0	5	0	99,538	0	10,972	10,972	4,513	03/15/2048	
	CHASE MORTGAGE FIN TR 2007-A1			PRINCIPAL RECEIPT		978	978	935	956	0	22	0	22	0	978	0	0	0	25		5FE
	CONTINTG HOME EQ LN TR 1996-3			PRINCIPAL RECEIPT Goldman Sachs		104	104 25.000	104	101	4	(126)	0	4	0	104	0	4.671	4.671	2.036	09/15/2027 03/01/2039	4FM
	FREEPORT-MCMORAN COPPER & GOLD			Goldman Sachs		1.018	1,000	956	946		(120)	0	(120)		985 عدا	0	4,671	4,671	2,036	03/01/2039	
	HARTFORD FINL SVCS GROUP INC D		08/19/2019	TENDER OF SHARES		162.122	150.000	165.626	158.783		(1.620)		(1.620)		157 . 163		دد4.958	دد 4.958	6.492	03/01/2022 04/15/2022	
	INDYMAC INDX 2006-AR33			PRINCIPAL RECEIPT		765			768	0	(1,020)	0	(2)	0		0	0			01/25/2037	
	MASSACHUSETTS MUT LIFE			Goldman Sachs		25.897	15.000	14.808	14.826	0	2	0	2	0	14.828	0	11.069	11.069	961	06/01/2039	
	MIDCONTINENT EXPRESS PIPELINE		09/15/2019			50.000	50.000	49.935	49.994	0	6	0	6	0	50.000	0	0	0	3.350	_09/15/2019 _	
61761D-AD-4	MS B0FA ML TRUST 2012-C6		09/17/2019	PRINCIPAL RECEIPT		452	452	456	454	0	(1)	0	(1)	0	452	0	0	0	9	11/17/2045	
651229-AX-4	NEWELL RUBBERMAID INC		08/19/2019	Goldman Sachs		26,331	25,000	25,000	25,000	0		0	0	0	25,000	0	1,331	1,331	1, 194	04/01/2036	3FE
	RESIDENTIAL ASSET SEC 2004-SL3			PRINCIPAL RECEIPT		1,442	1,442	1,520	1,448	92	(99)	0	(6)	0	1,442	0	0	0	71	12/25/2031	4FM
	SHERWIN WILLIAMS CO		08/19/2019	Goldman Sachs		27,941	25,000	24,828	24,833	0	2	0	2	0	24,835	0	3, 106	3, 106	813		2FE
	TOWD PT MTG TR 2018-1			PRINCIPAL RECEIPT		4,628	4,628	4,625	4,625	0	3	0	3	0	4,628	0	0	0	95	01/25/2058 _	
	TOWD PT MTG TR 2018-4		09/25/2019	PRINCIPAL RECEIPT		3,502	3,502	3,396	3,396	0	106	0	106	0	3,502	0	0	0	69	06/25/2058	. 1FE
	VERIZON COMMUNICATIONS INC		08/19/2019	Goldman Sachs		57, 134	50,000	50,947	50,904	0	(27)	0	(27)	0	50,877	0	6,256	6,256	1,772 43		2FE
	WELLS FARGO COML TR 2015-C27			PRINCIPAL RECEIPT PRINCIPAL RECEIPT		1,753 139	1,753 139	1,770 118	1,761 114		(8)	0	(8) 25	0	1,753 139				43	02/18/2048 06/26/2035	1FM
									648.627		(4,457)	0		0		0	40.007	42.397		XXX	XXX
	subtotal - Bonds - Industrial and Misc	ellaned	ous (Unaπili	ated)		686,699	629,765	668,252	,	131		0	(4,326)	· ·	644,301	0	42,397		33,010		
	otal - Bonds - Part 4					2,949,656	2,840,347	2,849,107	1,948,845	131	(9,070)	0	(8,938)	0	2,823,960	0	125,696	125,696	62,456	XXX	XXX
	otal - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal - Bonds					2,949,656	2,840,347	2,849,107	1,948,845	131	(9,070)	0	(8,938)	0	2,823,960	0	125,696	125,696	62,456	XXX	XXX
8999997. T	otal - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999. T	otal - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	otal - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	otal - Common Stocks					0	XXX	0	0	0	0	0	0		0	0	0	0	0	XXX	XXX
	otal - Preferred and Common Stocks	s				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
9999999 - 7		-				2.949.656	XXX	2.849.107	1,948,845	131	(9.070)	0	(8.938)	0	2.823.960	0	125.696	125.696	62.456	XXX	XXX
333333	ι σιαισ					2,343,000	\\\\\	۷,045,101	1,340,040	101	(3,0/0)		(0,500)	U	2,020,900		125,090	125,090	02,400	^/^/	

⁽a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues...

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

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

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

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

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

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

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5		ance at End of Eacuring Current Quart		9
			Amount of Interest Received		6	7	8	
Damanitani	0-4-	Rate of		at Current	E:	0 114 11	T1: 184 11	*
Depository		Interest	Quarter	Statement Date	First Month	Second Month	Third Month	
Associated Bank Green Bay, Wisconsin					(000 057)	(00.404)		XXX
-Administrative					(333,857)			
-Payroll						(1)		
-General Depository					1,206,536			
-Claims					(630,660)	(739,722)		
-Investment Accounts					0	(266,624)	(132,824)	XXX
0199998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See		1004						1004
instructions) - Open Depositories	XXX	XXX			212 212			XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	242,018	122,128	709,774	XXX
0299998. Deposits in depositories that do not								
exceed the allowable limit in any one depository (See	XXX	xxx						V/V/
instructions) - Suspended Depositories			0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	242,018	122,128	709,774	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
	ļ							
	<u> </u>							
0599999. Total - Cash	XXX	XXX	0	0	242,018	122,128	709,774	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Cha	w Investments	Owned	End of	Curront	Ougstor	

4	2 2 3		ea Ena oi Current	5	6	7	0	0
1	2 3	'	4	Э	О	Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	de	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0599999. Total	- U.S. Government Bonds	•	·			0	0	0
1099999. Total	- All Other Government Bonds					0	0	0
1799999. Total	- U.S. States, Territories and Possessions Bonds					0	0	0
2499999. Total	- U.S. Political Subdivisions Bonds					0	0	0
3199999. Total	- U.S. Special Revenues Bonds					0	0	0
	- Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
4899999. Total	- Hybrid Securities					0	0	0
5599999. Total	- Parent, Subsidiaries and Affiliates Bonds					0	0	0
6099999. Subto	otal - SVO Identified Funds					0	0	0
6599999. Subto	otal - Bank Loans					0	0	0
	- Issuer Obligations					0	0	0
	- Residential Mortgage-Backed Securities					0	0	0
	- Commercial Mortgage-Backed Securities					0	0	0
	- Other Loan-Backed and Structured Securities					0	0	0
	- SVO Identified Funds					0	0	0
8299999. Total						0	0	0
8399999. Total						0	0	0
	ASSOCIATED BANK SWEEP		09/30/2019	1.260	10/01/2019	932, 167	0	21,444
8499999. Subto	otal - Sweep Accounts					932, 167	0	21,444
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT		09/30/2019	1.260		932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts					932, 167	0	21,444
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	00	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343
8499999. Subto	otal - Sweep Accounts GOLDMAN SACHS GOVERNMENT MMKT					932,167 691,780	0	21,444 14,343



SUPPLEMENT FOR THE QUARTER ENDING SEPTEMBER 30, 2019 OF THE WPS Health Plan, Inc.

MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

NAIC	C Group Code 0068	(Net of	Reinsurance)		NAIC Com	pany Code 10159
	'	Individual C	Coverage	Group Co		5
		1 Insured	2 Uninsured	3 Insured	4 Uninsured	Total Cash
1.	Premiums Collected		XXX		XXX	0
2.	Earned Premiums		XXX		XXX	xxx
3.	Claims Paid		XXX		XXX	0
4.	Claims Incurred		XXX		XXX	XXX
5.	Reinsurance Coverage and Low Income Cost Sharing - Claims Paid Net of Reimbursements Applied (a)	xxx		xxx		0
6.	Aggregate Policy Reserves - Change		XXX		XXX	XXX
7.	Expenses Paid		XXX		XXX	0
8.	Expenses Incurred		XXX		XXX	XXX
9.	Underwriting Gain or Loss	0	XXX	0	XXX	XXX
10.	Cash Flow Result	XXX	XXX	XXX	XXX	0

(a) Uninsured Receivable/Payable with CMS at End of Quarter: \$ due from CMS or \$ due to CMS