



ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2019
 OF THE CONDITION AND AFFAIRS OF THE

Envision Insurance Company

(Name)

NAIC Group Code 00000 , 00000 (Current Period) (Prior Period) NAIC Company Code 12747 Employer's ID Number 20-4308924

Organized under the Laws of Ohio , State of Domicile or Port of Entry Ohio

Country of Domicile United States

Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
 Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization []
 Other [] Is HMO, Federally Qualified? Yes [] No []

Incorporated/Organized 02/08/2006 Commenced Business 01/01/2007

Statutory Home Office 2181 East Aurora Road , Twinsburg, OH, US 44087
 (Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2181 East Aurora Road
 (Street and Number)
Twinsburg, OH, US 44087 330-405-8089
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 2181 East Aurora Road , Twinsburg, OH, US 44087
 (Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 2181 East Aurora Road
 (Street and Number)
Twinsburg, OH, US 44087 330-405-8089
 (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number) (Extension)

Internet Web Site Address www.envisionrx.com

Statutory Statement Contact Scott David Gonia CPA , 330-486-4846
 (Name) (Area Code) (Telephone Number) (Extension)
eicaccounting@envisionrx.com 330-486-4801
 (E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
<u>William Carl Epling</u>	<u>President</u>	<u>Scott David Gonia</u>	<u>Treasurer</u>
<u>Robert Burns Weinberg</u>	<u>Senior Vice President, General Counsel & Secretary</u>	<u>Thomas John Welsh</u>	<u>Chief Financial Officer & Executive Vice President</u>

OTHER OFFICERS

DIRECTORS OR TRUSTEES

<u>William Carl Epling</u>	<u>Brian Todd Hoover #</u>	<u>Matthew Charles Schroeder</u>	<u>Thomas John Welsh</u>
<u>Susan Catherine Lowell #</u>	_____	_____	_____

State of Ohio

ss

County of Summit

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

Thomas John Welsh
 Chief Financial Officer & Executive Vice President

Scott David Gonia
 Treasurer

Robert Burns Weinberg
 Senior Vice President, General Counsel & Secretary

Subscribed and sworn to before me this _____ day of _____,

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

Exhibit 3 - Health Care Receivables

NONE

Exhibit 3A - Analysis of HC Receivables

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
NONE							
0199999 Individually listed receivables	0	0	0	0	0	0	0
0299999 Receivables not individually listed							
0399999 Total gross amounts receivable	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT 7 - PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	.0	.0.0		.0.0		
2. Intermediaries .....	.0	.0.0		.0.0		
3. All other providers .....	.0	.0.0		.0.0		
4. Total capitation payments .....	.0	.0.0	0	.0.0	0	0
Other Payments:						
5. Fee-for-service .....	.0	.0.0	XXX	XXX		
6. Contractual fee payments .....	.0	.0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service .....	.0	.0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments .....	.0	.0.0	XXX	XXX		
9. Non-contingent salaries .....	.0	.0.0	XXX	XXX		
10. Aggregate cost arrangements .....	.0	.0.0	XXX	XXX		
11. All other payments	352,828,206	100.0	XXX	XXX	351,268,495	1,559,711
12. Total other payments	352,828,206	100.0	XXX	XXX	351,268,495	1,559,711
13. Total (Line 4 plus Line 12)	352,828,206	100 %	XXX	XXX	351,268,495	1,559,711

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
NONE					
9999999 Totals			XXX	XXX	XXX

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment	NONE					
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	0	0	0	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alabama		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,169									1,169	
2. First Quarter	1,277									1,277	
3. Second Quarter	1,251									1,251	
4. Third Quarter	1,262									1,262	
5. Current Year	1,298									1,298	
6. Current Year Member Months	15,412									15,412	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	919,286									919,286	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	919,286									919,286	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	784,237									784,237	
18. Amount Incurred for Provision of Health Care Services	803,087									803,087	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$845,741

30.AL



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Alaska		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,681									1,681	
2. First Quarter	1,822									1,822	
3. Second Quarter	1,840									1,840	
4. Third Quarter	1,938									1,938	
5. Current Year	2,041									2,041	
6. Current Year Member Months	22,607									22,607	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	1,746,666									1,746,666	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	1,746,666									1,746,666	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	1,432,278									1,432,278	
18. Amount Incurred for Provision of Health Care Services	1,531,057									1,531,057	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,742,439

30.AK



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arizona		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	7,571									7,571	
2. First Quarter	8,820									8,820	
3. Second Quarter	8,805									8,805	
4. Third Quarter	8,947									8,947	
5. Current Year	9,464									9,464	
6. Current Year Member Months	105,831									105,831	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	7,290,536									7,290,536	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	7,290,536									7,290,536	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	5,279,209									5,279,209	
18. Amount Incurred for Provision of Health Care Services	5,923,305									5,923,305	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$7,236,936

30.AZ



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Arkansas		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	647									647	
2. First Quarter	668									668	
3. Second Quarter	662									662	
4. Third Quarter	644									644	
5. Current Year	604									604	
6. Current Year Member Months	7,729									7,729	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	472,972									472,972	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	472,972									472,972	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	387,271									387,271	
18. Amount Incurred for Provision of Health Care Services	350,637									350,637	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$446,715

30.AR



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF California		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	12,162									12,162	
2. First Quarter	30,279									30,279	
3. Second Quarter	37,377									37,377	
4. Third Quarter	44,664									44,664	
5. Current Year	52,210									52,210	
6. Current Year Member Months	465,150									465,150	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	28,311,020									28,311,020	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	28,311,020									28,311,020	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	16,937,490									16,937,490	
18. Amount Incurred for Provision of Health Care Services	26,627,335									26,627,335	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$28,242,524

30.CA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Colorado		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	10,587									10,587	
2. First Quarter	10,927									10,927	
3. Second Quarter	10,823									10,823	
4. Third Quarter	11,185									11,185	
5. Current Year	11,606									11,606	
6. Current Year Member Months	132,863									132,863	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	11,074,604									11,074,604	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	11,074,604									11,074,604	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	9,748,548									9,748,548	
18. Amount Incurred for Provision of Health Care Services	10,090,040									10,090,040	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$10,997,402

30.CO



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Connecticut		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	11,072									11,072	
2. First Quarter	10,973									10,973	
3. Second Quarter	11,279									11,279	
4. Third Quarter	11,542									11,542	
5. Current Year	11,985									11,985	
6. Current Year Member Months	135,790									135,790	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	7,421,359									7,421,359	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	7,421,359									7,421,359	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	6,186,745									6,186,745	
18. Amount Incurred for Provision of Health Care Services	6,992,423									6,992,423	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$7,340,669

30.CT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Delaware		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	4,390									4,390	
2. First Quarter	2,275									2,275	
3. Second Quarter	2,386									2,386	
4. Third Quarter	2,485									2,485	
5. Current Year	2,650									2,650	
6. Current Year Member Months	28,963									28,963	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	7,170,247									7,170,247	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	7,170,247									7,170,247	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	6,124,424									6,124,424	
18. Amount Incurred for Provision of Health Care Services	6,617,598									6,617,598	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$6,829,311

30.DE



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF District of Columbia		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	2,097									2,097	
2. First Quarter	2,072									2,072	
3. Second Quarter	2,108									2,108	
4. Third Quarter	2,206									2,206	
5. Current Year	2,319									2,319	
6. Current Year Member Months	25,946									25,946	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	1,953,490									1,953,490	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	1,953,490									1,953,490	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	1,669,871									1,669,871	
18. Amount Incurred for Provision of Health Care Services	1,825,561									1,825,561	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,937,094

30.DC



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Florida		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	4,046									4,046	
2. First Quarter	5,729									5,729	
3. Second Quarter	5,701									5,701	
4. Third Quarter	5,667									5,667	
5. Current Year	5,512									5,512	
6. Current Year Member Months	68,217									68,217	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	3,718,491									3,718,491	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	3,718,491									3,718,491	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	3,424,842									3,424,842	
18. Amount Incurred for Provision of Health Care Services	3,560,540									3,560,540	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$3,365,132

30.FL



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Georgia		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	25,368									25,368	
2. First Quarter	27,063									27,063	
3. Second Quarter	27,817									27,817	
4. Third Quarter	28,186									28,186	
5. Current Year	29,403									29,403	
6. Current Year Member Months	334,212									334,212	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	18,083,865									18,083,865	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	18,083,865									18,083,865	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	15,038,852									15,038,852	
18. Amount Incurred for Provision of Health Care Services	16,983,228									16,983,228	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$17,849,179

30.GA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code 00000

BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2019

NAIC Company Code

12747

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	34									34
2. First Quarter	38									38
3. Second Quarter	39									39
4. Third Quarter	37									37
5. Current Year	35									35
6. Current Year Member Months	449									449
Total Member Ambulatory Encounters for Year:										
7. Physician	0									
8. Non-Physician	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (b)	32,031									32,031
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	32,031									32,031
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	13,376									13,376
18. Amount Incurred for Provision of Health Care Services	8,861									8,861

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$32,031

30.GU



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Hawaii		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	329									329	
2. First Quarter	370									370	
3. Second Quarter	377									377	
4. Third Quarter	373									373	
5. Current Year	380									380	
6. Current Year Member Months	4,458									4,458	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	347,787									347,787	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	347,787									347,787	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	280,101									280,101	
18. Amount Incurred for Provision of Health Care Services	303,941									303,941	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$342,586

30.HI



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Idaho		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	3,415									3,415	
2. First Quarter	3,248									3,248	
3. Second Quarter	3,054									3,054	
4. Third Quarter	2,903									2,903	
5. Current Year	2,847									2,847	
6. Current Year Member Months	36,645									36,645	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	3,182,561									3,182,561	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	3,182,561									3,182,561	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,671,935									2,671,935	
18. Amount Incurred for Provision of Health Care Services	2,555,994									2,555,994	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$3,173,330

30.ID



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Illinois		DURING THE YEAR 2019							NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other		
		2 Individual	3 Group									
Total Members at end of:												
1. Prior Year	19,196									19,196		
2. First Quarter	21,917									21,917		
3. Second Quarter	22,356									22,356		
4. Third Quarter	23,002									23,002		
5. Current Year	23,980									23,980		
6. Current Year Member Months	270,823									270,823		
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	23,593,928									23,593,928		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	23,593,928									23,593,928		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	18,688,845									18,688,845		
18. Amount Incurred for Provision of Health Care Services	20,250,116									20,250,116		

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$22,903,652

30.1L



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Indiana		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,883									1,883	
2. First Quarter	1,627									1,627	
3. Second Quarter	1,576									1,576	
4. Third Quarter	1,533									1,533	
5. Current Year	1,513									1,513	
6. Current Year Member Months	18,946									18,946	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	4,574,671									4,574,671	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	4,574,671									4,574,671	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	4,043,613									4,043,613	
18. Amount Incurred for Provision of Health Care Services	4,207,088									4,207,088	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$4,040,015

30.IN



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Iowa		DURING THE YEAR 2019							NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other		
		2 Individual	3 Group									
Total Members at end of:												
1. Prior Year	662									662		
2. First Quarter	670									670		
3. Second Quarter	666									666		
4. Third Quarter	669									669		
5. Current Year	662									662		
6. Current Year Member Months	8,008									8,008		
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b).....	575,177									575,177		
13. Life Premiums Direct.....	0											
14. Property/Casualty Premiums Written.....	0											
15. Health Premiums Earned.....	575,177									575,177		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	451,006									451,006		
18. Amount Incurred for Provision of Health Care Services	523,761									523,761		

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$556,946

30.1A



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kansas		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	570									570	
2. First Quarter	559									559	
3. Second Quarter	562									562	
4. Third Quarter	527									527	
5. Current Year	519									519	
6. Current Year Member Months	6,488									6,488	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	593,035									593,035	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	593,035									593,035	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	579,383									579,383	
18. Amount Incurred for Provision of Health Care Services	513,969									513,969	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$575,107

30.KS



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Kentucky		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,227									1,227	
2. First Quarter	1,136									1,136	
3. Second Quarter	1,080									1,080	
4. Third Quarter	1,058									1,058	
5. Current Year	1,057									1,057	
6. Current Year Member Months	13,143									13,143	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	1,296,487									1,296,487	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	1,296,487									1,296,487	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	1,265,700									1,265,700	
18. Amount Incurred for Provision of Health Care Services	1,200,542									1,200,542	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,266,191

30.KY



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Louisiana		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,387									1,387	
2. First Quarter	1,079									1,079	
3. Second Quarter	1,048									1,048	
4. Third Quarter	1,041									1,041	
5. Current Year	1,046									1,046	
6. Current Year Member Months	12,694									12,694	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	1,054,834									1,054,834	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	1,054,834									1,054,834	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	964,681									964,681	
18. Amount Incurred for Provision of Health Care Services	952,458									952,458	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,000,204

30.LA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Maine		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	9,208									9,208	
2. First Quarter	8,142									8,142	
3. Second Quarter	8,344									8,344	
4. Third Quarter	8,541									8,541	
5. Current Year	8,809									8,809	
6. Current Year Member Months	100,572									100,572	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	4,948,912									4,948,912	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	4,948,912									4,948,912	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	4,361,117									4,361,117	
18. Amount Incurred for Provision of Health Care Services	4,459,333									4,459,333	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$4,945,834

30.ME



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Maryland		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	21,821									21,821	
2. First Quarter	21,766									21,766	
3. Second Quarter	22,150									22,150	
4. Third Quarter	22,532									22,532	
5. Current Year	23,174									23,174	
6. Current Year Member Months	267,176									267,176	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	14,274,210									14,274,210	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	14,274,210									14,274,210	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	12,292,403									12,292,403	
18. Amount Incurred for Provision of Health Care Services	13,410,513									13,410,513	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$14,229,486

30.MD



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Massachusetts		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	28,045									28,045	
2. First Quarter	26,929									26,929	
3. Second Quarter	27,808									27,808	
4. Third Quarter	28,496									28,496	
5. Current Year	29,465									29,465	
6. Current Year Member Months	334,043									334,043	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	16,583,554									16,583,554	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	16,583,554									16,583,554	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	13,365,386									13,365,386	
18. Amount Incurred for Provision of Health Care Services	15,364,336									15,364,336	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$16,583,554

30.MA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Michigan		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	49,744									49,744	
2. First Quarter	49,730									49,730	
3. Second Quarter	51,600									51,600	
4. Third Quarter	53,397									53,397	
5. Current Year	55,922									55,922	
6. Current Year Member Months	623,470									623,470	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	27,461,220									27,461,220	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	27,461,220									27,461,220	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	21,943,669									21,943,669	
18. Amount Incurred for Provision of Health Care Services	24,244,024									24,244,024	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$27,288,453

30.MI



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Minnesota		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	578									578	
2. First Quarter	528									528	
3. Second Quarter	520									520	
4. Third Quarter	509									509	
5. Current Year	499									499	
6. Current Year Member Months	6,233									6,233	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	921,296									921,296	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	921,296									921,296	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	887,670									887,670	
18. Amount Incurred for Provision of Health Care Services	865,248									865,248	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$921,296

30.MN



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Mississippi		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	12,123									12,123	
2. First Quarter	11,716									11,716	
3. Second Quarter	12,190									12,190	
4. Third Quarter	12,531									12,531	
5. Current Year	13,242									13,242	
6. Current Year Member Months	146,815									146,815	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	9,026,025									9,026,025	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	9,026,025									9,026,025	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	7,459,046									7,459,046	
18. Amount Incurred for Provision of Health Care Services	8,365,684									8,365,684	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$8,980,224

30.MS



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Missouri		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,227									1,227	
2. First Quarter	1,513									1,513	
3. Second Quarter	1,509									1,509	
4. Third Quarter	1,475									1,475	
5. Current Year	1,517									1,517	
6. Current Year Member Months	18,036									18,036	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	711,194									711,194	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	711,194									711,194	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	698,714									698,714	
18. Amount Incurred for Provision of Health Care Services	687,772									687,772	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$582,667

30.MO



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Montana		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	136									136	
2. First Quarter	272									272	
3. Second Quarter	268									268	
4. Third Quarter	266									266	
5. Current Year	270									270	
6. Current Year Member Months	3,246									3,246	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	237,043									237,043	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	237,043									237,043	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	239,050									239,050	
18. Amount Incurred for Provision of Health Care Services	220,488									220,488	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$235,300

30.MT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Nebraska		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	499									499	
2. First Quarter	556									556	
3. Second Quarter	544									544	
4. Third Quarter	509									509	
5. Current Year	505									505	
6. Current Year Member Months	6,420									6,420	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	381,117									381,117	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	381,117									381,117	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	350,492									350,492	
18. Amount Incurred for Provision of Health Care Services	351,561									351,561	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$346,563

30.NE



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Nevada		DURING THE YEAR 2019							NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other		
		2 Individual	3 Group									
Total Members at end of:												
1. Prior Year	460									460		
2. First Quarter	508									508		
3. Second Quarter	515									515		
4. Third Quarter	534									534		
5. Current Year	565									565		
6. Current Year Member Months	6,415									6,415		
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	409,324									409,324		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	409,324									409,324		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	376,800									376,800		
18. Amount Incurred for Provision of Health Care Services	385,371									385,371		

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$398,898

30.NV



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Hampshire		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	12,112									12,112	
2. First Quarter	11,484									11,484	
3. Second Quarter	11,863									11,863	
4. Third Quarter	12,206									12,206	
5. Current Year	12,655									12,655	
6. Current Year Member Months	143,120									143,120	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	6,738,613									6,738,613	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	6,738,613									6,738,613	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	5,320,386									5,320,386	
18. Amount Incurred for Provision of Health Care Services	6,069,850									6,069,850	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$6,727,017

30.NH



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Jersey		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,861									1,861	
2. First Quarter	2,142									2,142	
3. Second Quarter	2,096									2,096	
4. Third Quarter	2,069									2,069	
5. Current Year	2,034									2,034	
6. Current Year Member Months	25,159									25,159	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	2,587,428									2,587,428	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	2,587,428									2,587,428	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,411,585									2,411,585	
18. Amount Incurred for Provision of Health Care Services	2,429,990									2,429,990	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,585,412

30.NJ



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New Mexico		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	4,793									4,793	
2. First Quarter	5,442									5,442	
3. Second Quarter	5,407									5,407	
4. Third Quarter	5,530									5,530	
5. Current Year	5,760									5,760	
6. Current Year Member Months	66,068									66,068	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	3,774,110									3,774,110	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	3,774,110									3,774,110	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,629,990									2,629,990	
18. Amount Incurred for Provision of Health Care Services	2,996,545									2,996,545	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$3,761,581

30.NM



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF New York		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	36,447									36,447	
2. First Quarter	41,170									41,170	
3. Second Quarter	43,046									43,046	
4. Third Quarter	44,393									44,393	
5. Current Year	47,151									47,151	
6. Current Year Member Months	518,033									518,033	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	30,986,235									30,986,235	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	30,986,235									30,986,235	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	24,786,287									24,786,287	
18. Amount Incurred for Provision of Health Care Services	30,535,995									30,535,995	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$30,434,111

30.NY



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Carolina		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	39,135									39,135	
2. First Quarter	40,979									40,979	
3. Second Quarter	42,881									42,881	
4. Third Quarter	44,709									44,709	
5. Current Year	47,197									47,197	
6. Current Year Member Months	519,207									519,207	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	24,391,479									24,391,479	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	24,391,479									24,391,479	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	18,820,958									18,820,958	
18. Amount Incurred for Provision of Health Care Services	22,782,444									22,782,444	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$24,105,640

30.NC



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF North Dakota		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	159									159	
2. First Quarter	155									155	
3. Second Quarter	151									151	
4. Third Quarter	144									144	
5. Current Year	139									139	
6. Current Year Member Months	1,742									1,742	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	180,657									180,657	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	180,657									180,657	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	156,155									156,155	
18. Amount Incurred for Provision of Health Care Services	154,230									154,230	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$166,600

30.ND



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2019							NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other		
		2 Individual	3 Group									
Total Members at end of:												
1. Prior Year	42,525									42,525		
2. First Quarter	49,108									49,108		
3. Second Quarter	51,335									51,335		
4. Third Quarter	54,019									54,019		
5. Current Year	58,349									58,349		
6. Current Year Member Months	625,305									625,305		
Total Member Ambulatory Encounters for Year:												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	29,557,822									29,557,822		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	29,557,822									29,557,822		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	21,955,416									21,955,416		
18. Amount Incurred for Provision of Health Care Services	26,487,387									26,487,387		

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$29,466,841

30.0H



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Oklahoma		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,276									1,276	
2. First Quarter	1,243									1,243	
3. Second Quarter	1,226									1,226	
4. Third Quarter	1,195									1,195	
5. Current Year	1,174									1,174	
6. Current Year Member Months	14,735									14,735	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	854,749									854,749	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	854,749									854,749	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	750,335									750,335	
18. Amount Incurred for Provision of Health Care Services	718,692									718,692	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$791,345

30.OK



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Oregon		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	27,936									27,936	
2. First Quarter	29,235									29,235	
3. Second Quarter	30,136									30,136	
4. Third Quarter	31,066									31,066	
5. Current Year	32,239									32,239	
6. Current Year Member Months	363,918									363,918	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	14,605,526									14,605,526	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	14,605,526									14,605,526	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	10,556,420									10,556,420	
18. Amount Incurred for Provision of Health Care Services	12,006,169									12,006,169	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$14,600,240

30. OR



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Pennsylvania		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	80,905									80,905	
2. First Quarter	85,943									85,943	
3. Second Quarter	88,514									88,514	
4. Third Quarter	91,268									91,268	
5. Current Year	94,628									94,628	
6. Current Year Member Months	1,069,649									1,069,649	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	49,183,234									49,183,234	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	49,183,234									49,183,234	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	39,246,039									39,246,039	
18. Amount Incurred for Provision of Health Care Services	45,845,942									45,845,942	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$49,101,595

30.PA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Puerto Rico		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	45									45	
2. First Quarter	49									49	
3. Second Quarter	48									48	
4. Third Quarter	45									45	
5. Current Year	44									44	
6. Current Year Member Months	567									567	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	38,137									38,137	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	38,137									38,137	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	34,040									34,040	
18. Amount Incurred for Provision of Health Care Services	33,483									33,483	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$38,137

30.P.R



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Rhode Island		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	4,609									4,609	
2. First Quarter	4,352									4,352	
3. Second Quarter	4,533									4,533	
4. Third Quarter	4,627									4,627	
5. Current Year	4,836									4,836	
6. Current Year Member Months	54,458									54,458	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	2,465,481									2,465,481	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	2,465,481									2,465,481	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,044,669									2,044,669	
18. Amount Incurred for Provision of Health Care Services	2,258,862									2,258,862	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,383,942

30.RI



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Carolina		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	22,437									22,437	
2. First Quarter	25,366									25,366	
3. Second Quarter	25,968									25,968	
4. Third Quarter	26,577									26,577	
5. Current Year	27,453									27,453	
6. Current Year Member Months	313,131									313,131	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	17,703,885									17,703,885	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	17,703,885									17,703,885	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	14,323,017									14,323,017	
18. Amount Incurred for Provision of Health Care Services	16,463,799									16,463,799	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$17,636,413

30.S.C



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF South Dakota		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	170									170	
2. First Quarter	205									205	
3. Second Quarter	206									206	
4. Third Quarter	214									214	
5. Current Year	221									221	
6. Current Year Member Months	2,543									2,543	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	233,699									233,699	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	233,699									233,699	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	229,630									229,630	
18. Amount Incurred for Provision of Health Care Services	219,972									219,972	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$187,508

30.SD



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Tennessee		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	1,772									1,772	
2. First Quarter	2,112									2,112	
3. Second Quarter	2,071									2,071	
4. Third Quarter	2,088									2,088	
5. Current Year	2,099									2,099	
6. Current Year Member Months	24,876									24,876	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	2,150,339									2,150,339	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	2,150,339									2,150,339	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	1,914,600									1,914,600	
18. Amount Incurred for Provision of Health Care Services	1,928,057									1,928,057	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$1,903,869

30.TN



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Texas		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	9,771									9,771	
2. First Quarter	6,286									6,286	
3. Second Quarter	6,173									6,173	
4. Third Quarter	5,875									5,875	
5. Current Year	5,835									5,835	
6. Current Year Member Months	73,116									73,116	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	6,983,700									6,983,700	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	6,983,700									6,983,700	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	5,897,136									5,897,136	
18. Amount Incurred for Provision of Health Care Services	6,019,891									6,019,891	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$6,188,985

30.TX



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Utah		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	2,710									2,710	
2. First Quarter	2,632									2,632	
3. Second Quarter	2,537									2,537	
4. Third Quarter	2,410									2,410	
5. Current Year	2,373									2,373	
6. Current Year Member Months	30,182									30,182	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	2,786,558									2,786,558	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	2,786,558									2,786,558	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,411,156									2,411,156	
18. Amount Incurred for Provision of Health Care Services	2,240,027									2,240,027	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,770,823

30.UT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Vermont		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	6,312									6,312	
2. First Quarter	6,478									6,478	
3. Second Quarter	6,615									6,615	
4. Third Quarter	6,762									6,762	
5. Current Year	6,932									6,932	
6. Current Year Member Months	79,796									79,796	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	2,848,283									2,848,283	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	2,848,283									2,848,283	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,328,851									2,328,851	
18. Amount Incurred for Provision of Health Care Services	2,592,193									2,592,193	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,847,620

30.VT



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Virginia		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	3,023									3,023	
2. First Quarter	3,636									3,636	
3. Second Quarter	3,514									3,514	
4. Third Quarter	3,496									3,496	
5. Current Year	3,428									3,428	
6. Current Year Member Months	42,544									42,544	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	2,925,697									2,925,697	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	2,925,697									2,925,697	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	2,715,760									2,715,760	
18. Amount Incurred for Provision of Health Care Services	2,613,851									2,613,851	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$2,757,863

30.VA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Washington		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	46,454									46,454	
2. First Quarter	47,745									47,745	
3. Second Quarter	47,995									47,995	
4. Third Quarter	49,150									49,150	
5. Current Year	50,920									50,920	
6. Current Year Member Months	578,759									578,759	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	25,106,832									25,106,832	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	25,106,832									25,106,832	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	20,561,495									20,561,495	
18. Amount Incurred for Provision of Health Care Services	22,591,559									22,591,559	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$25,106,832

30.WA



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF West Virginia		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	11,855									11,855	
2. First Quarter	11,371									11,371	
3. Second Quarter	11,470									11,470	
4. Third Quarter	11,473									11,473	
5. Current Year	11,681									11,681	
6. Current Year Member Months	137,320									137,320	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	8,239,781									8,239,781	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	8,239,781									8,239,781	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	7,416,829									7,416,829	
18. Amount Incurred for Provision of Health Care Services	7,699,917									7,699,917	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$8,223,605

30.WV



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wisconsin		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	8,437									8,437	
2. First Quarter	8,725									8,725	
3. Second Quarter	8,820									8,820	
4. Third Quarter	9,065									9,065	
5. Current Year	9,375									9,375	
6. Current Year Member Months	107,162									107,162	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b)	9,923,317									9,923,317	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	9,923,317									9,923,317	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	8,231,263									8,231,263	
18. Amount Incurred for Provision of Health Care Services	8,783,324									8,783,324	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$9,883,796

30.W1



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Wyoming		DURING THE YEAR 2019						NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other	
		2 Individual	3 Group								
Total Members at end of:											
1. Prior Year	138									138	
2. First Quarter	186									186	
3. Second Quarter	186									186	
4. Third Quarter	221									221	
5. Current Year	189									189	
6. Current Year Member Months	2,373									2,373	
Total Member Ambulatory Encounters for Year:											
7. Physician	0										
8. Non-Physician	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b).....	176,117									176,117	
13. Life Premiums Direct.....	0										
14. Property/Casualty Premiums Written.....	0										
15. Health Premiums Earned.....	176,117									176,117	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services	139,433									139,433	
18. Amount Incurred for Provision of Health Care Services	156,640									156,640	

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

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$165,202

30.WY



ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Envision Insurance Company

2.

(LOCATION)

NAIC Group Code	00000	BUSINESS IN THE STATE OF Consolidated		DURING THE YEAR 2019							NAIC Company Code	12747
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other		
		2 Individual	3 Group									
Total Members at end of:												
1. Prior Year	598,216	0	0	0	0	0	0	0	0	598,216		
2. First Quarter	640,253	0	0	0	0	0	0	0	0	640,253		
3. Second Quarter	663,046	0	0	0	0	0	0	0	0	663,046		
4. Third Quarter	687,261	0	0	0	0	0	0	0	0	687,261		
5. Current Year	721,811	0	0	0	0	0	0	0	0	721,811		
6. Current Year Member Months	8,020,563	0	0	0	0	0	0	0	0	8,020,563		
Total Member Ambulatory Encounters for Year:												
7. Physician	0	0	0	0	0	0	0	0	0	0		
8. Non-Physician	0	0	0	0	0	0	0	0	0	0		
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0		
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0		
12. Health Premiums Written (b)	442,808,620	0	0	0	0	0	0	0	0	442,808,620		
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0		
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0		
15. Health Premiums Earned	442,808,620	0	0	0	0	0	0	0	0	442,808,620		
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0		
17. Amount Paid for Provision of Health Care Services	352,828,205	0	0	0	0	0	0	0	0	352,828,205		
18. Amount Incurred for Provision of Health Care Services	403,804,689	0	0	0	0	0	0	0	0	403,804,689		

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$437,070,456

30.GT

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE S - PART 1 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type Of Reinsurance Assumed	7 Type Of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other Than For Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
NONE												
9999999 Totals							0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE S - PART 3 - SECTION 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
82627	06-0839705	01/01/2015	SWISS RE LIFE & HLTH AMER INC.	MO		MD	58,007						
82627	06-0839705	01/01/2015	SWISS RE LIFE & HLTH AMER INC.	MO		MD	(425)						
88340	59-2859797	07/01/2008	HANNOVER LIFE REASSUR CO OF AMER.	FL		MD	(449)						
88340	59-2859797	01/01/2009	HANNOVER LIFE REASSUR CO OF AMER.	FL		MD	(3,031)						
0899999 - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates							54,102	0	0	0	0	0	0
1099999 - General Account - Authorized - Non-Affiliates - Total Authorized Non-Affiliates							54,102	0	0	0	0	0	0
1199999 - General Account - Authorized - Total General Account Authorized							54,102	0	0	0	0	0	0
General Account - Unauthorized - Non-Affiliates - U.S. Non-Affiliates													
		01/01/2017	PRAM Captive Insurance Company	NC		MD	1,323,885						
1999999 - General Account - Unauthorized - Non-Affiliates - U.S. Non-Affiliates							1,323,885	0	0	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates													
		01/01/2017	Artex SAC Ltd/Fleet ENX Segregated Acct	BMU		MD	16,454,234						
2099999 - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates							16,454,234	0	0	0	0	0	0
2199999 - General Account - Unauthorized - Non-Affiliates - Total Unauthorized Non-Affiliates							17,778,119	0	0	0	0	0	0
2299999 - General Account - Unauthorized - Total General Account Unauthorized							17,778,119	0	0	0	0	0	0
3499999 - General Account - Total General Account Authorized, Unauthorized and Certified							17,832,221	0	0	0	0	0	0
6999999 - Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							1,377,987	0	0	0	0	0	0
7099999 - Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							16,454,234	0	0	0	0	0	0
9999999 Totals							17,832,221	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5+6+7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols 9+11+12+13+14 but not in Excess of Col. 8
General Account - Accident and Health - Non-Affiliates - U.S. Non-Affiliates														
		01/01/2017	PRAM Captive Insurance Company		120,000	47,685	167,685				100,000		187,030	167,685
1999999			General Account - Accident and Health - Non-Affiliates - U.S. Non-Affiliates	0	120,000	47,685	167,685	0	XXX	0	100,000	0	187,030	167,685
General Account - Accident and Health - Non-Affiliates - Non-U.S. Non-Affiliates														
		01/01/2017	Artex SAC Ltd/Fleet ENX Segregated Acct		668,532	8,475	677,007	500,000			3,708,574		165,391	677,007
2099999			General Account - Accident and Health - Non-Affiliates - Non-U.S. Non-Affiliates	0	668,532	8,475	677,007	500,000	XXX	0	3,708,574	0	165,391	677,007
2199999			General Account - Accident and Health - Non-Affiliates - Total Non-Affiliates	0	788,532	56,160	844,692	500,000	XXX	0	3,808,574	0	352,421	844,692
2299999			General Account - Accident and Health - Total Accident and Health	0	788,532	56,160	844,692	500,000	XXX	0	3,808,574	0	352,421	844,692
2399999			General Account - Total General Account	0	788,532	56,160	844,692	500,000	XXX	0	3,808,574	0	352,421	844,692
3599999			Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)	0	120,000	47,685	167,685	0	XXX	0	100,000	0	187,030	167,685
3699999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)	0	668,532	8,475	677,007	500,000	XXX	0	3,708,574	0	165,391	677,007
9999999 Totals														
				0	788,532	56,160	844,692	500,000	XXX	0	3,808,574	0	352,421	844,692

34

(a)	Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0000001				Goldman Sachs Lending Partners LLC	500,000

SCHEDULE S – PART 6

Five-Year Exhibit of Reinsurance Ceded Business
(\$000 Omitted)

	1 2019	2 2018	3 2017	4 2016	5 2015
A. OPERATIONS ITEMS					
1. Premiums.....	17,832	8,868	170,559	225,610	223,598
2. Title XVIII-Medicare.....	0	0	0	0	0
3. Title XIX-Medicaid.....	0	0	0	0	0
4. Commissions and reinsurance expense allowance.....	0	0	0	0	0
5. Total hospital and medical expenses.....	11,545	8,745	154,493	221,136	213,356
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....	0	0	0	0	0
7. Claims payable.....	789	641	23,531	4,506	3,949
8. Reinsurance recoverable on paid losses.....	0	0	0	0	0
9. Experience rating refunds due or unpaid.....	0	0	0	0	0
10. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
11. Unauthorized reinsurance offset.....	3,809	5,914	3,738	0	0
12. Offset for reinsurance with Certified Reinsurers.....	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F).....	3,809	5,914	3,738	0	0
14. Letters of credit (L).....	500	500	500	0	0
15. Trust agreements (T).....	0	0	0	0	0
16. Other (O).....	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust.....	0	0	0	0	0
18. Funds deposited by and withheld from (F).....	0	0	0	0	0
19. Letters of credit (L).....	0	0	0	0	0
20. Trust agreements (T).....	0	0	0	0	0
21. Other (O).....	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	150,168,463		150,168,463
2. Accident and health premiums due and unpaid (Line 15).....	163,220,447		163,220,447
3. Amounts recoverable from reinsurers (Line 16.1).....	0		0
4. Net credit for ceded reinsurance.....	XXX	(3,930,950)	(3,930,950)
5. All other admitted assets (Balance).....	390,881,300	(964,218)	389,917,082
6. Total assets (Line 28)	704,270,210	(4,895,168)	699,375,042
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	178,682,051	788,532	179,470,583
8. Accrued medical incentive pool and bonus payments (Line 2).....	0		0
9. Premiums received in advance (Line 8).....	3,023,811		3,023,811
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount).....	3,808,575	(3,808,575)	0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount).....	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount).....	0		0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount).....	0		0
14. All other liabilities (Balance).....	463,973,876	(1,875,125)	462,098,751
15. Total liabilities (Line 24).....	649,488,313	(4,895,168)	644,593,145
16. Total capital and surplus (Line 33).....	54,781,897	XXX	54,781,897
17. Total liabilities, capital and surplus (Line 34)	704,270,210	(4,895,168)	699,375,042
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid.....	788,532		
19. Accrued medical incentive pool.....	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	0		
22. Other ceded reinsurance recoverables	964,218		
23. Total ceded reinsurance recoverables	1,752,750		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	3,808,575		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers.....	0		
28. Funds held under reinsurance treaties with Certified Reinsurers.....	0		
29. Other ceded reinsurance payables/offsets	1,875,125		
30. Total ceded reinsurance payables/offsets	5,683,700		
31. Total net credit for ceded reinsurance	(3,930,950)		

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL					0
2. Alaska	AK					0
3. Arizona	AZ					0
4. Arkansas	AR					0
5. California	CA					0
6. Colorado	CO					0
7. Connecticut	CT					0
8. Delaware	DE					0
9. District of Columbia	DC					0
10. Florida	FL					0
11. Georgia	GA					0
12. Hawaii	HI					0
13. Idaho	ID					0
14. Illinois	IL					0
15. Indiana	IN					0
16. Iowa	IA					0
17. Kansas	KS					0
18. Kentucky	KY					0
19. Louisiana	LA					0
20. Maine	ME					0
21. Maryland	MD					0
22. Massachusetts	MA					0
23. Michigan	MI					0
24. Minnesota	MN					0
25. Mississippi	MS					0
26. Missouri	MO					0
27. Montana	MT					0
28. Nebraska	NE					0
29. Nevada	NV					0
30. New Hampshire	NH					0
31. New Jersey	NJ					0
32. New Mexico	NM					0
33. New York	NY					0
34. North Carolina	NC					0
35. North Dakota	ND					0
36. Ohio	OH					0
37. Oklahoma	OK					0
38. Oregon	OR					0
39. Pennsylvania	PA					0
40. Rhode Island	RI					0
41. South Carolina	SC					0
42. South Dakota	SD					0
43. Tennessee	TN					0
44. Texas	TX					0
45. Utah	UT					0
46. Vermont	VT					0
47. Virginia	VA					0
48. Washington	WA					0
49. West Virginia	WV					0
50. Wisconsin	WI					0
51. Wyoming	WY					0
52. American Samoa	AS					0
53. Guam	GU					0
54. Puerto Rico	PR					0
55. US Virgin Islands	VI					0
56. Northern Mariana Islands	MP					0
57. Canada	CAN					0
58. Aggregate Other Alien	OT					0
59. Totals		0	0	0	0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

**SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
			23-1614034		84129	NYSE	Rite Aid Corporation	DE	UDP	Board of Directors	Board of Directors	100.0	Rite Aid Corporation	N	.0
			90-1011712				Hunter Lane, LLC	DE	NIA	Rite Aid Corporation	Ownership	100.0	Rite Aid Corporation	N	.0
			26-0676699				Envision Pharmaceutical Holdings LLC	DE	NIA	Hunter Lane, LLC	Ownership	100.0	Rite Aid Corporation	N	.0
		12747	20-4308924				Envision Insurance Company	OH	RE	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			34-1939227				Rx Options, LLC	OH	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			34-4221427				MedTrak Services, LLC	MO	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			05-0570786				Envision Pharmaceutical Services, LLC	OH	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			88-0511398				Envision Pharmaceutical Services, LLC	NV	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			20-3389462				Envision Medical Solutions, LLC	FL	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			26-2434607				Orchard Pharmaceutical Services, LLC	OH	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			59-2798509				First Florida Insurers of Tampa, LLC	OH	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			59-3760021				Advance Benefits, LLC	FL	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			27-4368094				Design Rx Holdings LLC	DE	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			20-1369429				Design Rx, LLC	WY	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			20-5166645				Design Rxclusives, LLC	WY	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			20-3649446				Rx Initiatives L.L.C.	UT	NIA	Design Rx Holdings Corporation, LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			45-4806467				Ascend Health Technology LLC	DE	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0
			41-1924169				Laker Software, LLC	MN	NIA	Envision Pharmaceutical Holdings LLC	Ownership	100.0	Rite Aid Corporation	N	.0

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	59-2798509	First Florida Insurers of Tampa, LLC					386,633				386,633	
	34-1939227	Rx Options, LLC					1,731,063,001				1,731,063,001	
12747	20-4308924	Envision Insurance Company					(1,732,955,852)				(1,732,955,852)	
	26-0676699	Envision Pharmaceutical Holdings LLC					1,506,218				1,506,218	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

- | | <u>Responses</u> |
|---|------------------|
| 1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? |YES..... |
| 2. Will an actuarial opinion be filed by March 1? |YES..... |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? |YES..... |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? |YES..... |

APRIL FILING

- | | |
|--|---------------|
| 5. Will Management's Discussion and Analysis be filed by April 1? |YES..... |
| 6. Will the Supplemental Investment Risks Interrogatories be filed by April 1? |YES..... |
| 7. Will the Accident and Health Policy Experience Exhibit be filed by April 1? |YES..... |

JUNE FILING

- | | |
|--|---------------|
| 8. Will an audited financial report be filed by June 1? |YES..... |
| 9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? |YES..... |

AUGUST FILING

- | | |
|---|---------------|
| 10. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? |YES..... |
|---|---------------|

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

MARCH FILING

- | | |
|--|---------------------------|
| 11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? |NO..... |
| 12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? |NO..... |
| 13. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? |SEE EXPLANATION..... |
| 14. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? |NO..... |
| 15. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1? |NO..... |
| 16. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? |YES..... |
| 17. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? |NO..... |
| 18. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? |NO..... |
| 19. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed with electronically with the NAIC by March 1? |NO..... |

APRIL FILING

- | | |
|---|---------------------------|
| 20. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? |NO..... |
| 21. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? |NO..... |
| 22. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? |YES..... |
| 23. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1? |YES..... |
| 24. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? |SEE EXPLANATION..... |
| 25. Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with the state of domicile and the NAIC by April 1? |SEE EXPLANATION..... |

AUGUST FILING

- | | |
|--|---------------------------|
| 26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? |SEE EXPLANATION..... |
|--|---------------------------|

Explanation:

11. The Company does not offer Medicare Supplement Insurance.
12. The Company does not offer Life Insurance.
13. The Company has less than 100 shareholders
14. The Company does not write Life Insurance.
15. The Company does not write Life Insurance.
17. Not Applicable.
18. Not Applicable.
19. Not Applicable.
20. The Company does not write Long-term Care Insurance.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

21. Not Required

24. Not Required by state of Ohio

25. Not Required by state of Ohio

26. None Required.

Bar code:

11. 
1 2 7 4 7 2 0 1 9 3 6 0 5 9 0 0 0

12. 
1 2 7 4 7 2 0 1 9 2 0 5 0 0 0 0 0

14. 
1 2 7 4 7 2 0 1 9 3 7 1 0 0 0 0 0

15. 
1 2 7 4 7 2 0 1 9 3 7 0 0 0 0 0 0

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21. 
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OVERFLOW PAGE FOR WRITE-INS



**SUPPLEMENT FOR THE YEAR 2019 OF THE Envision Insurance Company
MEDICARE PART D COVERAGE SUPPLEMENT**

(Net of Reinsurance)
(To Be Filed By March 1)

NAIC Group Code

00000

NAIC Company Code

12747

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage.....	253,862,529	XXX	18,856,519	XXX	272,719,048
1.12 Without Reinsurance Coverage.....		XXX		XXX	0
1.13 Risk-Corridor Payment Adjustments.....	120,220,906	XXX		XXX	120,220,906
1.2 Supplemental Benefits.....		XXX		XXX	0
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage.....	122,271	XXX		XXX	XXX
2.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
2.2 Supplemental Benefits.....		XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage.....		XXX		XXX	XXX
3.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
3.2 Supplemental Benefits.....		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable.....	30,590,289	XXX		XXX	XXX
4.2 Payable.....		XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage.....	253,984,800	XXX	18,856,519	XXX	XXX
5.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
5.13 Risk-Corridor Payment Adjustments.....	150,811,196	XXX		XXX	XXX
5.2 Supplemental Benefits.....		XXX		XXX	XXX
6. Total Premiums.....	404,795,996	XXX	18,856,519	XXX	392,939,954
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage.....	328,210,277	XXX	12,561,112	XXX	340,771,389
7.12 Without Reinsurance Coverage.....		XXX		XXX	0
7.2 Supplemental Benefits.....		XXX		XXX	0
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage.....	48,893,063	XXX	1,871,213	XXX	XXX
8.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
8.2 Supplemental Benefits.....		XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage.....		XXX		XXX	XXX
9.12 Without Reinsurance Coverage.....		XXX		XXX	XXX
9.2 Supplemental Benefits.....		XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage.....	377,103,340	XXX	14,432,325	XXX	XXX
10.12 Without Reinsurance Coverage.....	0	XXX	0	XXX	XXX
10.2 Supplemental Benefits.....	0	XXX	0	XXX	XXX
11. Total Claims	377,103,340	XXX	14,432,325	XXX	340,771,389
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid – Net To Reimbursements Applied.....	XXX	140,692,217	XXX	6,553,833	147,246,050
12.2 Reimbursements Received but Not Applied-change.....	XXX		XXX		0
12.3 Reimbursements Receivable-change.....	XXX		XXX		XXX
12.4 Health Care Receivables-change.....	XXX		XXX		XXX
13. Aggregate Policy Reserves-change.....					XXX
14. Expenses Paid.....	25,686,497	XXX	425,025	XXX	26,111,522
15. Expenses Incurred.....	23,185,195	XXX	383,637	XXX	XXX
16. Underwriting Gain/Loss.....	4,507,461	XXX	4,040,557	XXX	XXX
17. Cash Flow Result	XXX	XXX	XXX	XXX	(121,189,007)

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