

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE
BLUE CROSS OF IDAHO CARE PLUS, INC.

NAIC Group Code		y Code 15022 Employer's ID Number 46-2066513
Owner is a down down that I amount	(Current) (Prior)	State of Domicile or Port of Entry ID
Country of Domicile	119	State of Dofficile of Port of Entry
		Is HMO Federally Qualified?
Incorporated/Organized	02/19/2013	Commenced Business 02/21/2013
		Meridian, ID, US 83642
Main Administrative Office		
	Meridian, ID, US 83642	(208)-345-4550
		(Telephone)
	3000 E Pine Ave	Meridian, ID, US 83642
Primary Location of Books and Records	3000 E Pine Ave	
Records		(208)-345-4550
		(Telephone)
Internet Website Address	bcidaho.com	
Statutory Statement Contact	Alison R. Gale	(986)-224-4004
		(Telephone)
		(208)-331-7618
	(E-Mail)	(Fax)
		OFFICERS
Paul G. Zurlo, President		
Mark T. Kohler, Secretary		
	DIRECT	TORS OR TRUSTEES
Candice D. Allphin		
Drew E. Hobby		
Alicia A. Ritter		David M. Ward
Paul G. Zurlo		
on the reporting period stated abording liens or claims thereon, except contained, annexed or referred to entity as of the reporting period succordance with the NAIC Annual law may differ; or, (2) that state into the best of their information, kincludes the related corresponding	ty being duly sworn, each depose ove, all of the herein described as pt as herein stated, and that this s , is a full and true statement of a stated above, and of its income and I Statement Instructions and Accules or regulations require differe nowledge and belief, respectively ng electronic filing with the NAIC,	e and say that they are the described officers of said reporting entity, and that seets were the absolute property of the said reporting entity, free and clear from statement, together with related exhibits, schedules and explanations therein II the assets and liabilities and of the condition and affairs of the said reporting nd deductions therefrom for the period ended, and have been completed in counting Practices and Procedures manual except to the extent that: (1) state ences in reporting not related to accounting practices and procedures, according in Furthermore, the scope of this attestation by the described officers also when required, that is an exact copy (except for formatting differences due to may be requested by various regulators in lieu of or in addition to the enclosed
aul G. Zurlo	Marc F. Roberts	Mark T. Kohler
President	Treasurer	Secretary
Subscribed and sworn to before r	day of	a. Is this an original filing? Yes b. If no: 1. State the amendment number: 2. Date filed: 3. Number of pages attached:
	- 500001	

ASSETS

	ASSETS				
			Current Year		Prior Year
		1	2	3	4
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1.	Bonds (Schedule D)	125,510,659		125,510,659	
2.	Stocks (Schedule D):	120,010,000		120,010,000	
	2.1 Preferred stocks	661 012		661 012	1 008 487
	2.2 Common stocks				42,181,045
3.	Mortgage loans on real estate (Schedule B):	0,400,407		0,400,407	
0.	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$ encumbrances)				
	4.2 Properties held for the production of income (less \$ encumbrances)				
	4.3 Properties held for sale (less \$ encumbrances)				
5.	Cash (\$2,277,318, Schedule E - Part 1), cash equivalents (\$450,278, Schedule E - Part 2) and short-term investments (\$4,965,758, Schedule DA)	7,693,354		7,693,354	5,136,249
6.	Contract loans (including \$ premium notes)				
7.	Derivatives (Schedule DB)				
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets (Schedule DL)				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)				
13.	Title plants less \$ charged off (for Title insurers only)				
14.	Investment income due and accrued	812,798		812,798	1,173,115
15.	Premiums and considerations:				
	 15.1 Uncollected premiums and agents' balances in the course of collection	322,384			
	15.3 Accrued retrospective premiums (\$23,442,512) and contracts subject to redetermination (\$21,228,300)	44,670,812		44,670,812	16,996,936
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				
	16.2 Funds held by or deposited with reinsured companies				
	16.3 Other amounts receivable under reinsurance contracts				
	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software				
21.	Furniture and equipment, including health care delivery assets (\$)				
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				1,579,199
24.	Health care (\$39,572,846) and other amounts receivable				36,148,050
25.	Aggregate write-ins for other-than-invested assets	1,542,031	1,542,031	–	–
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)		25,600,582		301,417,612
	· · · · · · · · · · · · · · · · · · ·	607,283,322			301,417,612
28.	Is of Write-Ins	007,203,322	25,600,582	301,002,740	301,417,012
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
	• •				
	Cummany of remaining write ine feet line 25 from everflow nego				
	Summary of remaining write-ins for Line 25 from overflow page				
Z399.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	1,542,031	1,542,031		

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPITAL AN			Prior Year	
		1	Current Year 2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$ reinsurance ceded)			154,534,111	
	Accrued medical incentive pool and bonus amounts			859,755	
	Unpaid claims adjustment expenses			2,764,000	
4.	Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act				
	Aggregate life policy reserves				
	Property/casualty unearned premium reserves				
	Aggregate health claim reserves				
	Premiums received in advance				
	General expenses due or accrued				
10 1	Current federal and foreign income tay navable and interest thereon (including				
	\$ on realized capital gains (losses))	790.820		790.820	17.104.146
	Net deferred tax liability				
	Ceded reinsurance premiums payable				
	Amounts withheld or retained for the account of others				
	Remittances and items not allocated				
	Borrowed money (including \$ current) and interest thereon \$ (including				
	\$ current)				
	Amounts due to parent, subsidiaries and affiliates				
	Derivatives			· · · · · · · · · · · · · · · · · · ·	
	Payable for securities				
	Payable for securities lending				
	Funds held under reinsurance treaties (with \$ authorized reinsurers, \$				
	unauthorized reinsurers and \$ certified reinsurers)				
	Reinsurance in unauthorized and certified (\$) companies				
	Net adjustments in assets and liabilities due to foreign exchange rates				
	Liability for amounts held under uninsured plans				
	Aggregate write-ins for other liabilities (including \$ current)				
24.	Total liabilities (Lines 1 to 23)	544.288.392		544.288.392	196.621.863
	Aggregate write-ins for special surplus funds				
	Common capital stock				
	Preferred capital stock				
28.	Gross paid in and contributed surplus	XXX	XXX		
	Surplus notes.				
	Aggregate write-ins for other-than-special surplus funds				
	Unassigned funds (surplus).				
	Less treasury stock, at cost:			(203,003,032)	34,/ 33,/43
	32.1 shares common (value included in Line 26 \$)	vvv	XXX		
	32.2 shares preferred (value included in Line 27 \$).		XXX		
				07.004.040	104705740
	Total capital and surplus (Lines 25 to 31 minus Line 32)			37,394,348	104,795,749
	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	581,682,740	301,417,612
	s of Write-Ins				
2302.					
	Summary of remaining write-ins for Line 23 from overflow page				
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)				
2501.		XXX			
2502.		XXX	XXX		
		XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page		XXX		
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)		XXX		
3001.		XXX	XXX		
3002.		XXX	XXX		
		xxx	XXX		
	Summary of remaining write-ins for Line 30 from overflow page		1001		
UU 70	,		XXX		

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AND EXPENS		nt Voor	Drior Voor
		1	nt Year	Prior Year 3
			2	· ·
		Uncovered	Total	Total
	Member Months			
	Net premium income (including \$ non-health premium income)			
	Change in unearned premium reserves and reserve for rate credits			
	Fee-for-service (net of \$ medical expenses)			
	Risk revenue			
6.	Aggregate write-ins for other health care related revenues.	XXX		
7.	Aggregate write-ins for other non-health revenues.			
8.	Total revenues (Lines 2 to 7)	XXX	1,057,434,958	974,500,825
Hospi	tal and Medical:			
9.	Hospital/medical benefits		719,442,029	620,547,828
	Other professional services			
	Outside referrals.			
	Emergency room and out-of-area			
	Prescription drugs			
	Aggregate write-ins for other hospital and medical			
	Incentive pool, withhold adjustments and bonus amounts			
	Subtotal (Lines 9 to 15)		1,099,201,653	8/8,586,/55
Less:				
	Net reinsurance recoveries.			
18.	Total hospital and medical (Lines 16 minus 17)		1,097,651,867	878,429,432
19.	Non-health claims (net)			
20.	Claims adjustment expenses, including \$35,389,290 cost containment expenses		60,530,762	50,597,848
21.	General administrative expenses		91,175,667	77,532,432
	Increase in reserves for life and accident and health contracts (including \$ increase in reserves			
	for life only)		219,400,000	32,500,000
	Total underwriting deductions (Lines 18 through 22)			
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	YYY	(411 323 338)	(64 558 887)
	Net investment income earned (Exhibit of Net Investment Income, Line 17)			
	Net realized capital gains (losses) less capital gains tax of \$			
	Net investment gains (losses) (Lines 25 plus 26)		8,264,417	1,600,645
	(amount charged off \$)].			
	Aggregate write-ins for other income or expenses			
	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(403 058 921)	(62 958 242)
	Federal and foreign income taxes incurred			
	Net income (loss) (Lines 30 minus 31)			
			(386,745,595)	(53,754,051)
	s of Write-Ins	V004		
		XXX		
		XXX		
		XXX		
	Summary of remaining write-ins for Line 6 from overflow page			
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)			
0701.		XXX		
0702.		XXX		
0703.		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX		
	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX		
				• • • • • • • • • • • • • • • • • • • •
				•••••
	Summary of remaining write-ins for Line 14 from overflow page			• • • • • • • • • • • • • • • • • • • •
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			• • • • • • • • • • • • • • • • • • • •
2903.				
	Summary of remaining write-ins for Line 29 from overflow page			
2000	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)		1	

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

		1	2
	CAPITAL & SURPLUS ACCOUNT	Current Year	
33.	Capital and surplus prior reporting year	104,795,749	158,866,235
34.	Net income or (loss) from Line 32		
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$(135,067)		
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax	46,335,573	6,947,205
39.	Change in nonadmitted assets	516,736	(9,850,558
40.	Change in unauthorized and certified reinsurance.		
41.	Change in treasury stock		
42.	Change in surplus notes.	273,000,000	–
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in		
	44.2 Transferred from surplus (Stock Dividend)		
	44.3 Transferred to surplus		
45.	Surplus adjustments:		
	45.1 Paid in		
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus		
48.	Net change in capital and surplus (Lines 34 to 47)	(67,401,400)	(54,070,486
49.	Capital and surplus end of reporting year (Line 33 plus 48)	37,394,348	104,795,749
Deta	nils of Write-Ins		
4701	1		
4702	2		
	3		
	8. Summary of remaining write-ins for Line 47 from overflow page		
	9. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)		

CASH FLOW

	CASH FLOW		
		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance		
2.	Net investment income	7,226,415	8,679,878
3.	Miscellaneous income	–	–
4.	Total (Lines 1 to 3)	1,036,792,772	1,007,207,100
5.	Benefit and loss related payments	1,068,299,159	909,254,338
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	145,234,534	128,743,069
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	–	
10.	Total (Lines 5 through 9)	1,213,533,693	1,037,997,406
11.	Net cash from operations (Line 4 minus Line 10)		
	Cash from Investments	(, , , , ,	(***)
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	71 438 113	68 074 050
	12.2 Stocks		
	12.3 Mortgage loans		
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	108,391,053	92,/33,208
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds		
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications	124,073	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	31,449,445	92,688,233
14.	Net increase / (decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	76,941,608	44,975
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	273,000,000	
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		(5,006,849
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	(170,643,582)	1,658,195
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)		
	Reconciliation of Cash, Cash Equivalents and Short-Term Investments		(2,0 12,00
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	2,557,106	(34,093,985
10. 19.	Cash, cash equivalents and short-term investments:	2,007,700	(0 4,0 70,700
1 2.	19.1 Beginning of year	5 126 240	20 220 225
	19.2 End of year (Line 18 plus Line 19.1)	/, /,093,355	5,136,250
	: Supplemental disclosures of cash flow information for non-cash transactions:		
20.0	0001. Premium Deficiency Reserve	251,900,000	32,500,000

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		/ \\ \/ \L		<u> </u>	0110 01		DOSINE							
	1	Comprehensiv Medi		4	5	6	7 Federal	8	9	10	11	12	13	14
		2	3				Employees							
				Medicare			Health Benefits	Title XVIII	Title XIX		Disability	Long-Term		Other Non-
	Total	Individual	Group	Supplement	Vision Only	Dental Only	Plan	Medicare	Medicaid	Credit A&H	Income	Care	Other Health	Health
Net premium income	1,044,370,248			17,319,561				764,500,380	262,550,307					
2. Change in unearned premium reserves and reserve for rate credit	13,064,710 .			(740,000).				(1,792,612)	15,597,322					
3. Fee-for-service (net of \$ medical expenses)														XXX
4. Risk revenue														XXX
5. Aggregate write-ins for other health care related revenues														XXX
6. Aggregate write-ins for other non-health care related revenues	1 057 101 050	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Lines 1 to 6)	1,057,434,958			16,579,561				762,707,768	278,147,629					VVV
Hospital/medical benefits Other professional services.	719,442,029 . 85,948,545			13,779,494				499,670,952 . 41,223,294	205,991,583 44,061,232					XXX
<u>'</u>	43,267,826			522,130				41,223,294	11,387,806					XXXXXX
Outside referrals Emergency room and out-of-area	19,781,219			522,130				31,357,890	4,629,622					XXX
12. Prescription drugs	230,263,230			1/7,324				230,015,942	247,288					XXX
Aggregate write-ins for other hospital and medical	200,200,200							200,010,742	∠41,∠00					XXX
Incentive pool, withhold adjustments and bonus amounts	498,804							498.804						XXX
15. Subtotal (Lines 8 to 14)	1,099,201,653			15,142,967				817,741,155	266,317,531					XXX
16. Net reinsurance recoveries	1,549,786			10,112,507				1,549,786	200,017,001					XXX
17. Total hospital and medical (Lines 15 minus 16)	1,097,651,867			15,142,967				816,191,369	266,317,531					XXX
18. Non-health claims (net)	,,	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	
19. Claims adjustment expenses including \$35,389,290 cost containment														
expenses	60,530,761			1,351,084				42,053,163	17,126,514					
20. General administrative expenses	91,175,669			4,076,426				75,404,595	11,694,648					
21. Increase in reserves for accident and health contracts	219,400,000			960,499				209,040,860	9,398,641					XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	1,468,758,297			21,530,976				1,142,689,987	304,537,334					
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(411,323,339).			(4,951,415)				(379,982,219)	(26,389,705)					
Details of Write-Ins														
0501.														XXX
0502.														XXX
0503.														XXX
0598. Summary of remaining write-ins for Line 5 from overflow page														XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)		WW	VVV	WW.	WW.	VVV	VVA			VMV	V///	VVV	V/A/	XXX
0601. Other Income		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX	XXX	
0603		XXX	XXXXXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1301.		٨٨٨	٨٨٨	ΛΛΛ			^^^		ΑΛΛ	^^^		٨٨٨	^^^	XXX
1301.	-												1	XXX
1303.														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page														XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)														XXX

7

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1+2-3)
Comprehensive (hospital and medical) individual				
2. Comprehensive (hospital and medical) group				
3. Medicare Supplement	17,319,561			17,319,561
4. Vision only				
5. Dental only				
6. Federal Employees Health Benefits Plan				
7. Title XVIII – Medicare			861,702	764,500,380
8. Title XIX - Medicaid				262,550,307
9. Credit A&H.				
10. Disability Income				
11. Long-Term Care				
12. Other health				
13. Health subtotal (Lines 1 through 12)			938,345	1,044,370,248
14. Life				
15. Property/casualty				
16. Totals (Lines 13 to 15)	1,045,308,593		938,345	1,044,370,248

Annual Statement for the Year 2024 of the Blue Cross of Idaho Care Plus, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 – CLAIMS INCURRED DURING THE YEAR

		17	ART 2 - CLAIMS INCURRED DURING THE YEAR							10 1 11 10					
		1	Comprehensi Med	ve (Hospital & lical)	4	5	6	7 Federal	8	9	10	11	12	13	14
			2	3	NA - di			Employees Health Benefits	T:41- \0.00	Tial - VIV		Disability.			Oth N
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non- Health
1	Payments during the year: 1.1 Direct	1,064,500,112			13,879,474				803,597,979	247,022,659					
	1.2 Reinsurance assumed	704 004							704 004						
	1.3 Reinsurance ceded	781,221			10.070.474				781,221	047.000.650					
2.	Paid medical incentive pools and bonuses				13,879,474				802,816,758 4,874,478	247,022,659					
3.	Claim liability December 31, current year from Part 2A:	4,0/4,4/0							4,074,470						
0.	3.1 Direct	154,534,112			2,988,766				103,653,012	47,892,334					
	3.2 Reinsurance assumed														
	3.3 Reinsurance ceded														
	3.4 Net	154,534,112			2,988,766				103,653,012	47,892,334					
4.	Claim reserve December 31, current year from Part 2D: 4.1 Direct														
	4.2 Reinsurance assumed														
	4.3 Reinsurance ceded.														
	4.4 Net														
5.	Accrued medical incentive pools and bonuses, current year	859,755							859,755						
	Net health care receivables (a)	7,831,132			3,778				7,663,962	163,392					
7.	Amounts recoverable from reinsurers December 31, current year	768,686							768,686						
8.	Claim liability December 31, prior year from Part 2A:	440 500 040			4 704 404				00 044 477						
	8.1 Direct	112,500,240			1,721,494				82,344,677	28,434,069					
	8.2 Reinsurance assumed 8.3 Reinsurance ceded														
	8.4 Net.				1,721,494				82,344,677	28,434,069					
9	Claim reserve December 31, prior year from Part 2D:	112,300,240			1,721,494				02,344,077	20,434,009					
	9.1 Direct														
	9.2 Reinsurance assumed														
	9.3 Reinsurance ceded														
	9.4 Net														
10.	Accrued medical incentive pools and bonuses, prior year	5,235,429							5,235,429						
	Amounts recoverable from reinsurers December 31, prior year								120						
12.	Incurred benefits:	1 000 700 050			45.440.000				047.040.050	066 047 500					
	12.1 Direct	1,098,702,852			15,142,968				817,242,352	266,317,532					
	12.3 Reinsurance assumed	1,549,787							1,549,787						
	12.4 Net	1,097,153,065			15,142,968				815,692,565	266,317,532					
13.	Incurred medical incentive pools and bonuses	498,804			10,172,900				498,804	200,017,002					

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

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

				17411	ZA CLAIIVIS			· · -/ · · ·					-		
		1	Comprehensi Med	ve (Hospital & lical)	4	5	6	7 Federal	8	9	10	11	12	13	14
			2	3	Medicare			Employees Health Benefits	Title XVIII	Title XIX		Disability			Other Non-
		Total	Individual	Group	Supplement	Vision Only	Dental Only	Plan	Medicare	Medicaid	Credit A&H	Income	Long-Term Care	Other Health	Health
1. Re	ported in Process of Adjustment:														
1.1		19,560,112			2,766				6,671,012	12,886,334					
1.3															
1.4		19,560,112			2,766				6,671,012	12,886,334					
2. Inc	curred but Unreported:														
2.1		134,974,000			2,986,000		-		96,982,000	35,006,000					
2.3															
2.4		134,974,000			2,986,000				96,982,000	35,006,000					
3. Ar	nounts Withheld from Paid Claims and Capitations:														
3.1	Direct														
3.2															
3.3								-							
0.															
4. TO	OTALS:														
4.1	Direct	154,534,112			2,988,766				103,653,012	47,892,334					
4.3															
4.4		154,534,112			2,988,766				103,653,012	47,892,334					

Annual Statement for the Year 2024 of the Blue Cross of Idaho Care Plus, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR-NET OF REINSURANCE

	Olainaa Daid D			Liability December 31 of	5	6
	Claims Paid L	Ouring the Year	Currer	nt Year		
	1	2	3	4		Full control Olater Brown
	On Claims Incurred Prior to	On Claims Incurred During	On Claims Unpaid	On Claims Incurred During	Claims Incurred in Prior	Estimated Claim Reserve and Claim Liability
Line of Business	January 1 of Current Year		December 31 of Prior Year		Years (Columns 1 + 3)	December 31 of Prior Year
Comprehensive (hospital and medical) individual						
2. Comprehensive (hospital and medical) group						
3. Medicare Supplement	1,670,264	12,209,210	6,000	2,982,766	1,676,264	1,721,494
4. Vision Only						
5. Dental Only						
6. Federal Employees Health Benefits Plan						
7. Title XVIII - Medicare		763,311,435	70,000	103,583,012	38,806,757	82,344,677
8. Title XIX - Medicaid	25,256,198	221,766,461	127,000	47,765,334	25,383,198	
9. Credit A&H						
10. Disability Income						
11. Long-Term Care						
12. Other health						
13. Health subtotal (Lines 1 to 12)	65,663,219	997,287,106	203,000	154,331,112	65,866,219	112,500,240
14. Health care receivables (a)	8,008,295	55,140,904			8,008,295	55,318,067
15. Other non-health						
16. Medical incentive pools and bonus amounts	4,874,478			859,755	4,874,478	5,235,429
17. Totals (Lines 13 - 14 + 15 + 16)	62,529,402	942,146,202		155,190,867	62,732,402	62,417,602

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

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

GRAND TOTAL

Section A - Paid Health Claims

		Cumulative Net Amounts Paid									
	1	2	3	4	5						
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1. Prior											
2. 2020	543,279	598,405	598,405								
3. 2021	XXX	662,784									
4. 2022	XXX	XXX									
5. 2023	XXX	XXX	XXX	820,158	890,695						
6. 2024	XXX	XXX	XXX	xxx	997,286						

Section B - Incurred Health Claims

	Sum	of Cumulative Net Amount Paid and Claim	Liability, Claim Reserve and Medical Incenti	ive Pool and Bonuses Outstanding at End c	of Year	
	1	2	3	4	5	
Year in Which Losses Were Incu	rred 2020	2021	2022	2023	2024	
1. Prior	31,971	31,971				
2. 2020		598,405	598,405		598,405	
3. 2021	XXX	753,641	720,056	720,056		
4. 2022	XXX	XXX				
5. 2023	XXX	XXX	xxx	937,763		
6. 2024	XXX	XXX	xxx	xxx	1,152,478	

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim			Unpaid Claims	Total Claims and Claims Adjustment	
	Years in which Premiums were			Claim Adjustment		Adjustment Expense			Adjustment	Expense Incurred	
	Earned and Claims were Incurred	Premiums Earned	Claims Payments	Expense Payments	(Col. 3/2) Percent	Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	718,198	598,405	(8,502).	(1.421)	589,903	82.137			589,903	82.137
2.	2021	857,399	720,056	3,818	0.530	723,874	84.427			723,874	84.427
3.	2022	932,084	794,691	6,134	0.772	800,825	85.918	–		800,825	85.918
4.	2023	974,501	890,695	(4,156).	(0.467)	886,539	90.974	203	4	886,746	90.995
5.	2024	1,057,436	997,286	(10,659)	(1.069)	986,627	93.304	155,192	2,760	1,144,579	108.241

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

HOSPITAL & MEDICAL

Section A - Paid Health Claims

			555	ara Freditir Glairio								
		Cumulative Net Amounts Paid										
		1	2	3	4	5						
,	Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1.	Prior											
2.	2020											
3.	2021	XXX										
4.	2022	XXX	xxx									
5.	2023	XXX	XXX	XXX								
6.	2024	XXX	XXX	XXX	xxx							

Section B - Incurred Health Claims

		Sum o	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year									
		1	2	3	4	5						
,	ear in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1.	Prior											
2.	2020											
3.	2021	XXX										
4.	2022	XXX	XXX									
5.	2023	XXX	XXX	XXX								
6.	2024	XXX	XXX	XXX	XXX							

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1	. 2020										
2	. 2021										
3	2022										
4	2023										
5	2024										

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

MEDICARE SUPPLEMENT

Section A - Paid Health Claims

	Cumulative Net Amounts Paid									
	1	2	3	4	5					
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024					
1. Prior	645	645	648	648						
2. 2020	5,368		6,272	6,272	6,272					
3. 2021	XXX	6,945		8,101	8,101					
4. 2022	XXX	XXX	8,167	9,612	9,610					
5. 2023	XXX	XXX	XXX	9,430	11,100					
6. 2024	XXX	XXX	XXX	xxx	12,209					

Section B - Incurred Health Claims

		Sum o	f Cumulative Net Amount Paid and Claim I	iability, Claim Reserve and Medical Incenti	ive Pool and Bonuses Outstanding at End c	of Year
		1	2	3	4	5
	Year in Which Losses Were Incurred	2020	2021	2022	2023	2024
-	. Prior	648	648	648		648
12	. 2020				6,272	6,272
3	. 2021	XXX	8,117	8,101	8,101	
4	. 2022	XXX	XXX	9,614	9,610	9,610
į	. 2023	XXX	XXX	XXX	11,153	11,106
6	. 2024	XXX	XXX	XXX	xxx	15,192

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim			Unpaid Claims	Total Claims and Claims Adjustment	
	Years in which Premiums were			Claim Adjustment		Adjustment Expense			Adjustment	Expense Incurred	
	Earned and Claims were Incurred	Premiums Earned	Claims Payments	Expense Payments	(Col. 3/2) Percent	Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	7,981	6,272	90	1.435	6,362	79.714			6,362	79.714
2.	2021	9,164	8,101	224	2.765	8,325	90.845	–		8,325	90.845
3.	2022	10,944	9,610	219	2.279	9,829	89.812			9,829	89.812
4	2023	12,954	11,100	275	2.477	11,375	87.811	6		11,381	87.857
5.	2024	16,580	12,209	(262)	(2.146)	11,947	72.057	2,983	60	14,990	90.410

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

DENTAL ONLY

Section A - Paid Health Claims

		555	ulu i lealtii Glaiille								
	Cumulative Net Amounts Paid										
	1	2	3	4	5						
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1. Prior											
2. 2020											
3. 2021	XXX										
4. 2022	XXX	XXX									
5. 2023	XXX	XXX	XXX								
6. 2024	xxx	xxx	xxx	xxx							

Section B - Incurred Health Claims

		Sum o	of Cumulative Net Amount Paid and Claim	Liability, Claim Reserve and Medical Incenti	ive Pool and Bonuses Outstanding at End o	of Year
		1	2	3	4	5
Υ	ear in Which Losses Were Incurred	2020	2021	2022	2023	2024
1.	Prior					
2.	2020					
3.	2021	XXX				
4.	2022	XXX	xxx			
5.	2023	XXX	XXX	XXX		
6.	2024	XXX	XXX	xxx	xxx	

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1	2020		,	, ,						,	,
2	2021										
3	2022										
4	2023										
5	2024										

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

VISION ONLY

Section A - Paid Health Claims

		555	ulu i lealtii Glaiille								
Cumulative Net Amounts Paid											
	1	2	3	4	5						
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1. Prior											
2. 2020											
3. 2021	XXX										
4. 2022	XXX	XXX									
5. 2023	XXX	XXX	XXX								
6. 2024	xxx	xxx	xxx	xxx							

Section B - Incurred Health Claims

		ve Pool and Bonuses Outstanding at End o	of Year			
		1	2	3	4	5
,	ear in Which Losses Were Incurred	2020	2021	2022	2023	2024
1.	Prior					
2.	2020					
3.	2021	XXX				
4.	2022	XXX	XXX			
5.	2023	XXX	XXX	XXX		
6.	2024	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1	2020		,	, ,						,	,
2	2021										
3	2022										
4	2023										
5	2024										

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

FEDERAL EMPLOYEES HEALTH BENEFITS PLAN

Section A - Paid Health Claims

		555	ulu i lealtii Glaiille								
Cumulative Net Amounts Paid											
	1	2	3	4	5						
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1. Prior											
2. 2020											
3. 2021	XXX										
4. 2022	XXX	XXX									
5. 2023	XXX	XXX	XXX								
6. 2024	xxx	xxx	xxx	xxx							

Section B - Incurred Health Claims

		ve Pool and Bonuses Outstanding at End o	of Year			
		1	2	3	4	5
,	ear in Which Losses Were Incurred	2020	2021	2022	2023	2024
1.	Prior					
2.	2020					
3.	2021	XXX				
4.	2022	XXX	XXX			
5.	2023	XXX	XXX	XXX		
6.	2024	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments		Claim and Claim Adjustment Expense Payments (Col. 2+3)		Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1	2020										
2	2021										
3	2022										
4	2023										
5	2024										

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

TITLE XVIII MEDICARE

Section A - Paid Health Claims

	Cumulative Net Amounts Paid									
	1	2	3	4	5					
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024					
1. Prior										
2. 2020										
3. 2021	XXX		500,264	500,264	500,264					
4. 2022	XXX	XXX	538,303	569,220						
5. 2023	XXX	XXX	XXX	597,806						
6. 2024	XXX	XXX	XXX	XXX						

Section B - Incurred Health Claims

		Sum o	f Cumulative Net Amount Paid and Claim I	Liability, Claim Reserve and Medical Incenti	ive Pool and Bonuses Outstanding at End o	of Year	
		1	2	3	4	5	
Ye	ear in Which Losses Were Incurred	2020	2021	2022	2023	2024	
1.	Prior				17,583		
2.	2020		399,189		399,189		
3.	2021	XXX		500,264	500,264		
4.	2022	XXX	XXX		569,286		
5.	2023	XXX	XXX	XXX	685.320	641.487	
6.	2024	XXX	XXX	XXX	xxx		

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim			Unpaid Claims	Total Claims and Claims Adjustment	
	Years in which Premiums were			Claim Adjustment		Adjustment Expense			Adjustment	Expense Incurred	
	Earned and Claims were Incurred	Premiums Earned	Claims Payments	Expense Payments	(Col. 3/2) Percent	Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	482,541		(10,269)	(2.572)	388,920	80.598	–		388,920	80.598
2.	2021	569,481	500,264	2,660	0.532	502,924	88.313			502,924	88.313
3.	2022	616,500	569,286	8,250	1.449	577,536	93.680	–		577,536	93.680
4.	2023	669,722	641,417	(3,137)	(0.489)	638,280	95.305	70		638,351	95.316
5.	2024	762,708	763,311	4,202	0.550	767,513	100.630	104,443	2,001	873,957	114.586

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

TITLE XIX MEDICAID

Section A - Paid Health Claims

	Cumulative Net Amounts Paid									
	1	2	3	4	5					
Year in Which Losses Were Incurred	2020	2021	2022	2023	2024					
1. Prior										
2. 2020										
3. 2021	XXX				211,691					
4. 2022	XXX	XXX		215,729						
5. 2023	XXX	XXX	XXX	212,922						
6. 2024	XXX	XXX	XXX	xxx						

Section B - Incurred Health Claims

		Sum o	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year									
		1	2	3	4	5						
	Year in Which Losses Were Incurred	2020	2021	2022	2023	2024						
1	Prior											
2	. 2020											
3	. 2021	XXX				211,691						
4	. 2022	XXX	XXX		215,795							
5	. 2023	XXX	XXX	XXX		238,305						
6	. 2024	XXX	XXX	XXX	xxx	269,532						

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim			Unpaid Claims	Total Claims and Claims Adjustment	
	Years in which Premiums were			Claim Adjustment		Adjustment Expense			Adjustment	Expense Incurred	
	Earned and Claims were Incurred	Premiums Earned	Claims Payments	Expense Payments	(Col. 3/2) Percent	Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	(Col. 9/1) Percent
1.	2020	227,676	192,944	1,677	0.869	194,621	85.482			194,621	85.482
2.	2021	278,754	211,691 .	934 .	0.441	212,625	76.277			212,625	76.277
3.	2022	304,640	215,795	(2,335).	(1.082)	213,460	70.070			213,460	70.070
4.	2023	291,825	238,178	(1,294)	(0.543)	236,884	81.173	127	3	237,014	81.218
5.	2024	278,148	221,766	(14,599)	(6.583)	207,167	74.481	47,766	699	255,632	91.905

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted) OTHER HEALTH

Section A - Paid Health Claims

	OCCUPITATION OF THE PROPERTY O									
				Cumulative Net Amounts Paid						
		1	2	3	4	5				
,	Year in Which Losses Were Incurred	2020	2021	2022	2023	2024				
1.	Prior									
2.	2020									
3.	2021	XXX								
4.	2022	XXX	xxx							
5.	2023	XXX	XXX	XXX						
6.	2024	XXX	XXX	XXX	xxx					

Section B - Incurred Health Claims

		Sum o	f Cumulative Net Amount Paid and Claim	Liability, Claim Reserve and Medical Incent	ive Pool and Bonuses Outstanding at End o	of Year
		1	2	3	4	5
Year in	Which Losses Were Incurred	2020	2021	2022	2023	2024
1. Pri	ior					
2. 20	020					
3. 20)21	XXX				
4. 20)22	XXX	xxx			
5. 20	023	XXX	XXX	XXX		
6. 20	024	XXX	XXX	XXX	XXX	

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims were Incurred	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2+3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1	2020				******						
2	2021										
3	2022										
4	2023										
5	2024										

Annual Statement for the Year 2024 of the Blue Cross of Idaho Care Plus, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	Comprehens Med	ive (Hospital & dical)	4	5	6	7 Federal	8	9	10	11	12	13
		2	3	Medicare			Employees Health Benefits	Title XVIII	Title XIX		Disability		
	Total	Individual	Group	Supplement	Vision Only	Dental Only	Plan	Medicare	Medicaid	Credit A&H	Income	Long-Term Care	Other
Unearned premium reserves													
2. Additional policy reserves (a)	251,900,000			960,499				241,540,860	9,398,642				
Reserve for future contingent benefits	4,340,000			4,340,000									
Reserve for rate credits or experience rating refunds (including income)	ding \$ for investment								15,162,570				
5. Aggregate write-ins for other policy reserves								220,424					
6. Totals (gross)	271,622,994			5,300,499				241,761,284	24,561,212				
7. Reinsurance ceded													
8. Totals (Net) (Page 3, Line 4)	271,622,994			5,300,499				241,761,284	24,561,212				
Present value of amounts not yet due on claims	, , , , , , , , , , , , , , , , , , ,												
10. Reserve for future contingent benefits													
11. Aggregate write-ins for other claim reserves													
12. Totals (gross)													
13. Reinsurance ceded													
14. Totals (Net) (Page 3, Line 7)													
Details of Write-Ins													
0501. RAD-V Payable	220,424							220,424					
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow pa	age												
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above).	220,424							220,424					
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow p	page												
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above													

⁽a) Includes \$ 251,900,000 premium deficiency reserve.

PART 3 - ANALYSIS OF EXPENSES

	FART 3 - AI	NALYSIS OF EXPE				
		Claim Adjustn	nent Expenses	3	4	5
		1	2			
		Cost	Other Claim	General		
		Containment	Adjustment	Administrative	Investment	
		Expenses	Expenses	Expenses	Expenses	Total
1.	Rent (\$ for occupancy of own building)					
2.	Salaries, wages and other benefits	23,339,621	7,674,248	33,305,961		64,319,830
3.	Commissions (less \$ ceded plus \$ assumed)			19,329,732		19,329,732
4.	Legal fees and expenses	9,290		583,546		592,836
5.	Certifications and accreditation fees					
6.	Auditing, actuarial and other consulting services					
7.	Traveling expenses	162,995	14,302	387,249		564,546
8.	Marketing and advertising	8,220	98	4,280,701		4,289,019
9.	Postage, express and telephone					
10.	Printing and office supplies					
11.	Occupancy, depreciation and amortization					
12.	Equipment					
13.	Cost or depreciation of EDP equipment and software	4.186.017	5.549.077	7.962.758		17.697.852
14.	Outsourced services including EDP, claims, and other services					
15.	Boards, bureaus and association fees.	13.040	4.885	300.064		317.989
	Insurance, except on real estate	16.865	4.776	536.183		557.824
17.	Collection and bank service charges					
18.	Group service and administration fees					
19.	Reimbursements by uninsured plans			7 40,000		740,000
20.	Reimbursements from fiscal intermediaries					
21.	Real estate expenses					
22.	Real estate taxes					
	Taxes, licenses and fees:					
25.	23.1 State and local insurance taxes					
	23.2 State premium taxes					
	23.3 Regulatory authority licenses and fees					
	23.4 Payroll taxes	1 /57 /77	133	1 070 006		2 050 052
	23.5 Other (excluding federal income and real estate taxes)	1,437,477	432,470	1,970,000		3,009,903
24.	Investment expenses not included elsewhere				200.602	200 602
24. 25.	Aggregate write-ins for expenses	2 256 124	4E 214	£17 002	299,002	2 01 0 2 11
25. 26.	Total expenses incurred (Lines 1 to 25)					
	Less expenses unpaid December 31, current year					
	Add expenses unpaid December 31, prior year.					
29.	Amounts receivable relating to uninsured plans, prior year			21.740.050		23,000,256
	Amounts receivable relating to uninsured plans, current year					
	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30).	35,389,290	25,141,472	85,953,009	298,491	146,782,262
	ls of Write-Ins			25		25
	Contributions	0.170.006		25		25
		2,178,286	4= 0.1 1	F14 070		2,178,286
	Other Expenses.		45,214	516,978		640,030
	Summary of remaining write-ins for Line 25 from overflow page	0.054.04				
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	2,256,124	45,214	517,003		2,818,341

⁽a) Includes management fees of $\ 126,534,350$ to affiliates and $\ to$ non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. Government bonds	(a) 876,085	
1.1	Bonds exempt from U.S. tax		
1.2	Other bonds (unaffiliated)	(a)	4,612,908
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b) 52,850	52,850
2.11	Preferred stocks of affiliates		
2.2	Common stocks (unaffiliated)	1,556,154	1,432,081
2.21	Common stocks of affiliates.		
3.	Mortgage loans	(c)	
4.	Real estate	(d)	
5.	Contract loans.		
6.	Cash, cash equivalents and short-term investments.	(e) 666,849	651,670
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	7,877,029	
11.	Investment expenses		(g)299,682
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		299,682
17.	Net investment income (Line 10 minus Line 16).		
Detai	s of Write-Ins		
0901			
0902			
0903			
0998	Summary of remaining write-ins for Line 9 from overflow page		
0999	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)		
1501			
1502			
1503			
1598	Summary of remaining write-ins for Line 15 from overflow page		
1599	Totals (Lines 1501 through 1503 plus 1598) (Line 15 above)		

- (a) Includes \$575,260 accrual of discount less \$223,137 amortization of premium and less \$94,665 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes $\$ for company's occupancy of its own buildings; and excludes $\$ interest on encumbrances.
- (e) Includes \$92,736 accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$299,682 investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes $\$ depreciation on real estate and $\$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		UAL TIAL OA	•			1
		1	2	3	4	5
						Changain
		Realized Gain		Total Realized	Change in	Change in Unrealized Foreign
		(Loss) On Sales or	Other Realized	Capital Gain (Loss)	Unrealized Capital	Exchange Capital
		Maturity	Adjustments	(Columns 1 + 2)		Gain (Loss)
1	U.S. Government bonds				. ,	\ /
1. 1.1	Bonds exempt from U.S. tax	(1,204,700)		(1,204,700)		
	Other bonds (unaffiliated)	07.176		07.176		
1.2				27,176	33,055	
1.3	Bonds of affiliates.			/		
2.1	Preferred stocks (unaffiliated).				152,525	
2.11	Preferred stocks of affiliates					
2.2	Common stocks (unaffiliated)				(934,691)	
2.21	Common stocks of affiliates					
3.	Mortgage loans					
4.	Real estate					
5.	Contract loans					
6.	Cash, cash equivalents and short-term investments	(19)		(19)		
7.	Derivative instruments			,		
8.	Other invested assets					
9.	Aggregate write-ins for capital gains (losses)					
10.	Total capital gains (losses)	1 047 388		1,047,388		
Detail	s of Write-Ins				(0.0)	
0901	of which his					
0901.						
0902.						
	Cummons of romaining write in a far Lina O from avariant page					
	Summary of remaining write-ins for Line 9 from overflow page					
u999.	Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED ASSETS

	EXHIBIT OF NONADMITTED ASSETS	ı	1	1
		1	2	3
		Current Year Total Nonadmitted	Prior Year Total Nonadmitted	Assets
1.	Bonds (Schedule D)	Assets	Assets	(Col. 2 – Col. 1)
2.	Stocks (Schedule D):			
۷.	2.1 Preferred stocks			
	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens			
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale			
5.	Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			
6.	Contract loans			
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection			
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.			
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance:	250 (46		(050.646)
	16.1 Amounts recoverable from reinsurers.			,
	16.2 Funds held by or deposited with reinsured companies.			
17	16.3 Other amounts receivable under reinsurance contracts			
	Amounts receivable relating to uninsured plans Current federal and foreign income tax recoverable and interest thereon.			
	Net deferred tax asset			
19.	Guaranty funds receivable or on deposit.			
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			
22.	Net adjustment in assets and liabilities due to foreign exchange rates			
23.	Receivables from parent, subsidiaries and affiliates			
24.	Health care and other amounts receivable		19,464,225	
25.	Aggregate write-ins for other-than-invested assets			(1,355,001)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			(695,549)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts		, ,	
28.	Total (Lines 26 and 27)	25,600,582	24,905,033	(695,549)
Detai	ls of Write-Ins		,,.	(,,,,,,,,,
1102				
1103				
1198	Summary of remaining write-ins for Line 11 from overflow page			
1199	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)			
	Prepaid Expenses and Misc Receivables			(1,355,001)
2502				
2598	Summary of remaining write-ins for Line 25 from overflow page			
2599	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	1,542,031	187,030	(1,355,001)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

			Total Members at End of			6
	1	2	3	4	5	Current Year Member
Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Months
1. Health Maintenance Organizations	61,114	66,764	67,385	68,148		810,575
2. Provider Service Organizations						
3. Preferred Provider Organizations						14,280
4. Point of Service		·	·	,	,	
5. Indemnity Only		5,976	6,299	6,803	7,288	77.475
5. Aggregate write-ins for other lines of business			,	,	,	
7. Total			74,875			902,330
Details of Write-Ins						
0601						
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page						
100 T 1 1 (1)						

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Blue Cross of Idaho Care Plus, Inc. (the Company) are presented on the basis of accounting practices prescribed or permitted by the Idaho Department of Insurance (DOI). The DOI recognizes only these statutory accounting and prescribed or permitted practices for determining and reporting an insurance company's financial condition and results of operations and for determining solvency under Idaho State Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* (SAP) has been adopted as a component of prescribed or permitted practices by the State of Idaho.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Idaho is shown below:

	SSAP#	F/S Page	F/S Line #	2024	2023
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$(386,745,595).	\$(53,754,051).
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$(386,745,595).	\$(53,754,051).
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 37,394,348	\$ 104,795,749 .
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 37,394,348	\$ 104,795,749

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. As additional information becomes available, or actual amounts are determinable, the recorded estimates will be revised. Actual results could differ from these estimates.

C. Accounting Policy

Premium revenue is recognized during the month in which policyholder coverage is provided. The unrecognized portion of premiums received is recorded as premiums received in advance. All costs of acquiring new insurance business, including sales commissions, are charged to operations as incurred

In addition, the Company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the scientific amortization method. Non-investment grade bonds are stated at the lower of amortized cost or fair market value.
- (3) Common stocks are stated at fair market value.
- (4) Preferred stocks are stated in accordance with the guidance provided in Statement of Statutory Accounting Principle (SSAP) No. 32, Investments in Preferred Stock.
- (5) The Company has no direct investments in mortgage loans.
- (6) Loan-backed securities are stated at amortized cost using the "pro-rata" method whereby amortized value is always based on the initial amortized value ratio times the par balance as of the end of the current processing month. As principal is received, the entire discount or premium on the portion received is recognized in its entirety, directly mirroring the cash flows.
- (7) The Company has an insurance affiliate, Blue Cross of Idaho Health Service, Inc. (Blue Cross).
- (8) Investments in joint ventures, partnerships and limited liability companies Not Applicable
- (9) The Company has no investments in derivatives.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 54R, *Individual* and Group Accident and Health Contracts.
- (11) Unpaid losses and loss adjustment expenses may include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments to estimates are reflected in the period determined.
- (12) Changes in capitalization policy Not Applicable
- (13) The Company estimates pharmaceutical rebates based on historical experience, modified for current trends.

D. Going Concern

The Company has the ability to continue as a going concern within one year after the date that the financial statements are issued as there have been no conditions or events which would raise substantial doubt. The Company has a financial guarantee with Blue Cross under which Blue Cross guarantees, to the full extent of its assets, all contractual and financial obligations of the Company.

2. Accounting Changes and Corrections of Errors - Not Applicable

- 3. Business Combinations and Goodwill Not Applicable
- 4. Discontinued Operations Not Applicable
- 5. Investments
 - A. Mortgage Loans, including Mezzanine Real Estate Loans Not Applicable
 - B. Debt Restructuring Not Applicable
 - C. Reverse Mortgages Not Applicable
 - D. Loan-Backed Securities
 - (1) Prepayment assumptions for loan-backed securities were obtained from broker-dealer survey values or internal estimates.
 - (2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) Not Applicable
 - (3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities Not Applicable
 - (4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss
 - a. The aggregate amount of unrealized losses:

 1. Less than 12 months \$854,491

 2. 12 months or longer 3,517,377

 b. The aggregate related fair value of securities with unrealized losses:

 1. Less than 12 months \$21,338,852

 2. 12 months or longer 30,348,433
 - (5) These impairments were considered to be temporary primarily based on the issuer's creditworthiness. The Company also evaluated the length of time and extent to which the fair value has been less than cost or carrying value as well as its intent and ability to retain the security for a period of time sufficient to allow for anticipated recovery.
 - E. Dollar Repurchase Agreements and/or Securities Lending Transactions Not Applicable
 - F. Repurchase Agreements Transactions Accounted for as Secured Borrowing Not Applicable
 - G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Repurchase Transaction - Cash Provider - Overview of Secured Borrowing Transactions

(1) Information regarding the company policy or strategies for engaging in repo programs, policy for requiring collateral

The Company has an overnight reverse repurchase agreement accounted for as a secured borrowing. The repurchase program is intended to maximize the return on excess cash with relatively low risk. Collateral consists of U.S. Treasury securities and U.S. Government agency securities with fair values in excess of the amounts loaned under the agreement.

(2) Type of repo trades used

		First Quarter	Second Quarter	Third Quarter	Fourth Quarter	
a.	Bilateral (Yes/No)	YES	YES	YES	NO	
b.	Tri-Party (Yes/No)	NO	NO	NO	NO	

(3) Original (flow) & residual maturity

			First Quarter	Second Quarter	Third Quarter	Fourth Quarter
a.	Maxi	mum Amount				_
	1.	Open - No maturity	\$	\$	\$	\$
	2.	Overnight	7,700,000	10,600,000	9,200,000	
	3.	2 days to 1 week				
	4.	Over 1 week to 1 month				
	5.	Over 1 month to 3 months				
	6.	Over 3 months to 1 year				
	7.	Over 1 year				
b.	Endir	ng Balance				
	1.	Open - No maturity	\$	\$	\$	\$
	2.	Overnight				
	3.	2 days to 1 week				
	4.	Over 1 week to 1 month				
	5.	Over 1 month to 3 months				
	6.	Over 3 months to 1 year				
	7.	Over 1 year				

- (4) Fair value of securities sold and/or acquired that resulted in default Not Applicable
- (5) Fair value of securities acquired under repo secured borrowing Not Applicable
- (6) Securities acquired under repo secured borrowing by NAIC designation Not Applicable

5. Investments (Continued)

- (7) Collateral provided secured borrowing Not Applicable
- (8) Allocation of aggregate collateral pledged by remaining contractual maturity Not Applicable
- (9) Recognized receivable for return of collateral secured borrowing Not Applicable
- (10) Recognized liability to return collateral secured borrowing (total) Not Applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale Not Applicable
- J. Real Estate Not Applicable
- K. Low-Income Housing Tax Credits (LIHTC) Not Applicable
- L. Restricted Assets
 - (1) Restricted assets (including pledged)

		(1)	(2)	(3)	(4)	(5)	(0)	(7)
	Restricted Asset Category	Total Gross (Admitted & Nonadmited) Restricted from Current Year	Total Gross (Admitted & Nonadmited) Restricted From Prior Year	Increase / (Decrease) (1 - 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 - 4)	Gross (Admitted & Nonadmitted Restricted to Total Assets	Admitted)Restricted to Total Admitted Assets
a.	Subject to contractual obligation for which liability is not shown	\$	\$	\$. \$	\$	%.	%.
b.	Collateral held under security lending agreements							
	Subject to repurchase agreements							
	Subject to reverse repurchase agreements.							
e.	Subject to dollar repurchase agreements							
f.	Subject to dollar reverse repurchase agreements							
g.	Placed under option contracts							
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock							
i.	FHLB capital stock							
j.	On deposit with states	1,051,390	1,051,390			1,051,390	0.173	0.181
k.	On deposit with other regulatory bodies							
I.	Pledged as collateral to FHLB (including assets backing funding agreements)							
m	. Pledged as collateral not captured in other categories							
	Other restricted assets							
0.	Total restricted assets (Sum of a through n)	\$ 1,051,390	\$ 1,051,390	\$	\$	\$ 1,051,390	0.173 %.	0.181 %.

(2)

(4)

(5)

(6)

- (2) Detail of assets pledged as collateral not captured in other categories (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) Not Applicable
- (3) Detail of other restricted assets (contracts that share similar characteristics, such as reinsurance and derivatives, are reported in the aggregate) Not Applicable
- (4) Collateral received and reflected as assets within the reporting entity's financial statements Not Applicable
- M. Working Capital Finance Investments Not Applicable
- N. Offsetting and Netting of Assets and Liabilities Not Applicable
- O. 5GI Securities Not Applicable
- P. Short Sales Not Applicable
- Q. Prepayment Penalty and Acceleration Fees Not Applicable
- R. Reporting Entity's Share of Cash Pool by Asset Type Not Applicable
- S. Aggregate Collateral Loans by Qualifying Investment Collateral Not Applicable

6. Joint Ventures, Partnerships and Limited Liability Companies - Not Applicable

7. Investment Income

A. Due and Accrued Income Excluded from Surplus

No investment income due and accrued was excluded from surplus in 2024 or 2023. The Company does not accrue investment income when collection is uncertain.

- B. Total Amount Excluded Not Applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

	Interest Income Due and Accrued	Amount
1.	Gross.	\$ 812,798
2.	Nonadmitted	\$
3.	Admitted	\$ 812.798

- D. The aggregate deferred interest Not Applicable
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance Not Applicable
- 8. Derivative Instruments Not Applicable

9. Income Taxes

- A. Components of the Net Deferred Tax Asset/(Liability)
 - (1) Change between years by tax character

			2024			2023			Change	
		(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
		Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a)	Gross deferred tax assets	\$ 103,408,567 .	\$ 8,518 .	\$ 103,417,085 .	\$ 17,626,402	\$ 40,218	\$ 17,666,620	\$ 85,782,165	\$(31,700)	\$ 85,750,465 .
(b)	Statutory valuation allowance adjustments	44,398,345 .		44,398,345	6,129,060		6,129,060	38,269,285		38,269,285
(c)	Adjusted gross deferred tax assets (1a - 1b)	59,010,222	8,518 .	59,018,740	11,497,342	40,218	11,537,560	47,512,880	(31,700)	47,481,180
(d)	Deferred tax assets nonadmitted				5,077,231 .		5,077,231	(5,077,231).		(5,077,231).
(e)	Subtotal net admitted deferred tax asset (1c - 1d)	\$ 59,010,222	\$ 8,518	\$ 59,018,740	\$ 6,420,111	\$40,218	\$ 6,460,329	\$ 52,590,111	\$(31,700)	\$ 52,558,411
(f)	Deferred tax liabilities	28,806 .	31,306 .	60,112	63,783	198,073	261,856	(34,977).	(166,767).	(201,744).
(g)	Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f)	\$ 58,981,416	\$(22,788).	\$ 58,958,628	\$ 6,356,328	\$(157,855).	\$ 6,198,473	\$ 52,625,088	\$ 135,067 .	\$ 52,760,155

(2) Admission calculation components SSAP No. 101

` '	•								
		2024			2023			Change	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$	\$	\$	\$ 5,822,255	\$ 40,218	\$ 5,862,473	\$(5,822,255).	\$(40,218)	\$(5,862,473).
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation (lesser of 2(b)1 and 2(b)2 below)	58,950,110 .	8,518	58,958,628	336,000		336,000	58,614,110	8,518	58,622,628 .
Adjusted gross deferred tax assets expected to be realized following the balance sheet date	58,950,110 .	8,518 .	58,958,628	336,000		336,000	58,614,110	8,518	58,622,628
Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	58,958,628	XXX	XXX	9,859,728	XXX	XXX	49,098,900 .
(c) Adjusted gross deferred tax assets (excluding the amount of deferred tax assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities.	60,112 .		60,112	261,856		261,856	(201,744)	·	(201,744).
(d) Deferred tax assets admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 59,010,222	\$ 8,518 .	\$ 59,018,740	\$ 6,420,111	\$ 40,218	\$ 6,460,329	\$ 52,590,111	\$ (31,700)	\$ 52,558,411

(3) Ratio used as basis of admissibility

	2024	2023
(a) Ratio percentage used to determine recovery period and threshold limitation amount	51.000 %.	298.000 %.

As instructed by the DOI, the Company admitted deferred tax assets reversing within two years.

(4) Impact of tax-planning strategies

The Company is not relying on any tax-planning strategies.

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage

		20	124	20	23	Cha	inge
		(1)	(2)	(3)	(4)	(5)	(6)
		Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
1.	Adjusted gross DTAs amount from Note 9A1(c)	\$ 59,010,222	\$ 8,518	\$ 11,497,342	\$ 40,218	\$ 47,512,880	\$(31,700)
2.	Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3.	Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 59,010,222	\$ 8,518	\$ 6,420,111	\$ 40,218	\$ 52,590,111	\$(31,700)
4.	Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

- (b) Use of reinsurance-related tax-planning strategies None
- B. Regarding Deferred Tax Liabilities That Are Not Recognized

The Company has no material unrecognized deferred tax liabilities.

9. Income Taxes (Continued)

C. Major Components of Current Income Taxes Incurred

rent income taxes incurred consist of the following major components:	(1) 2024	(2) 2023	(3) Change (1-2)
Current Income Tax			onange (1 2)
(a) Federal	\$ (16,313,413)	\$(9,203,984)	\$(7,109,429)
(b) Foreign			
(c) Subtotal (1a+1b)	\$(16,313,413)	\$(9,203,984)	\$(7,109,429)
(d) Federal income tax on net capital gains			–
(e) Utilization of capital loss carry-forwards			
(f) Other			·
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ (16,313,326)	\$ (9,204,191)	\$ (7,109,135)
	(1) 2024	(2) 2023	(3) Change (1-2)
Deferred Tax Assets		2020	Change (1 2)
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 522,073	\$ 362,190	\$ 159,883
(2) Unearned premium reserve	52,899,000	6,825,000	46,074,000
(3) Policyholder reserves			–
(4) Investments		19,946	22,246
(5) Deferred acquisition costs			
(6) Policyholder dividends accrual			
(7) Fixed assets			
(8) Compensation and benefits accrual			
(9) Pension accrual			
(10) Receivables - nonadmitted	5,376,122	4,163,838	1,212,284
(11) Net operating loss carry-forward	44,567,495	6,253,748	38,313,747
(12) Tax credit carry-forward		1,680	5
(13) Other	<u></u>		
(99) Subtotal (Sum of 2a1 through 2a13)	\$ 103,408,567	\$ 17,626,402	\$ 85,782,165
(b) Statutory valuation allowance adjustment			
(c) Nonadmitted			
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)(e) Capital	\$ \$9,010,222	\$ 6,420,111	\$ 52,590,111
(1) Investments			• •
(2) Net capital loss carry-forward			–
(3) Real estate			
(4) Other			
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 8,518	\$ 40,218	\$(31,700)
(f) Statutory valuation allowance adjustment			
(g) Nonadmitted			
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	·	- <u> </u>	
(i) Admitted deferred tax assets (2d + 2h)	\$ 59,018,740	\$ 6,460,329	\$ 52,558,411
	(1) 2024	(2) 2023	(3) Change (1-2)
Deferred Tax Liabilities	·		
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
(5) Other			
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)			
(b) Capital	**************************************		(,, ,
(1) Investments		\$ 198.073	\$(166.767)
(2) Real estate		•	. , ,
(3) Other			
(99) Subtotal (3b1+3b2+3b3)			
(c) Deferred tax liabilities (3a99 + 3b99)	<u>-</u>		
Net deferred tax assets/liabilities (2i - 3c)	\$ 58,958,628	\$ 6,198,473	\$ 52,760,155

9. Income Taxes (Continued)

The change in deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	Current Period	Prior Year	Change (Col. 1 - Col. 2)
Adjusted gross deferred tax assets	. \$ 103,417,085	. \$ 17,666,620	\$
Total deferred tax liabilities	60,112	261,856	(201,744)
Net deferred tax assets (liabilities)	103,356,973	17,404,764	85,952,209
Statutory valuation allowance adjustment	44,398,345	6,129,060	38,269,285
Net deferred tax assets (liabilities) after statutory valuation allowance	58,958,628	11,275,704	47,682,924
Tax effect of unrealized gains (losses)			(135,067)
Change in net deferred income tax	•		\$

The realization of the DTA is dependent upon the Company's ability to generate sufficient sources of taxable income in future periods. Based on current and historical results and prospects for future operations, management anticipates it is more likely than not that future taxable income will be sufficient for realization of the remaining DTAs.

D. Among the More Significant Book to Tax Adjustments

The provision for federal income taxes incurred is different from that which would be provided by applying the statutory federal income tax rate to income before taxes. Among the more significant book to tax adjustments were the following:

	2024	Effective Tax Rate
Provision computed at statutory rate Change in non-admit	\$ (84,642,373) (1,212,284)	21.00% 0.30%
Change in VA/UTP Liability	21,955,959	-5.45%
Other permanent differences	37,430	0.00%
True-up of prior year tax return	87	0.00%
Total statutory income taxes	\$ (63,861,182)	15.85%
Federal income tax expense	\$ (16,313,413)	4.05%
Change in net deferred income tax	(47,547,857)	11.80%
Prior year underaccrual	87_	0.00%
Total statutory income taxes	\$ (63,861,182)	15.85%

E. Operating Loss and Tax Credit Carryforwards

- (1) At December 31, 2024, the Company has \$155,059,664 of net operating loss carryforward that expires beginning in 2044.
- (2) Income tax expense available for recoupment

The following federal income taxes incurred in the current and prior years are available for recoupment in the event of future net losses:

	Ordinary	Capital	Total
2022	\$	\$	\$
2023	–		–
2024		–	–

- (3) There were no deposits admitted under Section 6603 of the Internal Revenue Service Code.
- F. Consolidated Federal Income Tax Return Not Applicable
- G. Federal or Foreign Income Tax Loss Contingencies

The Company evaluates tax contingencies on an ongoing basis. The Company has recorded an income tax contingency under SSAP No. 5R as modified by SSAP No. 101 in the amount of \$790,820, of which \$101,549 relates to interest accrual, related to the special deduction of Blue Cross Blue Shield organizations pursuant to Section 833(b) of the Internal Revenue Code. It is reasonably possible that the contingency will significantly increase within 12 months of the reporting date if the Company takes this special deduction in 2025.

Gross DTAs have been reduced by statutory valuation allowance adjustment in the amount of \$44,398,345 related to the special deduction taken in the current and prior years under the IRC §833(b) and the addition of the 2024 NOL. The valuation allowance adjustment reduces the amount of gross DTAs to an amount that is more likely than not to be realized.

- H. Repatriation Transition Tax (RTT) Not Applicable
- I. Alternative Minimum Tax (AMT) Credit

The Inflation Reduction Act was enacted on August 16, 2022, and included a new corporate alternative minimum tax (CAMT) effective for tax years beginning after December 31, 2022. The Company is not an "applicable corporation" for purposes of the CAMT.

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

A. In February 2013, the Company's formation was sponsored by Blue Cross for the purpose of transacting business in Idaho as a managed care organization. On October 1, 2014, the Company and Blue Cross entered into an agreement to transfer the rights, title and interest in Medicare Advantage plan contracts with the federal Centers for Medicare and Medicaid Services (CMS) and the Medicare-Medicaid Coordinated Plan with the State of Idaho Department of Health and Welfare from Blue Cross to the Company. This transaction was initially approved by the Company's Board of Directors in October 2014 and by the DOI in January 2016. The Company has been operating the transferred lines of business since October 2014.

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

- B. On various dates between February 2013 and May 2015, the Company issued surplus notes (the Notes) with a par value of \$50,000,000 to Blue Cross as described in Note 13.K. Unapproved interest on the Notes has not been accrued or paid for 2022, 2023, or 2024.
- C. Transactions With Related Party Who Are Not Reported on Schedule Y Not Applicable
- D. The Company reported a payable of \$102,132,221 to Blue Cross at December 31, 2024. The intercompany receivable and payable balances between the Company and Blue Cross meet the requirements for valid right of setoff established by SSAP No. 64, Offsetting and Netting of Assets and Liabilities, Paragraph 2. Intercompany transactions consist of premium collected and claims paid by Blue Cross, direct expenses paid by Blue Cross, and the fee for administrative services performed by Blue Cross, all on behalf of the Company. All intercompany receivables and payables for the current period, with the exception of the surplus note receivable discussed below, are offset and reported net. Intercompany balances are settled on, at least, a quarterly basis.

As instructed by the DOI, the Company recorded a \$273,000,000 surplus note receivable from Blue Cross at December 31, 2024.

- E. The Company and Blue Cross entered into an administrative services agreement whereby Blue Cross provides certain administrative services to the Company. Pursuant to the administrative services agreement, the direct and indirect expenses incurred in providing the services are charged to the Company on a monthly basis.
- F. The Company and Blue Cross entered into a financial guarantee agreement whereby Blue Cross guarantees to the full extent of its assets, all contractual and financial obligations of the Company to its customers, in accordance with the Blue Cross Blue Shield Association (BCBSA) Guidelines to Administer the Controlled Affiliate License Agreement.
- G. Nature of Relationships that Could Affect Operations Not Applicable
- H. Amount Deducted for Investment in Upstream Company Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies Not Applicable
- K. Foreign Subsidiary Value Using CARVM Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method Not Applicable
- M. All SCA Investments Not Applicable
- N. Investment in Insurance SCAs Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking Not Applicable

11. Debt - Not Applicable

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - Not Applicable

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. Outstanding Shares Not Applicable
- B. Dividend Rate of Preferred Stock Not Applicable
- C. Dividend Restrictions Not Applicable
- D. Ordinary Dividends Not Applicable
- E. Company Profits Paid as Ordinary Dividends Not Applicable
- F. Surplus Restrictions Not Applicable
- G. Surplus Advances Not Applicable
- H. Stock Held for Special Purposes Not Applicable
- I. Changes in Special Surplus Funds Not Applicable
- J. Unassigned Funds (Surplus)

The portion of unassigned funds (surplus) represented by cumulative unrealized gain is \$85,726.

K. Company-Issued Surplus Debentures or Similar Obligations

1	2	3	4	5	6	7	8
Item Number	Date Issued	Interest Rate	Original Issue Amount of Note		Carrying Value of Note Prior Year	Carrying Value of Note Current Year	Unapproved Interest And/Or Principal
1001	02/20/2013	5.000 %	\$ 1,000,000	YES	\$ 1,000,000	\$ 1,000,000	\$ 150,137
1002	02/20/2013	5.000	500,000	YES	500,000	500,000	75,068
1003	03/18/2014	5.000	500,000	YES	500,000	500,000	75,068
1004	12/31/2014	5.000	5,000,000	YES	5,000,000	5,000,000 .	750,685
1005	12/31/2014	5.000	5,000,000	YES	5,000,000	5,000,000 .	750,685
1006	12/31/2014	5.000	4,000,000	YES	4,000,000	4,000,000	600,548
1007	03/06/2015	5.000	10,000,000	YES	10,000,000	10,000,000	1,501,370
1008	03/31/2015	5.000	4,000,000	YES	4,000,000	4,000,000	600,548
1009	05/29/2015	5.000	20,000,000	YES	20,000,000	20,000,000	3,002,740
Total	XXX	XXX	\$ 50,000,000	XXX	\$ 50,000,000	\$ 50,000,000	\$ 7,506,849

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations (Continued)

1	9	10	1	1	12	13	14
Item Number	Current Year Interest Expense Recognized	Recognize	ense paid to a ed liquidity	Offset age (not amounts 3rd party provider)	Current Year Principal Paid	Life-To-Date Principal Paid	Date of Maturity
1001	\$	- · \$ 44	13,288	% \$. \$	
1002		-	21,644				
1003		- 19	94,863				
1004		1,75	51,370				
1005		•	•				
1006							
		· ·	-				
Total	<u>\$</u>	<u> </u>	<u>26,371 </u>	(X <u>\$</u>		\$	·XXX
1	15	16	17	18		19	
1 Item Number		Surplus Note payments subject	Were Surplus Note proceeds	e Is Asset Issi Related Pa	arty	19 e of Assets Received	Upon Issuance
	Are Surplus Note 1 payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO)	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	ls Asset Issu Related Pa (YES/NC	arty)) Typ		•
ltem Number	Are Surplus Note payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO)	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issi Related Pa (YES/NC	arty)) Typ	e of Assets Received	
Item Number 1001	Are Surplus Note payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO)	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issu Related Pa (YES/NOYES	arty)) Typ	e of Assets Received Cash	
Item Number1001 1002 1003	Are Surplus Note payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO)	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issu Related Pa (YES/NO YES YES YES	arty)) Typ	e of Assets Received Cash Cash	
Item Number1001 1002 1003	Are Surplus Note payments contractually linked? (YES/NO)	Surplus Note payments subject to administrative offsetting provisions? (YES/NO) NO	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issu Related Pa (YES/NO YES YES YES YES YES YES YES	arty)) Typ	e of Assets Received Cash Cash Cash Cash Cash Cash	
1001	Are Surplus Note payments contractually linked? (YES/NO) NO NO NO NO NO NO	Surplus Note payments subject to administrative offsetting provisions? (YES/NO) NO	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issu Related Pa (YES/NO YES YES YES YES YES YES YES	arty)) Typ	e of Assets Received Cash Cash Cash Cash	
1001	Are Surplus Note payments contractually linked? (YES/NO) NO NO NO NO NO NO	Surplus Note payments subject to administrative offsetting provisions? (YES/NO) NO	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO)	Is Asset Issu Related Pa (YES/NO YES	arty D) Typ	e of Assets Received Cash Cash Cash Cash Cash Cash Cash Cash	
Item Number	Are Surplus Note payments contractually linked? (YES/NO) NO	Surplus Note payments subject to administrative offsetting provisions? (YES/NO) NO NO NO NO NO NO NO NO NO	Were Surplus Note proceeds used to purchase an asset directly from the holder of the surplus note? (YES/NO) NO	Is Asset Issue Related Part (YES/NO YES	arty)) Typ	e of Assets Received Cash Cash Cash Cash Cash Cash Cash Cash	

ltem Number	Principal Amount of Assets Received Upon Issuance	Book/Adjusted Carry Value of Assets	Is Liquidity Source a Related Party to the Surplus Note Issuer? (YES/NO)
1001	\$ 1,000,000	\$	YES
1002	500,000		YES
1003	500,000		YES
1004	5,000,000		YES
1005	5,000,000		YES
1006	4,000,000		YES
1007	10,000,000		YES
1008	4,000,000		YES
1009	20,000,000		YES
Total	\$ 50,000,000	\$	XXX

21

20

Each payment of principal and interest on the surplus notes can only be made with prior approval from the DOI and only to the extent that the Company has sufficient surplus earnings to make such payments.

22

As instructed by the DOI, the Company will issue a \$273,000,000 surplus note to Blue Cross, which has been included in surplus at December 31, 2024.

- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years Not Applicable

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments Not Applicable
- B. Assessments Not Applicable

Total.....

1

C. Gain Contingencies - Not Applicable

14. Liabilities, Contingencies and Assessments (Continued)

- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits Not Applicable
- E. Joint and Several Liabilities Not Applicable
- F. All Other Contingencies

CMS regularly conducts audits of Medicare Advantage plans to determine compliance with regulations. The Company recorded \$220,424 of reserves in 2024 for potential payments to CMS for these audits. These reserves are still outstanding as of December 31, 2024.

The Company is involved in litigation, regulatory investigations, and commercial disputes arising in the ordinary course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Company's financial position, results from operations or cash flow.

Health care businesses are subject to a changing social, economic, legal, legislative, and regulatory environment. Other issues that may affect the Company's business include efforts to expand tort liability to health insurance plans; class action lawsuits targeting large companies, including the BCBSA and its licensees; actions to restrict insurance pricing and the application of underwriting standards; and efforts to revise federal tax laws.

No other accrued liabilities were recorded on the accompanying balance sheets for litigation, regulatory or business environment matters as of December 31, 2024.

- 15. Leases Not Applicable
- 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk Not Applicable
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities Not Applicable
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
 - A. ASO Plans Not Applicable
 - B. ASC Plans Not Applicable
 - C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract
 - (1) Revenue from the Company's Medicare contract (or similarly structured cost-based reimbursement contract) for the year 2024 consisted of no revenue for medical and hospital related services and no revenue for administrative expenses.
 - (2) As of December 31, 2024, the Company reported \$21,743,352 as receivables from the Centers for Medicare and Medicaid Services and others for uninsured health plans.
 - (3) In connection with the Company's Medicare contract (or similarly structured cost-based reimbursement contract), the Company has not recorded any allowances or reserves for adjustment of recorded revenues at December 31, 2024.
 - (4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators Not Applicable

20. Fair Value Measurements

A. Fair Value Measurement

SSAP No. 100, Fair Value Measurements, establishes a fair value hierarchy which the Company uses to rank investment fair value assumptions based on their observability.

- Level 1 Quoted prices for identical instruments traded in active markets. Level 1 investments include debt and equity securities that are traded in an active exchange market.
- Level 2 Quoted prices for similar instruments traded in active markets, quoted prices for identical or similar instruments in inactive markets, nonquoted prices that are observable (for example, interest rates), and nonquoted prices that are derived from, or corroborated by, observable market data. Level 2 investments include debt securities, asset-backed securities, mortgage-backed securities and equity securities.
- Level 3 Nonquoted prices that are not directly observable. Level 3 investments include financial instruments whose value is determined using
 pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair value
 requires significant management judgment or estimation.
- (1) Fair value at reporting date

	Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a.	Assets at fair value					
	Bonds, industrial and misc.	\$	\$ 821,635	\$	\$	\$ 821,635
	Common stock, mutual funds	–	8,450,407			8,450,407
	Perpetual preferred stock, industrial and misc.	661,012				661,012
	Total assets at fair value/NAV	\$ 661,012	\$ 9,272,042	\$	\$	\$ 9,933,054
b.	Liabilities at fair value					_
	Total liabilities at fair value	\$	\$	\$	\$	\$

- (2) Fair value measurements in Level 3 of the fair value hierarchy Not Applicable
- (3) The Company did not have any transfers between fair value levels during the reporting period.
- (4) Fair values for the Company's Level 2 fixed maturity securities are based on prices provided by its investment managers and custodian banks. The Company's fixed maturity securities portfolio is highly liquid, which allows for the portfolio to be valued through third-party pricing services using market and matrix pricing.

20. Fair Value Measurements (Continued)

Fair values for the Company's Level 2 equity securities are based on prices provided by readily observable market quotations, when available.

- (5) Derivatives Not Applicable
- B. Other Fair Value Disclosures Not Applicable
- C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	. \$ 119,034,528	\$ 125,510,659	\$ 26,938,092	\$ 92,096,436	\$	\$	\$
Common stock	8,450,407	8,450,407		8,450,407			
Preferred stock	661,012	661,012	661,012				
Short-term investments	4,966,960	4,965,758	4,966,960				

- D. Not Practicable to Estimate Fair Value Not Applicable
- E. Nature and Risk of Investments Reported at NAV Not Applicable

21. Other Items

A. Unusual or Infrequent Items

In December 2024, the Company submitted a Risk Based Capital Plan (RBC Plan) with the DOI. The RBC Plan is a joint plan with the Company and Blue Cross to maintain an agreed upon minimum level of capitalization and provide for a merger of the Company and Blue Cross, whereby Blue Cross would be the surviving insurer. The merger is expected to occur in 2025, contingent on its feasibility and practicality. The DOI provided a written order to proceed with the submitted RBC Plan.

- B. Troubled Debt Restructuring Not Applicable
- C. Other Disclosures Not Applicable
- D. Business Interruption Insurance Recoveries Not Applicable
- E. State Transferable and Non-Transferable Tax Credits Not Applicable
- F. Subprime-Mortgage-Related Risk Exposure Not Applicable
- G. Retained Assets Not Applicable
- H. Insurance-Linked Securities (ILS) Contracts Not Applicable
- I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy Not Applicable

22. Events Subsequent

Subsequent events have been considered through February 26, 2025 for the statutory statement available for issue on February 26, 2025.

Type I – Recognized Subsequent Event:

In February 2025, the Company issued, and Blue Cross purchased, a \$273,000,000 surplus note.

Type II - Nonrecognized Subsequent Events:

The Company is not aware of any Type II subsequent events that could have a material effect on its financial statements.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes () No (X)

23. Reinsurance (Continued)

Section 2 - Ceded Reinsurance Report - Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

Section 3 - Ceded Reinsurance Report - Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$ 416,040
- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes () No (X)

- B. Uncollectible Reinsurance Not Applicable
- C. Commutation of Reinsurance Reflected in Income and Expenses Not Applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation Not Applicable
- E. Reinsurance Credit Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

The Company estimates accrued retrospective premium adjustments, for its health insurance business, through a mathematical approach using an algorithm of the Company's underwriting rules and experience rating practices.

B. Method Used to Record

Accrued retrospective premiums are recorded as an adjustment to earned premiums.

C. Amount and Percent of Net Retrospective Premiums

The amount of net premiums written by the Company that are subject to retrospective rating features were \$1,044,370,248 and \$958,481,538, which represented 100% of the total net premiums written, for the years ended December 31, 2024 and 2023, respectively.

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

		(1)	(2)	(3)	(4)	(5)
		Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting	Year					
(1) Medical lo	ss ratio rebates incurred	\$. \$. \$	\$ 95,302	\$ 95,302
(2) Medical lo	ss ratio rebates paid					
(3) Medical lo	ss ratio rebates unpaid				220,264	220,264
(4) Plus reins	urance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reins	urance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates u	npaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 220,264
Current Reporti	ng Year-to-Date					
(7) Medical lo	ss ratio rebates incurred	\$. \$. \$	\$ 61,949	\$ 61,949
(8) Medical lo	ss ratio rebates paid				282,213	282,213
(9) Medical lo	ss ratio rebates unpaid					–
	urance assumed amounts					
(11) Less reins	urance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates u	npaid net of reinsurance	XXX	XXX	XXX	XXX	\$

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

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

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? NO

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year Not Applicable
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance Not Applicable

Notes to the Financial Statements

25. Change in Incurred Claims and Claim Adjustment Expenses

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

Reserves as of December 31, 2023 were \$62.4 million for unpaid insured claims and unpaid claims adjustment expenses, including accrued medical incentive pool of \$5.2 million, net of gross healthcare receivables of \$55.3 million. As of December 31, 2024, \$62.5 million has been paid for expenses attributable to insured events of prior years. Reserves remaining for prior years were \$0.2 million as of December 31, 2024. The reestimation of reserves for unpaid insured claims, unpaid claims adjustment expenses and accrued medical incentive pool, net of gross healthcare receivables, for prior years based on the latest information known regarding individual claims, as well as the ongoing analysis of recent loss development trends, resulted in an unfavorable prior-year development of \$0.3 million since December 31, 2023.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses

There were no significant changes in the methodology or assumptions used in calculating the liability for unpaid losses and loss adjustment expenses from prior year.

26. Intercompany Pooling Arrangements - Not Applicable

27. Structured Settlements - Not Applicable

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2024	\$ 20,974,719	\$ 21,157,475 .	\$	\$	\$
09/30/2024	19,953,293 .	21,162,491	5,552,533		
06/30/2024	19,148,976 .	19,718,010	4,626,865	14,162,357	
03/31/2024	19,544,861 .	16,983,353	4,000,995	12,536,199	488,943
12/31/2023	18,824,588 .	15,618,875	4,276,604	11,059,627	587,668
09/30/2023	15,626,237 .	15,780,518	3,974,590	11,203,552	640,384
06/30/2023	15,471,435 .	16,109,186	3,787,375	11,073,926	459,799
03/31/2023	14,671,229 .	15,083,568	2,626,262	10,930,250	257,287
12/31/2022	12,347,379 .	12,397,576	3,976,948	8,103,015	181,009
09/30/2022	11,725,723 .	12,340,521	3,575,452	8,530,310	78,559
06/30/2022	11,180,295 .	12,107,243	3,458,073	7,815,622	757,568
03/31/2022	10,474,956 .	11,166,231	1,920,760	8,406,116	687,078

B. Risk-Sharing Receivables

			Risk Sharing Receivable			Actual Risk Sharing Amounts Received			ved
Calendar Year	Evaluation Period Year Ending	As Estimated in the Prior Year	As Estimated in the Current Year	Billed	Not Yet Billed	In Year Billed	First Year Subsequent	Second Year Subsequent	All Other
2024	2024	\$ 11,821,690	\$	\$ 10,141,084	\$. \$ 10,141,084	\$	\$	\$
	2025		15,157,824						
2023	2023	11,325,610		12,727,934		12,727,934			
	2024		11,821,690						
2022	2022	5,581,589		5,209,071		5,209,071			
	2023		11,325,610						

The Company does not net receivable and payable balances with the same provider.

29. Participating Policies - Not Applicable

30. Premium Deficiency Reserves

1.	Liability carried for premium deficiency reserves:	\$251,900,000
2.	Date of the most recent evaluation of this liability:	12/31/2024
3.	Was anticipated investment income utilized in the calculation?	YES

The Company recorded a premium deficiency reserve of \$251,900,000 and \$32,500,000 for the years ended December 31, 2024 and December 31, 2023, respectively, as a result of expected underwriting losses in our government health programs business, primarily due to high claims trend and reduced premium income resulting from CMS changes to the Company's Medicare Advantage contract.

31. Anticipated Salvage and Subrogation

The Company took into account anticipated salvage and subrogation in its determination of the liability for unpaid claims/losses and reduced the liability by \$685,475 and \$1,064,018 for the years ended December 31, 2024 and 2023, respectively.

GENERAL

1.1. Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?						YES
	If yes, complete Sched	ule Y, Parts 1, 1A, 2, and 3.				
1.2.	such regulatory official providing disclosure so in its Model Insurance	g entity register and file with its domiciliary State Insura al of the state of domicile of the principal insurer in the ubstantially similar to the standards adopted by the Nat Holding Company System Regulatory Act and model re and disclosure requirements substantially similar to those	e Holding Company Sy ional Association of Ins egulations pertaining th	stem, a registration s surance Commissione nereto, or is the report	statement ers (NAIC) ing entity	YES
1.3.	•	·	•	-		
1.4.	•	publicly traded or a member of a publicly traded group?				
1.5.		s yes, provide the CIK (Central Index Key) code issued by				
	•	made during the year of this statement in the charter, by		•		
	of the reporting entity?					
2.2.						
3.1.	State as of what date t	the latest financial examination of the reporting entity wa	as made or is being mad	de		12/31/2021
3.2.		nat the latest financial examination report became avail d be the date of the examined balance sheet and not the				12/31/2021
	domicile or the report examination (balance	the latest financial examination report became availabling entity. This is the release date or completion date sheet date)	e of the examination r	eport and not the da	te of the	06/22/2023
3.4. By what department or departments? Idaho Department of Insurance						
3.5.	3.5. Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?					
3.6.	Have all of the recomn	nendations within the latest financial examination report	been complied with?			N/A
4.1.	any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:					
	4.11. sales of new business? 4.12. renewals?					
4.2.	affiliate, receive credit	red by this statement, did any sales/service organization or commissions for or control a substantial part (more th	an 20 percent of any m	ajor line of business r	neasured	
		siness?				
5 1		y been a party to a merger or consolidation during the pe				
	If yes, complete and fil	e the merger history data file with the NAIC.				
5.2.		e of the entity, NAIC company code, and state of domicil a result of the merger or consolidation.	ie (use two ietter state a	ibbleviation) for any e	mility mat	
		1	2	3		
		Name of Entity	NAIC Company Code	State of Domicile		
6.1.		ty had any Certificates of Authority, licenses or registra				NO
6.0	·	by any governmental entity during the reporting period?				INO
6.2.	If yes, give full informa	ition				
7.1.	Does any foreign (non-	-United States) person or entity directly or indirectly contr	ol 10% or more of the re	enorting entity?		NO
	If yes,	officed States) person of entity directly of indirectly conti	or row or more or the re	sporting entity:		
7.2.	7.21. State the percent 7.22. State the nation	tage of foreign controlality(s) or entity(s); or if the entity(s) and identify the type of entity(s) (e.g., individually in the entity (s) (e	entity is a mutual or re	eciprocal, the nationa	lity of its	%
		1	2			
		Nationality	Type of En	tity		
8.1.	3.1. Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?					
8.2.	If response to 8.1 is ye	s, please identify the name of the DIHC				
8.3.	Is the company affiliat	ed with one or more banks, thrifts or securities firms?				NO
8.4.	federal financial regula	es, please provide the names and locations (city and state) atory services agency [i.e. the Federal Reserve Board (FRI surance Corporation (FDIC) and the Securities Exchange	B), the Office of the Cor	nptroller of the Curren	cy (OCC),	

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

	1	2	3	4	5	6		
	Affiliate Name	Location (City, State)	FRB	occ	FDIC	SEC		
			NO	NO	NO	NO		
		holding company with significant insurance sidiary of the depository institution holding com				NO		
		a company or subsidiary of a company that h				NO		
	What is the name and address of the indepe audit?	endent certified public accountant or accounting	ng firm retaine	d to conduct t	he annual			
	Eide Bailly 800 Nicollet Mall #1300, Minneapol							
	accountant requirements as allowed in Section	ns to the prohibited non-audit services providion 7H of the Annual Financial Reporting Mo	odel Regulation	n (Model Audi	t Rule), or	NO		
10.2.	If the response to 10.1 is yes, provide informat	ion related to this exemption:						
	10.3. Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?							
10.4.	If the response to 10.3 is yes, provide informat	ion related to this exemption:						
10.5.	Has the reporting entity established an Audit C	ommittee in compliance with the domiciliary st	ate insurance l	aws?		YES		
10.6.	If the response to 10.5 is no or n/a, please expl	lain.						
	11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification? Erik Wheeler, Director, Actuarial Services, Blue Cross of Idaho 3000 E. Plne Ave. Meridian, ID 83642							
12.1.	Does the reporting entity own any securities of 12.11 Name of real estate holding company	f a real estate holding company or otherwise ho	old real estate i	ndirectly?		NO		
12.2.	If yes, provide explanation							
13.	FOR UNITED STATES BRANCHES OF ALIEN R							
		ar in the United States manager or the United St			-			
13.2.		ansacted for the reporting entity through its U						
13.3.	Have there been any changes made to any of	the trust indentures during the year?						
13.4.	If answer to (13.3) is yes, has the domiciliary of	or entry state approved the changes?						
14.1.	 14.1. Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?							
14.11	. If the response to 14.1 is no, please explain:							
14.2.	Has the code of ethics for senior managers be	een amended?				NO		
14.21	. If the response to 14.2 is yes, provide informa-	tion related to amendment(s).						
	Have any provisions of the code of ethics bee . If the response to 14.3 is yes, provide the natu	n waived for any of the specified officers?re of any waiver(s).				NO		

15.2. If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

15.1. Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not

on the SVO Bank List?.

..NO...

1	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount
			\$

16	In the musches	BOARD OF DIRECTORS	b.adia.aba.aaaittaa			
	thereof?	se or sale of all investments of the reporting entity passed upon either by the board of directors or a		YES		
	thereof?	rting entity keep a complete permanent record of the proceedings of its board of directors and all su				
	on the part of	ting entity an established procedure for disclosure to its board of directors or trustees of any materia any of its officers, directors, trustees or responsible employees that is in conflict or is likely to confli person?	ct with the official	YES		
		FINANCIAL				
19.		ement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Principles)?		NO		
20.1.	20.11 To dire	t loaned during the year (inclusive of Separate Accounts, exclusive of policy loans): ctors or other officers				
		skholders not officerses, supreme or grand (Fraternal only)				
20.2		t of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans)				
20.2.	20.21 To dire	ctors or other officers	\$.			
		es, supreme or grand (Fraternal only)				
21.1.		sets reported in this statement subject to a contractual obligation to transfer to another party wit on being reported in the statement?		NO		
21.2.	•	he amount thereof at December 31 of the current year:	٨			
	21.21 Rented from others					
	21.23 Leased from others\$					
	21.24 Other		\$.			
22.1.		tement include payments for assessments as described in the <i>Annual Statement Instructions</i> other association assessments?		NO		
22.2.	If answer is y	res: nt paid as losses or risk adjustment	٨			
		nt paid as losses of risk adjustment				
		mounts paid				
23.1.	Does the rep	orting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this stateme	ent?	YES		
23.2.	23.2. If yes, indicate any amounts receivable from parent included in the Page 2 amount:					
24.1.		urer utilize third parties to pay agent commissions in which the amounts advanced by the third part days?	ies are not settled in	NO		
24.2.	If the respon	se to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.				
		1	2			
		Name of Third-Party	ls the Third-Party Agent a Related Party (Yes/No)			
	_					
		INVESTMENT				
25.01		e stocks, bonds and other securities owned December 31 of current year, over which the reporting the actual possession of the reporting entity on said date? (other than securities lending programs a		YES		
25.02	. If no, give	full and complete information, relating thereto				
25.03		ties lending programs, provide a description of the program including value for collateral and and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 wholed)				
25.04		orting entity's securities lending program, report amount of collateral for conforming programs as ital Instructions.				
25.05	. For the rep	orting entity's securities lending program, report amount of collateral for other programs	\$			
25.06		securities lending program require 102% (domestic securities) and 105% (foreign securities) from of the contract?		N/A		
25.07	. Does the re	eporting entity non-admit when the collateral received from the counterparty falls below 100%?		N/A		
25.08		eporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending securities lending?		N/A		

25.09.				of the following as of December 3		
				chedule DL, Parts 1 and 2ssets reported on Schedule DL, Pa		
				age		
26.1.	under the control of the	ne reporting entity or has the repo	orting entity so	y owned at December 31 of the cold or transferred any assets subject 1.1 and 25.03)	ct to a put option contract	YES
26.2.		nt thereof at December 31 of the c		, , , , , , , , , , , , , , , , , , , ,		
	26.21. Subject to rep	ourchase agreements				
	26.25. Placed under	option agreements			¢	
				B Capital Stock		
				_Bding agreements		
26.3.	For category (26.26) p	rovide the following:	T.			
		1		2	3	
		Nature of Restriction		Description	Amount	
					\$	
27.1.	Does the reporting entity	have any hedging transactions re	ported on Sch	edule DB?		NO
				n made available to the domicil		
d	lescription with this stat	ement				N/A
LINES :	27.3 through 27.5: FOR I	LIFE/FRATERNAL REPORTING EN	TITIES ONLY:			
27.3. Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity?					NO	
·					INU	
		YES, does the reporting entity util				NO
2	27.42 Permitted account	ng practice				NO
2	27.43 Other accounting g	juidance				NO
_				rovisions of SSAP No. 108, the rep		NO
•		y has obtained explicit approval fi		illiary state.		NU
•	Hedging strategy s	ubject to the special accounting p	orovisions is co	onsistent with the requirements of		
•				hedging strategy is incorporated was within the Actuarial Guideline Co		
	Amount.	•			·	
•				that the hedging strategy meets ned Hedging Strategy is the hedgi		
		actual day-to-day risk mitigation		ned fledging Strategy is the fledgi	ing strategy being used by	
				e current year mandatorily conve		
	•	• •				
28.2.	If yes, state the amount	thereof at December 31 of the cur	rent year			
				rtgage loans and investments held		
				and other securities, owned through pany in accordance with Section 1		
i	Considerations, F. Outs	courcing of Critical Functions, C	Custodial or S	Safekeeping Agreements of the	NAIC Financial Condition	\/F0
						YES
29.01.	For agreements that cor	nply with the requirements of the	NAIC FINANCIA	l Condition Examiners Handbook,	complete the following:	
		·			_	
		me of Custodian(s)			todian's Address	
				Boise, Idaho		
Wells F	argo			Sioux Falls, South Dakota		
	For all agreements that on name, location and a co		nts of the <i>NAI</i> 0	C Financial Condition Examiners H	landbook, provide the	
	1	2		3		
	Name(s)	Location(s)		Complete Exp	lanation(s)	
29.03.	Have there been any cha	anges, including name changes, ir	the custodiar	n(s) identified in 29.01 during the o	eurrent year?	NO
20.04	If you give full and com	alote information relating thereto:				

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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

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

1	2
Name of Firm or Individual	Affiliation
Pacific Investment Management Company LLC	U
Paul G Zurlo "handle securities"	
David M Ward, "handle securities"	
Peter P Didio "handle securities"	I
Kaye Woods, "handle securities"	
Marc F Roberts, "handle securities"	I

29.0597. For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?......YES.....

29.0598. For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?

YES

29.06. For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
	Pacific Investment Management Company LLC	549300KGPYO7XGMYYN38	SEC	NO

30.1. Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?......YES...

30.2. If yes, complete the following schedule:

1	2	2
'	2	3
		Book/Adjusted Carrying Value
CUSIP #	Name of Mutual Fund	Value
92837F763	VIRTUS:SEIX FR HI INC I	\$ 3,923,833
04045F592	ARI FDS:FLT RT INC I	2,303,992
77958B402	T ROWE PRICE I:FR	2,222,582
30.2999 TOTAL		\$8,450,407

30.3. For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
Name of Mutual Fund (from above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book / Adjusted Carrying Value Attributable to the Holding	Date of Valuation
VIRTUS:SEIX FR HI INC I	UFINET	-	12/31/2024
VIRTUS:SEIX FR HI INC I	ASURION CORPORATION	44,421	12/31/2024
VIRTUS:SEIX FR HI INC I	ULTRA CLEAN HOLDINGS	39,845	12/31/2024
VIRTUS:SEIX FR HI INC I	AMERICAN AIRLINES INC		12/31/2024
VIRTUS:SEIX FR HI INC I	WATERBRIDGE	37,616	12/31/2024
ARI FDS:FLT RT INC I	Ukg, Inc. Term Loan 10-feb-2031	73,273	12/31/2024
ARI FDS:FLT RT INC I	Cdk Global li Llc Term Loan 06-jul-2029	49,689	12/31/2024
ARI FDS:FLT RT INC I	Broadstreet Partners, Inc. Term Loan 16-jun-2031	45,967	12/31/2024
ARI FDS:FLT RT INC I	Truist Insurance Holdings, Llc Term Loan 06-may- 2032	45,698	12/31/2024
ARI FDS:FLT RT INC I	Clubcorp Holdings, Inc. Term Loan 18-sep-2026		
T ROWE PRICE I:FR	TRP Government Reserve	225,347	12/31/2024
T ROWE PRICE I:FR	AssuredPartners	46,720	12/31/2024
T ROWE PRICE I:FR	HUB International	43,213	12/31/2024
T ROWE PRICE I:FR	UKG	42,867	12/31/2024
T ROWE PRICE I:FR	Epicor Software	35,108	12/31/2024

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

Tot fall value.			
	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1. Bonds	\$ 130,476,417	\$124,001,488	\$(6,474,930)
31.2. Preferred Stocks	661,012	661,012	–
31.3. Totals	\$ 131,137,429	\$ 124,662,500	\$ (6.474.930)

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

FMV supplied by investment managers/advisors and custodians listed in 29.06 and 29.01, respectively, above.

32.1.	Was the rate used to calculate fair value determined by a broker or custodia	in for any of the securities in Schedule D?	YES
32.2.	If the answer to 32.1 is yes, does the reporting entity have a copy of the copy) for all brokers or custodians used as a pricing source?		
32.3.	If the answer to 32.2 is no, describe the reporting entity's process for determined fair value for Schedule D:	mining a reliable pricing source for purposes of disclose	ure of
33.1.	Have all the filing requirements of the <i>Purposes and Procedures Manual of</i>	the NAIC Investment Analysis Office been followed?	YES
33.2.	If no, list exceptions:		
34.	By self-designating 5GI securities, the reporting entity is certifying the follow a. Documentation necessary to permit a full credit analysis of the secur security is not available.		or PL
	 b. Issuer or obligor is current on all contracted interest and principal pay c. The insurer has an actual expectation of ultimate payment of all contracted. 		
	Has the reporting entity self-designated 5GI securities?		
35.	By self-designating PLGI securities, the reporting entity is certifying its contained and Procedures Manual of the NAIC Investment Analysis Office (P&P Manuelements of each self-designated PLGI security:	ual) for private letter rating (PLR) securities and the follo	owing
	a. The security was either:i. issued prior to January 1, 2018 (which is exempt from PLR filing r	equirements pursuant to the P&P Manual) or	
	ii. issued from January 1, 2018 to December 31, 2021 and subject		ary 1,
	2022 which confidentiality agreement remains in force, for which letter rating rationale report to the SVO due to confidentiality securities").		
	b. The reporting entity is holding capital commensurate with the NAIC security.	Designation and NAIC Designation Category reported for	or the
	 c. The NAIC Designation and NAIC Designation Category were derived capacity as an NRSRO which is shown on a current private letter reinsurer and available for examination by state insurance regulators. 		
	d. Other than for waived submission PLR securities, defined above, on		
	after January 1, 2022, if the reporting entity is not permitted to share report of the PL security with the SVO, it certifies that it is reporting designation.		
	Has the reporting entity self-designated PLGI to securities, all of which meet	t the above requirement and as specified in the P&P Mar	iual?NO
36.	By assigning FE to a Schedule BA non-registered private fund, the report designated FE fund:	ting entity is certifying the following elements of each	self-
	a. The shares were purchased prior to January 1, 2019.		
	 b. The reporting entity is holding capital commensurate with the NAIC D c. The security had a public credit rating(s) with annual surveillance a 		RSRO
	prior to January 1, 2019.		
	 d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public of 	credit rating(s) with annual surveillance assigned by an	NAIC
	CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NA	AIC CRP has not lansed	
	Has the reporting entity assigned FE to Schedule BA non-registered private to		NO
37.	By rolling/renewing short-term or cash equivalent investments with continuidentified through a code (%) in those investment schedules), the reporting	entity is certifying to the following:	Part 2
	a. The investment is a liquid asset that can be terminated by the reportingb. If the investment is with a nonrelated party or nonaffiliate, then it re		ted at
	the discretion of all involved parties. c. If the investment is with a related party or affiliate, then the rep	porting entity has completed robust re-underwriting of	of the
	transaction for which documentation is available for regulator review		
	d. Short-term and cash equivalent investments that have been renewed 37.a - 37.c are reported as long-term investments.	d/rolled from the prior period that do not meet the crite	eria in
	Has the reporting entity rolled/renewed short-term or cash equivalent invest		
	Does the reporting entity directly hold cryptocurrencies?		
	If the response to 38.1 is yes, on what schedule are they reported?		
	Does the reporting entity directly or indirectly accept cryptocurrencies as pa		NO
39.2.	If the response to 39.1 is yes, are the cryptocurrencies held directly or are th 39.21 Held directly		
39.3.	If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for p	ayments of premiums or that are held directly.	
	1	2	3
			Accepted for
	Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Payment of Premiums
	OTHE		
40.1.	Amount of payments to trade associations, service organizations and statis	stical or rating bureaus, if any?	\$ 1,504,494

Annual Statement for the Year 2024 of the Blue Cross of Idaho Care Plus, Inc. $\,$

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

40.2. List the name of the organization and the amount paid if any such payment represented service organizations, and statistical or rating bureaus during the period covered by this state.						
1	2					
Name	Amount Paid					
Milliman Inc. \$						
41.1. Amount of payments for legal expenses, if any?	\$592,837					
41.2. List the name of the firm and the amount paid if any such payment represented 25% or mor covered by this statement.	re of the total payments for legal expenses during the period					
1	2					
Name	Amount Paid					
Holland & Hart LLP	\$					
42.1. Amount of payments for expenditures in connection with matters before legislative bodies, any?						
42.2. List the name of the firm and the amount paid if any such payment represented 25% or matters before legislative bodies, officers, or departments of government during the period of						
1	2					
Name	Amount Paid					

GENERAL INTERROGATORIESPART 2 - HEALTH INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supp									
1.2										
1.3	What portion of Item (1.2) is not reported on the Medica 1.31 Reason for excluding:	re Supplement Insura	nce Experience Exhibit?		\$					
1.4	Indicate amount of earned premium attributable to Cana		•							
1.5	Indicate total incurred claims on all Medicare Supplement insurance.									
1.6	Individual policies: Most current three years: 1.61 Total premium earned 1.62 Total incurred claims 1.63 Number of covered lives All years prior to most current three years: 1.64 Total premium earned 1.65 Total incurred claims 1.66 Number of covered lives				\$\$	7,295,871 2,843 8,666,091 7,516,394				
1.7	Group policies: Most current three years:				ė					
	1.71 Total premium earned									
	1.73 Number of covered lives					•••••				
	All years prior to most current three years: 1.74 Total premium earned				\$					
	1.75 Total incurred claims									
	1.76 Number of covered lives									
2. He	ealth Test:		1	2						
			Current Year	Prior Year						
	2.1 Premium Numerator	\$	1,057,434,958 \$	974,500,825						
	2.2 Premium Denominator									
	2.3 Premium Ratio (2.1/2.2) 2.4 Reserve Numerator									
	2.5 Reserve Denominator	\$	427,016,861 \$	170,884,379						
	2.6 Reserve Ratio (2.4/2.5)		100.000 %	100.000 %						
3.1	Has the reporting entity received any endowment or gift returned when, as and if the earnings of the reporting entity yes, give particulars:					NO				
4.1	Have copies of all agreements stating the period and na dependents been filed with the appropriate regulatory ag					YES				
4.2	If not previously filed, furnish herewith a copy(ies) of su	ch agreement(s). Do	:hese agreements include	additional benefits offered?		NO				
5.1	Does the reporting entity have stop-loss reinsurance?									
5.2	If no, explain:									
	• •									
5.3	Maximum retained risk (see instructions)									
	5.31 Comprehensive Medical									
	5.33 Medicare Supplement				\$					
	5.34 Dental and Vision									
	5.36 Other									
6.	Describe a supersupersubject the new artists and its uppersubs	ave to protect subscril	pers and their dependents	against the risk of insolvency						
71	Describe arrangement which the reporting entity may had including hold harmless provisions, conversion privilege and any other agreements: The financial reserve levels of Blue Cross of Idaho Care 608 to be assured that the Company is financially able to providers. Does the reporting entity set up its claim liability for providers.	es with other carriers, Plus, Inc. are closely to provide insurance by	agreements with providers scrutinized by the Idaho Ir senefits to its members an	surance Department per Idaho d pay covered health insuranc	Code S e claims	s to its				
7.1	including hold harmless provisions, conversion privilege and any other agreements: The financial reserve levels of Blue Cross of Idaho Care 608 to be assured that the Company is financially able t providers. Does the reporting entity set up its claim liability for providers.	es with other carriers, Plus, Inc. are closely to provide insurance by	agreements with providers scrutinized by the Idaho Ir senefits to its members an	surance Department per Idaho d pay covered health insuranc	Code S e claims	s to its				
7.2	including hold harmless provisions, conversion privilege and any other agreements: The financial reserve levels of Blue Cross of Idaho Care 608 to be assured that the Company is financially able t providers. Does the reporting entity set up its claim liability for providing in the provider of the pr	es with other carriers, Plus, Inc. are closely to provide insurance by vider services on a se	agreements with providers scrutinized by the Idaho Ir senefits to its members an	surance Department per Idaho d pay covered health insuranc	Code S e claims	s to its				
	including hold harmless provisions, conversion privilege and any other agreements: The financial reserve levels of Blue Cross of Idaho Care 608 to be assured that the Company is financially able t providers. Does the reporting entity set up its claim liability for provider if no, give details Provide the following information regarding participatin 8.1 Number of providers at start of reporting year	es with other carriers, Plus, Inc. are closely to provide insurance by vider services on a se	agreements with providers scrutinized by the Idaho Ir benefits to its members an rvice date basis?	surance Department per Idaho d pay covered health insuranc	Code S e claims	s to its YES				
7.2	including hold harmless provisions, conversion privilege and any other agreements: The financial reserve levels of Blue Cross of Idaho Care 608 to be assured that the Company is financially able t providers. Does the reporting entity set up its claim liability for provider no, give details Provide the following information regarding participatin	es with other carriers, Plus, Inc. are closely to provide insurance by vider services on a se	agreements with providers scrutinized by the Idaho Ir benefits to its members an rvice date basis?	surance Department per Idaho d pay covered health insuranc	Code S e claims	s to its YES				

GENERAL INTERROGATORIESPART 2 - HEALTH INTERROGATORIES

9.2	If yes, direct premium earned: 9.21 Business with rate guarantees between 15-36 months 9.22 Business with rate guarantees over 36 months									
10.1	0.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?									
10.2	0.2 If yes: 10.21 Maximum amount payable bonuses									
11.1	Is the reporting entity organized as: 11.12 A Medical Group/Staff Model, 11.13 An Individual Practice Association (IPA), or, 11.14 A Mixed Model (combination of above)?							NO		
11.2	2 Is the reporting entity subject to Statutory Minimum Capital and	Surplus R	Requirements?					YES		
11.3	If yes, show the name of the state requiring such minimum capit	tal and su	rplus				Idah	10		
11.4	If yes, show the amount required						\$	2,000,000		
11.5	5 Is this amount included as part of a contingency reserve in stock	kholder's e	equity?					NO		
11.6	If the amount is calculated, show the calculation									
12.		1 ame of Se	ervice Area							
13.1	Do you act as a custodian for health savings accounts?							NO		
13.2	2 If yes, please provide the amount of custodial funds held as of the	he reportir	ng date				\$			
13.3	B Do you act as an administrator for health savings accounts?							NO		
13.4	If yes, please provide the balance of the funds administered as o	of the repo	orting date				\$			
14.1	Are any of the captive affiliates reported on Schedule S, Part 3, a	uthorized	reinsurers?					N/A		
14.2.	2. If the answer to 14.1 is yes, please provide the following:									
	1 2	3	4	Assets S 5	upporting Reser					
		niciliary sdiction	Reserve Credit		6 Trust Agreements	7 Other				
15.	Provide the following for individual ordinary life insurance* polic assumed or ceded). 15.1 Direct Premium Written	•	• •				Ś			
	15.2 Total Incurred Claims 15.3 Number of Covered Lives									
	*** I'									
	Term (whether full underwriting, limite	•	urance Include		app")					
	Whole Life (whether full underwriting,	, limited ui	nderwriting, jet							
	Variable Life (with or without seconda Universal Life (with or without second	, ,								
	Variable Universal Life (with or without second									
16.	Is the reporting entity licensed or chartered, registered, qualified,			ss in at least	two states?	_		NO		
	If no, does the reporting entity assume reinsurance business that domicile of the reporting entity?	t covers ri	sks residing in	at least one s	tate other than	the state of		NO		

FIVE-YEAR HISTORICAL DATA

	FIVE-YEAR H	STORICAL	DAIA			
		1	2	3	4	5
		2024	2023	2022	2021	2020
Balar	ice Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	581,682,740	301,417,612	323,772,970	352,577,027	267,794,572
2.	Total liabilities (Page 3, Line 24)		196,621,863	164,906,738	220,618,761	175,621,122
3.	Statutory minimum capital and surplus requirement		2,000,000	2,000,000	2,000,000	2,000,000
4.	Total capital and surplus (Page 3, Line 33)	37,394,348	104,795,749	158,866,232	131,958,266	92,173,451
Incon	ne Statement (Page 4)					
5.	Total revenues (Line 8)		974,500,825	932,083,803		718,223,136
6.	Total medical and hospital expenses (Line 18)		878,429,432	789,657,548		587,863,574
7.	Claims adjustment expenses (Line 20)		50,597,848	43,479,013		31,939,137
8.	Total administrative expenses (Line 21)		77,532,432	70,857,675		56,853,151
9.	Net underwriting gain (loss) (Line 24)		, ,			21,267,274
10.	Net investment gain (loss) (Line 27)		1,600,645	(2,199,575)	5,514,784	2,624,729
11.	Total other income (Lines 28 plus 29)					
12.	Net income or (loss) (Line 32)	(386,745,595)	(53,754,051)	35,483,070	40,613,644	16,692,321
Cash	Flow (Page 6)					
13.	Net cash from operations (Line 11)	(176,740,921)	(30,790,306)	68,987,330	47,437,992	29,711,817
	Based Capital Analysis					
14.	Total adjusted capital				131,958,266	
15.	Authorized control level risk-based capital	42,181,871	33,141,082	31,702,543	29,082,713	23,835,821
Enrol	lment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)				60,858	
17.	Total members months (Column 6, Line 7)	902,330	814,709	799,573	715,509	601,722
	ating Percentage (Page 4) divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0 %	100.0 %	100.0 %	100.0 %	100.0 %
19.	Total hospital and medical plus other non-health (Lines 18 plus Line					
	19)				84.4	
20.	Cost containment expenses					
21.	Other claims adjustment expenses					
22.	Total underwriting deductions (Line 23)			95.8		
23.	Total underwriting gain (loss) (Line 24)	(38.9)	(6.6)	4.2	4.3	3.0
	id Claims Analysis Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 17, Col. 5)	62,732,402	53,721,357	56,406,221	55,126,700	31,971,678
25.	Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	62,417,602	60,574,586	66,283,277	60,961,542	48,292,519
Inves	tments in Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)					
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)					
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)					
29.	Affiliated short-term investments (subtotal included in Sch. DA Verification, Col. 5, Line 10)					
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31					
33.	Total investment in parent included in Lines 26 to 31 above					

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

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

					Alloca	ted by States						
	<u> </u>		1					irect Business On				
				2	3	4	5	6	7	8	9	10
	States, Etc.		Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property / Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
		AL	N									
		AZ	N									
		AR	N									
		CA	N									
		CO	N									
7.	Connecticut	CT	N									
		DE	N									
		DC	N									
		FL	N									
		GA	N									
		ID	L	17,319,561	765,362,082	262,626,950			***************************************		1,045,308,594	
		IL	N	17,012,001	. 50,002,002						.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		IN	N									
16.	lowa	IA	N									
		KS	N									
	,	KY	N									
		LA	N									
		ME	N									
		MD	N									
		MI	N									
		MN	N									
		MS	N									
26.	Missouri	MO	N									
		MT	N									
		NE	N									
		NV	N									
	New Hampshire New Jersey		N									
		NJ	N									
		NY	N									
		NC	N									
		ND	N									
		OH	N									
		OK	N									
		OR	N									
		PA	N									
		RI SC	N									
		SD	N						***************************************			
		TN	N									
		TX	N									
45.	Utah	UT	N									
	Vermont		N									
	Virginia		N									
	Washington		N									
		WV WI	N									
	Wyoming		N									
	American Samoa		N									
	Guam		N									
54.	Puerto Rico	PR	N									
55.	U.S. Virgin Islands	VI	N									
	Northern Mariana Islands		N									
		CAN	N									
	Aggregate Other Alien		XXX	47040	7/50/00/5	040404					40450005	
	Subtotal		XXX	17,319,561	765,362,082	262,626,950					1,045,308,594	
	Reporting entity contributions for Employee Benefit Plans		XXX									
	Total (Direct Business)		XXX	17,319,561	765,362,082	262,626,950					1,045,308,594	
	of Write-Ins		٨٨	100,616,71	/ 03,302,002	202,020,930			***************************************		1,040,000,094	
	or write-ins		XXX					1			1	
			XXX									
58002.			XXX									
	Summary of remaining write-											
	ins for Line 58 from overflow							1			1	
	page		XXX									
58999.	Totals (Lines 58001 through							1			1	
	58003 plus 58998) (Line 58 above)		XXX									
L	ubove)		٨٨٨									

(a) Active Status Counts	
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	14. Q - Qualified - Qualified or accredited reinsurer
2. R - Registered - Non-domiciled RRGs	56 5. N - None of the above - Not allowed to write business in the state56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	

(b) Explanation of basis of allocation by states, premiums by state, etc All premiums written within the State of Idaho

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

IDAHO BENEFITS ADMINISTRATION,

STATE OF INCORPORATION - IDAHO DATE OF INCORPORATION - 02/13/12

35-2457718 **NM INITIATIVES, LLC**

STATE OF INCORPORATION - IDAHO DATE OF INCORPORATION - 09/07/12