

**REPORT ON EXAMINATION**  
**OF**  
**COVENTRY HEALTH CARE OF KANSAS, INC.**  
**9401 INDIAN CREEK PARKWAY, SUITE 1300**  
**OVERLAND PARK, KANSAS 66210**  
**AS OF**  
**DECEMBER 31, 2020**

## **TABLE OF CONTENTS**

<b><u>SUBJECT</u></b>	<b><u>PAGE NUMBER</u></b>
SALUTATION.....	1
SCOPE OF EXAMINATION .....	1
Independent Audit Reports .....	3
Actuarial Review .....	3
SUMMARY OF SIGNIFICANT FINDINGS .....	3
COMPANY HISTORY .....	4
General .....	4
Capital Stock .....	4
Dividends and Capital Contributions .....	5
COPORATE RECORDS .....	5
MANAGEMENT AND CONTROL .....	5
Shareholders.....	5
Board of Directors .....	6
Committees .....	7
Officers.....	7
INSURANCE HOLDING COMPANY SYSTEM .....	8
Intercompany/Cost Sharing Agreements .....	9
TERRITORY AND PLAN OF OPERATION.....	12
SELECT FINANCIAL INFORMATION.....	13
REINSURANCE .....	13
General .....	13
Assumed Reinsurance .....	14
Ceded Reinsurance .....	14
FINANCIAL STATEMENTS .....	15
STATEMENT OF ASSETS .....	16
STATEMENT OF LIABILITIES AND SURPLUS .....	17
STATEMENT OF INCOME .....	18
CAPITAL AND SURPLUS ACCOUNT .....	18
ANALYSIS OF CHANGES IN FINANCIAL STATEMENTS .....	20
COMMENTS ON FINANCIAL STATEMENTS .....	20
SUBSEQUENT EVENTS .....	20
SUMMARY OF RECOMMENDATIONS.....	20
CONCLUSION .....	21
SUPERVISION.....	21

Overland Park, KS  
May 3, 2022

Honorable Vicki Schmidt  
Commissioner of Insurance  
Kansas Insurance Department  
1300 SW Arrowhead Rd  
Topeka, Kansas 66604-4019

Dear Commissioner:

In accordance with your authorization and pursuant to K.S.A. 40-222, an examination has been conducted of the financial condition and business affairs of:

**COVENTRY HEALTH CARE OF KANSAS, INC.**

with its statutory home office at:

**8535 E. 21<sup>st</sup> STREET N.  
WICHITA, KANSAS 67206**

and main administrative office at:

**9401 INDIAN CREEK PARKWAY, STE. 1300  
OVERLAND PARK, KANSAS 66210**

hereinafter referred to as the "Company" or "CHC-KS". The following report on such examination is respectfully submitted.

**SCOPE OF EXAMINATION**

The examiners have performed a multi-state financial examination of Coventry Health Care of Kansas, Inc., a Kansas domiciled health insurance company. The last examination covered the five-year period from January 1, 2014, through December 31, 2018. This examination covers the two-year period from January 1, 2019, through December 31, 2020. This examination was performed as part of the multi-state

coordinated examination of the CVS-Aetna Group (“CVS-Aetna” or “Group”) of regulated entities wherein Connecticut was the lead state.

The examination was conducted in accordance with the rules, regulations, and directives of the Kansas Insurance Department (“Department”) and the observed guidelines and procedures contained in the National Association of Insurance Commissioners (“NAIC”) *Financial Condition Examiners Handbook* (“Handbook”). The Handbook requires that the examiners plan and perform the examination to evaluate the financial condition, assess corporate governance, identify current and prospective risks of the Company, and evaluate system controls and procedures used to mitigate those risks. An examination also includes identifying and evaluating significant risks that could cause an insurer’s surplus to be materially misstated both currently and prospectively.

All accounts and activities of the Company were considered in accordance with the risk-focused examination process. This may include assessing significant estimates made by management and evaluating management’s compliance with Statutory Accounting Principles. Activities considered in the examination as key to the Company included the following: Financial Reporting, Reinsurance – Ceding, Related Party, Investments, Health Related Items, Capital and Surplus, Underwriting (Commercial and Medicaid), Reserves/Claims Handling (Commercial and Medicaid), and Actuarial Reserving/Pricing (Commercial and Medicaid). The examination does not attest to the fair presentation of the financial statements included herein. If, during the course of the examination an adjustment is identified, the impact of such adjustment is documented separately following the Company’s financial statements.

This examination report includes significant findings of fact, as mentioned in K.S.A. 40-222, and general information about the insurer and its financial condition. There may be other items identified during the examination that, due to their nature (e.g., subjective conclusions, proprietary information, etc.), are not included within the examination report but separately communicated to other regulators and/or the Company.

### **Independent Audit Reports**

Financial statements of the Company were audited by Ernst & Young LLP of Indianapolis, Indiana, for the years ending December 31, 2019, and December 31, 2020. In each of the years under examination, the auditors concluded that the financial statements of the Company present fairly, in all material respects, the admitted assets, liabilities and policyholders' surplus of the Company, the results of its operations, and its cash flows for the years then ended in accordance with the accounting practices prescribed or permitted by the Department.

The independent auditor's workpapers were reviewed and analyzed by the examiners. Significant reliance was placed on select work papers during this examination.

### **Actuarial Review**

The Company's Appointed Actuary who issued the December 31, 2020 Statement of Actuarial Opinion was Jeffrey J. Drzazgowski, FSA, MAAA, Vice President and Valuation Actuary of Aetna Resources, LLC, Hartford, Connecticut.

### **SUMMARY OF SIGNIFICANT FINDINGS**

No significant findings were noted during the examination.

## **COMPANY HISTORY**

### **General**

The Company, formerly known as Healthcare America Plans, Inc., was incorporated on January 2, 1976, and received its certificate of authority on August 31, 1981.

The Company is organized as a for-profit HMO in the state of Kansas pursuant to K.S.A. 40-3201. The certificate of authority provides for a perpetual existence. On May 7, 2013, the Company's parent Coventry Health Care, Inc. ("CHC") was acquired by and merged into Aetna Inc. ("Aetna"), as a wholly-owned subsidiary. On January 1, 2014, CHC merged into Aetna Health Holdings, LLC ("AHH"), a wholly-owned subsidiary of Aetna, resulting in the elimination of CHC as a legal entity and AHH owning 100% of the Company's common stock. Aetna, through AHH's 100% ownership of the Company's common stock, became the ultimate controlling person ("UCP").

On November 28, 2018, CVS Health Corporation's ("CVS Health") wholly-owned subsidiary CVS Pharmacy, Inc. ("CVS Pharmacy") acquired 100% of the common stock of Aetna via a subsidiary. Aetna continues as the immediate parent of AHH, which remains the immediate parent of the Company. Both Aetna and AHH are subsidiaries of CVS Pharmacy with CVS Health being the UCP.

### **Capital Stock**

The Company's articles of incorporation authorize the issuance of 1,000 shares of common capital stock with a par value of \$5.00 per share. As of December 31, 2020, 1,000 shares had been issued and were outstanding, resulting in a total paid-up common capital stock amount of \$5,000. As of December 31, 2020, AHH owned 100% of the

Company's stock.

### **Dividends and Capital Contributions**

The Company did not receive any capital contributions during the period under review. The Company paid extraordinary dividends of \$7,500,000 in 2020 to its parent, AHH. The Company received the Department's prior approval to pay the dividends.

### **COPORATE RECORDS**

A review of the Company's bylaws and articles of incorporation determined there were no amendments made during the period under examination.

### **MANAGEMENT AND CONTROL**

#### **Shareholders**

Article II, Section 1 of the Company's Bylaws provides, "The annual meeting of the shareholders shall be held during the first six months of each year, at the time stated in the notice of such meeting, for the purpose of electing directors and for the transaction of such other business as may come before the meeting. If the day fixed for the annual meeting shall be a legal holiday, such meeting shall be held on the next succeeding business day. If the election of directors shall not be held on the day designated herein for any annual meeting of the shareholders, or at any adjournment thereof, the Board of Directors shall cause the election to be held at a special meeting of the shareholders as soon thereafter as conveniently may be. In the event that an annual meeting is not held on the date designated herein, a meeting on a subsequent date may be held in lieu thereof and any business transacted or elections held at such meeting shall be valid as if transacted and held at the annual meeting."

Article II, Section 10 of the Company's Bylaws also provides, "Informal Action by

Shareholders: Any action required to be taken at a meeting of the shareholders, or any other action which may be taken at a meeting of the shareholders, may be taken without a meeting if a consent in writing, setting forth the action so taken, shall be signed by all of the shareholders entitled to vote with respect to the subject matter thereof.”

### **Board of Directors**

Article III, Section 1 of the Company’s Bylaws provides, “The business and the affairs of the Company shall be managed under the direction of its Board of Directors. The Board of Directors may authorize any officer or officers, agent or agents, to enter into any contract or execute and deliver any instrument in the name of and on behalf of the Company, and such authority may be general or confined to specific instances.”

Article III, Section 2 of the Company’s Bylaws provides that: “The number of directors of the Company shall be no fewer than 1 and no more than 15, the number to be determined from time to time by a majority of the entire Board of Directors. The directors shall be chosen by election by a majority of votes cast at such election by or on behalf of any shareholder present or represented at the annual meeting. Each Director shall hold office until the next annual meeting of the shareholders or until a successor shall have been duly elected and qualified or until his or her earlier death, resignation or removal. Directors need not be residents of the state of Kansas or shareholders of the Company.” The Board of Directors was comprised of three directors throughout the period of examination. The directors elected and serving as of December 31, 2020, were as follows:

<b><u>Name</u></b>	<b><u>Position(s) Held</u></b>
Gregory Stephen Martino	Assistant Vice President, State Government Affairs CVS Health



Cathleen Sue Tinker	Senior Market Compliance Consultant CVS Health
James Benjamin Boyman	President Coventry Health Care of Kansas, Inc. Vice President, Aetna Local Market CVS Health

### **Committees**

The Company's Bylaws indicate that the Board may designate one or more committees of the Board. The Audit Committee of the Company's parent, AHH, is designated to act as the Company's Audit Committee.

### **Officers**

Article IV, Section 1 of the Company's Bylaws provides, "The officers of the Company shall be a President, a Secretary, a Treasurer and such other officers, assistant officers and acting officers as may be deemed necessary. Any two or more offices may be held by the same person."

Article IV, Section 2 of the Company's bylaws provides that: "The following officers of the Company shall be elected annually by the Board of Directors at the first meeting of the Board of Directors held after each annual meeting of the shareholders: the President, the Treasurer, and the Corporate Secretary. If the election of officers shall not be held at such meeting, such election shall be held as soon thereafter as conveniently may be. The remaining officers of the Company shall be elected either by the Board of Directors in the manner described above or by a Management Resources Committee and approved by the Board of Directors at its first meeting held after each annual meeting of the shareholders. Each officer shall hold office until a successor shall have been duly elected and shall have qualified or until the officer's death, resignation or removal in the manner

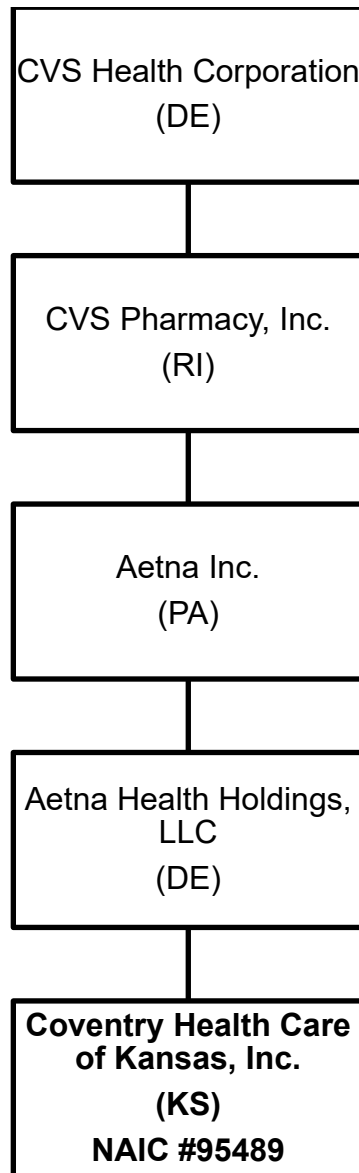
hereinafter provided.” The officers elected and serving as of December 31, 2020, were as follows:

<b><u>Name</u></b>	<b><u>Position(s) Held</u></b>
James Boyman	President
Tracy Smith	Vice President and Treasurer
Edward Chung-I Lee	Vice President and Secretary
Davin Reinecke	Chief Financial Officer

### **INSURANCE HOLDING COMPANY SYSTEM**

K.S.A. 40-3305 requires a domestic insurer that is part of an insurance holding company system to file appropriate registration statements with the Commissioner of Insurance. The Company has submitted Forms “B” and “C” registration statements to the Department for each of the years under examination. A review of the registration statements indicated that the Company is properly reporting items and events as required by statute.

The Company’s parent is Aetna Health Holdings, LLC, which in turn is 100% owned by the Aetna Inc., which in turn is 100% owned by CVS Pharmacy, Inc, which in turn is 100% owned by CVS Health Corporation, the ultimate parent of the holding company system. The organizational chart below illustrates the identities and intercompany relationships among insurance and non-insurance companies and the controlling entities thereof, as of December 31, 2020.



Coventry Health Care of Kansas, Inc. is a Kansas company, wholly-owned directly by Aetna Health Holdings, LLC and ultimately owned by CVS Health Corporation.

**Intercompany/Cost Sharing Agreements**

The following is a brief description of significant agreements executed with affiliated entities that were in effect as of December 31, 2020:

**Management Services Agreement:** The Company entered into a Management Services Agreement with Coventry Health and Life Insurance Company (“CHL”) effective April 1, 2000. The agreement is for the provision of administrative services provided by the Company to CHL for a predetermined per member per month fee for PPO, Individual and Medicare Advantage lines of business. The Company will provide CHL, throughout the term of the agreement with certain administrative services, including sales and marketing services, financial services, medical management services, provider relations services, and facilities and occupancy services. CHL paid \$0 to the Company during 2020.

**Management Services and Global Capitation Network Agreement:** The Company entered into a Management Services and Global Capitation Network Agreement with Coventry Health Care, Inc., MHNet Specialty Services, LLC (“MHNet”) and multiple subsidiaries, including the Company and CHL effective June 1, 2008. MHNet administers and funds the mental health benefits for the commercial, ASO, and Medicare lines of the Company’s business in the states of Oklahoma, Arkansas, Kansas and Missouri. The Company pays MHNet a monthly fee based on a fixed fee (per member per month). The rates are amended annually, and the amendments are approved by the Department. Effective December 1, 2020, the agreement was terminated. The Company paid \$0 to MHNet during 2020.

**Management Services and Global Capitation Network Agreement:** The Company entered into a Management Services and Global Capitation Network Agreement with Group Dental Service of Maryland, Inc. (“GDS-MD”) effective January 1, 2009. GDS-MD administers and funds the dental benefits for specific self-funded ASO

clients, Medicare Advantage and Federal Employee Benefit plans for the Company. The compensation in the agreement is based on either a fixed fee (per employee per month) or a percent of administrative fees collected. The Company paid \$0 to GDS-MD during 2020.

**Management Services and Global Capitation Network Agreement:** The Company entered into a Management Services and Global Capitation Network Agreement with Group Dental Service, Inc. (“GDS”) effective January 1, 2009. GDS administers and funds the dental benefits for specific self-funded ASO clients, Medicare Advantage and Federal Employee Benefit plans for the Company. The compensation in the agreement is based on either a fixed fee (per employee per month) or a percent of administrative fees collected. The Company paid \$0 to GDS during 2020.

**Administrative Services Agreement:** The Company entered into an Administrative Services Agreement with Aetna Health Management, LLC (“AHM”) effective January 1, 2014. Under the agreement, AHM agrees to provide certain administrative services and, to the extent requested, pharmacy benefit management services and pharmacy rebate services. The administrative fees are based on a percentage of premium and subject to an annual true-up to actual costs. Under the agreement, this true-up is due to be settled with the affiliate by April 15th of the following contract year. The agreement was amended effective January 1, 2020, to allow other affiliates to provide services in accordance to a schedule of services and pricing. The Company paid \$6,200,929 to AHM during 2020. Under this agreement, the Company receives pharmaceutical rebates from AHM that relate to the Company's membership.

The Company had pharmaceutical rebate receivables of \$932,008 as of December 31, 2020.

**Insolvency Agreement:** The Company entered into an Insolvency Agreement with Aetna Health Insurance Company (“AHIC”), effective June 1, 2016. Under this agreement, in the event the Company ceases operations or becomes insolvent, AHIC agrees to continue plan benefits for members until the end of the contract period for which premiums have been paid to the Company by the members.

**Tax Sharing Agreement:** Effective January 1, 2019, the Company entered into a written tax sharing agreement with CVS Health. In accordance with this agreement, the Company’s current federal income tax liability is generally computed as if the Company were filing a separate federal income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to this agreement, the Company has the enforceable right to recoup its net losses carried forward as an offset to future net income subject to federal income taxes.

### **TERRITORY AND PLAN OF OPERATION**

As of December 31, 2020, the Company is authorized to transact business in the states of Arkansas, Kansas, Missouri, and Oklahoma. In 2020, the Company reported premium income of \$0 in Arkansas, premium income of \$39,109,978 in Kansas, premium income of \$28,376,928 in Missouri, and \$1,051,849 in Oklahoma. The NAIC Schedule T Exceptions Report was reviewed for each of the states where the Company is licensed. No exceptions were noted.

The Company primarily wrote group commercial health and Medicare Advantage

up until 2016. In 2016, the Company sold its Medicare Advantage business to Coventry Health Care of Missouri, Inc. and began migrating its group commercial products to Aetna Health Inc., an affiliated entity. The migration of the group commercial business was completed by the end of 2018. Beginning in 2018, the Company began enrolling members for Medicare expansion business in Kansas with coverage effective date beginning in 2019. As of December 31, 2020, 3,884 members were enrolled in the plan.

### **SELECT FINANCIAL INFORMATION**

The exhibit below shows the Company's financial amounts for the period of December 31, 2019, through December 31, 2020. The financial amounts were obtained from annual statements filed by the Company.

<i>(in thousands)</i>	<b><u>2019</u></b>	<b><u>2020</u></b>
Admitted Assets	\$ 21,557	\$ 43,710
Liabilities	4,510	17,035
Capital and Surplus	17,047	26,675
Net Underwriting Gain/(Loss)	2,469	18,436
Net Income (Loss)	2,985	15,440
Direct Written Premium	6,736	68,539
Total Revenues	7,419	67,939

### **REINSURANCE**

#### **General**

The Company's premium activity on a direct written, assumed, and ceded basis for the period under examination is detailed below:

*(\$000 omitted)*

<b>Premium Type</b>	<b>2020</b>	<b>2019</b>
Direct Written Premium	\$68,539	\$6,736
Reinsurance Assumed	0	0
Reinsurance Ceded	(177)	(20)
<b>Net Premiums Written</b>	<b><u>\$68,362</u></b>	<b><u>\$6,716</u></b>

### **Assumed Reinsurance**

The Company assumes no business from other insurance carriers.

### **Ceded Reinsurance**

The Company is a reinsured entity to a specific quota share agreement between Aetna Health Management, LLC and Fresenius Medical Care Reinsurance Company (Cayman) LTD (“Fresenius”). The Agreement was effective April 1, 2014, and the Company became a reinsured entity under the Agreement effective March 1, 2016, and the terms of the agreement remained in effect as of December 31, 2020. Under this Agreement, the Company cedes 100% of eligible expenses incurred per program participant per agreement year for end-stage renal disease (ESRD) Medicare Advantage product offerings including but not limited to: Aetna Medicare Plan (HMO), Aetna Medicare Plan (HMO) Open Access, Aetna Medicare Plan (PPO), and Coventry Medicare Advantage Plans. Pursuant to the Agreement, Fresenius will (i) validate Aetna Medicare Advantage beneficiaries who have ESRD and who have also been identified by Aetna, and (ii) strive to improve clinical outcomes while reducing the cost of care. Fresenius utilizes both population health management and focused clinical intervention tools to improve clinical outcomes and reduce (a) the overall cost of care for Aetna MA ESRD Members; (b) hospitalizations and readmissions; (c) SNF admissions, and (d) overall utilization of acute care and emergency services.



The Company is contingently liable for all reinsurance losses ceded to others. This contingent liability would become an actual liability in the event that an assuming reinsurer fails to perform its obligations under the reinsurance contract.

### **FINANCIAL STATEMENTS**

The following financial statements are based on the statutory financial statements filed by the Company with the Department and present the financial condition of the Company for the period ending December 31, 2020. Any accompanying comments on the financial statements reflect any examination adjustments to the amounts reported in the Annual Statement and should be considered an integral part of the financial statements.

**COVENTRY HEALTH CARE OF KANSAS, INC.**  
**STATEMENT OF ASSETS**  
**AS OF DECEMBER 31, 2020**

	Assets	Nonadmitted Assets	Net Admitted Assets
Bonds	\$ 12,067,386	\$ -	\$ 12,067,386
Cash and cash equivalents	24,818,610		24,818,610
Investment income due & accrued	71,505		71,505
Uncollected premiums and agents' balances in the course of collection	3,539	\$ 3,298	241
Accrued retrospective premiums and contracts subject to redetermination	1,144,139		1,144,139
Amounts receivable relating to uninsured plans	2,019,780		2,019,780
Net deferred tax asset	4,220,658	2,133,491	2,087,167
Furniture and equipment	670,368	670,368	-
Receivable from parent, subsidiaries and affiliates	235	235	-
Healthcare and other amounts receivable	1,075,224	12,023	1,063,201
Aggregate write-ins for other than invested assets	437,645	-	437,645
Totals	<u>\$ 46,529,089</u>	<u>\$2,819,415</u>	<u>\$ 43,709,674</u>

**COVENTRY HEALTH CARE OF KANSAS, INC.  
STATEMENT OF LIABILITIES AND SURPLUS  
AS OF DECEMBER 31, 2020**

Claims unpaid	\$ 8,281,666
Accrued medical incentive pool	31,901
Unpaid claims adjustment expenses	95,989
Aggregate health policy reserves, including the liability for medical loss ratio rebate per the Public Health Service Act	2,969,662
Premiums received in advance	6,986
General expenses due or accrued	1,106,834
Current federal and foreign income tax payable	3,354,310
Remittances and items not allocated	120,474
Amounts due to parent, subsidiaries and affiliates	926,795
Funds held under reinsurance treaties	22,052
Aggregate write-ins for other liabilities	117,871
Total liabilities	<u>\$ 17,034,540</u>
Common capital stock	\$ 5,000
Gross paid in and contributed surplus	125,271,800
Unassigned funds	<u>(98,601,666)</u>
Surplus as regards policyholders	<u>\$ 26,675,134</u>
Totals	<u><u>\$ 43,709,674</u></u>

**COVENTRY HEALTH CARE OF KANSAS, INC.  
STATEMENT OF INCOME  
FOR THE YEAR ENDED DECEMBER 31, 2020**

Member months	38,211
Net premium income	\$ 68,361,483
Change in unearned premium reserves	<u>(422,574)</u>
Total revenues	\$ 67,938,909
<u>Hospital and Medical:</u>	
Hospital/medical benefits	\$ 29,146,542
Other professional services	4,016,052
Outside referrals	1,585,063
Emergency room and out-of-area	2,397,332
Prescription drugs	4,908,519
Incentive pool, withhold adjustment and bonus amounts	<u>28,084</u>
Subtotal	\$ 42,081,592
<u>Less:</u>	
Net reinsurance recoveries	<u>157,235</u>
Total hospital and medical	\$ 41,924,357
Claims adjustment expenses	1,068,208
General and administrative expenses	<u>6,509,964</u>
Total underwriting deductions	\$ 49,502,529
Net underwriting loss	\$ 18,436,380
Net investment income earned	\$ 392,953
Net realized capital losses	<u>(263,760)</u>
Net investment gains (losses)	\$ 129,193
Net income (loss) after capital gains tax, before fed income tax	\$ 18,565,573
Federal income taxes incurred	<u>3,125,813</u>
Net income (loss)	<u><u>\$ 15,439,760</u></u>

**COVENTRY HEALTH CARE OF KANSAS, INC.  
CAPITAL AND SURPLUS ACCOUNT  
RECONCILIATION OF CAPITAL AND SURPLUS SINCE LAST EXAMINATION**

Surplus as regards policyholders, December 31, 2018			<u>\$ 13,701,044</u>
Net income	2019	2,984,530	
	2020	<u>15,439,760</u>	18,424,290
Change in net unrealized capital gains or (losses)	2019	48,178	
	2020	<u>5,979</u>	54,157
Change in net deferred income tax	2019	(731,594)	
	2020	<u>(773,567)</u>	(1,505,161)
Change in nonadmitted assets	2019	1,045,146	
	2020	<u>2,455,658</u>	3,500,804
Surplus Adjustments Paid in	2019	-	
	2020	<u>(7,500,000)</u>	(7,500,000)
Surplus as regards policyholders, December 31, 2020			<u><u>\$ 26,675,134</u></u>

### **ANALYSIS OF CHANGES IN FINANCIAL STATEMENTS**

No adjustments were made to surplus as a result of this examination. The capital and surplus of the Company as of December 31, 2020, was \$26,675,134, which was the same amount reported by the Company in its 2020 filed Annual Statement.

### **COMMENTS ON FINANCIAL STATEMENTS**

There were no significant or material findings resulting from the examination that warranted inclusion in this Report on Examination.

### **SUBSEQUENT EVENTS**

The COVID-19 pandemic has continued to develop throughout 2020, 2021 and into 2022, with significant uncertainty remaining regarding the full effect of COVID-19 on the U.S. and global insurance and reinsurance industry. At the time of releasing this report, the examination's review noted that there has not been a significant impact to the Company. However, the Department will continue to closely monitor the impact of the pandemic on the Company and will take necessary action if concerns arise.

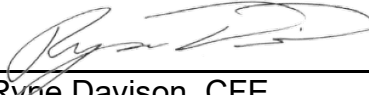
### **SUMMARY OF RECOMMENDATIONS**

No recommendations for the Company were identified that warranted inclusion in this Report on Examination.

## **CONCLUSION**

The assistance and cooperation by the officers of the Company during this examination is hereby acknowledged and appreciated. In addition to the undersigned, David Palmer, CFE, Exam Manager and Karen Elsom, FSA, MAAA, Consulting Exam Actuary Lewis & Ellis, Inc. Overland Park, Kansas, both representing the Department, participated in this examination.

Respectfully submitted,



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Ryne Davison, CFE  
Examiner-in-Charge  
Lewis & Ellis, Inc.  
representing the Kansas Insurance  
Department

## **SUPERVISION**

The examination process has been monitored and supervised by the undersigned. The examination report and supporting workpapers have been reviewed and approved. Compliance with NAIC procedures and guidelines as contained in the Financial Condition Examiners Handbook has been confirmed except where practices, procedures and applicable regulations of the Department and statutes of the State of Kansas prevailed.



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Levi Nwasoria, CPA, CFE  
Chief Examiner  
Kansas Insurance Department

**EXHIBIT S**  
**EXAMINER'S AFFIDAVIT AS TO STANDARDS AND**  
**PROCEDURES USED IN AN EXAMINATION**

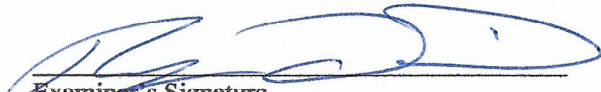
State of Mississippi,

County of Madison,

Ryne Davison, being duly sworn, states as follows:

1. I have authority to represent the Kansas Insurance Department in the examination of Coventry Health Care of Kansas, Inc.
2. The Kansas Insurance Department is accredited under the National Association of Insurance Commissioners Financial Regulation Standards and Accreditation.
3. I have reviewed the examination work papers and examination report, and the examination of Coventry Health Care of Kansas, Inc. was performed in a manner consistent with the standards and procedures required by K.S.A 40-222.

The affiant says nothing further.

  
Examiner's Signature

Subscribed and sworn before me by original identification on this 26 day of May, 20 22.

(SEAL)

Marlee Hughes  
Notary Public



My commission expires October 24, 2025 [date].