

**REPORT ON EXAMINATION
OF
SUNFLOWER STATE HEALTH PLAN, INC.
8325 LENEXA DRIVE
LENEXA, KANSAS 66214
AS OF
DECEMBER 31, 2022**

FILED

June 28, 2024

VICKI SCHMIDT
Commissioner of Insurance

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Topeka, Kansas
June 7, 2024

Honorable Vicki Schmidt
Commissioner of Insurance
Kansas Department of Insurance
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:

SUNFLOWER STATE HEALTH PLAN, INC.

with its statutory home office at:

**8325 LENEXA DRIVE
LENEXA, KANSAS 66214**

and main administrative office at:

**7700 FORSYTH BOULEVARD
ST. LOUIS, MISSOURI 63105**

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

SCOPE OF EXAMINATION

The examiners have performed a multi-state financial examination of the Company, a Kansas-domiciled health insurance company. The last examination covered the four-year period from January 1, 2016, through December 31, 2019. This examination covers the three-year period from January 1, 2020, through December 31, 2022. This examination was performed as part of the multi-state coordinated examination of the Centene Group ("Centene" "Centene Corporation" or "the Group") of regulated entities

wherein the Texas Department of Insurance (“TDI”) is the lead state.

The examination was conducted in accordance with the rules, regulations, and directives of the Kansas Department of Insurance (“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.

Those activities considered in the examination as key or critical to SSHP included Investments, Reinsurance Ceded, Premiums, Related Party, Underwriting, Claims, and Reserving. The examination also included a review and evaluation of information technology general controls.

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 KPMG, LLP (“KPMG”) of St. Louis, Missouri for the years ending December 31, 2020, through December 31, 2022. 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 as of December 31, 2022, and the results of its operations and its cash flows for the years then ended in accordance with the statutory 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 workpapers during this examination.

Actuarial Review

Bryan Goldman, FSA, MAA, an employee of Centene Management Company, LLC, a wholly-owned subsidiary of Centene, was appointed to perform a review of the Company’s actuarial practices and reserves as of December 31, 2022. The appointed actuary’s review consisted of evaluating assumptions, methodologies, and calculations utilized by the Company in its reserve setting process.

SUMMARY OF SIGNIFICANT FINDINGS

There were no significant findings of fact that warranted inclusion in this Report of Examination.

COMPANY HISTORY

General

The Company was incorporated in Kansas on September 15, 2011, as a health maintenance organization under the provisions of K.S.A. 40-3201, *et seq.*

The Company began operations on January 1, 2013, as a health maintenance organization under Article 32, Chapter 40 of the Kansas Statutes Annotated. The Company was organized as a for-profit corporation as set forth in its Articles of Incorporation with the nature of its business being:

- To provide integrated healthcare services to Medicaid recipients in the State of Kansas; and
- To engage in any other lawful act, activity or business for which corporations may be organized under the Kansas General Corporation Code, as amended from time to time.

Capital Stock

As of December 31, 2022, the Company had 30,000 shares of common stock authorized with no par value and 100 shares issued and outstanding with no par value. One hundred percent (100%) of the Company's stock was owned by Centene Corporation.

Dividends and Capital Contributions

The Company did not receive any capital contributions during the period under examination. In September 2021, the Company paid an extraordinary dividend, which was approved by the Department, in the amount of twenty-five million dollars (\$25,000,000) to its parent, Centene Corporation.

CORPORATE RECORDS

The Company's articles of incorporation and bylaws were reviewed. There were no amendments to the articles of incorporation or the bylaws during the examination period.

MANAGEMENT AND CONTROL

Ownership

As of December 31, 2022, Centene Corporation owns 100% of the Company's outstanding capital stock.

Board of Directors

The Company's bylaws consist of nine (9) articles that provide the framework for the operation, management, and control of the Company. The Company is managed under the direction of its board of directors ("Board").

The Board members elected and serving as of December 31, 2022.were as follows:

<u>Name</u>	<u>Principal Occupation and Business Affiliation</u>
Jennifer A. Robinson	Senior Corporate Counsel Centene Corporation
Mark S. Siegmund	Chief Clinical and Operating Officer KidsTLC
Denise R. Cyzman	Executive Director Kansas Association for the Medically Underserved
Mitchell L. Wasden	Plan President and Chief Executive Officer Iowa Total Care
David E. Johnson	Administrator, Lutheran Family Services of Nebraska
Dr. Alicia R. Chennell	Physician -Owner Chennell Family Wellness

Michael R. Stephens President and Chief Executive Officer
Sunflower State Health Plan, Inc.

Dr. Rebecca S. Klinger Pediatrician, Stockholder
Pediatric Associates

Dr. Jennifer L. Woodward Physician-Associate Professor, Family Medicine and
Community Health
University of Kansas Medical Center

Committees

The Company's bylaws indicate that the Board may designate one (1) or more committees of the Board. The Board has not appointed any committees over the examination period. All committees of the Board operate at the Centene Corporation level.

Officers

Pursuant to the bylaws, the Company will have a President and a Secretary and may also have the following officers: a Chairman of the Board, one or more Vice Presidents, a Treasurer, one or more Assistant Secretaries and one or more Assistant Treasurers. The bylaws direct the Board to elect a President and Secretary at its annual meeting. The Board then, or from time to time, may elect one (1) or more officers as it may deem advisable. The following is a listing of officers and their position(s) held as of December 31, 2022:

Name

Office

Michael R. Stephens	Chairman, President, and Chief Executive Officer
Terry L. Weathers	Treasurer
Christopher A. Koster	Secretary
Tricia L. Dinkelman	Vice President of Tax

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 Form “B” and “C” registration statements to the Department for each of the years under examination. A review of the registration statements indicated that the items and events pertaining to the Company were properly reported as required by statute.

SSHP’s immediate and ultimate parent is Centene Corporation, a Delaware company.

The abbreviated organizational chart below illustrates the identities and intercompany relationships among insurance and non-insurance companies and the controlling entities thereof, as of December 31, 2022. Ownership percentage is noted in parentheses when less than 100% and the Kansas domiciled insurer is bolded.

Centene Corporation (Delaware)

Sunflower State Health Plan, Inc. (Kansas)

Iowa Total Care, Inc. (Iowa)

Bankers Reserve Life Insurance Company of Wisconsin (Wisconsin)

Celtic Group, Inc. (Delaware)

 Celtic Insurance Company (Illinois)

Coordinated Care Corporation (Indiana)

Centene Management Company, LLC (Wisconsin)

Centene Holdings, LLC (Delaware)

 Centene Company of Texas, LP (99%) (Texas)

CCTX Holdings, LLC (Delaware)

 Centene Company of Texas, LP (1%) (Texas)

Envolve Holdings, LLC (Delaware)

 Cenpatio Behavioral Health, LLC (California)

 Envolve, Inc. (Delaware)

 Envolve PeopleCare, Inc. (Delaware)

 Envolve Benefit Options, Inc. (Delaware)

 Envolve Vision Benefits, Inc. (Delaware)

 Envolve Vision of Texas, Inc. (Texas)

 Envolve Vision, Inc. (Delaware)

 Envolve Vision of Florida, Inc. (Florida)

 Envolve Total Vision, Inc. (Delaware)

Envolve Optical, Inc. (Delaware)
 Envolve Dental, Inc. (Delaware)
 Envolve Dental of Florida, Inc. (Florida)
 Envolve Dental of Texas, Inc. (Texas)
 Centene Pharmacy Services, Inc. (Delaware)
 MeridianRx, LLC (Michigan)
 U.S. Medical Management Holdings, Inc. (Delaware)
 Comprehensive Health Management, LLC (Florida)
 Centene Health Plan Holdings, Inc. (Delaware)
 Wellcare Health Plans, Inc. (Delaware)
 WCG Health Management, Inc. (Delaware)
 The WellCare Management Group, Inc. (New York)
 HealthSmart Benefits Management, LLC (Texas)
 Magellan Health, Inc. (Delaware)
 Magellan Pharmacy Services, Inc. (Delaware)
 Magellan Healthcare, Inc. (Delaware)
 National Imaging Associates, Inc. (Delaware)
 Next Door Neighbors, LLC (60%) (Delaware)
 Next Door Neighbors, Inc. (Delaware)
 Centene Venture Company Alabama Health Plan, Inc. (Alabama)
 Centene Venture Company Illinois (Illinois)
 Centene Venture Company Kansas (Kansas)
 Centene Venture Company Florida (Florida)
 Centene Venture Company Indiana, Inc. (Indiana)
 Centene Venture Company Tennessee (Tennessee)
 Centene Venture Insurance Company Texas (Texas)
 Centene Venture Company Michigan (Michigan)
 Specialty Therapeutic Care Holdings, LLC (Delaware)
 Specialty Therapeutic Care, LP (99.99%) (Texas)
 Specialty Therapeutic Care, GP, LLC (Texas)
 Specialty Therapeutic Care, LP (0.01%) (Texas)
 Presonyx, Inc. (Delaware)
 AcariaHealth, Inc. (Delaware)
 AcariaHealth Pharmacy #11, Inc. (Texas)
 AcariaHealth Pharmacy #12, Inc. (New York)
 AcariaHealth Pharmacy #13, Inc. (California)
 AcariaHealth Pharmacy #14, Inc. (California)
 AcariaHealth Pharmacy #26, Inc. (Delaware)
 AcariaHealth Pharmacy, Inc. (California)
 HomeScripts.com, LLC (Michigan)
 Foundation Care LLC (80%) (Missouri)
 Health Net, LLC (Delaware)
 Health Net of California, Inc. (California)
 Health Net Life Insurance Company (California)
 Managed Health Network, LLC (Delaware)
 Managed Health Network (California)
 MHN Services, LLC (California)
 Health Net Federal Services, LLC (Delaware)

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, 2022.

Management Agreement

Effective January 1, 2014, the Company entered into a Management Agreement with Centene Management Company, LLC (“CMC”), whereby the Company is provided with administrative and support services necessary to fulfill its responsibilities under the terms of its contract with the Kansas Department of Health and Environment (“KDHE”), Division of Health Care Finance. The administrative and support services provided under this agreement include: finance, claims administration, regulatory and compliance services, management information systems, legal services, and treasury services.

In return for these services, the Company will reimburse CMC for a sliding scale percentage of revenue, based on volume and type of business written. For long-term care members, the scale ranges from 4.5% - 5.5%, for TANF/CHIP/ABD members, the scale ranges from 10% - 12%, and for Marketplace/Commercial members, the scale ranges from 13% - 15%. These percentages will increase or decrease driven by projected revenue increases or decreases, respectively, and is subject to a final accounting based upon the annual revenue confirmed by a certified public accountant. This agreement was amended and restated effective January 1, 2023, to provide for compensation based on actual costs. The Company incurred \$129,731,016, \$159,343,877, and \$137,366,202 in 2022, 2021, and 2020 respectively.

Pharmacy Benefit Management Services Agreement

The Company is a party to a pharmacy benefit management services agreement with Envolve Pharmacy Solutions, Inc., effective January 1, 2018, whereby the Company is provided pharmacy benefit management services to its members. This agreement was amended and restated effective January 1, 2023, as an Administrative Pharmacy Services agreement.

Pursuant to the agreement, the Company incurred \$192,695,666, \$234,593,678, and \$199,588,381 for services provided in 2022, 2021, and 2020, respectively.

Vision Services Agreement

The Company is a party to a vision services agreement with Envolve Vision, Inc., effective January 1, 2013, whereby the Company is provided vision benefits management services to its members. Pursuant to the agreement, the Company incurred \$10,759,897, \$8,959,652, and \$9,341,131 for services provided in 2022, 2021, and 2020, respectively.

Dental Services Agreement

The Company is a party to a dental services agreement with Envolve Dental, Inc., whereby the Company is provided dental benefit management services to its members. The original agreement for the Company's Medicaid Products was effective August 1, 2014, and pursuant to an amendment, dental services for the Company's Medicare Advantage Products was added effective January 1, 2018. Pursuant to the agreements, the Company incurred \$33,983,689, \$36,282,404, and \$26,805,512 for services provided in 2022, 2021, and 2020, respectively.

Tax Sharing Agreement

The Company is a party to the Centene Corporation's Tax Sharing Agreement,

which requires that all subsidiaries reimburse or recover their portion of the income taxes as calculated on a separate company basis for settlement under the consolidated federal income tax return. For all years under examination, the Company filed a consolidated federal income tax return with Centene Corporation and its subsidiaries.

Administrative Radiology Services Agreement

The Company is a party to an administrative radiology services agreement with National Imaging Associates, Inc., (NIA) effective November 13, 2018, before the parties were affiliates. NIA became an affiliate when Centene acquired its parent entity in January 2022. The Company incurred \$687,543 for services provided pursuant to this agreement in 2022.

Participating Provider Agreement

The Company is a party to this agreement with AcariaHealth, Inc., effective August 15, 2022, for the provision of home infusion services and supplies. The Company incurred \$8,741,305 for services provided pursuant to this agreement in 2022.

Reinsurance Agreement

The Company is a party to a reinsurance agreement with Bankers Reserve Life Insurance Company of Wisconsin (“Bankers Reserve”) to provide stop-loss reinsurance coverage to the Company. Further information regarding this agreement is contained in the Reinsurance section of this report.

TERRITORY AND PLAN OF OPERATION

As of December 31, 2022, the Company is authorized to transact business in Kansas. The Company began operations in 2013 by providing managed care to Medicaid recipients through its contract with Kansas Department of Health and Environment. The

Company has approximately 168,318 members in service areas that cover all the 105 counties in Kansas. There are two other Medicaid managed care organizations in the state, and SSHP has approximately 34% market share statewide. The current contract covers from January 1, 2021, through December 31, 2023, with the option to renew for two additional one-year periods.

On January 1, 2018, the Company entered into a contract with Centers for Medicaid and Medicare Services to sell a Medicare Advantage product in Kansas. The Company's one year Medicare contract expired on December 31, 2023, and is renewable annually for successive one-year terms.

The Company also offered Health Insurance Marketplace through the Affordable Care Act programs in Kansas, which was not renewed for 2022 and is currently in runout.

SELECT FINANCIAL INFORMATION

The exhibit below shows the Company's financial results for the period of December 31, 2020, through December 31, 2022. The financial amounts were obtained from annual statements filed by the Company.

	<u>2020</u>	<u>2021</u>	<u>2022</u>
<i>(\$000's omitted)</i>			
Admitted Assets	\$384,351	\$381,733	\$400,137
Liabilities	213,321	198,831	166,360
Capital and Surplus	171,029	182,901	233,777
Net Income (Loss)	40,144	39,854	48,582
Net Premium Income	1,663,448	1,809,046	1,685,413

REINSURANCE

General

The Company's premium activity on a direct written, assumed, and ceded basis

for the period under examination is detailed below:

(000's omitted)

Premium Type	2020	2021	2022
Direct Premiums Written	\$ 1,663,573	\$ 1,809,294	\$ 1,685,640
Reinsurance Assumed	0	0	0
Reinsurance Ceded:	(125)	(249)	(228)
Net Premiums Written	\$ 1,663,448	\$ 1,809,046	\$ 1,685,413

Assumed Reinsurance

The Company did not assume any reinsurance as of December 31, 2022.

Ceded Reinsurance

The Company is a party to an HMO reinsurance agreement with affiliate Bankers Reserve. The agreement term was from January 1, 2022, to January 1, 2023, and covered all products the Company wrote in 2022 with a maximum payable per covered person of \$5,000,000. The Company ceded \$264,078 in premiums during 2022 under this agreement with no recoverable losses. During the examination period, the Company had a similar reinsurance arrangement with a non-affiliate, PartnerRe America Insurance Company, under an HMO specific excess loss reinsurance agreement with a maximum payable per covered person of \$5,000,000.

All reinsurance agreements in effect during the examination contained insolvency and cancellation clauses as required by K.S.A. 40-221a. All reinsurance agreements reviewed provided for the transfer of risk; however, the Company is contingently liable for all reinsurance losses ceded to others. This contingent liability would become an actual liability in the event 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, 2022. There were no adjustments to the Company's filed statutory financial statements as a result of this examination.

SUNFLOWER STATE HEALTH PLAN, INC.
STATEMENT OF ASSETS
AS OF DECEMBER 31, 2022

	Assets	Assets Nonadmitted	Net Admitted Assets
Bonds	\$128,448,883	\$ -	\$128,448,883
Cash and cash equivalent	165,528,306	-	165,528,306
Other invested assets	4,282,336	-	4,282,336
Investment income due and accrued	1,335,970	-	1,335,970
Uncollected premiums and agents' balances in the course of collection	87,988,727	-	87,988,727
Accrued retrospective premiums	4,742,092	-	4,742,092
Amounts receivable related to uninsured plans	621,210	-	621,210
Net deferred tax asset	1,640,810	-	1,640,810
Receivables from parent, subsidiaries, and affiliates	3,304,942	-	3,304,942
Healthcare and other amounts receivable	6,901,073	5,454,814	1,446,259
Aggregate write-ins for other-than- invested assets	855,440	58,337	797,103
	<u>\$405,649,789</u>	<u>\$5,513,151</u>	<u>\$400,136,638</u>

**SUNFLOWER STATE HEALTH PLAN, INC.
STATEMENT OF LIABILITIES AND SURPLUS
AS OF DECEMBER 31, 2022**

Claims unpaid	\$146,075,544
Accrued medical incentive pool and bonus amounts	1,962,058
Unpaid claims adjustment expenses	1,726,069
Aggregate health policy reserves	3,126,682
Premiums received in advance	712
General expenses due or accrued	2,088,999
Current federal income tax payable and interest thereon	1,998,547
Ceded reinsurance premiums payable	22,497
Amounts due to parent, subsidiaries and affiliates	7,815,739
Liability for amounts held under uninsured plans	1,336,239
Aggregate write-ins for liabilities	206,729
Total liabilities	<u>166,359,815</u>
Gross paid in and contributed surplus	245,000,000
Unassigned funds (surplus)	<u>(11,223,177)</u>
Total capital and surplus	<u>233,776,823</u>
Total liabilities, capital and surplus	<u><u>\$400,136,638</u></u>

**SUNFLOWER STATE HEALTH PLAN, INC.
STATEMENT OF REVENUE AND EXPENSES
FOR THE YEAR ENDED DECEMBER 31, 2022**

Member Months	2,054,850
Net premium income	<u>\$1,685,412,815</u>
Total	1,685,412,815
 <u>Hospital and Medical:</u>	
Hospital/medical benefits	1,105,367,709
Other professional services	49,015,779
Emergency room and out-of-area	26,352,672
Prescription drugs	171,635,264
Incentive pool, withheld adjustments and bonus amounts	3,380,759
Subtotal	<u>1,355,752,183</u>
 <u>Less:</u>	
Net reinsurance recoveries	1,490,129
Total hospital and medical	<u>1,354,262,054</u>
Claims adjustment expenses	14,398,305
General administrative expenses	261,491,098
Total underwriting deductions	<u>1,630,151,457</u>
Net underwriting gains	<u>55,261,358</u>
Net investment income earned	5,799,894
Net realized capital losses	<u>(8,429)</u>
Net investment gains	5,791,465
Net gain or loss from agents' or premium balances charged off	(2,811)
Aggregate write-ins for other income and expenses	<u>(3,266)</u>
Net income after capital gains tax and before all other federal income taxes	<u>61,046,746</u>
Federal income taxes incurred	<u>12,464,256</u>
Net income	<u><u>\$48,582,490</u></u>

**SUNFLOWER STATE HEALTH PLAN, INC.
CAPITAL AND SURPLUS ACCOUNT
RECONCILIATION OF CAPITAL AND SURPLUS SINCE LAST EXAMINATION**

	2020	2021	2022
Surplus as regards policyholders, December 31 prior year	\$131,832,534	\$171,029,481	\$182,901,147
Net income (loss)	40,114,244	39,854,045	48,582,490
Change in net unrealized capital gains or (losses)	769	(46,015)	(213,051)
Change in net deferred income tax	648,223	131,435	(1,024,082)
Change in nonadmitted assets	(1,566,289)	(3,067,799)	3,530,320
Surplus adjustments – paid in	-	-	-
Dividends to stockholders	-	(25,000,000)	-
Surplus as regards policyholders, December 31 current year	<u>\$171,029,481</u>	<u>\$182,901,147</u>	<u>\$233,776,823</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, 2022, of \$233,776,823, was the same amount reported by the Company in its 2022 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

Subsequent to the examination date, the Kansas Department of Health and Environment announced that the Company has been selected as one of three managed care organizations that will serve the Kansas Medicaid program, known as KanCare, effective January 1, 2025, to December 31, 2027. This selection is a continuation of the Company's participation in the KanCare program as previously discussed in the Territory and Plan of Operation section of this report.

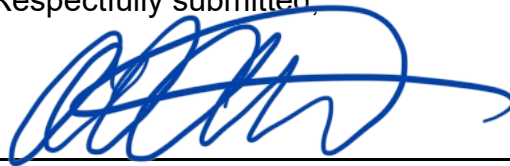
SUMMARY OF RECOMMENDATIONS

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, Ryne Davison, CFE, Examination Manager with Lewis & Ellis, LLC, representing the Department; Walter Harry, PIR, CISA, AES, with TDI performed the information technology portion of the examination of the entire Group; Sean Fulton, ASA, MAAA, with TDI performed an actuarial review of the Group's reserving methodologies and assumptions; and Andrew Larocque, ASA, MAAA, with Risk & Regulatory Consultants, Inc, representing the Illinois Department of Insurance performed an actuarial review of the Group's rate adequacy.


Respectfully submitted,



Omar Akel, CFE
Examiner-in-Charge
Lewis & Ellis, LLC,
representing the Kansas Department of
Insurance

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 Handbook has been confirmed except where practices, procedures and applicable regulations of the Department and statutes of the State of Kansas prevailed.

A handwritten signature in black ink, reading "Levi Nwasoria", written over a horizontal line.

Levi Nwasoria, CPA, CFE
Chief Examiner
Kansas Department of Insurance

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

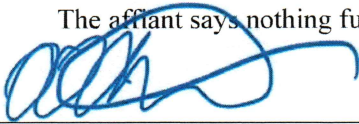
State of NEBRASKA,

County of GARDEN,

OMAR AKEL, being duly sworn, states as follows:

1. I have authority to represent the Kansas Insurance Department in the examination of Sunflower State Health Plan, 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 Sunflower State Health Plan, Inc. was performed in a manner consistent with the standards and procedures required by K.S.A 40-222.

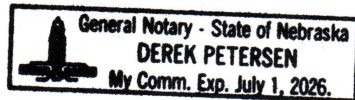
The affiant says nothing further.



Examiner's Signature

Subscribed and sworn before me by OMAR AKEL on this 24th day of JUNE, 2024.

(SEAL)



Notary Public

My commission expires July 1, 2026 [date].