



# HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2011

OF THE CONDITION AND AFFAIRS OF THE

## HealthLink HMO, Inc.

NAIC Group Code 0671 0671 NAIC Company Code 96475 Employer's ID Number 43-1616135  
(Current) (Prior)

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

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [ ] No [ X ]

Incorporated/Organized 07/29/1992 Commenced Business 01/14/1993

Statutory Home Office 1831 Chestnut Street, St. Louis, MO 63103-2275  
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 1831 Chestnut Street  
(Street and Number)  
St. Louis, MO 63103-2275 314-923-4444  
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 6775 W. Washington Street, Milwaukee, WI 53214  
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 6775 W. Washington Street  
(Street and Number)  
Milwaukee, WI 53214 414-459-6833  
(City or Town, State and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.healthlink.com

Statutory Statement Contact Brenda J Buss, 414-459-6833  
(Name) (Area Code) (Telephone Number)  
brenda.buss@bcbswi.com 414-459-6229  
(E-mail Address) (FAX Number)

### OFFICERS

President Dennis William Casey Treasurer Robert David Kretschmer  
Secretary Kathleen Susan Kiefer Assistant Secretary Karen Elizabeth Geiger

### OTHER

### DIRECTORS OR TRUSTEES

Wayne Scott DeVeydt Dennis William Casey Catherine Irene Kelaghan

State of Indiana SS:  
County of Hendricks

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

Dennis William Casey Kathleen Susan Kiefer Robert David Kretschmer  
President Secretary Treasurer

Subscribed and sworn to before me this 25 day of JANUARY 2012  
Theresa A Hill

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



Exhibit 2 - A&H Premiums Due and Unpaid

**N O N E**

Exhibit 3 - Health Care Receivables

**N O N E**

**EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

**Aging Analysis of Unpaid Claims**

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0199999. Individually listed claims unpaid	0	0	0	0	0	0
0299999. Aggregate accounts not individually listed- uncovered						0
0399999. Aggregate accounts not individually listed-covered						0
0499999. Subtotals	0	0	0	0	0	0
0599999. Unreported claims and other claim reserves						17,909
0699999. Total amounts withheld						17,909
0799999. Total claims unpaid						17,909
.....						
.....						
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.....						
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.....						
.....						
0899999 Accrued medical incentive pool and bonus amounts						



**EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
WellPoint, Inc. ....	Cash Collection .....	123,629	123,629	
WellPoint, Inc. ....	Administrative Expenses .....	12,700	12,700	
WellPoint, Inc. ....	Accounts Payable .....	749	749	
The WellPoint Companies, Inc. ....	Payroll .....	68,683	68,683	
0199999. Individually listed payables		205,761	205,761	0
0299999. Payables not individually listed		6,024	6,024	
0399999 Total gross payables		211,785	211,785	0

**EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS**

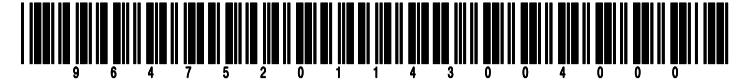
Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	0	0.0		0.0		
2. Intermediaries .....	0	0.0		0.0		
3. All other providers .....	0	0.0		0.0		
4. Total capitation payments .....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service .....	0	0.0	XXX	XXX		
6. Contractual fee payments .....	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service .....	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments .....	0	0.0	XXX	XXX		
9. Non-contingent salaries .....	0	0.0	XXX	XXX		
10. Aggregate cost arrangements .....	0	0.0	XXX	XXX		
11. All other payments .....	141,569	100.0	XXX	XXX		141,569
12. Total other payments .....	141,569	100.0	XXX	XXX	0	141,569
13. TOTAL (Line 4 plus Line 12)	141,569	100%	XXX	XXX	0	141,569

**EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

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

Exhibit 8 - Furniture and Equipment Owned

**N O N E**



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

2.

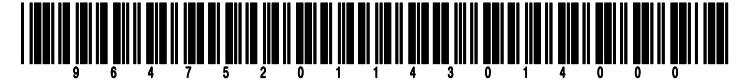
NAIC Group Code	BUSINESS IN THE STATE OF			DURING THE YEAR						(LOCATION)
	Arkansas			2011						NAIC Company Code
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
<b>Total Members at end of:</b>										
1. Prior Year .....										
2. First Quarter .....										
3. Second Quarter .....										
4. Third Quarter .....										
5. Current Year										
6. Current Year Member Months										
<b>Total Member Ambulatory Encounters for Year:</b>										
7. Physician .....										
8. Non-Physician .....										
9. Total										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (b) .....										
13. Life Premiums Direct										
14. Property/Casualty Premiums Written .....										
15. Health Premiums Earned.....										
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services.....										
18. Amount Incurred for Provision of Health Care Services										

NONE

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

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

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

2.

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

NONE

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....  
 (b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

HealthLink HMO, Inc.

2. St. Louis, MO

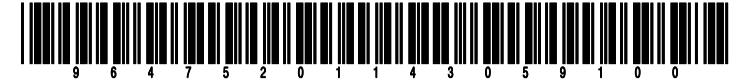
(LOCATION)

NAIC Group Code	0671	BUSINESS IN THE STATE OF		Missouri	DURING THE YEAR						2011	(LOCATION)		
		1		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	NAIC Company Code	96475
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other			
<b>Total Members at end of:</b>														
1.	Prior Year .....	21	21											
2.	First Quarter .....	21	21											
3.	Second Quarter .....	21	21											
4.	Third Quarter .....	21	21											
5.	Current Year	15	15											
6.	Current Year Member Months	240	240											
<b>Total Member Ambulatory Encounters for Year:</b>														
7.	Physician .....	57	57											
8.	Non-Physician .....	4	4											
9.	Total	61	61	0	0	0	0	0	0	0	0	0		
10.	Hospital Patient Days Incurred	16	16											
11.	Number of Inpatient Admissions	4	4											
12.	Health Premiums Written (b) .....	23,816	23,816											
13.	Life Premiums Direct	0												
14.	Property/Casualty Premiums Written .....	0												
15.	Health Premiums Earned .....	23,816	23,816											
16.	Property/Casualty Premiums Earned	0												
17.	Amount Paid for Provision of Health Care Services .....	141,569	141,569											
18.	Amount Incurred for Provision of Health Care Services	145,098	145,098											

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

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

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

HealthLink HMO, Inc.

2. St. Louis, MO

NAIC Group Code	0671	BUSINESS IN THE STATE OF	(LOCATION)										
			Grand Total			DURING THE YEAR				2011	NAIC Company Code		96475
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>													
1. Prior Year	21	21	0	0	0	0	0	0	0	0			
2. First Quarter	21	21	0	0	0	0	0	0	0	0			
3. Second Quarter	21	21	0	0	0	0	0	0	0	0			
4. Third Quarter	21	21	0	0	0	0	0	0	0	0			
5. Current Year	15	15	0	0	0	0	0	0	0	0			
6. Current Year Member Months	240	240	0	0	0	0	0	0	0	0			
<b>Total Member Ambulatory Encounters for Year:</b>													
7. Physician	57	57	0	0	0	0	0	0	0	0			
8. Non-Physician	4	4	0	0	0	0	0	0	0	0			
9. Total	61	61	0	0	0	0	0	0	0	0			
10. Hospital Patient Days Incurred	16	16	0	0	0	0	0	0	0	0			
11. Number of Inpatient Admissions	4	4	0	0	0	0	0	0	0	0			
12. Health Premiums Written (b)	23,816	23,816	0	0	0	0	0	0	0	0			
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0			
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0			
15. Health Premiums Earned	23,816	23,816	0	0	0	0	0	0	0	0			
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0			
17. Amount Paid for Provision of Health Care Services	141,569	141,569	0	0	0	0	0	0	0	0			
18. Amount Incurred for Provision of Health Care Services	145,098	145,098	0	0	0	0	0	0	0	0			

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....0

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

**SCHEDULE S - PART 1 - SECTION 2**

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

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
<b>NONE</b>											
0999999 - Totals											





Schedule S - Part 4

**N O N E**

Schedule S - Part 4 - Bank Footnote

**N O N E**

**SCHEDULE S - PART 5**

Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)

	1 2011	2 2010	3 2009	4 2008	5 2007
<b>A. OPERATIONS ITEMS</b>					
1. Premiums .....	24	60	70	80	31
2. Title XVIII - Medicare .....	0	0	0	0	0
3. Title XIX - Medicaid .....	0	0	0	0	0
4. Commissions and reinsurance expense allowance .....					
5. Total hospital and medical expenses .....					
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....	3	10	0	1	31
7. Claims payable .....	18	14	3	8	11
8. Reinsurance recoverable on paid losses .....	0	0	0	0	0
9. Experience rating refunds due or unpaid .....					
10. Commissions and reinsurance expense allowances unpaid .....					
11. Unauthorized reinsurance offset .....					
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
12. Funds deposited by and withheld from (F) .....	0	0	0	0	0
13. Letters of credit (L) .....	0	0	0	0	0
14. Trust agreements (T) .....	0	0	0	0	0
15. Other (O) .....	0	0	0	0	0

**SCHEDULE S - PART 6**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	18,089,965		18,089,965
2. Accident and health premiums due and unpaid (Line 15) .....	0		0
3. Amounts recoverable from reinsurers (Line 16.1) .....	0		0
4. Net credit for ceded reinsurance .....	xxx	17,909	17,909
5. All other admitted assets (Balance) .....	1,360,001		1,360,001
6. Total assets (Line 28)	19,449,966	17,909	19,467,875
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	0	17,909	17,909
8. Accrued medical incentive pool and bonus payments (Line 2) .....	0		0
9. Premiums received in advance (Line 8) .....	14,323		14,323
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19) .....	0		0
11. Reinsurance in unauthorized companies (Line 20) .....	0		0
12. All other liabilities (Balance) .....	1,441,192		1,441,192
13. Total liabilities (Line 24) .....	1,455,515	17,909	1,473,424
14. Total capital and surplus (Line 33) .....	17,994,451	xxx	17,994,451
15. Total liabilities, capital and surplus (Line 34)	19,449,966	17,909	19,467,875
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
16. Claims unpaid .....	17,909		
17. Accrued medical incentive pool .....	0		
18. Premiums received in advance .....	0		
19. Reinsurance recoverable on paid losses .....	0		
20. Other ceded reinsurance recoverables .....	0		
21. Total ceded reinsurance recoverables .....	17,909		
22. Premiums receivable .....	0		
23. Funds held under reinsurance treaties with authorized and unauthorized reinsurers .....	0		
24. Unauthorized reinsurance .....	0		
25. Other ceded reinsurance payables/offsets .....	0		
26. Total ceded reinsurance payables/offsets .....	0		
27. Total net credit for ceded reinsurance	17,909		

**SCHEDULE T - PART 2  
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
..0671	WellPoint, Inc.	..11069	36-4384128				American Imaging Management East, LLC	DE	JA	American Imaging Management, Inc. Imaging Management Holdings, L.L.C.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		36-3692630				American Imaging Management, Inc.	IL	NIA		Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		26-1974650				Anthem Blue Cross and Blue Shield Plan Administrator, LLC	JN	NIA	Anthem Health Plans, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..62825	95-4331852				Anthem Blue Cross Life and Health Insurance Company	CA	JA	WellPoint California Services, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		34-1979156				Anthem Credentialing Services, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		35-1898945				Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		26-1498094				Anthem Health Insurance Company of Nevada	NV	NIA	HMO Colorado, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..95120	61-1237516				Anthem Health Plans of Kentucky, Inc.	KY	JA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..52618	31-1705652				Anthem Health Plans of Maine, Inc.	ME	JA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..53759	02-0510530				Anthem Health Plans of New Hampshire, Inc.	NH	JA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..71835	54-0357120	40003317			Anthem Health Plans of Virginia, Inc.	VA	JA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..60217	06-1475928				Anthem Health Plans, Inc.	CT	JA	WellPoint, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		61-1459939				Anthem Holding Corp.	JN	UIP	WellPoint, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..28207	35-0781558				Anthem Insurance Companies, Inc.	JN	JA	WellPoint, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..13573	20-5876774				Anthem Life & Disability Insurance Company	NY	JA	WellPoint Acquisition, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..61069	35-0980405				Anthem Life Insurance Company	JN	JA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		32-0031791				Anthem Southeast, Inc.	JN	NIA	WellPoint, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		35-2129194				Anthem UM Services, Inc.	JN	NIA	UNICARE Specialty Services, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		30-0606541				Anthem Workers' Compensation, LLC	JN	NIA	Anthem Blue Cross Life and Health Insurance Company	Ownership	..75.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		30-0606541				Anthem Workers' Compensation, LLC	JN	NIA	HealthLink, Inc.	Ownership	..25.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		95-4640529				Arcus Enterprises, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		20-2858325				Arcus Financial Services, Inc.	JN	NIA	Arcus Enterprises, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		20-2858384				ARCUS HealthLiving Services, Inc.	JN	NIA	Arcus Enterprises, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		35-1292384				Associated Group, Inc.	JN	NIA	Anthem Insurance Companies, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		11-3713086				ATH Holding Company, LLC	JN	NIA	WellPoint, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		02-0454980				Behavioral Health Network, Inc.	NH	NIA	WellPoint Acquisition, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..54801	58-0469845				Blue Cross and Blue Shield of Georgia, Inc.	GA	JA	Cerulean Companies, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..96962	58-1638390				Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	GA	JA	Cerulean Companies, Inc.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.	..54003	39-0138065				Blue Cross Blue Shield of Wisconsin	WI	JA	Crossroads Acquisition Corp.	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		95-3760980				Blue Cross of California	CA	JA	WellPoint California Services, Inc.	Ownership	..100.000	WellPoint, Inc.	..0100
..0671	WellPoint, Inc.		20-2994048				Blue Cross of California Partnership Plan, Inc.	CA	JA	Blue Cross of California	Ownership	..100.000	WellPoint, Inc.	..0101
..0671	WellPoint, Inc.		20-4307514				CareMore Health Group, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	..100.000	WellPoint, Inc.	
..0671	WellPoint, Inc.		95-4694706				CareMore Health Plan	CA	JA	CareMore Medical Enterprises	Ownership	..100.000	WellPoint, Inc.	..0102
..0671	WellPoint, Inc.	..13562	38-3795280				CareMore Health Plan of Arizona, Inc.	AZ	JA	CareMore Medical Enterprises	Ownership	..100.000	WellPoint, Inc.	

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0671	WellPoint, Inc.	...13753	27-1848815				CareMore Health Plan of Colorado, Inc.	CO	JA	CareMore Medical Enterprises	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...13605	26-4001602				CareMore Health Plan of Nevada	NV	JA	CareMore Medical Enterprises	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		27-1625392				CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Medical Enterprises	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		20-4307555				CareMore Holdings, Inc.	DE	NIA	CareMore Health Group, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		20-2076421				CareMore Medical Enterprises	CA	NIA	CareMore Holdings, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		95-4420935				CareMore Medical Management Company	CA	NIA	CareMore Medical Enterprises	Ownership	98.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		95-4420935				CareMore Medical Management Company	CA	NIA	CMC Holding Company, LLC	Ownership	2.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		58-2217138				Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		39-1413702				Claim Management Services, Inc.	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.						CMC Holding Company, LLC	DE	NIA	CareMore Medical Enterprises	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		35-2393838				CommunityConnect Health Plan of Pennsylvania, Inc.	PA	NIA	Health Ventures Partner, L.L.C.	Ownership	89.290	WellPoint, Inc.	...0103
...0671	WellPoint, Inc.	...10345	31-1440175				Community Insurance Company	OH	JA	ATH Holding Company, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...95693	39-1462554				Compcare Health Services Insurance Corporation	WI	JA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		20-0334650				Crossroads Acquisition Corp.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		41-1905556				DeCare Analytics, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		02-0574609				DeCare Dental Health International, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.						DeCare Dental Insurance Ireland, Ltd.	Ireland	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		73-1665525				DeCare Dental Networks, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		01-0822645				DeCare Dental, LLC	MN	NIA	Anthem Holding Corp.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.						DeCare Operations Ireland, Limited	Ireland	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.						DeCare Systems Ireland, Limited	Ireland	NIA	DeCare Dental, LLC	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		26-2544715				Designated Agent Company, Inc.	KY	NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		13-3934328				EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...55093	23-7391136				Empire HealthChoice Assurance, Inc.	NY	JA	WellPoint Holding Corp	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...95433	13-3874803				Empire HealthChoice HMO, Inc.	NY	JA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		43-1047923				Forty-Four Forty-Four Forest Park Redevelopment Corp.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		95-2907752				Golden West Health Plan, Inc.	CA	JA	WellPoint California Services, Inc.	Ownership	100.000	WellPoint, Inc.	...0104
...0671	WellPoint, Inc.		26-4286154				Government Health Services, LLC	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...97217	58-1473042				Greater Georgia Life Insurance Company	GA	JA	Blue Cross and Blue Shield of Georgia, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		51-0365660				Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		54-1237939				Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		36-3897701				Health Ventures Partner, L.L.C.	JL	NIA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...95169	54-1356687				HealthKeepers, Inc.	VA	JA	Anthem Southeast, Inc.	Ownership	92.510	WellPoint, Inc.	
...0671	WellPoint, Inc.	...95169	54-1356687				HealthKeepers, Inc.	VA	JA	UNICARE National Services, Inc.	Ownership	7.490	WellPoint, Inc.	
...0671	WellPoint, Inc.	...96475	43-1616135				HealthLink HMO, Inc.	MO		HealthLink, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.		43-1364135				HealthLink, Inc.	IL	UDP	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
...0671	WellPoint, Inc.	...78972	86-0257201				Healthy Alliance Life Insurance Company	MO	JA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0671	WellPoint, Inc.	95473	84-1017384				HMO Colorado, Inc.	CO	JA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	95358	37-1216698				HMO Missouri, Inc.	MO	JA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		75-2619605				Imaging Management Holdings, L.L.C.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		56-2368286				Imaging Providers of Texas (non-profit)	TX	NIA	American Imaging Management, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		20-3578501				IMASIS, L.L.C.	DE	NIA	American Imaging Management, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		04-3371737				Landmark Solutions, LLC	NH	NIA	Behavioral Health Network, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	95527	02-0494919				Matthew Thornton Health Plan, Inc.	NH	JA	Anthem Health Plans of New Hampshire, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		39-2013971				Meridian Resource Company, LLC	WI	NIA	Compcare Health Services Insurance Corporation	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		52-1519940				National Capital Preferred Provider Organization, Inc.	MD	NIA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		35-1840597				National Government Services, Inc.	JN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	85286	75-1461960				OneNation Insurance Company	JN	JA	ATH Holding Company, LLC	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		95-4249368				Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		95-4386221				Park Square I, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		95-4249345				Park Square II, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		43-1595640				R & P Realty, Inc.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		56-2396739				Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		27-4410025				Radiant Services, LLC	JN	NIA	Community Insurance Company	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.						Rayant Insurance Company of New York	NY	JA	WellPoint Holding Corp	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	60024	13-3989915				RightCHOICE Insurance Company	JL	JA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	83640	36-3506910				RightCHOICE Managed Care, Inc.	DE	UIP	Anthem Holding Corp.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		47-0851593				Rocky Mountain Hospital and Medical Service, Inc.	CO	JA	ATH Holding Company, LLC	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	11011	84-0747736				SellCore, Inc.	DE	NIA	WellPoint, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		20-0473316				Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		55-0712302				State Sponsored Business UM Services, Inc.	JN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		45-4071004				Summit Administrative Services, L.L.C.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		20-3806260				The WellPoint Companies, Inc.	JN	NIA	ATH Holding Company, LLC	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		35-1835818				TrustSolutions, LLC	WI	NIA	Government Health Services, LLC	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		43-1967924				UNICARE Health Insurance Company of the Midwest	JL	JA	UNICARE Illinois Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	70700	36-3304416				UNICARE Health Plan of Kansas, Inc.	KS	JA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	12805	20-4842073				UNICARE Health Plan of West Virginia, Inc.	WV	JA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	11810	84-1620480				UNICARE Health Plans of Texas, Inc.	TX	JA	UNICARE Illinois Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	95420	74-2151310				UNICARE Health Plans of the Midwest, Inc.	JL	JA	UNICARE Illinois Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	95505	36-3897076				UNICARE Illinois Services, Inc.	JL	NIA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		36-3899137				UNICARE Life & Health Insurance Company	JN	JA	UNICARE National Services, Inc.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.	80314	52-0913817				UNICARE National Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	WellPoint, Inc.	
0671	WellPoint, Inc.		95-4635507											

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

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

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
..0671	WellPoint, Inc. ....		77-0494551				UNICARE Specialty Services, Inc. ....	DE	NIA	Anthem Holding Corp. .... Blue Cross Blue Shield of Wisconsin	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		39-1946735				United Government Services, LLC	WI	NIA		Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		36-4014617				UtiliMED IPA, Inc. ....	NY	NIA	American Imaging Management, Inc. ..	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		20-4405193				WellPoint Acquisition, LLC	JN	NIA	WellPoint, Inc. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		20-2156380				WellPoint Behavioral Health, Inc. ....	DE	NIA	UNICARE Specialty Services, Inc. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		95-4640531				WellPoint California Services, Inc. ..	DE	NIA	Anthem Holding Corp. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		95-4657170				WellPoint Dental Services, Inc. ....	DE	NIA	UNICARE Specialty Services, Inc. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		20-3620996				WellPoint Holding Corp WellPoint Information Technology	DE	NIA	WellPoint, Inc. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		45-2736438				Services, Inc. ....	CA	NIA	Blue Cross of California	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		36-4595641				WellPoint Insurance Services, Inc. ....	HI	NIA	WellPoint, Inc. ....	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		36-3897080				WellPoint Partnership Plan, LLC	JL	NIA	Health Ventures Partner, L.L.C. ....	Ownership.....	75.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		36-3897080				WellPoint Partnership Plan, LLC	JL	NIA	UNICARE Illinois Services, Inc. ....	Ownership.....	25.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		35-2145715		6324	New York Stock Exchange (NYSE)	WellPoint, Inc. ....	JN	UIP				WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		98-0552141				WPMI Enterprise Consulting and Service Co., LTD	China	NIA	WPMI, LLC	Ownership.....	100.000	WellPoint, Inc. ....	
..0671	WellPoint, Inc. ....		20-8672847				WPMI, LLC	DE	NIA	ATH Holding Company, LLC	Ownership.....	62.500	WellPoint, Inc. ....	0105

Asterisk	Explanation
0100	Insurer is deemed to be an insurance affiliate in column 10, but doesn't have an NAIC code in column 3 because it is regulated by the California Department of Managed Health Care.
0101	Insurer is deemed to be an insurance affiliate in column 10, but doesn't have an NAIC code in column 3 because it is regulated by the California Department of Managed Health Care.
0102	Insurer is deemed to be an insurance affiliate in column 10, but doesn't have an NAIC code in column 3 because it is regulated by the California Department of Managed Health Care.
0103	10.71% owned by unaffiliated investors
0104	Insurer is deemed to be an insurance affiliate in column 10, but doesn't have an NAIC code in column 3 because it is regulated by the California Department of Managed Health Care.
0105	37.5% owned by unaffiliated investors

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

**SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	36-4384128	American Imaging Management East, LLC					(5,080,942)				(5,080,942)	
	36-3692630	American Imaging Management, Inc.					(37,904,184)				(37,904,184)	
62825	95-4331852	Anthem Blue Cross Life and Health Insurance Company, Inc.					(1,036,333,926)	(5,068,307)			(1,041,402,233)	4,080,947
95120	61-1237516	Anthem Health Plans of Kentucky, Inc.	(160,000,000)				(265,284,438)				(425,284,438)	
52618	31-1705652	Anthem Health Plans of Maine, Inc.	(48,800,000)				(102,004,006)				(150,804,006)	
53759	02-0510530	Anthem Health Plans of New Hampshire, Inc.	(25,000,000)				(50,855,055)				(75,855,055)	
71835	54-0357120	Anthem Health Plans of Virginia, Inc.		(359,500,000)			(476,359,991)	(1,819,542)			(837,679,533)	(5,230,081)
60217	06-1475928	Anthem Health Plans, Inc.	(300,000,000)				(304,899,701)				(604,899,701)	
	61-1459939	Anthem Holding Corp.					13,140,651				13,140,651	
28207	35-0781558	Anthem Insurance Companies, Inc.	(275,000,000)				(769,872,927)	(21,676,040)			(1,066,548,967)	31,370,787
13573	20-5876774	Anthem Life and Disability Insurance Company					(192,421)				(192,421)	
61069	35-0980405	Anthem Life Insurance Company			122,511,721		(31,800,606)	3,071,240			93,782,355	(18,116,278)
	32-0031791	Anthem Southeast, Inc.					(99,315)				(99,315)	
	35-2129194	Anthem UM Services, Inc.					5,631,620				5,631,620	
	20-2858325	Arcus Financial Services, Inc.					1,550,360				1,550,360	
	11-3713086	ATH Holding Company, LLC					41,760,191				41,760,191	
54801	58-0469845	Blue Cross and Blue Shield of Georgia, Inc.	(198,100,000)				(171,038,650)				(369,138,650)	
96962	58-1638390	Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	(64,700,000)				(294,601,393)				(359,301,393)	
54003	39-0138065	Blue Cross Blue Shield of Wisconsin	(88,207,249)				(103,293,546)	(298,264)			(191,799,059)	(82,651)
	95-3760980	Blue Cross of California	(500,000,000)				(405,698,514)	(426,960)			(906,125,474)	3,614,507
	20-2994048	Blue Cross of California Partnership Plan, Inc.					(79,933,937)				(79,933,937)	
	95-4694706	Caremore Health Plan					(6,992,844)				(6,992,844)	
13562	38-3975280	Caremore Health Plan of Arizona, Inc.					(12,212,518)				(12,212,518)	
13605	26-4001602	Caremore Health Plan of Nevada					(4,324,377)				(4,324,377)	
	20-2076421	Caremore Medical Enterprises					16,536,895				16,536,895	
	39-1413702	Claim Management Services, Inc.					(226,440)				(226,440)	
10345	31-1440175	Community Insurance Company	(375,600,000)				(721,380,324)				(1,096,980,324)	
95693	39-1462554	Compicare Health Services Insurance Corporation	(21,792,751)	(18,207,249)			(50,675,483)				(90,675,483)	
	20-0334650	Crossroads Acquisition Corp.					662,307				662,307	
	13-3934328	EHC Benefits Agency, Inc.					2,902,693				2,902,693	
55093	23-7391136	Empire HealthChoice Assurance, Inc.	(210,000,000)				(822,221,248)				(1,032,221,248)	
95433	13-3874803	Empire HealthChoice HMO, Inc.	(170,000,000)				(139,348,014)				(309,348,014)	
	95-2907752	Golden West Health Plan, Inc.					(2,286,935)				(2,286,935)	
97217	58-1473042	Greater Georgia Life Insurance Company	(1,900,000)				(5,746,987)				(7,646,987)	
	51-0365660	Health Core, Inc.					(14,346,391)				(14,346,391)	
	54-1237939	Health Management Corporation					8,931,123				8,931,123	
95169	54-1356687	HealthKeepers, Inc.	(126,300,000)				(153,199,262)	1,819,542			(277,679,720)	5,230,081

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE HealthLink HMO, Inc.

**SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
96475	43-1616135	HealthLink HMO, Inc.	(12,000,000)				10,848,000	121,282			(1,030,718)	17,909
	43-1364135	HealthLink, Inc.					(77,510,679)				(77,510,679)	
78972	86-0257201	Healthy Alliance Life Insurance Company	(80,000,000)				(234,136,378)				(314,136,378)	
95473	84-1017384	HMO Colorado, Inc.	(2,528,372)	(17,471,628)			(19,370,030)				(39,370,030)	
95358	37-1216698	HMO Missouri, Inc.	(44,500,000)				(20,932,410)				(65,432,410)	
	98-0408753	HTH Re, LTD						5,068,307			5,068,307	(4,080,947)
	39-1582567	Imaging Management Holdings, LLC					789,984				789,984	
95527	02-0494919	Matthew Thornton Health Plan, Inc.	(25,000,000)				(62,138,240)				(87,138,240)	
	39-2013971	Meridian Resource Company, LLC					(7,113,093)				(7,113,093)	
	52-1519940	National Capital Preferred Provider Organization, Inc.					372,121				372,121	
	35-1840597	National Government Services, Inc.					(10,958,934)				(10,958,934)	
85286	75-1461960	OneNation Insurance Company					(371,285)	508,585			137,300	246,073
95167	54-1650230	Peninsula Health Care, Inc.									0	
96512	54-1239244	Priority Health Care, Inc.									0	
	43-1595640	R&P Realty					231,707				231,707	
60024	13-3989915	Rayant Insurance Company of New York									0	
	56-2396739	Resolution Health, Inc.					17,292,937				17,292,937	
83640	36-3506910	RightCHOICE Insurance Company					(42,658)				(42,658)	
	47-0851593	RightCHOICE Managed Care, Inc.					(19,442,514)				(19,442,514)	
11011	84-0747736	Rocky Mountain Hospital and Medical Service, Inc.	(69,943,256)				(230,311,504)	22,149,493			(278,105,267)	(39,437,447)
	55-0712302	Southeast Services, Inc.					13,038,922				13,038,922	
	35-1835818	The WellPoint Companies, Inc.					3,200,066,822				3,200,066,822	
	43-1967924	TrustSolutions, LLC					(689,457)				(689,457)	
10076	76-0646301	UNICARE Health Insurance Company of Texas					(150,159)				(150,159)	
70700	36-3304416	UNICARE Health Insurance Company of the Midwest	(2,200,000)				(2,705,533)				(4,905,533)	
12805	20-4842073	UNICARE Health Plan of Kansas, Inc.					(15,631,130)				(15,631,130)	
11810	84-1620480	UNICARE Health Plan of West Virginia, Inc.					(16,772,410)				(19,572,410)	
95420	74-2151310	UNICARE Health Plans of Texas, Inc.	(20,000,000)				(4,679,189)				(24,679,189)	
95505	36-3897076	UNICARE Health Plans of the Midwest, Inc.	(3,600,000)				(1,959,928)				(5,559,928)	
80314	52-0913817	UNICARE Life & Health Insurance Company	(56,623,349)	(19,576,651)	(122,511,721)		(55,660,233)	(3,449,336)			(257,821,290)	22,387,100
	95-4635507	UNICARE National Services, Inc.					3,921,971				3,921,971	
	77-0494551	UNICARE Specialty Services, Inc.					(120,555)				(120,555)	
	95-4613835	WellPoint Behavioral Health, Inc.					(132,540)				(132,540)	
	95-4640531	WellPoint California Services, Inc.	50,336,250								50,336,250	
	95-4657170	WellPoint Dental Services, Inc.					8,628,106				8,628,106	
	20-3620996	WellPoint Holding Corp	300,000,000				122,420,239				422,420,239	
	36-3897080	WellPoint Partnership Plan, LLC					(8,359,669)				(8,359,669)	
	35-2145715	WellPoint, Inc.	2,534,258,727	414,755,528			3,392,603,867				6,341,618,122	
	98-0552141	WPMI (Shanghai) Enterprise Consulting & Serv Co. Ltd. (G2510)					(429,411)				(429,411)	

40.1

**SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	20-8672847	WPMI, LLC					(3,498,202)				(3,498,202)	
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

	Responses
<b>MARCH FILING</b>	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2. Will an actuarial opinion be filed by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
<b>APRIL FILING</b>	
5. Will Management's Discussion and Analysis be filed by April 1? .....	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	YES
<b>JUNE FILING</b>	
8. Will an audited financial report be filed by June 1? .....	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES
<b>AUGUST FILING</b>	
10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? .....	YES

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

<b>MARCH FILING</b>	
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? .....	NO
13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?.....	NO
14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
<b>APRIL FILING</b>	
21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? .....	NO
23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC? .....	NO
24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	YES
25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	YES
<b>AUGUST FILING</b>	
26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	NO

- Explanations:
- 11.
  - 12.
  - 13.
  - 14.
  - 15.
  - 16.
  - 17.
  - 18.
  - 19.
  - 20.
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  - 26.

Bar Codes:

11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
12. Life Supplement [Document Identifier 205]	
13. Property/Casualty Supplement [Document Identifier 207]	
14. SIS Stockholder Information Supplement [Document Identifier 420]	
15. Participating Opinion for Exhibit 5 [Document Identifier 371]	
16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	
17. Medicare Part D Coverage Supplement [Document Identifier 365]	
18. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	
19. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	

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20. Relief from the Requirements for Audit Committees [Document Identifier 226]



21. Long-Term Care Experience Reporting Forms [Document Identifier 306]



22. Life Supplement [Document Identifier 211]



23. Property/Casualty Supplement Insurance Expense Exhibit  
[Document Identifier 213]



26. Management's Report of Internal Control Over Financial Reporting  
[Document Identifier 223]



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