

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold; text-align: center;">2022</p> <hr/> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 07/31/2022

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
 a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report
 an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. ▶

D Check box if filing under: Form 5558 automatic extension the DFVC program
 special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>MEDECISION, INC.</u></p> <p><u>550 E SWEDESFORD RD</u> <u>SUITE 220</u> <u>WAYNE, PA 19087-5607</u></p>	<p>1c Effective date of plan <u>03/01/1994</u></p> <p>2b Employer Identification Number (EIN) <u>23-2530889</u></p> <p>2c Plan Sponsor's telephone number <u>484-323-2664</u></p> <p>2d Business code (see instructions) <u>541512</u></p>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	01/30/2023	GENE GEORGE PARENT FBO MEDICISION
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	01/30/2023	GENE GEORGE PARENT FBO MEDICISION
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor MEDECISION, INC. 550 E SWEDESFORD RD SUITE 220 WAYNE, PA 19087-5607	3b Administrator's EIN 23-2530889 3c Administrator's telephone number 484-323-2664
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 871
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits..... d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)..... h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 556 6a(2) 0 6b 0 6c 0 6d 0 6e 0 6f 0 6g 0 6h 112
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2S 2T 3D 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules (1) <input checked="" type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input checked="" type="checkbox"/> ¹ A (Insurance Information) (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) Yes No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) Yes No

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

**SCHEDULE A
(Form 5500)**

Department of the Treasury
Internal Revenue Service
Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **07/31/2022**

A Name of plan THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 MEDECISION, INC.	D Employer Identification Number (EIN) 23-2530889

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-1050034	93629	031576	0	01/01/2022	07/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II	Investment and Annuity Contract Information Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.
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4 Current value of plan's interest under this contract in the general account at year end.....	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount..... Specify nature of costs ▶	6d	

e Type of contract: (1) individual policies (2) group deferred annuity
(3) other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) deposit administration (2) immediate participation guarantee
(3) guaranteed investment (4) other ▶

b Balance at the end of the previous year	7b		
c Additions: (1) Contributions deposited during the year	7c(1)		
	7c(2)		
	7c(3)		
	7c(4)		
	7c(5)		
(6) Total additions.....	7c(6)		
d Total of balance and additions (add lines 7b and 7c(6))		7d	
e Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year		7e(1)
	(2) Administration charge made by carrier.....		7e(2)
	(3) Transferred to separate account.....		7e(3)
	(4) Other (specify below)		7e(4)
(5) Total deductions.....	7e(5)		
f Balance at the end of the current year (subtract line 7e(5) from line 7d)		7f	

Part III Welfare Benefit Contract Information
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** Health (other than dental or vision)
- b** Dental
- c** Vision
- d** Life insurance
- e** Temporary disability (accident and sickness)
- f** Long-term disability
- g** Supplemental unemployment
- h** Prescription drug
- i** Stop loss (large deductible)
- j** HMO contract
- k** PPO contract
- l** Indemnity contract
- m** Other (specify) ▶

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)	
	(2) Increase (decrease) in amount due but unpaid	9a(2)	
	(3) Increase (decrease) in unearned premium reserve.....	9a(3)	
	(4) Earned ((1) + (2) - (3)).....		9a(4)
b	Benefit charges (1) Claims paid.....	9b(1)	
	(2) Increase (decrease) in claim reserves	9b(2)	
	(3) Incurred claims (add (1) and (2)).....		9b(3)
	(4) Claims charged		9b(4)
c	Remainder of premium: (1) Retention charges (on an accrual basis) --		
	(A) Commissions	9c(1)(A)	
	(B) Administrative service or other fees	9c(1)(B)	
	(C) Other specific acquisition costs.....	9c(1)(C)	
	(D) Other expenses	9c(1)(D)	
	(E) Taxes	9c(1)(E)	
	(F) Charges for risks or other contingencies	9c(1)(F)	
	(G) Other retention charges.....	9c(1)(G)	
	(H) Total retention.....		9c(1)(H)
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.).....		9c(2)
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement.....		9d(1)
	(2) Claim reserves		9d(2)
	(3) Other reserves		9d(3)
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).).....		9e

10 Nonexperience-rated contracts:

a	Total premiums or subscription charges paid to carrier	10a	
b	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	
	Specify nature of costs.		

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? Yes No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 07/31/2022

A Name of plan <u>THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MEDECISION, INC.</u>	D Employer Identification Number (EIN) <u>23-2530889</u>	

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... Yes No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

WILLIS TOWERS WATSON US LLC

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	7366	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

PRUDENTIAL RETIREMENT INSURANCE AND

06-1050034

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 50	NONE	1100	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
 (complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

<p align="center">SCHEDULE D (Form 5500)</p> <p align="center">Department of the Treasury Internal Revenue Service</p> <hr/> <p align="center">Department of Labor Employee Benefits Security Administration</p>	<p>DFE/Participating Plan Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ File as an attachment to Form 5500.</p>	<p>OMB No. 1210-0110</p> <hr/> <p>2022</p> <hr/> <p>This Form is Open to Public Inspection.</p>
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 07/31/2022

<p>A Name of plan <u>THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES</u></p>	<p>B Three-digit plan number (PN) ▶</p>	<p><u>001</u></p>
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<p>C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>MEDECISION, INC.</u></p>	<p>D Employer Identification Number (EIN) <u>23-2530889</u></p>
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Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: LCV/LSV ASSET MGMT

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-318</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MCG/ARTISAN PARTNER

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-185</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MCV/WELLINGTON

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-187</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU DAY ONE IFX TARG BAL

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-697</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU IFX SEL LT AGG GRO

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-511</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU IFX SEL LT BALANCED

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-513</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU IFX SEL LT CONSER GRO

b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.

c EIN-PN <u>06-1050034-514</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PRU IFX SEL LT GROWTH		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-512	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: PRU IFX SEL LT INC & EQU		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-515	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: SCG/TIMESQUARE		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-132	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: NORTHERN TR AGG BD IND		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-088	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: NORTHERN TRUST ACWI EX US		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-110	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: NORTHERN TR EXT EQ MK		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC		
c EIN-PN 45-6138589-223	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: CORE PLUS BOND/PGIM FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-299	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: DRYDEN S&P 500 INDEX FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-123	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: SCV/CEREDEX		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-256	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: LCG/JENNISON FUND		
b Name of sponsor of entity listed in (a): PRUDENTIAL RETIREMENT INS.		
c EIN-PN 06-1050034-408	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

**SCHEDULE H
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

► **File as an attachment to Form 5500.**

OMB No. 1210-0110

2022

This Form is Open to Public Inspection

For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **07/31/2022**

A Name of plan THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES		B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 MEDECISION, INC.		D Employer Identification Number (EIN) 23-2530889	

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	11062	0
(2) Participant contributions.....	1b(2)	77228	0
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities.....	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred.....	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred.....	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests.....	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)	375699	0
(9) Value of interest in common/collective trusts.....	1c(9)	1289759	0
(10) Value of interest in pooled separate accounts.....	1c(10)	34990364	0
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	7279366	0
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	4224184	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	48247662	0
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	48247662	0

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	390236	
(B) Participants.....	2a(1)(B)	2947226	
(C) Others (including rollovers).....	2a(1)(C)	324274	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		3661736
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	8254	
(F) Other.....	2b(1)(F)	54568	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		62822
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		-185367
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-6538360
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-486558
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-3485727
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	4468673	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		4468673
f Corrective distributions (see instructions)	2f		6165
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	9686	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		9686
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4484524
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-7970251
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan.....	2l(2)		40277411

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

- (1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

- (1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: ERNST & YOUNG LLP

(2) EIN: 34-6565596

d The opinion of an independent qualified public accountant is **not attached** because:

- (1) This form is filed for a CCT, PSA, or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

	Yes	No	Amount
4a		X	

		Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....	4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	4d		X	
e Was this plan covered by a fidelity bond?.....	4e	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	4i		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.).....	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k	X		
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... Yes No
 If "Yes," enter the amount of any plan assets that reverted to the employer this year 0.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
THE 401K PLAN	36-1236610	005

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 07/31/2022

A Name of plan <u>THE 401(K) PLAN FOR CERTAIN HCSC SUBSIDIARIES</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>MEDECISION, INC.</u>	D Employer Identification Number (EIN) <u>23-2530889</u>	

Part I	Distributions
---------------	----------------------

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....

1	0
---	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 22-1211670

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3	
---	--

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a	
b Enter the amount contributed by the employer to the plan for this plan year.....	6b	
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c	

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? Yes No N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? Yes No N/A

Part III	Amendments
-----------------	-------------------

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... Increase Decrease Both No

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
----------------	---

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... Yes No

11 a Does the ESOP hold any preferred stock?..... Yes No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... Yes No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... Yes No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: Hourly Weekly Unit of production Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	14a	
b The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
c The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14c	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....	15a	
b The corresponding number for the second preceding plan year.....	15b	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
 0-3 years 3-6 years 6-9 years 9-12 years 12-15 years 15-18 years 18-21 years 21 years or more

c What duration measure was used to calculate line 19(b)?
 Effective duration Macaulay duration Modified duration Other (specify): _____

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? Yes No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
 Yes.
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
 No. Other. Provide explanation _____

FINANCIAL STATEMENTS

THE 401(k) PLAN for Certain HCSC Subsidiaries
As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022
With Report of Independent Auditors

Ernst & Young LLP



THE 401(k) PLAN for Certain HCSC Subsidiaries

Financial Statements

As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022

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155 North Wacker Drive
Chicago, IL 60606-1787

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Fax: +1 312 879 4000
ey.com

Report of Independent Auditors

HCSC Plan Administrative Committee
Health Care Service Corporation
THE 401(k) PLAN for Certain HCSC Subsidiaries

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of July 31, 2022 and December 31, 2021, and the related statement of changes in net assets available for benefits for the period from January 1, 2022 through July 31, 2022, and the related notes (collectively referred to as the “financial statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of July 31, 2022 and December 31, 2021, and for the period from January 1, 2022 through July 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor’s Responsibilities for the Audit of the Financial Statements section

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of

internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

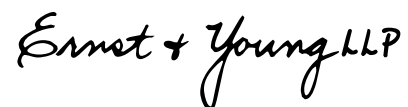
In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.



January 20, 2023

THE 401(k) PLAN for Certain HCSC Subsidiaries

Statements of Net Assets Available for Benefits

	July 31, 2022	December 31, 2021
Assets		
Investments, at fair value	\$ —	\$ 43,559,489
Investments at contract value	—	4,224,184
Receivables:		
Employer contributions	—	11,062
Participant contributions	—	77,228
Notes receivable from participants	—	375,699
Total receivables	—	463,989
Net assets available for benefits	<u>\$ —</u>	<u>\$ 48,247,662</u>

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Statement of Changes in Net Assets Available for Benefits

	Period From January 1, 2022 Through July 31, 2022
Additions	
Investment income (loss):	
Net depreciation in fair value of investments	\$ (7,210,285)
Interest	—
Dividends	54,568
	(7,155,717)
 Interest income on notes receivable from participants	 8,254
 Contributions:	
Employee	2,947,226
Employer	390,236
Rollover	324,274
	3,661,736
 Total additions, net of investment losses	 (3,485,727)
 Deductions	
Benefit payments	4,474,838
Administrative expenses	9,686
Total deductions	4,484,524
 Net decrease	 (7,970,251)
 Transfer of assets to THE 401(k) PLAN	 (40,277,411)
 Net assets available for benefits at beginning of period	 48,247,662
Net assets available for benefits at end of period	\$ —

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements

July 31, 2022 and December 31, 2021

1. Plan Description

THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan) was a qualified defined-contribution plan covering substantially all eligible employees of Medecision, Inc. and Innovista LLC (the Companies) who were at least 21 years of age. The Companies are subsidiaries of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC) As of July 31, 2022 the Plan ceased to exist and employees' balances in the amount of \$40,277,411 were merged into THE 401(k) PLAN, which is a plan sponsored by HCSC.

The following description of the Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was administered by a committee (the Plan Administrative Committee) appointed by the Employee Benefits Compliance Committee of the Company. The Plan Administrative Committee consisted of a chairman and at least two additional members. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA) and was exempt from federal income taxes under Section 401(a) of the Internal Revenue Code (IRC).

Prudential Retirement Insurance and Annuity Company (PRIAC) and Prudential Bank & Trust, FSB (Prudential) served as the record-keepers and custodians of the Plan.

Employee Contributions

Eligible active employees of the Companies, as defined by the Plan agreement, were eligible to participate in the Plan beginning at the time of employment. Leased or temporary employees were not eligible to participate in the Plan. Participants were automatically enrolled in the Plan at a deferral rate of 6% of compensation on a tax-deferred basis, subject to applicable IRC maximum amounts, unless the participant chose another percentage or elected not to participate. The maximum deferral percentage under the Plan was 75%. Participants who attained the age of 50 before the end of the Plan year were eligible to make catch-up contributions.

Participants could also contribute amounts representing distributions from other qualified defined-benefit or defined-contribution plans.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Employer Contributions

The employer could make a matching contribution at a discretionary percentage of pretax contributions. From January 1, 2022 to July 31, 2022, the discretionary matching contribution was based on a matching percentage of 30% of the first 4% of compensation deferred.

The employer could also may make a non-elective contribution at the discretion of management. Such additional contribution, if any, was allocated to each participant in proportion to his or her compensation for the Plan year while a participant. To receive the non-elective contribution, the employee must have been an eligible participant on the last day of the Plan year and completed at least 1,000 hours of service during the Plan year. Non-elective contributions were not made from January 1, 2022 to July 31, 2022.

Participant Accounts

Each participant's account was credited with their contribution and the Companies' employer contribution and an allocation of the Plan's earnings and was charged with an allocation of the Plan's losses and administrative expenses as well as direct participant-related account fees. Allocations were based on participant earnings or account balances, as defined.

The benefit to which a participant is entitled was the benefit that could be provided from the participant's vested accounts. Participants directed contributions into the various investment options offered by the Plan.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Vesting

Participants were fully vested and have non-forfeitable interests in their contributions and earnings thereon at all times. Participants became fully vested in the employer contributions and earnings thereon upon retirement, disability, death, reaching the age of 65, or based upon the following vesting schedule:

<u>Years of Service</u>	<u>Vested Portion</u>
Less than 1	—%
1 but less than 2	25%
2 or more	100%

Forfeited Accounts

Forfeited non-vested accounts were used to pay Plan administrative expenses and reduce future employer contributions. In 2022, forfeitures of \$8,161 were applied against certain administrative expenses. There were no forfeitures used to offset the Company's matching contributions in 2022. The balance in the forfeiture account was \$0 and \$82,307 as of July 31, 2022 and December 31, 2021, respectively.

Benefit Payments

In accordance with the Plan's provisions, benefits were distributable upon termination, death, or disability in a single-sum cash payment. Participants could also take in-service withdrawals, according to the Plan provisions, and hardship withdrawals upon financial hardship, as defined by the Plan document.

In 2020 the Plan updated provisions or operations as appropriate or as required by the Setting Every Community Up for Retirement Enhancement Act (SECURE Act), the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) and the Bipartisan Budget Act of 2018. A plan amendment to adopt these changes is not required until 2025.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Participant Loans

A participant was eligible to request a loan after accumulating \$2,000 in his or her account. Loans were not made in excess of 50% of the participant's vested account balance, not to exceed \$50,000, reduced by the highest outstanding loan balance in the preceding 12 months. The minimum loan amount was \$1,000. Loans were secured by the balance in the participant's account, supported by promissory notes payable to the Plan, and bore interest at a periodically published fixed rate tied to the prime rate at the time of the loan. Both principal and interest were repayable through payroll deductions over periods ranging up to 60 months. For loans taken prior to January 1, 2013, terms could exceed 60 months for the purchase of a primary residence. Additionally, each employee could have only one loan outstanding under the current Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Payment of Benefits

Benefits to participants are recorded when paid.

Plan Expenses

During 2022, substantially all administrative expenses, except for fees related to notes receivable from participants, incurred in connection with the administration of the Plan were paid by the Companies.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires the Plan's management to make estimates that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Investment Valuation and Income Recognition

Investments held by the Plan (except for fully benefit-responsive investment contract) are stated at fair value. Fair value is defined under Accounting Standards Codification (ASC) 820 as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., exit price). See Note 4 for further discussion of fair value measurements.

To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy in ASC 820 are described below:

Level 1 – Fair value is based on unadjusted quoted prices for identical assets or liabilities in an active market that the Plan has the ability to access at the measurement date.

Level 2 – Fair value is based on quoted prices in markets that are not active, quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the asset or liability.

Level 3 – Fair value is based on prices or valuation techniques that require inputs that are both significant to the fair value measurement and unobservable. These inputs reflect judgment about the assumptions that a market participant would use in pricing the investment and are based on the best available information.

Shares of registered investment companies are valued based on published market prices, which represent the NAV of shares held at year-end. Pooled separate accounts and common/collective trusts have a readily determinable fair value and are valued at NAV of units held at year-end.

Interest income is recorded as earned on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought, sold, and held during the year.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Notes Receivable From Participants

Notes receivable from participants represent participant loans that are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of July 31, 2022, and December 31, 2021. If a participant ceases to make loan repayments as agreed and the plan administrator deems the participant loan to be a distribution, the participant loan balance is reduced and is recorded as a benefit payment. The Plan held participants loans of \$0 and \$375,699, as of July 31, 2022 and December 31, 2021, respectively.

3. Investments

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements, including investments, at fair value, fully benefit-responsive investment contract, at contract value, and notes receivable from participants held at July 31, 2022, and December 31, 2021, and net depreciation in fair value of investments, interest, dividends and interest income on notes receivable from participants for the year period from January 1, 2022 through July 31, 2022, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by PRIAC and Prudential.

4. Fair Value Measurements

As of July 31, 2022, there were no assets held by the Plan. The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value, as of December 31, 2021:

	Assets at Fair Value as of December 31, 2021			
	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ 7,279,366	\$ —	\$ —	\$ 7,279,366
Pooled separate accounts	—	34,990,364	—	34,990,364
Common collective trusts	—	1,289,759	—	1,289,759
Total assets at fair value	\$ 7,279,366	\$ 36,280,123	\$ —	\$ 43,559,489

There were no assets or liabilities measured at fair value on a nonrecurring basis as of July 31, 2022, and December 31, 2021.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract

The Plan entered into a fully benefit-responsive investment contract with PRIAC, which meets the fully benefit-responsive contract criteria and, therefore, is reported at contract value. Contract value is the relevant measurement attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under terms of the Plan. PRIAC maintains the contributions in a separate account. The separate account, which is segregated from the general account assets of PRIAC, is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Payment obligations and the fulfillment of any guarantees specified in the group insurance claims are supported by the assets in the separate account and if such assets are not sufficient, by the full faith and credit of PRIAC. The Plan merger had no impact on this investment. The Plan held HCSC Stable Value Fund totaling \$0 and \$4,224,184 as of July 31, 2022, and December 31, 2021, respectively.

Contract value, as reported to the Plan by PRIAC, represents contributions made under the contract plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. Participant-directed redemptions have no significant restrictions; however, the Plan is required to provide 30-day termination notice to liquidate its entire contract.

Interest is credited on contract balances using a single “portfolio rate” approach. Under this methodology, a single interest crediting rate is applied to all contributions made, regardless of the timing of those contributions. The crediting interest rate is based on a formula agreed upon with PRIAC, but may not be less than 0%. Such interest rates are reviewed on a semiannual basis for resetting. In determining the interest rate, consideration is given to the anticipated yield on the separate account for the following calendar year, adjusted to reflect the amortization of gains or losses realized from the sale of securities, amortization of gains or losses due to permanent impairments and the difference between the amount of interest credited to date to the HCSC investment contract and the underlying investments results of the separate account. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract (continued)

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include: (i) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (ii) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (iii) bankruptcy of the Plan sponsor or other Plan sponsor events (e.g., divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (iv) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that the occurrence of any such events, which would limit the Plan's ability to transact at contract value with participants, is probable.

6. Income Tax Status

The underlying prototype plan has received an opinion letter from the IRS dated April 29, 2014, stating that the written form of the underlying prototype document is qualified under Section 401 of the IRC. Any employer adopting this form of the plan will be considered to have a plan qualified under Section 401 of the IRC, and, therefore the related trust is tax-exempt. Once qualified, the Plan is required to operate in compliance with the IRC to maintain its qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan management has analyzed the tax positions taken by the Plan, and has concluded that there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

7. Risks and Uncertainties

The Plan invests in various investment securities that are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. The changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

8. Related-Party and Party-in-Interest Transactions

The investment contract and the units of pooled separate accounts held by the Plan are managed by PRIAC and Prudential, the custodians of the Plan; therefore, these transactions qualify as party-in-interest transactions; however, these are exempt transactions under ERISA. Fees were paid by the Plan to the custodians for certain transactions and certain investment management services.

9. Subsequent Events

Management evaluated subsequent events for the Plan through January 20, 2023 the date the financial statements were available to be issued.

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FINANCIAL STATEMENTS

THE 401(k) PLAN for Certain HCSC Subsidiaries
As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022
With Report of Independent Auditors

Ernst & Young LLP



THE 401(k) PLAN for Certain HCSC Subsidiaries

Financial Statements

As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022

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Report of Independent Auditors

HCSC Plan Administrative Committee
Health Care Service Corporation
THE 401(k) PLAN for Certain HCSC Subsidiaries

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of July 31, 2022 and December 31, 2021, and the related statement of changes in net assets available for benefits for the period from January 1, 2022 through July 31, 2022, and the related notes (collectively referred to as the “financial statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of July 31, 2022 and December 31, 2021, and for the period from January 1, 2022 through July 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor’s Responsibilities for the Audit of the Financial Statements section

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of

internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

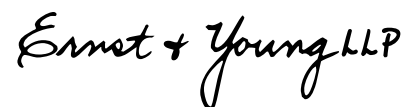
In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.



January 20, 2023

THE 401(k) PLAN for Certain HCSC Subsidiaries

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Notes receivable from participants	—	375,699
Total receivables	—	463,989
Net assets available for benefits	<u>\$ —</u>	<u>\$ 48,247,662</u>

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Statement of Changes in Net Assets Available for Benefits

	Period From January 1, 2022 Through July 31, 2022
Additions	
Investment income (loss):	
Net depreciation in fair value of investments	\$ (7,210,285)
Interest	—
Dividends	54,568
	(7,155,717)
 Interest income on notes receivable from participants	 8,254
 Contributions:	
Employee	2,947,226
Employer	390,236
Rollover	324,274
	3,661,736
 Total additions, net of investment losses	 (3,485,727)
Deductions	
Benefit payments	4,474,838
Administrative expenses	9,686
Total deductions	4,484,524
 Net decrease	 (7,970,251)
 Transfer of assets to THE 401(k) PLAN	 (40,277,411)
 Net assets available for benefits at beginning of period	 48,247,662
Net assets available for benefits at end of period	\$ —

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements

July 31, 2022 and December 31, 2021

1. Plan Description

THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan) was a qualified defined-contribution plan covering substantially all eligible employees of Medecision, Inc. and Innovista LLC (the Companies) who were at least 21 years of age. The Companies are subsidiaries of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC) As of July 31, 2022 the Plan ceased to exist and employees' balances in the amount of \$40,277,411 were merged into THE 401(k) PLAN, which is a plan sponsored by HCSC.

The following description of the Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was administered by a committee (the Plan Administrative Committee) appointed by the Employee Benefits Compliance Committee of the Company. The Plan Administrative Committee consisted of a chairman and at least two additional members. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA) and was exempt from federal income taxes under Section 401(a) of the Internal Revenue Code (IRC).

Prudential Retirement Insurance and Annuity Company (PRIAC) and Prudential Bank & Trust, FSB (Prudential) served as the record-keepers and custodians of the Plan.

Employee Contributions

Eligible active employees of the Companies, as defined by the Plan agreement, were eligible to participate in the Plan beginning at the time of employment. Leased or temporary employees were not eligible to participate in the Plan. Participants were automatically enrolled in the Plan at a deferral rate of 6% of compensation on a tax-deferred basis, subject to applicable IRC maximum amounts, unless the participant chose another percentage or elected not to participate. The maximum deferral percentage under the Plan was 75%. Participants who attained the age of 50 before the end of the Plan year were eligible to make catch-up contributions.

Participants could also contribute amounts representing distributions from other qualified defined-benefit or defined-contribution plans.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Employer Contributions

The employer could make a matching contribution at a discretionary percentage of pretax contributions. From January 1, 2022 to July 31, 2022, the discretionary matching contribution was based on a matching percentage of 30% of the first 4% of compensation deferred.

The employer could also may make a non-elective contribution at the discretion of management. Such additional contribution, if any, was allocated to each participant in proportion to his or her compensation for the Plan year while a participant. To receive the non-elective contribution, the employee must have been an eligible participant on the last day of the Plan year and completed at least 1,000 hours of service during the Plan year. Non-elective contributions were not made from January 1, 2022 to July 31, 2022.

Participant Accounts

Each participant's account was credited with their contribution and the Companies' employer contribution and an allocation of the Plan's earnings and was charged with an allocation of the Plan's losses and administrative expenses as well as direct participant-related account fees. Allocations were based on participant earnings or account balances, as defined.

The benefit to which a participant is entitled was the benefit that could be provided from the participant's vested accounts. Participants directed contributions into the various investment options offered by the Plan.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Vesting

Participants were fully vested and have non-forfeitable interests in their contributions and earnings thereon at all times. Participants became fully vested in the employer contributions and earnings thereon upon retirement, disability, death, reaching the age of 65, or based upon the following vesting schedule:

<u>Years of Service</u>	<u>Vested Portion</u>
Less than 1	—%
1 but less than 2	25%
2 or more	100%

Forfeited Accounts

Forfeited non-vested accounts were used to pay Plan administrative expenses and reduce future employer contributions. In 2022, forfeitures of \$8,161 were applied against certain administrative expenses. There were no forfeitures used to offset the Company's matching contributions in 2022. The balance in the forfeiture account was \$0 and \$82,307 as of July 31, 2022 and December 31, 2021, respectively.

Benefit Payments

In accordance with the Plan's provisions, benefits were distributable upon termination, death, or disability in a single-sum cash payment. Participants could also take in-service withdrawals, according to the Plan provisions, and hardship withdrawals upon financial hardship, as defined by the Plan document.

In 2020 the Plan updated provisions or operations as appropriate or as required by the Setting Every Community Up for Retirement Enhancement Act (SECURE Act), the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) and the Bipartisan Budget Act of 2018. A plan amendment to adopt these changes is not required until 2025.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Participant Loans

A participant was eligible to request a loan after accumulating \$2,000 in his or her account. Loans were not made in excess of 50% of the participant's vested account balance, not to exceed \$50,000, reduced by the highest outstanding loan balance in the preceding 12 months. The minimum loan amount was \$1,000. Loans were secured by the balance in the participant's account, supported by promissory notes payable to the Plan, and bore interest at a periodically published fixed rate tied to the prime rate at the time of the loan. Both principal and interest were repayable through payroll deductions over periods ranging up to 60 months. For loans taken prior to January 1, 2013, terms could exceed 60 months for the purchase of a primary residence. Additionally, each employee could have only one loan outstanding under the current Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Payment of Benefits

Benefits to participants are recorded when paid.

Plan Expenses

During 2022, substantially all administrative expenses, except for fees related to notes receivable from participants, incurred in connection with the administration of the Plan were paid by the Companies.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires the Plan's management to make estimates that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Investment Valuation and Income Recognition

Investments held by the Plan (except for fully benefit-responsive investment contract) are stated at fair value. Fair value is defined under Accounting Standards Codification (ASC) 820 as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., exit price). See Note 4 for further discussion of fair value measurements.

To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy in ASC 820 are described below:

Level 1 – Fair value is based on unadjusted quoted prices for identical assets or liabilities in an active market that the Plan has the ability to access at the measurement date.

Level 2 – Fair value is based on quoted prices in markets that are not active, quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the asset or liability.

Level 3 – Fair value is based on prices or valuation techniques that require inputs that are both significant to the fair value measurement and unobservable. These inputs reflect judgment about the assumptions that a market participant would use in pricing the investment and are based on the best available information.

Shares of registered investment companies are valued based on published market prices, which represent the NAV of shares held at year-end. Pooled separate accounts and common/collective trusts have a readily determinable fair value and are valued at NAV of units held at year-end.

Interest income is recorded as earned on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought, sold, and held during the year.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Notes Receivable From Participants

Notes receivable from participants represent participant loans that are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of July 31, 2022, and December 31, 2021. If a participant ceases to make loan repayments as agreed and the plan administrator deems the participant loan to be a distribution, the participant loan balance is reduced and is recorded as a benefit payment. The Plan held participants loans of \$0 and \$375,699, as of July 31, 2022 and December 31, 2021, respectively.

3. Investments

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements, including investments, at fair value, fully benefit-responsive investment contract, at contract value, and notes receivable from participants held at July 31, 2022, and December 31, 2021, and net depreciation in fair value of investments, interest, dividends and interest income on notes receivable from participants for the year period from January 1, 2022 through July 31, 2022, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by PRIAC and Prudential.

4. Fair Value Measurements

As of July 31, 2022, there were no assets held by the Plan. The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value, as of December 31, 2021:

	Assets at Fair Value as of December 31, 2021			
	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ 7,279,366	\$ —	\$ —	\$ 7,279,366
Pooled separate accounts	—	34,990,364	—	34,990,364
Common collective trusts	—	1,289,759	—	1,289,759
Total assets at fair value	\$ 7,279,366	\$ 36,280,123	\$ —	\$ 43,559,489

There were no assets or liabilities measured at fair value on a nonrecurring basis as of July 31, 2022, and December 31, 2021.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract

The Plan entered into a fully benefit-responsive investment contract with PRIAC, which meets the fully benefit-responsive contract criteria and, therefore, is reported at contract value. Contract value is the relevant measurement attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under terms of the Plan. PRIAC maintains the contributions in a separate account. The separate account, which is segregated from the general account assets of PRIAC, is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Payment obligations and the fulfillment of any guarantees specified in the group insurance claims are supported by the assets in the separate account and if such assets are not sufficient, by the full faith and credit of PRIAC. The Plan merger had no impact on this investment. The Plan held HCSC Stable Value Fund totaling \$0 and \$4,224,184 as of July 31, 2022, and December 31, 2021, respectively.

Contract value, as reported to the Plan by PRIAC, represents contributions made under the contract plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. Participant-directed redemptions have no significant restrictions; however, the Plan is required to provide 30-day termination notice to liquidate its entire contract.

Interest is credited on contract balances using a single “portfolio rate” approach. Under this methodology, a single interest crediting rate is applied to all contributions made, regardless of the timing of those contributions. The crediting interest rate is based on a formula agreed upon with PRIAC, but may not be less than 0%. Such interest rates are reviewed on a semiannual basis for resetting. In determining the interest rate, consideration is given to the anticipated yield on the separate account for the following calendar year, adjusted to reflect the amortization of gains or losses realized from the sale of securities, amortization of gains or losses due to permanent impairments and the difference between the amount of interest credited to date to the HCSC investment contract and the underlying investments results of the separate account. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract (continued)

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include: (i) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (ii) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (iii) bankruptcy of the Plan sponsor or other Plan sponsor events (e.g., divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (iv) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that the occurrence of any such events, which would limit the Plan's ability to transact at contract value with participants, is probable.

6. Income Tax Status

The underlying prototype plan has received an opinion letter from the IRS dated April 29, 2014, stating that the written form of the underlying prototype document is qualified under Section 401 of the IRC. Any employer adopting this form of the plan will be considered to have a plan qualified under Section 401 of the IRC, and, therefore the related trust is tax-exempt. Once qualified, the Plan is required to operate in compliance with the IRC to maintain its qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan management has analyzed the tax positions taken by the Plan, and has concluded that there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

7. Risks and Uncertainties

The Plan invests in various investment securities that are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. The changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

8. Related-Party and Party-in-Interest Transactions

The investment contract and the units of pooled separate accounts held by the Plan are managed by PRIAC and Prudential, the custodians of the Plan; therefore, these transactions qualify as party-in-interest transactions; however, these are exempt transactions under ERISA. Fees were paid by the Plan to the custodians for certain transactions and certain investment management services.

9. Subsequent Events

Management evaluated subsequent events for the Plan through January 20, 2023 the date the financial statements were available to be issued.

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FINANCIAL STATEMENTS

THE 401(k) PLAN for Certain HCSC Subsidiaries
As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022
With Report of Independent Auditors

Ernst & Young LLP



THE 401(k) PLAN for Certain HCSC Subsidiaries

Financial Statements

As of July 31, 2022 and December 31, 2021 and
For the Period from January 1, 2022 to July 31, 2022

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Report of Independent Auditors

HCSC Plan Administrative Committee
Health Care Service Corporation
THE 401(k) PLAN for Certain HCSC Subsidiaries

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of July 31, 2022 and December 31, 2021, and the related statement of changes in net assets available for benefits for the period from January 1, 2022 through July 31, 2022, and the related notes (collectively referred to as the “financial statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of July 31, 2022 and December 31, 2021, and for the period from January 1, 2022 through July 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor’s Responsibilities for the Audit of the Financial Statements section

- the amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

- the information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of

internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

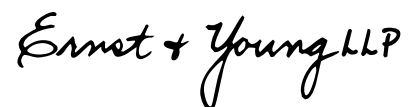
In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.



January 20, 2023

THE 401(k) PLAN for Certain HCSC Subsidiaries

Statements of Net Assets Available for Benefits

	July 31, 2022	December 31, 2021
Assets		
Investments, at fair value	\$ —	\$ 43,559,489
Investments at contract value	—	4,224,184
Receivables:		
Employer contributions	—	11,062
Participant contributions	—	77,228
Notes receivable from participants	—	375,699
Total receivables	—	463,989
Net assets available for benefits	<u>\$ —</u>	<u>\$ 48,247,662</u>

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Statement of Changes in Net Assets Available for Benefits

	Period From January 1, 2022 Through July 31, 2022
Additions	
Investment income (loss):	
Net depreciation in fair value of investments	\$ (7,210,285)
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Dividends	54,568
	(7,155,717)
 Interest income on notes receivable from participants	 8,254
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Employee	2,947,226
Employer	390,236
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	3,661,736
 Total additions, net of investment losses	 (3,485,727)
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Administrative expenses	9,686
Total deductions	4,484,524
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 Net assets available for benefits at beginning of period	 48,247,662
Net assets available for benefits at end of period	\$ —

See accompanying notes.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements

July 31, 2022 and December 31, 2021

1. Plan Description

THE 401(k) PLAN for Certain HCSC Subsidiaries (the Plan) was a qualified defined-contribution plan covering substantially all eligible employees of Medecision, Inc. and Innovista LLC (the Companies) who were at least 21 years of age. The Companies are subsidiaries of Health Care Service Corporation, a Mutual Legal Reserve Company (HCSC) As of July 31, 2022 the Plan ceased to exist and employees' balances in the amount of \$40,277,411 were merged into THE 401(k) PLAN, which is a plan sponsored by HCSC.

The following description of the Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan was administered by a committee (the Plan Administrative Committee) appointed by the Employee Benefits Compliance Committee of the Company. The Plan Administrative Committee consisted of a chairman and at least two additional members. The Plan was subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA) and was exempt from federal income taxes under Section 401(a) of the Internal Revenue Code (IRC).

Prudential Retirement Insurance and Annuity Company (PRIAC) and Prudential Bank & Trust, FSB (Prudential) served as the record-keepers and custodians of the Plan.

Employee Contributions

Eligible active employees of the Companies, as defined by the Plan agreement, were eligible to participate in the Plan beginning at the time of employment. Leased or temporary employees were not eligible to participate in the Plan. Participants were automatically enrolled in the Plan at a deferral rate of 6% of compensation on a tax-deferred basis, subject to applicable IRC maximum amounts, unless the participant chose another percentage or elected not to participate. The maximum deferral percentage under the Plan was 75%. Participants who attained the age of 50 before the end of the Plan year were eligible to make catch-up contributions.

Participants could also contribute amounts representing distributions from other qualified defined-benefit or defined-contribution plans.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Employer Contributions

The employer could make a matching contribution at a discretionary percentage of pretax contributions. From January 1, 2022 to July 31, 2022, the discretionary matching contribution was based on a matching percentage of 30% of the first 4% of compensation deferred.

The employer could also may make a non-elective contribution at the discretion of management. Such additional contribution, if any, was allocated to each participant in proportion to his or her compensation for the Plan year while a participant. To receive the non-elective contribution, the employee must have been an eligible participant on the last day of the Plan year and completed at least 1,000 hours of service during the Plan year. Non-elective contributions were not made from January 1, 2022 to July 31, 2022.

Participant Accounts

Each participant's account was credited with their contribution and the Companies' employer contribution and an allocation of the Plan's earnings and was charged with an allocation of the Plan's losses and administrative expenses as well as direct participant-related account fees. Allocations were based on participant earnings or account balances, as defined.

The benefit to which a participant is entitled was the benefit that could be provided from the participant's vested accounts. Participants directed contributions into the various investment options offered by the Plan.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Vesting

Participants were fully vested and have non-forfeitable interests in their contributions and earnings thereon at all times. Participants became fully vested in the employer contributions and earnings thereon upon retirement, disability, death, reaching the age of 65, or based upon the following vesting schedule:

<u>Years of Service</u>	<u>Vested Portion</u>
Less than 1	—%
1 but less than 2	25%
2 or more	100%

Forfeited Accounts

Forfeited non-vested accounts were used to pay Plan administrative expenses and reduce future employer contributions. In 2022, forfeitures of \$8,161 were applied against certain administrative expenses. There were no forfeitures used to offset the Company's matching contributions in 2022. The balance in the forfeiture account was \$0 and \$82,307 as of July 31, 2022 and December 31, 2021, respectively.

Benefit Payments

In accordance with the Plan's provisions, benefits were distributable upon termination, death, or disability in a single-sum cash payment. Participants could also take in-service withdrawals, according to the Plan provisions, and hardship withdrawals upon financial hardship, as defined by the Plan document.

In 2020 the Plan updated provisions or operations as appropriate or as required by the Setting Every Community Up for Retirement Enhancement Act (SECURE Act), the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) and the Bipartisan Budget Act of 2018. A plan amendment to adopt these changes is not required until 2025.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

1. Plan Description (continued)

Participant Loans

A participant was eligible to request a loan after accumulating \$2,000 in his or her account. Loans were not made in excess of 50% of the participant's vested account balance, not to exceed \$50,000, reduced by the highest outstanding loan balance in the preceding 12 months. The minimum loan amount was \$1,000. Loans were secured by the balance in the participant's account, supported by promissory notes payable to the Plan, and bore interest at a periodically published fixed rate tied to the prime rate at the time of the loan. Both principal and interest were repayable through payroll deductions over periods ranging up to 60 months. For loans taken prior to January 1, 2013, terms could exceed 60 months for the purchase of a primary residence. Additionally, each employee could have only one loan outstanding under the current Plan.

2. Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting.

Payment of Benefits

Benefits to participants are recorded when paid.

Plan Expenses

During 2022, substantially all administrative expenses, except for fees related to notes receivable from participants, incurred in connection with the administration of the Plan were paid by the Companies.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America (U.S. GAAP) requires the Plan's management to make estimates that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Investment Valuation and Income Recognition

Investments held by the Plan (except for fully benefit-responsive investment contract) are stated at fair value. Fair value is defined under Accounting Standards Codification (ASC) 820 as the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date (i.e., exit price). See Note 4 for further discussion of fair value measurements.

To measure fair value, a hierarchy has been established that requires an entity to maximize the use of observable inputs and minimize the use of unobservable inputs. As such, the hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy in ASC 820 are described below:

Level 1 – Fair value is based on unadjusted quoted prices for identical assets or liabilities in an active market that the Plan has the ability to access at the measurement date.

Level 2 – Fair value is based on quoted prices in markets that are not active, quoted prices for similar assets and liabilities in active markets, and inputs that are observable for the asset or liability, either directly or indirectly, for substantially the full term of the asset or liability.

Level 3 – Fair value is based on prices or valuation techniques that require inputs that are both significant to the fair value measurement and unobservable. These inputs reflect judgment about the assumptions that a market participant would use in pricing the investment and are based on the best available information.

Shares of registered investment companies are valued based on published market prices, which represent the NAV of shares held at year-end. Pooled separate accounts and common/collective trusts have a readily determinable fair value and are valued at NAV of units held at year-end.

Interest income is recorded as earned on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought, sold, and held during the year.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Notes Receivable From Participants

Notes receivable from participants represent participant loans that are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of July 31, 2022, and December 31, 2021. If a participant ceases to make loan repayments as agreed and the plan administrator deems the participant loan to be a distribution, the participant loan balance is reduced and is recorded as a benefit payment. The Plan held participants loans of \$0 and \$375,699, as of July 31, 2022 and December 31, 2021, respectively.

3. Investments

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements, including investments, at fair value, fully benefit-responsive investment contract, at contract value, and notes receivable from participants held at July 31, 2022, and December 31, 2021, and net depreciation in fair value of investments, interest, dividends and interest income on notes receivable from participants for the year period from January 1, 2022 through July 31, 2022, was obtained or derived from information supplied to the plan administrator and certified as complete and accurate by PRIAC and Prudential.

4. Fair Value Measurements

As of July 31, 2022, there were no assets held by the Plan. The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value, as of December 31, 2021:

	Assets at Fair Value as of December 31, 2021			
	Level 1	Level 2	Level 3	Total
Registered investment companies	\$ 7,279,366	\$ —	\$ —	\$ 7,279,366
Pooled separate accounts	—	34,990,364	—	34,990,364
Common collective trusts	—	1,289,759	—	1,289,759
Total assets at fair value	\$ 7,279,366	\$ 36,280,123	\$ —	\$ 43,559,489

There were no assets or liabilities measured at fair value on a nonrecurring basis as of July 31, 2022, and December 31, 2021.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract

The Plan entered into a fully benefit-responsive investment contract with PRIAC, which meets the fully benefit-responsive contract criteria and, therefore, is reported at contract value. Contract value is the relevant measurement attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under terms of the Plan. PRIAC maintains the contributions in a separate account. The separate account, which is segregated from the general account assets of PRIAC, is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Payment obligations and the fulfillment of any guarantees specified in the group insurance claims are supported by the assets in the separate account and if such assets are not sufficient, by the full faith and credit of PRIAC. The Plan merger had no impact on this investment. The Plan held HCSC Stable Value Fund totaling \$0 and \$4,224,184 as of July 31, 2022, and December 31, 2021, respectively.

Contract value, as reported to the Plan by PRIAC, represents contributions made under the contract plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. Participant-directed redemptions have no significant restrictions; however, the Plan is required to provide 30-day termination notice to liquidate its entire contract.

Interest is credited on contract balances using a single “portfolio rate” approach. Under this methodology, a single interest crediting rate is applied to all contributions made, regardless of the timing of those contributions. The crediting interest rate is based on a formula agreed upon with PRIAC, but may not be less than 0%. Such interest rates are reviewed on a semiannual basis for resetting. In determining the interest rate, consideration is given to the anticipated yield on the separate account for the following calendar year, adjusted to reflect the amortization of gains or losses realized from the sale of securities, amortization of gains or losses due to permanent impairments and the difference between the amount of interest credited to date to the HCSC investment contract and the underlying investments results of the separate account. There are no reserves against contract value for credit risk of the contract issuer or otherwise.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

5. Fully Benefit-Responsive Investment Contract (continued)

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include: (i) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (ii) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (iii) bankruptcy of the Plan sponsor or other Plan sponsor events (e.g., divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (iv) the failure of the trust to qualify for exemption from Federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that the occurrence of any such events, which would limit the Plan's ability to transact at contract value with participants, is probable.

6. Income Tax Status

The underlying prototype plan has received an opinion letter from the IRS dated April 29, 2014, stating that the written form of the underlying prototype document is qualified under Section 401 of the IRC. Any employer adopting this form of the plan will be considered to have a plan qualified under Section 401 of the IRC, and, therefore the related trust is tax-exempt. Once qualified, the Plan is required to operate in compliance with the IRC to maintain its qualified status. The plan administrator believes the Plan is being operated in compliance with the applicable requirements of the IRC and, therefore, believes the Plan is qualified and the related trust is tax-exempt.

Accounting principles generally accepted in the United States require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. Plan management has analyzed the tax positions taken by the Plan, and has concluded that there are no uncertain positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

7. Risks and Uncertainties

The Plan invests in various investment securities that are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term. The changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

THE 401(k) PLAN for Certain HCSC Subsidiaries

Notes to Financial Statements (continued)

8. Related-Party and Party-in-Interest Transactions

The investment contract and the units of pooled separate accounts held by the Plan are managed by PRIAC and Prudential, the custodians of the Plan; therefore, these transactions qualify as party-in-interest transactions; however, these are exempt transactions under ERISA. Fees were paid by the Plan to the custodians for certain transactions and certain investment management services.

9. Subsequent Events

Management evaluated subsequent events for the Plan through January 20, 2023 the date the financial statements were available to be issued.

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