Clerk of the Superior Court
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Filing ID 14355411 FAEGRE DRINKER BIDDLE & REATH LLP 1 1144 15th Street, Suite 3400 Denver, Colorado 80202 2 Joel A. Glover (State Bar No. 034018) 3 Direct Dial: 303.607.3648 Direct Fax: 303.607.3600 4 Email: Joel.Glover@Faegredrinker.com 5 Attorneys for Receiver 6 7 SUPERIOR COURT OF ARIZONA 8 COUNTY OF MARICOPA 9 10 No. CV2016-011872 STATE OF ARIZONA, ex rel. EVAN G. DANIELS, Director 11 PETITION NO. 52 of Insurance. 12 Plaintiff, RECEIVER'S PETITION TO ACCEPT LIQUIDATION BALANCE 13 SHEET AS OF DECEMBER 31, 2021 COMPASS COOPERATIVE MUTUAL 14 HEALTH NETWORK, INC., dba MERITUS (Assigned to The Honorable Daniel Martin) MUTUAL HEALTH PARTNERS, an 15 Arizona corporation; and COMPASS COOPERATIVE HEALTH 16 PLAN, INC., dba MERITUS HEALTH PARTNERS, an Arizona corporation, 17 Defendants. 18 19 Darren Ellingson, in his capacity as the Special Deputy Receiver of Compass 20 Cooperative Mutual Health Network, Inc. doing business as Meritus Mutual Health 21 Partners ("Meritus Mutual") and Compass Cooperative Health Plan, Inc. dba Meritus 22 Health Partners ("MHP") (collectively referred to as the "Meritus Companies"), appointed 23 pursuant to A.R.S. § 20-611, et seq., hereby petitions the Court for entry of the Order re 24 Petition No. 52 Accepting Liquidation Balance Sheet as of December 31, 2021. 25 1. In an Order dated August 10, 2016, this Court placed Meritus Mutual and 26 MHP into receivership under orders of liquidation. 27 2. Consistent with and subject to the Arizona Insurer Receivership Act, A.R.S. 28 § 20-611 et seq. and Orders entered by this Court, the Receiver for MHP and Meritus

Mutual continues to marshal and liquidate assets and to administer and adjudicate liabilities and claims. While the marshalling, liquidating, administration, adjudication and related analysis is continuing, at this time the Receiver is submitting this Liquidation Balance Sheet as of December 31, 2021.

- 3. The information in this petition is based on the attached Declaration of Special Deputy Receiver Regarding Liquidation Balance Sheet as of December 31, 2021, including: Declaration Exhibit 1 comprised of the Liquidation Balance Sheet as of December 31, 2021 and the accompanying Notes; and Declaration Exhibit 2 comprised of the Unaudited Statements of Net Assets as of December 31, 2021, the Unaudited Statements of Change in Net Assets in Liquidation as of December 31, 2021 and the accompanying Notes (collectively, the "Declaration"). The Declaration is incorporated herein by reference.
- 4. The Liquidation Balance Sheet is prepared in reliance on, among other things, this Court's March 8, 2019 Order Re Petition No. 26 Granting Claim Determination and Setoff Related to Claims of the United States (the "Setoff Order"). Paragraphs 10, 12 and 13 of the Setoff Order include the following findings:

CMS's claims for payment from Meritus Mutual under the converted start-up note and the solvency note, referred to as the CMS Surplus Notes, are Class 10 priority level claims under A.R.S. § 20-629 and are not subject to setoff.

In accordance with A.R.S. § 20-638, the setoff of all claims as between MHP and CMS under the ACA Risk-Sharing Programs, including, but not limited to CSR, Reinsurance, Risk Adjustment, and Risk Corridor, is approved so that the net effect is that the remaining amount that CMS owes MHP under the ACA Risk-Sharing Programs (with all related mutual debts and credits setoff and otherwise deemed satisfied) is as follows:

Net Risk Corridor Claims due and owing from CMS to MHP: \$4,863,178 Net Reinsurance Claims due and owing from CMS to MHP: \$7,171,320

In accordance with A.R.S. § 20-638, the setoff of all claims as between Meritus Mutual and CMS under the ACA Risk-Sharing Programs, including, but not limited to CSR, Reinsurance, Risk Adjustment, and Risk Corridor, is approved so that the net effect is that the remaining amount that CMS owes Meritus Mutual under the ACA Risk-Sharing Programs (with all related mutual debts and credits setoff and otherwise deemed satisfied) is as follows:

Net Risk Corridor Claims due and owing from CMS to Meritus Mutual: \$12,182,141

Net Reinsurance Claims due and owing from CMS to Meritus Mutual: \$3,283,275

- 5. During the reporting period for this Liquidation Balance Sheet, through December 31, 2021, the Receiver was continuing to seek recovery for amounts due under the Risk Corridor Program and under the Reinsurance Program via actions pending in the Court of Federal Claims. After the reporting period, the Receiver entered into a settlement with the United States which has been approved by this Court and the Court of Federal Claims. Subject to implementation after the court approvals, the accounting and revisions associated with this settlement will be reflected in future Liquidation Balance Sheets and Unaudited Statements of Net Assets applicable to the appropriate reporting period.
- 6. <u>Estate Assets Liquidation Basis</u>. Cash and cash-equivalents for MHP total \$3,074,039 and for Meritus Mutual total \$321,634.
- a. The other non-cash assets primarily are comprised of receivables, claims, causes of action and setoffs. Those assets are not readily liquidated or otherwise reduced to cash and their liquidation remains subject to a number of factors beyond the Receiver's control. While the Receiver reserves all rights to marshal and liquidate all assets of the estates, the Receiver included a figure as a "reserve" in order to allow the amounts to net out to zero for purposes of reporting the asset on a liquidation basis.

- b. For example, negative balances and receivables related to providers total \$444,071 for MHP and \$298,646 for Meritus Mutual. The Receiver reserves the right to seek collection of such amounts by offset or otherwise depending on the circumstances.
- c. Additionally, claims against the United States government are addressed in the Setoff Order. As determined by the Setoff Order, the net claims due to MHP from CMS total \$12,034,498, comprised of Risk Corridor claims totaling \$4,863,178 and Reinsurance claims totaling \$7,171,320. Likewise, the net claims due to Meritus Mutual from CMS total \$15,465,416, comprised of Risk Corridor claims totaling \$12,182,141 and Reinsurance claims totaling \$3,283,275.
- 7. <u>Liabilities Statutory Priority System.</u> Liabilities to be adjudicated for the receivership estates are organized according to the statutory priority system (A.R.S. § 20-629) based on claims made with the Receiver in accordance with the Liquidation Plan previously approved by the Court. Claims in each class must be paid in full before estate assets may be used to pay creditors at the next level. A.R.S. § 20-629(A). Among other things, proofs of claim remain subject to an adjudication process which includes the opportunity for notice, objection and Court determination. The figures are subject to change and the Receiver may adopt a different recommendation from that provided herein depending on the circumstances. However, initial figures at this time include the following.
- a. Class 1 Administrative expenses are incurred on an on-going basis subject to and in accordance with the Arizona Insurer Receivership Act and Orders entered by this Court. Payments to legal counsel, the Special Deputy Receiver and Regulatory Services Group continue to be reported on a quarterly basis in the Status Reports. Details associated with the administrative expenses are set forth in Declaration Exhibit 2 attached to the Declaration of Special Deputy Receiver. As of December 31, 2021, the combined amount of administrative expenses for 2021 total \$188,141. The administrative expenses

¹ This Petition and the related Notes rely on the specific figures provided for in the Setoff Order re Petition 26. The figures in the Liquidation Balance Sheet vary slightly (between \$1 and \$2) due to calculations and automatic rounding in the spreadsheet used to generate the balance sheet.

will continue in accordance with Arizona law depending on the circumstances and subject to the Arizona Insurer Receivership Act and Orders entered by this Court.

- b. Class 2 Guaranty Association claims for Meritus Mutual currently total \$3,340,743, which number may be revised as the Guaranty Association continues to incur expenses, pay claims and provide coverage in accordance with its enabling act, A.R.S. \$20-681 et seq. Because the Guaranty Association was not legally authorized to provide coverage for MHP as a health care services organization, there are no Guaranty Association claims applicable to MHP.
- c. Class 3 Policyholder, member and provider claims for MHP that are out of network currently, also referred to as "non-contracted" provider claims, total \$5,691,491. For Meritus Mutual, the Class 3 claims that are not covered by the Guaranty Association currently total \$1,243.
- d. Class 4 Claims of the United States Government that would constitute Class 4 claims as submitted under the proof of claim process by the United States total \$50,650,121 as against MHP and \$755,916 as against Meritus Mutual. Those claims are subject to the Setoff Order and, as noted above and addressed in the Setoff Order, the net amount of Class 4 claims is zero.
 - e. Class 5 There are no claims for compensation to employees.
- f. Class 6 The amount of state taxes and fees that would be Class 6 claims total \$730,505 for MHP and total \$11,848 for Meritus Mutual.
- g. Class 7 The amount of claims against MHP for providers required by law or agreement to hold enrollees harmless from liability for services (referred to as innetwork or contract providers) currently totals \$4,221,511. Because Meritus Mutual is not a health care services organization, there are no Class 7 claims applicable to Meritus Mutual.
- h. Class 8 The amount of claims for other general creditors totals \$52,223,506 for MHP and totals \$14,808 for Meritus Mutual. Among other things, this figure includes intercompany payables as between MHP and Meritus Mutual totaling in

1	
2	SUPERIOR COURT OF ARIZONA
3	COUNTY OF MARICOPA
4	
5	No. CV2016-011872 (Assigned to The Honorable Daniel Martin)
6	MASTER SERVICE LIST
7	Director Evan G. Daniels, Receiver
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9	100 North 15th Avenue, #102 Phoenix, Arizona 85007
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15	Public Law Section
16	Office of the Attorney General 2005 N. Central Avenue
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21	400 East Van Buren Phoenix, Arizona 85004
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25	Scottsdale, Arizona 85250
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9	Lori Nestor, Executive Director Arizona Life & Disability
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17	Patient Financial Services
18	Attn: Anna Rosalez, Manager 525 West Brown Road, Third Floor
19	Mesa, Arizona 85201
20	S. David Childers
21	Kutak Rock LLP 8601 North Scottsdale Road, Suite 300
22	Scottsdale, Arizona 85253
23	Debbie Bailey Cactus Children's Clinic, PC
24	5940 West Union Hills Drive Suite D100
25	Glendale, Arizona 85308
26	
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10	U.S. Department of Justice
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5	Email: <u>Joel.Glover@Faegredrinker.com</u>								
6	Attorneys for Receiver								
7	CLINEDIOD OF	OURT OF ARIZONA							
8									
9	COUNTY	OF MARICOPA							
10	STATE OF ARIZONA, ex rel.	No. CV2016-011872							
11	EVAN G. DANIELS, Director of Insurance,	PETITION NO. 52							
12	Plaintiff,	DECLARATION OF SPECIAL DEPUTY RECEIVER REGARDING							
13	VS.	LIQUIDATION BALANCE SHEET							
14	COMPASS COOPERATIVE MUTUAL HEALTH NETWORK, INC., dba MERITUS MUTUAL HEALTH PARTNERS, an	AS OF DECEMBER 31, 2021 WITH DECLARATION EXHIBITS 1 AND 2							
15	Arizona corporation; and COMPASS COOPERATIVE HEALTH	(Assigned to The Honorable Daniel Martin)							
16	PLAN, INC., dba MERITUS HEALTH PARTNERS, an Arizona corporation,	Daniel Wattin)							
17	Defendants.								
18									
19	By signing below, I, Darren Ellingso	on, state to the Court under penalty of law, that							
20	the information stated on these pages is true	e and correct to the best of my knowledge and							
21	belief.								
22	1. I am over eighteen years of a	ge, and I have personal knowledge of the facts							
23	herein. I acquired my personal knowledge	in my capacity as Special Deputy Receiver of							
24	Meritus Mutual Health Partners, in liquidat	ion ("Meritus Mutual") and of Meritus Health							
25	Partners, in liquidation ("MHP"). I have se	erved as Special Deputy Receiver since the							
26	commencement of the Meritus Mutual and	MHP receiverships and, in that capacity, I am							
27	familiar with and have personal knowledge	of the books and records of Meritus Mutual							
28	and MHP. In acquiring my personal know	ledge, I relied upon work performed by one or							

more persons that worked under my direction with respect to the Meritus Mutual and MHP receiverships.

2. Attached as Declaration Exhibit 1 is the Liquidation Balance Sheet as of December 31, 2021 and the accompanying Notes for Meritus Mutual and MHP. Attached as Declaration Exhibit 2 is the Unaudited Statements of Net Assets as of December 31, 2021, the Unaudited Statements of Change in Net Assets in Liquidation as of December 31, 2021 and the accompanying Notes for Meritus Mutual and MHP. Declaration Exhibits 1 and 2 are incorporated herein by reference. Based on my knowledge and belief and the determinations I have made in my capacity as Special Deputy Receiver, the Exhibits report on and present the financial information for Meritus Mutual and MHP as of December 31, 2021 based on the books and records of Meritus Mutual and MHP calculated on a liquidation basis and subject to the accompanying Notes.

By signing below, I state to the Court, under penalty of law, that the information stated on these pages is true and correct to the best of my knowledge and belief.

Darren Ellingson, Special Deputy Receiver

Date: 5/24/2027

Liquidation Balance Sheet - As of December 31, 2021 Meritus Health Partners (HCSO) and Meritus Mutual Health Partners (PPO) In Receivership – No. CV2016-011872

	Meritus Mutual Health Partners (PPO)			ſ	Meritus Health Partners (HCSO)								
	12/31/2021 Offset		Offset	Net/Actual		Γ	1	2/31/2021		Offset	ı	Net/Actual	
Current Assets - Cash	\$	321,634			\$	321,634		\$	3,074,039			\$	3,074,039
NET DUE FROM CMS POST OFFSET													
Accrued Risk Corridor	\$	12,938,057	\$	(755,916)		12,182,141		\$	55,513,299	\$	(50,650,121)		4,863,178
Accrued Reinsurance	\$	3,283,275			\$	3,283,275		\$	7,171,320			\$	7,171,320
Reserved	\$	(15,465,416)			\$	(15,465,416)		\$	(12,034,498)			\$	(12,034,498)
Total Due from CMS Post Offset	\$	755,916	\$	(755,916)	\$	-	L	\$	50,650,121	\$	(50,650,121)	\$	-
Solvency Loan													
HMO-Solvency Loan	\$	51,652,071			\$	51,652,071		ċ				ċ	_
Reserve		, ,			•	, ,		\$ \$	-			\$ \$	-
	\$	(51,652,071)		•	\$	(51,652,071)	F	\$ \$	-		•	\$	-
Net receivable	>	-			>	-		\$	-			\$	-
Other Assets													
Provider Receivables	\$	298,646						\$	444,071			\$	444,071
Reserve Provider	\$	(298,646)						\$	(444,071)			\$	(444,071)
Intercompany Receivables	\$	-						\$	10,338			\$	10,338
Total Assets	\$	1,077,550			\$	321,634		\$	53,734,498			\$	3,084,377
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LIABILITIES													
Member Premium Refunds	\$	-			\$	-		\$	-			\$	-
Class 1	\$	10,338			\$	10,338		\$	-			\$	-
Class 2	\$	3,340,743			\$	3,340,743		\$	-			\$	-
Class 3	\$	1,243			\$	1,243		\$	5,691,491			\$	5,691,491
Class 4 As Offset													
CSR claims on paid claims	\$	115,649	\$	(115,649)	\$	-		\$	3,899,178	\$	(3,899,178)	\$	-
Reinsurance Fees	\$	46,092	\$	(46,092)	\$	-		\$	510,975	\$	(510,975)	\$	=
Risk Adjustment	\$	594,167	\$	(594,167)		-		\$	46,195,827	\$	(46,195,827)		-
PPACA User Fee	\$. 8	\$	(8)		_		\$	44,141	\$	(44,141)		-
Total Class 4	\$	755,916	\$	(755,916)		-		\$		\$	(50,650,121)		-
Class 6	\$	11,848			\$	11,848		\$	730,505			\$	730,505
Class 7	\$	-			\$	-		\$	4,221,511			\$	4,221,511
Class 8	\$	14,808			\$	14,808		\$	52,223,506			\$	52,223,506
Class 10	\$	93,826,261			\$	93,826,261		\$	-			\$	-
Total Liabilities	\$	97,961,157			\$	97,205,241	ŀ	\$	113,517,134			\$	62,867,013
Capital(Assets minus Liabilties)	\$	(96,883,607)			\$	(96,883,607)		\$	(59,782,636)			\$	(59,782,636)

Petition 52 Declaration Exhibit 1, page 1

- 1. Receivership Generally. The Liquidation Balance Sheet (including the Statement of Net Assets and the Statement of Net Liabilities) is presented with respect to Meritus Health Partners, in Receivership ("MHP) and Meritus Mutual Health Partners, in Receivership ("Meritus Mutual") subject to and in accordance with the Arizona Insurance Receivership Act, A.R.S. § 20-601, et seq., (the "Receivership Act") the Order for Appointment of Receiver and Injunction entered on August 10, 2016 with respect to MHP and Meritus Mutual (the "Receivership Order") in CV2016-011872 pending in the Superior Court of Arizona, County of Maricopa (the "Receivership Court") and subsequent orders entered by the Receivership Court. The statements rely upon pre-receivership company books and records as updated based on a statutory liquidation basis of accounting in accordance with the Receivership Act that differs from generally accepted accounting principles and that differs from statutory accounting principles that would otherwise be applicable to ongoing licensed insurance entities that are not in liquidation. Estimates and assumptions are utilized to report values and amounts. The Receiver makes no representations or warranties regarding the accuracy of the information or the opinions, estimates, assumptions or evaluations contained and/or reflected in this Liquidation Balance Sheet.
- 2. Application to MHP and Meritus Mutual. The Receivership Order established one proceeding for MHP and Meritus Mutual for administrative efficiencies while recognizing that MHP and Meritus Mutual would each be liquidated separately subject to and in accordance with the Receivership Act. (Receivership Order, Par. 5, page 4; Par. 8, page 5.) Consistent with that Order, this Liquidation Balance Sheet reports on MHP and Meritus Mutual separately. Unless otherwise provided herein, these Notes are applicable to MHP and to Meritus Mutual.
- 3. Receivership Act. References to the Receivership Act are to the version of the Receivership Act in force at the time of the commencement of the Receivership proceedings. Subsequent amendments and/or modifications of the Receivership Act are not applicable unless retroactivity is expressly declared therein. A.R.S. § 1-244.
- 4. <u>Special Deposits</u>. Special deposits have been released subject to and in accordance with prior orders of the Receivership Court. (See Order re Petition No. 6 for Release of Special Deposits.)
- 5. Receivables CMS. All amounts for Receivables related to the United States and the Center for Medicare and Medicaid Services ("CMS") are determined based on Order re Petition No. 26 Granting Claim Determination and Setoff Related to Claims of the United States (the "Setoff Order"). During the applicable reporting period, the Receiver was continuing to seek recovery for net amounts due under the Risk Corridor Program and under the Reinsurance Program, after implementation of the Offset, via actions pending in the Court of Federal Claims, including the Risk Corridor Action (pending as a class action in the United States Court of Federal Claims, No. 1:16-cv-00259-MMS) and the Reinsurance Action (pending in the United States Court of Federal Claims, No. 19-1499C-MEW). The column headed "Net/Actual" reflects the implementation of the

Notes Accompanying Liquidation Balance Sheet as of December 31, 2021 Meritus Health Partners (HCSO) and Meritus Mutual Health Partners (PPO) In Receivership – No. CV2016-011872

Offset on the Liquidation Balance Sheet. Because these claims are subject to litigation and the related recovery risks in any litigation, the total amount of the claims are "Reserved" pending final resolution of the litigation. After the reporting period, the Receiver entered into a settlement with the United States which has been approved by this Court and the Court of Federal Claims. Subject to implementation after the court approvals, the accounting and revisions associated with this settlement will be reflected in future Liquidation Balance Sheets and Unaudited Statements of Net Assets applicable to the appropriate reporting period.

- 6. <u>Receivables Providers</u>. All amounts for Receivables related to providers are, as yet, undetermined. The Receiver reserves all rights related to the Receivables, including but not limited to seeking to apply such amounts as offsets, commencing actions to recover such amounts and/or abandoning the claims in the Receiver's discretion.
- 7. <u>Class 1 Claims Administrative Expenses</u>. Administrative expenses of the Receiver continue to be incurred subject to and in accordance with the Receivership Act and orders of the Receivership Court. Payments to consultants are subject to the reporting process as previously ordered by this Court, with compensation rates subject to Court approval.
- 8. Statutory Proof of Claim Process. All amounts reported as "Net Liabilities" are based solely on the amount claimed on proofs of claims (POCs) filed with the Receiver subject to the Receivership Act and Orders of the Receivership Court, including but not limited to the Setoff Order. Except as provided in the Setoff Order, the estate liability, if any, the amounts owed, and the priorities of the claims have not been determined. The Receiver is continuing the process of adjudicating POCs. The Receiver reserves all rights to adjust these amounts and priority levels based on the adjudication of claims process under the Receivership Act and Orders of the Receivership Court. No claims accrue interest since all rights are fixed as of the Liquidation Order Date.
- 9. <u>Class 10 Claims Surplus Notes</u>. The amount and priority level for the surplus note claims are based on the figures included in the Setoff Order. Per the Setoff Order, the Surplus Notes are Class 10 priority level claims under A.R.S. § 20-629 and are not subject to setoff.
- 10. Receivership Liquidation Fund. Pursuant to A.R.S. § 20-648, the Receiver previously made payments to the Receivership Liquidation Fund in accordance with the Receivership Court's Order Regarding Petition No. 4, Regarding Receivership Liquidation Fund Per A.R.S. § 20-648. To the extent additional payments to the Receivership Liquidation Fund are anticipated, the Receiver reserves all rights to update and/or modify the Liquidation Balance Sheet as necessary or appropriate under the circumstances.

Petition 52 Declaration Exhibit 1, page 3

Meritus Mutual Health Partners and Meritus Health Partners in Liquidation Unaudited Statements of Net Assets

As of December 31, 2021

7.5 51 5000111501 51, 2021	PPO	нмо	CONSOLIDATED
CURRENT ASSETS			
Comerica accounts	208,424	127,737	336,161
Funds held on Deposit with Receiver	113,210	113,210	226,421
Comerica Brokerage Account		2,833,092	2,833,092
Total Current Assets	321,634	3,074,039	3,395,674
NET DUE FROM CMS POST OFFSET			
Accrued Risk Corridor	12,938,057	55,513,299	68,451,356
(ACA Offset)	(755,916)	(50,650,121)	(51,406,037)
Net Risk Corridor Due from CMS	12,182,141	4,863,178	17,045,319
Accrued Reinsurance	3,283,275	7,171,320	10,454,594
(ACA Offset)	· · · · · -	· · · · · -	· · · · · · -
Net Reinsurance Due from CMS	3,283,275	7,171,320	10,454,594
Total Due from CMS Post Offset	15,465,416	12,034,498	27,499,913
(Reserved – Litigation Risk)	(15,465,416)	(12,034,498)	(27,499,913)
INTERCOMPANY-SOLVENCY LOAN			
Intercompany-Solvency Loan	51,652,071	-	51,652,071
Reserve for Intercompany-Solvency Loan	(51,652,071)	-	(51,652,071)
Net Intercompany-Solvency Loan	-	-	-
OTHER ASSETS			
PPO Negative Balance Claims	297,940	-	297,940
HMO Negative Balance Claims	-	153,025	153,025
Receivables - Banner Health	-	242,229	242,229
Receivables - Dignity Health	706	48,817	49,523
Receivables - CVS Pharmacy Rebate	-	- -	- -
Reserve Provider Receivables	(298,646)	(444,071)	(742,718)
Intercompany Receivables	-	10,338	10,338
Total Other Assets	0	10,338	10,338
TOTAL ASSETS	\$ 321,634	3,084,378	\$ 3,406,012
LIABILITIES			
Member Premium Refunds	-	-	-
CLASS 1 CLAIMS			
Receivership Expenses	-	-	-
Intercompany Payables	10,338	-	10,338
Total Class 1 Claims	10,338	-	10,338
CLASS 2 CLAIMS			
PPO Claims - POC Received	-	-	=
PPO Claims - No POC Response	384,356	-	384,356
PPO Claims - Paid by Guaranty Fund	2,956,387	-	2,956,387
Total Class 2 Claims	3,340,743	-	3,340,743
CLASS 3 CLAIMS			
Member Medical Reimbursements	90	17,176	17,266
HMO Claims not contracted- POC Received	-	5,067,436	5,067,436

Meritus Mutual Health Partners and Meritus Health Partners in Liquidation Unaudited Statements of Net Assets

As of December 31, 2021

·	PPO	нмо	CONSOLIDATED
HMO Claims not contracted - No POC Response	-	606,878	606,878
PPO - Delta Dental	1,153	, -	1,153
Total Class 3 Claims	1,243	5,691,491	5,692,733
CLASS 4 CLAIMS AS OFFSET			
CSR claims on paid claims	115,649	3,899,178	4,014,827
Reinsurance Fees	46,092	510,975	557,067
Risk Adjustment	594,167	46,195,827	46,789,994
PPACA User Fee	8	44,141	44,149
Total Class 4 Claims Offset	755,916	50,650,121	51,406,037
CLASS 6 CLAIMS			
AZ State Premium Tax-2015	-	628,565	628,565
AZ State Assessment Fees	1,775	1,475	3,250
AZ State PICORRO Tax	10,073	100,464	110,538
Total Class 6 Claims	11,848	730,505	742,353
CLASS 7 CLAIMS			
HMO Claims contracted - POC Received	-	4,046,817	4,046,817
HMO Claims contracted - No POC Response	-	39,665	39,665
HMO - Delta Dental - No POC Response	-	69,698	69,698
HMO - CVS/Caremark - POC Received	-	65,331	65,331
Total Class 7 Claims	-	4,221,511	4,221,511
CLASS 8 CLAIMS			
Vendors - POC Received	14,808	306,733	321,541
Vendors - No POC Response	-	264,702	264,702
Payable to MMHP-Solvency Loan	-	51,652,071	51,652,071
Total Class 8 Claims	14,808	52,223,506	52,238,313
CLASS 9 CLAIMS			
Proof of Claims, Untimely	-	-	-
CLASS 10 CLAIMS			
Series B Solvency Loan Principal	93,826,261	-	93,826,261
TOTAL LIABILITIES	97,961,157	113,517,133	211,478,290
CAPITAL Net capital December 31, 2019	(97,583,187)	(110,380,980)	(207,964,167)
Adjustment to opening net assets	(37,303,107)	77,377	77,377
YTD Net Income (Loss)	(56,335)	(129,153)	(185,488)
TOTAL CAPITAL ACCOUNTS	(97,639,522)	(110,432,755)	(208,072,278)
TOTAL LIABILITIES + CAPITAL	\$ 321,634	\$ 3,084,378	\$ 3,406,012
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Meritus Mutual Health Partners and Meritus Health Partners in Liquidation Unaudited Statements of Change in Net Assets and Liabilities in Liquidation As of December 31, 2021

7.0 0. 2 000	PPO	нмо	CONSOLIDATED
REVENUE			
Premium Refunds	-	-	-
Change in risk corridor	-	-	=
Risk adjustment transfers	-	-	-
Bad Debt Expense for Risk Cooridor	-	-	-
Bad Debt Expense for Solvency Loan	<u>-</u>	-	-
Total Revenue		-	
MEDICAL EXPENSES			
Medical	=	-	=
Pharmacy	-	-	-
Less Pharmacy Rebates	-	-	-
Network Access Fees	-	-	-
Total Medical	-	-	-
PAYROLL EXPENSE			
Salary Expense	_	_	_
Payroll Tax Expense			
Payroll Benefits	_	_	_
Contract Labor	4,310	38,790	43,100
Total Payroll Expense	4,310	38,790	43,100
Total Layron Expense	4,310	30,730	43,100
GENERAL & ADMINISTRATIVE EXPENSES			
Bank charges	478	455	934
Employee Travel Expense	-	-	-
Insurance	1,577	13,839	15,416
IT Software/Hardware Expense	969	8,718	9,686
Mileage	-	-	-
Miscellaneous Expenses	-	-	-
Outsourcing Services	-	-	-
Postage and Delivery	3	26	28
Professional Services	3,230	3,230	6,460
Receivership Legal	24,531	24,531	49,063
Receivership Management	21,490	21,290	42,780
Rent	1,892	17,032	18,925
Supplies	28	269	296
Taxes & Fees	106	50	156
Telephone	130	1,167	1,297
TPA Services	<u> </u>	<u> </u>	
Total General & Administrative Expenses	54,434	90,607	145,041
NET OPERATING GAIN(LOSS)	(58,744)	(129,397)	(188,141)
NON-OPERATING INCOME (EXPENSES)			
	2.400		2,400
Arizona Guaranty Fund Interest Income	2,400	-	2,400
Dividend Income	-	- 24E	252
	9	245	253
Gains (losses) on sale of Fixed Assets	-	-	-
Gains (losses) on Investmetns Total Non-Operating Income (Expenses)	2,409	245	2,653
Total Non-Operating Income (Expenses)	2,403	243	2,035
NET PROFIT (LOSS)	(56,335)	(129,153)	(185,488)

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Organization

Compass Cooperative Mutual Health Network, Inc. doing business as Meritus Mutual Health Partners ("Meritus Mutual" or "PPO") is an Arizona nonprofit corporation that was issued an Arizona certificate of authority to transact disability insurance business on May 28, 2013. Compass Cooperative Health Plan, Inc. doing business as Meritus Health Partners ("MHP" or "HMO") is an Arizona nonprofit corporation which was issued an Arizona certificate of authority to transact business as a health care services organization effective May 28, 2013. Meritus Mutual was approved to operate as a consumer operated and oriented health plan ("Co-Op") in the State of Arizona by the Center for Medicare & Medicaid Services ("CMS"). Meritus Mutual received start-up and solvency loans from CMS under the Affordable Care Act ("ACA") in the aggregate of approximately \$93.8 million. Meritus Mutual and MHP were under common control, had the same officers and directors, shared the same home office, and shared services for adjudication and payment of claims.

Meritus Mutual and MHP were placed under an Order of Supervision on October 30, 2015 and were placed into Receivership with an Order of Liquidation on August 10, 2016 by Maricopa County Superior Court ("Receivership Court"). As part of the Receivership Order, Interim Director of Insurance Leslie R. Hess was appointed as Receiver of Meritus Mutual and MHP ("Receiver").

Dated March 8, 2017, the Receivership Court entered an Order Approving Liquidation Plan that, among other things, established a claims bar deadline, established a separate claims adjudication process for PPO and HMO providers; and imposed a Temporary Restraining Order enjoining Balance Billing and Enrollee Collections and prohibiting Providers with unpaid claims for services provided under insurance policies issued by Meritus Mutual and/or MHP from seeking to recover balances due directly from enrollees and/or insureds, pending completion of the claim adjudication process and issuance of an Explanation of Benefits Form.

Basis of Presentation

The accompanying financial statements of the Meritus companies in liquidation have been prepared on the liquidation basis of accounting in conformity with generally accepted accounting principles. These financial statements reflect the financial position and activity of the Meritus companies.

Under the liquidation basis of accounting, assets are stated at their estimated net realizable values. Liabilities are stated at their ultimate amounts and are subsequently adjusted to settlement amounts upon final distribution. A new cost basis is established as of the date of liquidation. Liabilities are fixed as of that date.

The valuation of assets and liabilities requires many estimates and assumptions, as there are substantial uncertainties in carrying out the provisions of the liquidation proceedings. The actual value of future liquidating distributions will depend upon a variety of factors including, among others, the future recovery of the estate's assets and the actual timing of distributions.

The Meritus entities have not accrued liquidation administrative expense because of the uncertainty as to the ultimate costs of liquidation. Liquidation administrative expense will be accrued as the entities are in a position to provide reasonable estimates when the liquidation process is nearing completion.

Amounts due from and to the Center for Medicare & Medicaid Services ("CMS")

The Unaudited Statements (including in particular the section headed "Net Due from CMS Post Offset") are prepared in reliance on, among other things, this Court's March 8, 2019 Order Re Petition No. 26 Granting Claim Determination and Setoff Related to Claims of the United States (the "Setoff Order"). Because these claims are subject to litigation and the related recovery risks in any litigation, the total amount of the claims are marked "Reserved – Litigation Risk" pending final resolution of the litigation. Paragraphs 10, 12 and 13 of the Setoff Order include the following findings:

CMS's claims for payment from Meritus Mutual under the converted start-up note and the solvency note, referred to as the CMS Surplus Notes, are Class 10 priority level claims under A.R.S. § 20-629 and are not subject to setoff.

In accordance with A.R.S. § 20-638, the setoff of all claims as between MHP and CMS under the ACA Risk-Sharing Programs, including, but not limited to CSR, Reinsurance, Risk Adjustment, and Risk Corridor, is approved so that the net effect is that the remaining amount that CMS owes MHP under the ACA Risk-Sharing Programs (with all related mutual debts and credits setoff and otherwise deemed satisfied) is as follows:

Net Risk Corridor Claims due and owing from CMS to MHP: \$4,863,178 Net Reinsurance Claims due and owing from CMS to MHP: \$7,171,320

In accordance with A.R.S. § 20-638, the setoff of all claims as between Meritus Mutual and CMS under the ACA Risk-Sharing Programs, including, but not limited to CSR, Reinsurance, Risk Adjustment, and Risk Corridor, is approved so that the net effect is that the remaining amount that CMS owes Meritus Mutual under the ACA Risk-Sharing Programs (with all related mutual debts and credits setoff and otherwise deemed satisfied) is as follows:

Net Risk Corridor Claims due and owing from CMS to Meritus Mutual: \$12,182,141

Net Reinsurance Claims due and owing from CMS to Meritus Mutual: \$3,283,275

During the applicable reporting period, the Receiver was continuing to seek recovery for net amounts due under the Risk Corridor Program and under the Reinsurance Program, after implementation of the Offset, via actions pending in the Court of Federal Claims, including the Risk Corridor Action (pending as a class action in the United States Court of Federal Claims, No. 1:16-cv-00259-MMS) and the Reinsurance Action (pending in the United States Court of Federal Claims, No. 19-1499C-MEW). After the reporting period, the Receiver entered into a settlement with the United States which has been approved by this Court and

the Court of Federal Claims. Subject to implementation after the court approvals, the accounting and revisions associated with this settlement will be reflected in future Liquidation Balance Sheets and Unaudited Statements of Net Assets applicable to the appropriate reporting period.

Assets

For Meritus Mutual Health Partners (PPO), total available cash and/or cash equivalent is \$321.634.

For Meritus Health Partners (HMO), total available cash and/or cash equivalent is \$3,074,039.

Liabilities

Payables due by the PPO and HMO are organized by Arizona's Priority of Distribution classifications for liquidations and subject to Orders of the Receivership Court, including but not limited to the proof of claim process. See A.R.S. §20-629

Except as provided for in the Setoff Order (specifically addressing Class 4 Claims and Class 10 Claims), the claims that make up the liabilities are estimates, have not been fully adjudicated and remain subject to the proof of claim process, Arizona law, and Orders of the Receivership Court. The possibility of a valid claim being paid is dependent on the valuation of the claim, the order of preference of the claim, and the amount of funds remaining after other claims having higher preference have been discharged. Each priority class of claims must be fully paid before any distribution may be made to the next priority class. All members of a class receiving partial payment must receive the same pro-rata amount. No claims accrue interest since all rights are fixed as of the Liquidation Order Date.

Due to the shared administrative expenses an intercompany balance is due the HMO from the PPO.

PPO Provider claims that have been covered by the Arizona Guaranty Fund total approximately \$2,956,387 which amounts are being paid by the Arizona Guaranty Fund subject to the Arizona Guaranty Fund enabling act and administered under a Service Agreement between the Arizona Guaranty Fund and the Receiver. Under its subrogation and assignment rights, the Guaranty Fund will have Class 2 claims for such amounts.

Subject to the Receiver's rights to offset, other creditors with priority level claims at or below the Class 2 claims will only be paid with estate distributions, if any, remaining after payment of Class 1 and Class 2 claims.

HMO Provider claims are classified at two levels, including: Class 3 priority for out of network, non-contracted, timely claims; Class 7 priority for in network, contracted, timely claims.

Subject to the Receiver's rights to offset, other creditors with priority level claims at or below the Class 3 and Class 7 claims will only be paid with estate distributions, if any, remaining after payment of creditors with a superior priority class.

Meritus Mutual Health Partners (PPO) – Revenue

Arizona Guaranty Fund Administrative Payments: These amounts are payments made by the Arizona Guaranty Fund to the Receiver for administrative services provided under the Service Agreement.

Medical Expense

The amounts referred to as "MEDICAL EXPENSES" are amounts that have been identified as part of the POC process. While they are not amounts that have been paid by either MHP or Meritus Mutual, depending on the ultimate POC Process, some or all of these amounts may qualify as claims.

Gains (losses) on sale of Fixed Assets

These amounts are based on proceeds from the sale of certain office equipment as part of the receivership process.