

In the United States Court of Federal Claims

No. 16-259C
(Filed: July 23, 2020)

HEALTH REPUBLIC INSURANCE *
COMPANY, *
*
Plaintiff, *
*
v. *
*
THE UNITED STATES, *
*
Defendant. *

ORDER

On July 17, 2020, the parties in the above-captioned case filed (1) a joint motion to divide the class into subclasses and stipulation for the entry of a partial judgment and (2) a joint status report regarding further proceedings. As set forth below, the court grants the parties’ motion, adopts a schedule for further proceedings, and directs the entry of judgment pursuant to Rule 54(b) of the Rules of the United States Court of Federal Claims (“RCFC”).

The Joint Motion to Divide the Class Into Subclasses

On January 3, 2017, the court certified the following class:

All persons or entities offering Qualified Health Plans under the Patient Protection and Affordable Care Act in the 2014 and 2015 benefit years, and whose allowable costs in either the 2014 or 2015 benefit years, as calculated by the Centers for Medicare and Medicaid Services, were more than 103 percent of their target amounts (as those terms are defined in the Patient Protection and Affordable Care Act). Excluded from the Class are the Defendant and its members, agencies, divisions, departments, and employees.

In light of the decision of the United States Supreme Court in Maine Community Health Options v. United States, 140 S. Ct. 1308 (2020), the parties agree that the class members are entitled “to receive payment of damages from the United States under ACA section 1342 for risk corridors benefit years 2014 and 2015.” Mot. 3. They further “agree on the amount due to the Class with respect to all but four class members” and that one of the class members that does not have a dispute with the government “is not yet authorized to stipulate to judgment.” Id. They therefore request that the class be divided into three subclasses pursuant to RCFC 23(c)(5) to facilitate the resolution of the class members’ claims.

The first proposed subclass is “the ‘Non-Dispute Subclass,’ which consists of Class members who have no disputes with the government,” id., contains all but five of the members of the existing class, and is defined as follows:

All approved class members offering Qualified Health Plans under the Patient Protection and Affordable Care Act in the 2014 and 2015 benefit years, whose allowable costs in either the 2014 or 2015 benefit years, as calculated by the Centers for Medicare & Medicaid Services, were more than 103 percent of their target amounts (as those terms are defined in the Patient Protection and Affordable Care Act), except those entities with ongoing disputes with the government concerning the amount due to the entity under Section 1342 of the Affordable Care Act, entities that dispute the government’s right to offset debts against a judgment pursuant to Section 1342, or entities that disputes [sic] the extent of any such offset.

Id. at 4. Plaintiff Health Republic Insurance Company “has agreed to serve as the class representative for the Non-Dispute Subclass.” Id.

The second proposed subclass is “the ‘Dispute Subclass,’ which consists of Class members who have a legal dispute with the government,” id. at 3, and is defined as follows:

All approved class members offering Qualified Health Plans under the Patient Protection and Affordable Care Act in the 2014 and 2015 benefit years, whose allowable costs in either the 2014 or 2015 benefit years, as calculated by the Centers for Medicare & Medicaid Services, were more than 103 percent of their target amounts (as those terms are defined in the Patient Protection and Affordable Care Act), and that dispute the amount due to the entity under Section 1342 of the Affordable Care Act, and/or dispute the government’s right to offset debts against a judgment pursuant to Section 1342, and/or dispute the extent of any such offset.

Id. at 4. The proposed Dispute Subclass would include Colorado Health Insurance Cooperative, Inc., Freelancers CO-OP of New Jersey, Inc., Meritus Health Partners, and Meritus Mutual Health Partners. Class member “Colorado Health Insurance Cooperative, Inc. has agreed to serve as the class representative for the Dispute Subclass.” Id.

The third proposed subclass is “the ‘Arches Subclass,’ which consists of Arches Mutual Insurance Company, who has no legal dispute with the government but is not yet authorized to stipulate to judgment,” id. at 3, by “the state court governing its liquidation,” id. at 3 n.2. The proposed subclass is defined as follows:

All approved class members offering Qualified Health Plans under the Patient Protection and Affordable Care Act in the 2014 and 2015 benefit years, whose allowable costs in either the 2014 or 2015 benefit years, as calculated by the Centers for Medicare & Medicaid Services, were more than 103 percent of their

target amounts (as those terms are defined in the Patient Protection and Affordable Care Act), and who have reached an agreement with the government related to offsets, but must seek approval from a state court prior to stipulating to judgment.

Id. at 5. Class member “Arches Mutual Insurance Company has agreed to serve as the class representative for the Arches Subclass.” Id.

“When appropriate, a class may be divided into subclasses that are each treated as a class.” RCFC 23(c)(5). “Subclasses may be certified . . . to isolate common issues of law or fact shared by distinct groups of plaintiffs.” Haggart v. United States, 104 Fed. Cl. 484, 488 (2012). When entertaining a motion to certify subclasses, even when such a motion is made jointly by the parties, the court must determine whether each subclass satisfies the prerequisites of RCFC 23(a) and (b). Id. Specifically, a proposed subclass representative must demonstrate (i) numerosity—that the proposed subclass is so large that joinder is impracticable; (ii) commonality—that there are common questions of law or fact that predominate over questions affecting individual prospective subclass members and that the government has treated the prospective class members similarly; (iii) typicality—that its claims are typical of the proposed subclass; (iv) adequacy—that it will fairly represent the proposed subclass; and (v) superiority—that a class action is the fairest and most efficient method of resolving the suit. RCFC 23(a)-(b).

With respect to the proposed Non-Dispute Subclass, the court finds that its definition is imprecise because, as drafted by the parties, it includes a member of another proposed subclass: Arches Mutual Insurance Company. To remedy this issue, the court amends the definition as follows (amendments are underlined for the parties’ convenience):

All approved class members offering Qualified Health Plans under the Patient Protection and Affordable Care Act in the 2014 and 2015 benefit years, whose allowable costs in either the 2014 or 2015 benefit years, as calculated by the Centers for Medicare & Medicaid Services, were more than 103 percent of their target amounts (as those terms are defined in the Patient Protection and Affordable Care Act), except those entities that must seek approval from a state court prior to stipulating to judgment, entities with ongoing disputes with the government concerning the amount due to the entity under Section 1342 of the Affordable Care Act, entities that dispute the government’s right to offset debts against a judgment pursuant to Section 1342, and entities that dispute the extent of any such offset.

As amended, the court finds that the proposed Non-Dispute Subclass satisfies the requirements described in RCFC 23(a)-(b). In addition, although the proposed Dispute Subclass includes only four members and the proposed Arches Subclass includes only one member, the nature of these proceedings and the rationale for the creation of the subclasses supports a finding that these subclasses satisfy the requirements described in RCFC 23(a)-(b).¹ Accordingly, the court

¹ Indeed, the court is entitled to consider issues of judicial economy when certifying a class, see, e.g., Haggart, 104 Fed. Cl. at 489, and by jointly proposing the creation of the

GRANTS the parties' motion and certifies (1) the Non-Dispute Subclass, as defined by the court; (2) the Dispute Subclass, as defined by the parties; and (3) the Arches Subclass, as defined by the parties. In addition, the court appoints Quinn Emanuel Urquhart & Sullivan, LLP, who the court appointed as counsel for the original class, as counsel for each subclass.²

Further Proceedings in the Dispute and Arches Subclasses

With respect to the Dispute Subclass, the parties propose a schedule for briefing defendant's anticipated motion for leave to amend its answer. The court adopts the parties' proposal, as follows:³

- Defendant shall file its motion for leave to amend its answer **no later than Monday, August 3, 2020.**
- The subclass representative, Colorado Health Insurance Cooperative, Inc., shall file its response to defendant's motion **no later than Thursday, August 13, 2020.**
- Defendant shall file its reply in support of its motion **no later than Thursday, August 20, 2020.**

With respect to the Arches Subclass, the parties shall file, **no later than Friday, August 21, 2020**, a joint status report advising the court of the status of the request for state court approval and proposing a schedule for providing the court with periodic updates on that request.

Entry of Judgment and Further Proceedings in the Non-Dispute Subclass

With respect to the Non-Dispute Subclass, the parties jointly stipulate that "the Non-Dispute Subclass is entitled to payment from the United States under the risk corridors program for the 2014 and 2015 benefit years in the amount of \$1,921,068,282.41," that defendant "is entitled to payment from Non-Dispute [Subclass] member Louisiana Health Cooperative, Inc." in the total amount of \$17,406,235.22, and that the amount due to each subclass member is

subclasses, the parties are implicitly representing that the creation of these two small subclasses provides the most efficient method of resolving the claims of the proposed subclasses' members.

² Although the parties did not address the appointment of counsel for the subclasses in their motion, the court is required to appoint counsel for the subclasses pursuant to RCFC 23(c)(1) and RCFC 23(c)(5). See, e.g., Haggart, 104 Fed. Cl. at 491.

³ Notwithstanding the addition of two class representatives, the parties may, for simplicity, retain the existing case caption in their filings related to the claims of the Dispute Subclass and the Arches Subclass.

accurately set forth in the exhibit attached to their joint stipulation. The parties request that the court enter judgment in accordance with these stipulations. The court **GRANTS** that request.⁴

Pursuant to RCFC 54(b), there being no just reason for delay, the clerk shall enter judgment in favor of the Non-Dispute Subclass in the amount of \$1,921,068,282.41 and judgment in favor of the United States in the amount of \$17,406,235.22. The judgment in favor of the United States shall be paid through deduction from the amount owed under the judgment in favor of the Non-Dispute Subclass, such that the net amount payable by the United States to the Non-Dispute Subclass from the Judgment Fund is \$1,903,662,047.19. The amount due to each member of the Non-Dispute Subclass is set forth in Exhibit A. The judgment shall be payable to JND Legal Administration, the claims administrator retained by class counsel, for distribution to the members of the Non-Dispute Subclass.⁵

In addition, plaintiff requests that the court set a schedule for determining attorney's fees and nontaxable costs payable from the Non-Dispute Subclass's net judgment proceeds pursuant to RCFC 23(h). The court **GRANTS** plaintiff's request and adopts the following schedule:

- Subclass counsel shall file a motion for an award for attorney's fees and nontaxable costs **no later than Thursday, July 30, 2020**. Pursuant to RCFC 23(h)(1), "[n]otice of the motion must be served on all parties and, for motions by class counsel, directed to class members in a reasonable manner." **The notice shall be provided to subclass members promptly after the motion is filed, and shall include instructions for the submission of written objections or responses to the motion to subclass counsel.**
- Members of the Non-Dispute Subclass may object or respond to the motion. Such objections/responses **must be made in writing and submitted to subclass counsel in the manner described in the notice no later than Thursday, August 20, 2020.**
- **No later than Thursday, September 3, 2020**, subclass counsel shall file either (1) a reply that addresses all subclass member objections/responses,

⁴ In conjunction with this order, the court **FINDS** the parties' cross-motions for summary judgment (ECF No. 47 and ECF No. 52) to be **MOOT**.

⁵ Plaintiff "requests that the Court direct the government to present this judgment to the Department of Treasury for payment to the Court-appointed claims administrator JND Legal Administration." First, the court has not appointed JND Legal Administration as the claims administrator. Rather, it appointed Health Republic Insurance Company as class representative and Quinn Emanuel Urquhart & Sullivan, LLP as class counsel, see ECF No. 30; RCFC 23(c)(1), who retained JND Legal Administration to serve as claims administrator. Second, defendant is not responsible for presenting the judgment to the Department of Treasury. Rather, after the entry of judgment, the clerk of court will provide plaintiff's counsel with a certified transcript of judgment and instructions for obtaining payment of the judgment from the Department of Treasury.

with every objection or response received by counsel attached to the reply as an exhibit; or (2) a status report indicating that no objections or responses were received.

IT IS SO ORDERED.

s/ Margaret M. Sweeney
MARGARET M. SWEENEY
Chief Judge

Exhibit A

IN THE UNITED STATES COURT OF FEDERAL CLAIMSHEALTH REPUBLIC INSURANCE
COMPANY,Plaintiff,
on behalf of itself and all others
similarly situated,

vs.

THE UNITED STATES OF AMERICA,

Defendant.

Case No. 16-259C

Judge Sweeney

**EXHIBIT A TO JOINT MOTION TO DIVIDE CLASS INTO SUBCLASSES AND
STIPULATION FOR ENTRY OF PARTIAL JUDGMENT AS TO ONE SUBCLASS**

| HIOS ID | Issuer Name | Total Payments Balance | Offsets | Net RC Balance |
|----------------|--|-------------------------------|----------------|-----------------------|
| 16049 | All Savers Insurance Company | \$6,697,668.39 | | |
| 36373 | All Savers Insurance Company | \$11,449,513.89 | | |
| 36677 | All Savers Insurance Company | \$294,912.81 | | |
| 39924 | All Savers Insurance Company | \$7,972,985.11 | | |
| 85947 | All Savers Insurance Company | \$62,422,090.52 | | |
| 92137 | All Savers Insurance Company | \$184,407.92 | | |
| 98971 | All Savers Insurance Company | \$7,002,813.66 | | |
| 67577 | Alliance Health and Life Insurance Company | \$369,880.03 | | |
| 32536 | ATRIO Health Plans | \$589,657.01 | | |
| 60536 | Avera Health Plans, Inc. | \$26,120,468.22 | | |
| 74980 | Avera Health Plans, Inc. | \$913,160.23 | | |
| 15287 | Blue Cross & Blue Shield of Rhode Island | \$381,639.63 | | |
| 16842 | Blue Cross and Blue Shield of Florida | \$12,018,283.99 | | |
| 18558 | Blue Cross and Blue Shield of Kansas, Inc. | \$38,218,779.37 | | |
| 42690 | Blue Cross and Blue Shield of Massachusetts HMO Blue, Inc. | \$3,275,797.62 | | |
| 26065 | Blue Cross and Blue Shield of South Carolina | \$11,205,576.67 | | |
| 49532 | BlueChoice HealthPlan of South Carolina, Inc. | \$7,837,407.61 | | |

| | | | | |
|-------|---|-----------------|--|--|
| 27811 | BlueCross BlueShield Kansas Solutions, Inc. | \$12,968,346.42 | | |
| 40586 | Bluegrass Family Health, Inc. | \$4,440,440.13 | | |
| 82569 | Boston Medical Center Health Plan, Inc. | \$1,445,782.89 | | |
| 70285 | CA Physician's Service dba Blue Shield of CA | \$22,807,199.00 | | |
| 45127 | Capital Advantage Assurance Company | \$2,505,542.65 | | |
| 82795 | Capital Advantage Insurance Company CAIC | \$241,532.88 | | |
| 10207 | CareFirst BlueChoice, Inc. | \$2,560,974.15 | | |
| 28137 | CareFirst BlueChoice, Inc. | \$37,089,252.70 | | |
| 45532 | CareFirst of Maryland, Inc. | \$12,096,305.98 | | |
| 54192 | CareSource Indiana, Inc. | \$1,293,422.26 | | |
| 45636 | CareSource Kentucky Co. | \$3,577,396.03 | | |
| 92551 | CDPHP Universal Benefits Inc. | \$47,697,764.95 | | |
| 47579 | Chinese Community Health Plan | \$593,429.63 | | |
| 72034 | CHRISTUS Health Plan | \$134,369.02 | | |
| 63312 | Colorado Choice Health Plans | \$6,659,644.23 | | |
| 87416 | Common Ground Healthcare Cooperative | \$67,325,233.36 | | |
| 18581 | Community Health Plan of Washington | \$1,187,131.21 | | |
| 98905 | CommunityCare HMO Inc. | \$2,422,216.86 | | |
| 87698 | CommunityCare Life & Health Insurance Co | \$761,894.83 | | |
| 41895 | Consumers Mutual Insurance of Michigan | \$25,843,655.17 | | |
| 38345 | Dean Health Plan | \$31,644,174.98 | | |
| 66699 | Denver Health Medical Plan, Inc | \$380,764.18 | | |
| 78124 | Excellus Health Plan, Inc. | \$31,028,716.81 | | |
| 88806 | Fallon Community Health Plan, Inc. | \$1,218,752.09 | | |
| 56503 | Florida Health Care Plan, Inc. | \$719,021.99 | | |
| 22444 | Geisinger Health Plan | \$36,995,506.57 | | |
| 75729 | Geisinger Quality Options | \$8,372,420.70 | | |
| 94084 | GHMSI | \$4,445,042.32 | | |
| 85408 | GlobalHealth, Inc. | \$6,202,344.71 | | |
| 47949 | Golden Rule Insurance Company | \$0.00 | | |
| 80473 | Group Health Cooperative | \$521,384.24 | | |
| 34102 | Group Health Plan, Inc. | \$11,396,084.43 | | |
| 40308 | Group Hospitalization and Medical Services Inc. | \$155,508.63 | | |

| | | | | |
|-------|--|------------------|-----------------|-----------------|
| 27651 | Gundersen Health Plan, Inc. | \$394,393.50 | | |
| 91058 | Gundersen Health Plan, Inc. | \$6,096,264.82 | | |
| 27357 | Health First Health Plan, Inc. | \$85,751.91 | | |
| 77150 | Health First Insurance, Inc. | \$1,708,120.48 | | |
| 30252 | Health Options, Inc. | \$9,475,810.73 | | |
| 95865 | Health Plan of Nevada, Inc. | \$643,589.93 | | |
| 96383 | Health Republic Insurance Company | \$19,565,019.76 | | |
| 47342 | Health Tradition Health Plan | \$1,385,886.58 | | |
| 92036 | HealthSpan | \$12,878,282.88 | | |
| 20126 | HealthSpan Integrated Care | \$21,869,077.92 | | |
| 19636 | HMO Louisiana, Inc. | \$18,013,347.69 | | |
| 21032 | Kaiser Foundation Health Plan of Colo. | \$64,718,412.45 | | |
| 89942 | Kaiser Foundation Health Plan of Georgia | \$10,913,600.35 | | |
| 90296 | Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. | \$17,630,217.35 | | |
| 94506 | Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. | \$3,903,893.99 | | |
| 95185 | Kaiser Foundation Health Plan of the Mid-Atlantic States, Inc. | \$34,598,194.30 | | |
| 40513 | Kaiser Foundation Health Plan, Inc. | \$117,740,652.66 | | |
| 60612 | Kaiser Foundation Health Plan, Inc. | \$34,324,694.58 | | |
| 71287 | Kaiser Foundation Healthplan of the NW | \$9,821,230.13 | | |
| 53789 | Keystone Health Plan Central | \$528,671.99 | | |
| 67202 | Louisiana Health Cooperative, Inc. | \$63,331,147.11 | \$17,406,235.22 | \$45,924,911.89 |
| 97176 | Louisiana Health Service & Indemnity Company | \$73,296,024.88 | | |
| 58326 | MercyCare HMO, Inc. | \$2,414,171.05 | | |
| 35334 | MercyCare Insurance Company | \$1,170,713.86 | | |
| 11177 | MetroPlus Health Plan | \$16,424,594.93 | | |
| 11555 | New Health Ventures Inc | \$177,328.66 | | |
| 82483 | North Shore-LIJ Insurance Company Inc | \$18,002,649.15 | | |
| 20507 | Optima Health Plan | \$2,229,495.98 | | |
| 74289 | Oscar Insurance Corporation | \$58,424,157.02 | | |
| 50221 | Oscar Insurance Corporation of New Jersey | \$2,132,615.32 | | |
| 48834 | Oxford Health Plans (NJ), Inc. | \$1,357,526.59 | | |
| 10091 | PacificSource Health Plans | \$16,892,224.87 | | |

| | | | | |
|-------|--|------------------|--|--|
| 23603 | PacificSource Health Plans | \$17,473,387.21 | | |
| 60597 | PacificSource Health Plans | \$3,930,773.68 | | |
| 65441 | PHPS, Inc. (fka Phoenix Health Plans, Inc.) | \$34,931.14 | | |
| 50816 | Physicians Health Plan of Northern Indiana, Inc. | \$6,370,812.47 | | |
| 58564 | Physicians Plus Insurance Corporation | \$171,543.34 | | |
| 88102 | PreferredOne Insurance Company | \$45,727,888.21 | | |
| 26734 | Premier Health Plan, Inc. | \$2,572,926.75 | | |
| 57173 | Presbyterian Health Plan, Inc. | \$2,063,703.11 | | |
| 29698 | Priority Health | \$14,688,532.68 | | |
| 29241 | Priority Health Insurance Company (PHIC) | \$5,678,007.91 | | |
| 16698 | Prominence HealthFirst | \$501,439.74 | | |
| 56707 | Providence Health Plan | \$7,302,569.66 | | |
| 70525 | QCA Health Plan, Inc. | \$3,957,601.38 | | |
| 37903 | QualChoice Life & Health Insurance Company, Inc. | \$4,524,487.98 | | |
| 80208 | Rocky Mountain Health Care Options | \$366,780.94 | | |
| 97879 | Rocky Mountain HMO | \$34,831,063.53 | | |
| 38166 | Security Health Plan of Wisconsin, Inc. | \$36,886,330.97 | | |
| 26002 | SelectHealth | \$60,598,770.69 | | |
| 68781 | SelectHealth | \$180,603,493.13 | | |
| 26539 | SHA, LLC DBA FirstCare Health Plans | \$7,356,449.15 | | |
| 92499 | Sharp Health Plan | \$37,507.58 | | |
| 62210 | South Dakota State Medical Holding Company, Inc. | \$13,269,548.73 | | |
| 52664 | Summa Insurance Company, Inc. | \$2,091,574.38 | | |
| 14650 | Time Insurance Company | \$494,806.51 | | |
| 19068 | Time Insurance Company | \$1,450,728.94 | | |
| 19524 | Time Insurance Company | \$4,045,974.64 | | |
| 20544 | Time Insurance Company | \$7,352,482.72 | | |
| 24867 | Time Insurance Company | \$253,920.36 | | |
| 28020 | Time Insurance Company | \$7,661,197.18 | | |
| 29176 | Time Insurance Company | \$568,168.32 | | |
| 29211 | Time Insurance Company | \$7,321,151.53 | | |
| 39996 | Time Insurance Company | \$1,451,025.54 | | |
| 42260 | Time Insurance Company | \$925,446.08 | | |
| 60299 | Time Insurance Company | \$234,775.92 | | |

| | | | | |
|-------|--|-----------------|--|--|
| 62662 | Time Insurance Company | \$61,174,353.15 | | |
| 67807 | Time Insurance Company | \$1,111,551.75 | | |
| 80863 | Time Insurance Company | \$7,624,448.10 | | |
| 89029 | Time Insurance Company | \$431,897.82 | | |
| 91842 | Time Insurance Company | \$4,618,815.85 | | |
| 29125 | Tufts Associated Health Maintenance Org | \$285,907.70 | | |
| 85736 | UCare Minnesota | \$10,464,932.43 | | |
| 71667 | UnitedHealthcare Community Plan, Inc. | \$144,054.47 | | |
| 31779 | UnitedHealthcare Insurance Company | \$166,087.58 | | |
| 49650 | UnitedHealthcare Insurance Company | \$497,317.92 | | |
| 45002 | UnitedHealthcare Life Insurance Company | \$27.28 | | |
| 59809 | UnitedHealthcare Life Insurance Company | \$6,577.07 | | |
| 68259 | UnitedHealthcare of Alabama, Inc. | \$8,688,275.81 | | |
| 68398 | UnitedHealthcare of Florida, Inc. | \$42,820,458.16 | | |
| 43802 | UnitedHealthcare of Georgia, Inc. | \$12,145,393.47 | | |
| 23671 | UnitedHealthcare of Kentucky, Ltd. | \$13,606.24 | | |
| 38499 | UnitedHealthcare of Louisiana, Inc. | \$4,251,825.74 | | |
| 97560 | UnitedHealthcare of Mississippi, Inc. | \$809,174.17 | | |
| 79881 | UnitedHealthcare of New England, Inc. | \$635.07 | | |
| 54235 | UnitedHealthcare of New York, Inc. | \$909,112.89 | | |
| 54332 | UnitedHealthcare of North Carolina, Inc | \$18,401,376.06 | | |
| 33931 | UnitedHealthcare of Ohio, Inc. | \$902,297.30 | | |
| 24872 | UnitedHealthcare of Pennsylvania, Inc. | \$5,937,531.25 | | |
| 21066 | UnitedHealthcare of the Mid-Atlantic Inc | \$14,598.52 | | |
| 31112 | UnitedHealthcare of the Mid-Atlantic Inc | \$128,553.76 | | |
| 16724 | UnitedHealthcare of the Midwest, Inc. | \$115,915.27 | | |
| 66413 | UnitedHealthcare of Utah, Inc. | \$6,697.41 | | |
| 37833 | Unity Health Plans Insurance Corporation | \$11,131,237.20 | | |
| 88925 | University of Arizona Health Plans-University Healthcare, Inc. | \$1,750,150.59 | | |

| | | | | |
|--------------|---------------------------------|---------------------------|------------------------|---------------------------|
| 75293 | USable Mutual Insurance Company | \$15,919,592.28 | | |
| 67243 | Vantage Health Plan, Inc. | \$1,785,495.97 | | |
| 93689 | Western Health Advantage | \$176,519.93 | | |
| TOTAL | | \$1,921,068,282.41 | \$17,406,235.22 | \$1,903,662,047.19 |