NEW YORK STATE DEPARTMENT OF FINANCIAL SERVICES

FINANCIAL CONDITION REPORT ON EXAMINATION

OF THE

ANTHEM LIFE & DISABILITY INSURANCE COMPANY

CONDITION: DECEMBER 31, 2017

DATE OF REPORT: MAY 9, 2019

NEW YORK STATE DEPARTMENT OF FINANCIAL SERVICES

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AS OF

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EXAMINER: BRADLEY W. NEFF, CFE

TABLE OF CONTENTS

Andrew M. Cuomo
Governor

Linda A. Lacewell
Superintendent

October 28, 2019

The Honorable Linda A. Lacewell
Superintendent of Financial Services
New York, New York 10004

Madam:

In accordance with instructions contained in Appointment No.31781, dated May 31, 2018, and annexed hereto, an examination has been made into the condition and affairs of Anthem Life & Disability Insurance Company, hereinafter referred to as "the Company," at the statutory home office of the Company's ultimate parent, Anthem, Inc. ("ANTM"), located at 220 Virginia Avenue, Indianapolis, IN 46204. The Company's home office is located at Nine Pine Street, 14th Floor, New York, NY 10005.

Wherever "Department" appears in this report, it refers to the New York State Department of Financial Services.

The report indicating the results of this examination is respectfully submitted.

1. EXECUTIVE SUMMARY

The material violation contained in this report is summarized below.

The Company violated Section 325(a) of the New York Insurance Law by failing to keep and maintain the general ledgers for all years under examination and the attachments referenced in the board of director and all its committees meeting minutes at its principal office in New York. (See item 3F of this report.)

2. SCOPE OF EXAMINATION

The examination of the Company was a full-scope examination as defined in the National Association of Insurance Commissioners' ("NAIC's") *Financial Condition Examiners Handbook, 2018 Edition* (the "Handbook"). The examination covers the four-year period from January 1, 2014, to December 31, 2017. The examination was conducted observing the guidelines and procedures in the Handbook and, where deemed appropriate by the examiner, transactions occurring subsequent to December 31, 2017, but prior to the date of this report (i.e., the completion date of the examination) were also reviewed.

The examination was conducted on a risk-focused basis in accordance with the provisions of the Handbook published by the NAIC. The Handbook guidance provides for the establishment of an examination plan based on the examiner's assessment of risk in the insurer's operations and utilizing that evaluation in formulating the nature and extent of the examination. The examiner planned and performed the examination to evaluate the current financial condition as well as identify prospective risks that may threaten the future solvency of the insurer. The examiner identified key processes, assessed the risks within those processes and evaluated the internal control systems and procedures used to mitigate those risks. The examination also included assessing the principles used and significant estimates made by management, evaluating the overall financial statement presentation, and determining management's compliance with New York statutes and Department guidelines, Statutory Accounting Principles as adopted by the Department, and annual statement instructions.

The examination of the Company was coordinated and conducted with the multi-state group examination of the ANTM's holding company system. The multi-state group examination was led by the State of Indiana, with participation from the states of Arizona, California, Colorado, Connecticut, Georgia, Iowa, Kentucky, Louisiana, Maryland, Maine, Mississippi, Missouri, New Jersey, New Mexico, Nevada, New York, Ohio, Oklahoma, Texas, Virginia, Washington, West Virginia, and Wisconsin, and the District of Columbia. Since the lead and participating states are all accredited by the NAIC, all states deemed it appropriate to rely on each other's work.

Information about the Company's organizational structure, business approach and control environment were utilized to develop the examination approach. The Company's risks and management activities were evaluated incorporating the NAIC's nine branded risk categories. These categories are as follows:

- Pricing/Underwriting
- Reserving
- Operational
- Strategic
- Credit
- Market
- Liquidity
- Legal
- Reputational

The Company was audited annually, for the years 2014 through 2017, by the accounting firm of Ernst & Young LLP. The Company received an unqualified opinion in all years. Certain audit workpapers of the accounting firm were reviewed and relied upon in conjunction with this examination. The Company shares an internal audit department, and a separate risk, control and assurance department, with ANTM, the Company's ultimate parent, which has the responsibility of assessing the internal control structure and compliance with the Sarbanes-Oxley Act of 2002 ("SOX"). The Company is not subject to SOX and was under the $500 million premium threshold for the Model Audit Rule. Where applicable, SOX workpapers and reports of ANTM were reviewed and portions were relied upon for this examination.

The examiner reviewed the corrective actions taken by the Company with respect to the financial condition comments contained in the prior report on examination. The results of the examiner's review are contained in item 7 of this report. This report on examination is confined to financial statements and comments on those matters which involve departure from laws, regulations or rules, or matters which require explanation or description.

3. DESCRIPTION OF COMPANY

A. History

The Company was incorporated under the laws of the State of New York on October 13, 2006, and was licensed and commenced business on January 1, 2009. Initial resources of $16,000,000, consisting of common capital stock of $2,000,000 and paid in and contributed surplus of $14,000,000, were provided through the sale of 1,000 shares of common stock (with a par value of $2,000 per share) for $16,000 per share.

B. Holding Company

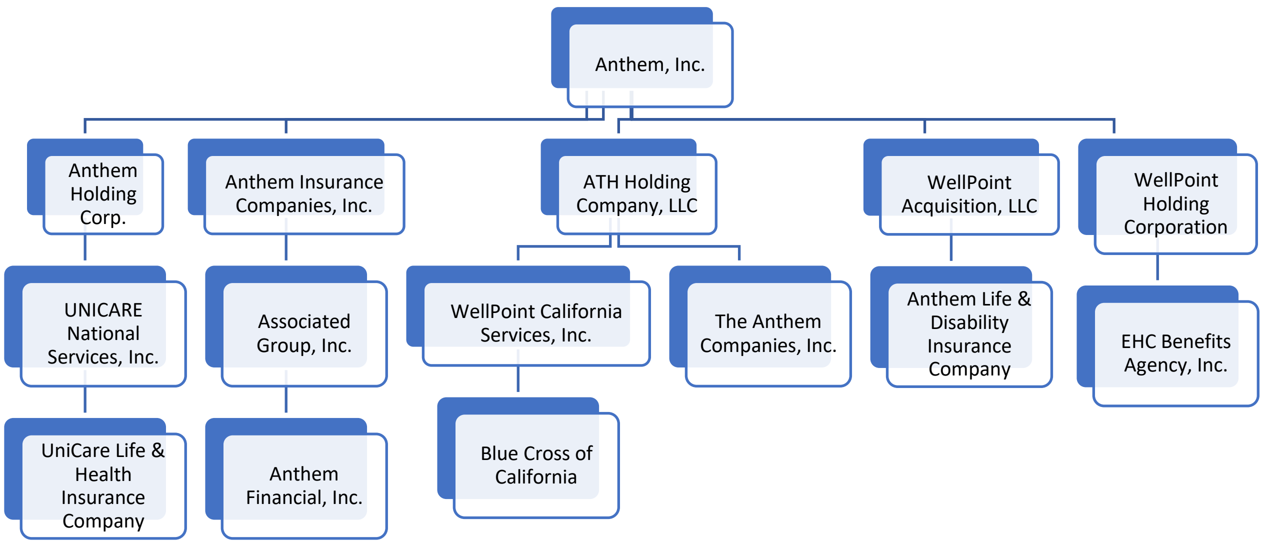
The Company is a wholly-owned subsidiary of Wellpoint Acquisition, LLC ("WPA"), an Indiana limited liability company. WPA is in turn a wholly-owned subsidiary of ANTM, an Indiana publicly traded company and the ultimate parent of the Company.

ANTM was formed when WellPoint Health Networks, Inc. and Anthem, Inc. merged in 2004. ANTM originally assumed the WellPoint, Inc. name at the time of the merger. In December 2014, WellPoint, Inc. changed its corporate name to its present name.

ANTM, through its subsidiaries and holding companies, owns and manages insurance and health care benefits companies and is an independent licensee of the Blue Cross and Blue Shield Association, an association of independent health benefit plans.

C. Organizational Chart

An abbreviated organization chart reflecting the relationship between the Company and significant entities in its holding company system as of December 31, 2017, follows:



D. Service Agreements

The Company had one service agreement in effect with affiliates during the examination period.

Type of Agreement and Department File Number	Effective Date	Provider of Services	Recipient of Services	Specific Service(s) Covered	Expense* For Each Year of the Examination
Administrative Services Agreement File No. 35562	01/01/2008	Anthem Insurance Companies, Inc.; Blue Cross of CA; Unicare Life & Health Insurance Company; WellPoint, Inc.**; WellPoint Holding Corporation; EHC Benefits Agency, Inc.; and The WellPoint Companies, Inc.***	The Company	Marketing; sales; claims; customer service; enrollment and billing; operations support; print mail; underwriting; medical and disability condition management; actuarial valuation; decision support; external affairs; finance; general administration and management; human resources; legal compliance; planning; information technology support; and investment advisory services	2017 $(1,393,786) 2016 $(1,245,556) 2015 $(1,219,327) 2014 $(1,102,905)

*Amount of Expense Incurred by the Company
**Now known as Anthem, Inc.
***Now known as The Anthem Companies, Inc.

The Company participates in a federal income tax allocation agreement with its parent and affiliates.

E. Management

The Company's by-laws provide that the board of directors shall be comprised of not less than 13 and not more than 25 directors. If the Company's admitted assets fall below one and one-half billion dollars, the number of directors may be decreased to a minimum of nine members. Directors are elected for a period of one year at the annual meeting of the stockholders held in May of each year. As of December 31, 2017, the board of directors consisted of nine members. Meetings of the board are held quarterly.

The nine board members and their principal business affiliation as of December 31, 2017, were as follows:

Name and Residence	Principal Business Affiliation	Year First Elected
Sean M. Doolan* Albany, New York	Attorney Hinman Straub, P.C.	2006
Ethel A. Graber Niskayuna, New York	Vice President and General Manager Anthem, Inc.	2008
William T. Lee* Roosevelt, New York	Retired Executive Vice President UNITE HERE	2006
David A. Levene* Melville, New York	Retired Executive Vice President Metropolitan Life Insurance Company	2008
Randall V. Pernicone New Milford, New Jersey	Financial Executive Anthem, Inc.	2014
Gregory G. Poulakos Avon, Connecticut	President and Chairperson of the Board Anthem Life & Disability Insurance Company	2017
Lawrence G. Schreiber Waukesha, Wisconsin	Insurance Executive Anthem, Inc.	2015
Jay H. Wagner Carmel, Indiana	Secretary Anthem Life & Disability Insurance Company	2008
Harold Wolchok* Staten Island, NY	Retired Professor Empire State College	2006

*Not affiliated with the Company or any other company in the holding company system

In September 2018, Mr. Schreiber resigned from the board and was replaced by Mr. Alan Murray.

The examiner's review of the minutes of the meetings of the board of directors and its committees indicated that meetings were well attended, and that each director attended most meetings.

The following is a listing of the principal officers of the Company as of December 31, 2017:

Name	Title
Gregory G. Poulakos	President and Chairperson of the Board
Eric K. Noble	Treasurer
Jay H. Wagner	Secretary
Serena H. Richard	Assistant Secretary
Susan M. O'Connell	Valuation Actuary
Vincent E. Scher	Assistant Treasurer

As of December 31, 2017, the designated consumer services officer per Section 216.4(c) of 11 NYCRR 216 (Insurance Regulation 64) is Ms. Angela Sillus, Staff Vice President, Specialty Enrollment & Billing.

F. Books and Records

Section 325(a) of the New York Insurance Law states:

> "Every domestic insurer and every licensed United States branch of an alien insurer entered through this state shall, except as hereinafter provided, keep and maintain at its principal office in this state its charter and by-laws, (in the case of a United States branch a copy thereof) and its books of account, and if a domestic stock corporation, a record containing the names and addresses of its shareholders, the number and class of shares held by each and the dates when they respectively became the owners of record thereof, and if a domestic corporation the minutes of any meetings of its shareholders, policyholders, board of directors and committees thereof."

On December 11, 2018, the examiner reviewed the Company's books of account that are maintained at its principal office in New York. The review revealed that the general ledgers for all years under examination and the attachments referenced in the board of director and all its committees meeting minutes were not maintained.

Section F(7)(b) of Attachment NY-03 to the amended and restated administrative service agreement between the Company and its parent and affiliates states:

> "All records, books and files established and maintained by Provider by reason of its performance of services under this Agreement shall be maintained in accordance with applicable law and regulation, including, but not limited to, New York Insurance Department Regulation No. 152 (11NYCRR 243).
> In addition, with respect to accounting services provided to ALDIC [Anthem Life & Disability Insurance Company] hereunder and ALDIC's records involving ALDIC's books of account:
> . . . Provider will maintain acceptable backup (hard copy or other durable medium, as defined in New York Insurance Department Regulation 152, as long as the means to access the durable medium is also maintained at ALDIC's principal office) of the records constituting ALDIC's books of account, such backup will be forwarded to ALDIC monthly and will be maintained by ALDIC at its New York Office."

According to the amended and restated administrative service agreement between the Company and its parent and affiliates, copies of the Company's books, record, and files should have been forwarded to the Company on a monthly basis.

The Company failed to comply with the terms of its amended and restated administrative services agreement with its parent and affiliates by not maintaining a process whereby copies of all the Company's books, records, and files are forwarded to the Company on a monthly basis and maintained in an accessible medium at the Company's principal office in New York, New York.

The examiner recommends that the Company enforce the terms of its administrative services agreement with its parent and affiliates regarding the furnishing and maintaining of the Company's books of account.

The Company violated Section 325(a) of the New York Insurance Law by failing to keep and maintain the general ledgers for all years under examination and the attachments referenced in the board of director and all its committees meeting minutes at its principal office in New York.

4. TERRITORY AND PLAN OF OPERATIONS

The Company is authorized to write life insurance, annuities, and accident and health insurance as defined in paragraphs 1, 2 and 3 of Section 1113(a) of the New York Insurance Law.

The Company is licensed to transact business only in the State of New York. In 2017, all life premiums and accident and health premiums were received from New York. Policies are written on a non-participating basis.

A. Statutory and Special Deposits

As of December 31, 2017, the Company had $4,400,000 (par value) of United States Political Subdivision Bonds on deposit with the State of New York, its domiciliary state, for the benefit of all policyholders, claimants and creditors of the Company.

B. Direct Operations

The Company offers group life and group accident and health insurance. Group life insurance consist of term life insurance; group accident and health consist of short and long term disability, and accidental death and dismemberment coverage offered in partners with Empire HealthChoice Assurance Company to market its products. The Company also operates as a licensee of the Blue Cross Blue Shield Association.

The Company's agency operations are conducted on a general agency basis.

C. Reinsurance

As of December 31, 2017, the Company had reinsurance treaties in effect with two companies, both of which were authorized or accredited. The Company's group life and accident and health business is reinsured on an excess of loss and yearly renewable term bases. Reinsurance is provided on an automatic and facultative basis.

The maximum retention limit for group life contracts is $300,000. The total face amount of life insurance ceded as of December 31, 2017, was $75,625,515, which represents 2.8% of the total face amount of life insurance in force.

5. SIGNIFICANT OPERATING RESULTS

Indicated below is significant information concerning the operations of the Company during the period under examination as extracted from its filed annual statements. Failure of items to add to the totals shown in any table in this report is due to rounding.

The following table indicates the Company's financial growth (decline) during the period under review:

	December 31, 2013	December 31, 2017	Increase (Decrease)
Admitted assets	$ 22,434,523	$ 24,522,827	$ 2,088,304
Liabilities	$ 2,809,979	$ 5,188,182	$ 2,378,203
Common capital stock	$ 2,000,000	$ 2,000,000	$ 0
Gross paid in and contributed surplus	16,000,000	16,000,000	0
Unassigned funds (surplus)	1,624,544	1,334,645	(289,899)
Total capital and surplus	$ 19,624,544	$ 19,334,645	$ (289,899)
Total liabilities, capital and surplus	$ 22,434,523	$ 24,522,827	$ 2,088,304

The Company's invested assets as of December 31, 2016, mainly comprised bonds (54.4%) and cash and short-term investments (45.6%). A shift in the Company's invested assets occurred in 2017 when the company liquidated certain bond investments and reinvested the funds in cash and short-term investments. After the shift in invested assets, the Company's invested assets, as of December 31, 2017, mainly comprised cash and short-term investments (78.1%) and bonds (21.9%).

The Company's entire bond portfolio, as of December 31, 2017, comprised investment grade obligations.

The following indicates, for each of the years listed below, the amount of group life insurance issued and in force by type (in thousands of dollars):

	Group Life	
Year	Issued & Increases	In Force
2014	$ 531,084	$ 2,493,897
2015	$ 922,224	$ 3,228,030
2016	$ 152,919	$ 2,602,960
2017	$ 478,195	$ 2,668,418

The year-to-year fluctuations in the issued and increases (sum of life benefit amounts) of newly issued group life policies were the result of variations in the number of groups sold, the size (number of certificates) of these groups, or the average life benefit amount. The lower volume of policies issued for 2016 was due to only 24 groups being issued that year compared with more than double this number being issued in the other years. The larger volume in 2015 was due to both a greater number of lives and a larger average benefit amount when compared with the other years.

The following has been extracted from the Exhibits of Accident and Health Insurance in the filed annual statements for each of the years under review:

	Group			
	2014	2015	2016	2017
Outstanding, end of previous year	29,385	32,322	33,961	31,962
Issued during the year	7,377	10,232	3,541	5,129
Other net changes during the year	(4,440)	(8,593)	(5,540)	(2,128)
Outstanding, end of current year	32,322	33,961	31,962	34,963

The year-to-year fluctuations in the number of certificate holders for newly issued group accident and health policies were the result of variations in the number of groups sold and the size of these groups. The lower number of certificates sold in 2016 was due to fewer groups being issued that year compared with the other years in the examination period. The trend toward the sale of smaller groups in 2016 and 2017 also contributed to the smaller number of certificates issued in these years. There was no change in sales strategy, but the Company was less successful in closing cases in 2016 and 2017 compared with the two previous years.

The following is the net gain (loss) from operations by line of business after federal income taxes but before realized capital gains (losses) reported for each of the years under examination in the Company's filed annual statements:

	2014	2015	2016	2017
Group Life	$267,498	$(620,775)	$(270,120)	$(581,773)
Group accident and health	$289,527	$ (41,837)	$(301,197)	$ 853,070
Total	$557,025	$(662,612)	$(571,317)	$ 271,297

The significant decrease in group life net gain (loss) in 2015 compared with 2014 was primarily the result of the increase in aggregate reserves for life contracts, which was attributed to the significant increase in group life sales in 2015. Also contributing to the decrease in net gain is the establishment of a $378,000 premium reserve for the life line of business as of December 31, 2015. The decrease in the group life net loss in 2016 compared with 2015 was due to the decrease in aggregate reserves for life contracts as a result of the decrease in group life sales in 2016. This was partially offset by an increase in paid claims due to the greater number of claims and the slightly larger average benefit amount. The increase in group life net loss in 2017 was due to the $303,000 decrease in revenue, the $151,000 increase in commission expenses, and the $477,000 increase in general administrative expenses. These increases were offset by a $126,000 decrease in benefit expenses and a $94,000 increase in tax benefit incurred.

The significant decrease in group accident and health net gain (loss) in 2015 compared with 2014 was primarily the result of the $658,000 increase in reserves for calendar year 2015, which was attributed to the approval of more waiver and long-term disability claims as the Company's business continued to grow. Also contributing to the decrease in net gain is the establishment of a $107,000 premium deficiency reserve. The increase in group accident and health net loss in 2016 was primarily the result of higher benefit expense, which was attributed to increased paid claims in 2016 due to the greater number of disability claims and the larger average benefit amount for accidental death and dismemberment and disability claims. Additionally, there was a $1.1 million increase in the aggregate reserves for accident and health contracts. The increase in group accident and health net gain (loss) in 2017 was primarily the result of improved claim activity during the year, with claim closures exceeding newly approved claims.

The following ratios, applicable to the accident and health business of the Company, have been extracted from Schedule H for each of the indicated years:

	2014	2015	2016	2017
Premiums earned	100.0%	100.0%	100.0%	100.0%
Incurred losses	47.9%	76.7%	88.0%	19.1%
Commissions	10.7	9.0	11.7	13.9
Expenses	25.5	24.2	24.0	22.3
	84.1%	109.9%	123.7%	55.3%
Underwriting results	15.9%	(9.9%)	(23.7%)	44.7%

The increases in incurred losses for 2015 and 2016 were due to higher paid claims and increases in aggregate reserves as the Company's business continues to grow. The significant decrease in incurred losses in 2017 compared to 2016 was due to the decrease in aggregate reserves for accident and health contracts primarily as a result of the improved long-term disability claim experience. Long-term disability claim activity was quite significant during 2016 with higher incidence of claims. Claim activity improved greatly in 2017 with claim closures (7 claims) exceeding newly approved claims (3 claims), and the average reserve for the new claims was lower than that for the closed claims.

6. FINANCIAL STATEMENTS

The following statements show the assets, liabilities, and capital and surplus as of December 31, 2017, as contained in the Company's 2017 filed annual statement, a condensed summary of operations and a reconciliation of the capital and surplus account for each of the years under review. The examiner's review of a sample of transactions did not reveal any differences which materially affected the Company's financial condition as presented in its financial statements contained in the December 31, 2017 filed annual statement.

A. Independent Accountants

The firm of Ernst & Young LLP was retained by the Company to audit the Company's combined statutory basis statements of financial position as of December 31 of each year in the examination period, and the related statutory-basis statements of operations, capital and surplus, and cash flows for the years then ended.

Ernst & Young LLP concluded that the statutory financial statements presented fairly, in all material respects, the financial position of the Company at the respective audit dates. Balances reported in these audited financial statements were reconciled to the corresponding years' annual statements with no discrepancies noted.

B. Net Admitted Assets

Bonds	$ 5,136,574
Cash, cash equivalents and short term investments	18,361,267
Investment income due and accrued	75,833
Premiums and considerations:	
Uncollected premiums and agents' balances in the course of collection	347,051
Reinsurance:	
Amounts recoverable from reinsurers	1,747
Net deferred tax asset	152,589
Receivables from parent, subsidiaries and affiliates	447,766
Total admitted assets	$24,522,827

C. Liabilities, Capital and Surplus

Aggregate reserve for life policies and contracts	$ 1,110,998
Aggregate reserve for accident and health contracts	1,978,258
Liability for deposit-type contracts	871,995
Contract claims - Life	653,846
Contract claims - Accident and health	177,203
Premiums and annuity considerations for life and accident and health contracts received in advance	1,448
Commissions to agents due or accrued	135,871
General expenses due or accrued	80,192
Taxes, licenses and fees due or accrued, excluding federal income taxes	21,258
Current federal and foreign income taxes	91,466
Amounts withheld or retained by company as agent or trustee	300
Remittances and items not allocated	23,298
Miscellaneous liabilities:	
Asset valuation reserve	15,410
Escheat liability	26,639
Total liabilities	$ 5,188,182
Common capital stock	2,000,000
Gross paid in and contributed surplus	16,000,000
Unassigned funds (surplus)	1,334,645
Total capital and surplus	$19,334,645
Total liabilities, capital and surplus	$24,522,827

D. Condensed Summary of Operations

	2014	2015	2016	2017
Premiums and considerations	$6,046,784	$6,634,744	$7,167,074	$7,112,448
Investment income	332,900	335,870	282,111	287,769
Commissions and reserve adjustments on reinsurance ceded	23,060	0	0	0
Total income	$6,402,744	$6,970,614	$7,449,185	$7,400,217
Benefit payments	$3,572,711	$3,972,745	$5,297,181	$5,190,067
Increase in reserves	88,065	1,723,815	961,855	(740,002)
Commissions	573,530	618,132	675,368	913,457
General expenses and taxes	1,330,084	1,439,808	1,488,604	1,579,255
Total deductions	$5,564,390	$7,754,500	$8,423,008	$6,942,777
Net gain (loss)	$ 838,354	$ (783,886)	$ (973,823)	$ 457,440
Federal and foreign income taxes incurred	281,329	(121,274)	(402,506)	186,143
Net gain (loss) from operations before net realized capital gains	$ 557,025	$ (662,612)	$ (571,317)	$ 271,297
Net realized capital (losses)	0	0	0	(29,311)
Net income	$ 557,025	$ (662,612)	$ (571,317)	$ 241,986

E. Capital and Surplus Account

	2014	2015	2016	2017
Capital and surplus, December 31, prior year	$19,624,544	$20,202,803	$19,731,725	$18,914,308
Net income	$ 557,025	$ (662,612)	$ (571,317)	$ 241,986
Change in net deferred income tax	27,810	191,505	(313,684)	202,656
Change in non-admitted assets and related items	5,397	9,662	78,114	(69,496)
Change in asset valuation reserve	(11,973)	(9,633)	(10,530)	45,191
Net change in capital and surplus for the year	578,259	(471,078)	(817,417)	420,337
Capital and surplus, December 31, current year	$20,202,803	$19,731,725	$18,914,308	$19,334,645

7. PRIOR REPORT SUMMARY AND CONCLUSIONS

Following are financial condition comments contained in the prior report on examination and the subsequent actions taken by the Company in response to each citation:

Item	Description
A	In December 2014, the ultimate parent of the Company, WellPoint, Inc. changed its corporate name to Anthem, Inc. The examiner's review indicated that the ultimate parent of the Company changed its corporate name to Anthem, Inc.
B	In February 2015, Anthem, Inc. was the target of a sophisticated external cyberattack whereby unauthorized access to personal information of customers and employees occurred. Upon discovery of the cyberattack, Anthem Inc. took immediate action to remediate the security vulnerability and retained a cyber security firm to evaluate systems and identify solutions based on the evolving landscape. The examiner's review indicated that the Company's response to the cyberattack was deemed appropriate.

8. SUMMARY AND CONCLUSIONS

Following are the recommendation and violation contained in this report:

Item	Description	Page No(s).
A	The examiner recommends that the Company enforce the terms of its administrative services agreement with its parent and affiliates regarding the furnishing and maintaining of the Company's books of account.	10
B	The Company violated Section 325(a) of the New York Insurance Law by failing to keep and maintain at its principal office in New York its general ledgers for the years under examination, as well as attachments referenced in its board of director, and all committee meeting minutes.	10

Respectfully submitted,

Bradley W. Neff

Bradley W. Neff, CFE

Noble Consulting Services, Inc.

STATE OF NEW YORK)
) SS:
COUNTY OF NEW YORK)

Bradley W. Neff, being duly sworn deposes and says that the foregoing report, subscribed by him is true to the best of his knowledge and belief.

Bradley W. Neff

Bradley W. Neff

Subscribed and sworn to before me

this 8th day of November 2019

ROCHELLE ATKINS
Notary Public, State of Indiana
Hendricks County
Commission Number NP0716900
My Commission Expires
November 08, 2026

NOTARY PUBLIC SEAL INDIANA

Rochelle Atkins

Respectfully submitted,

/s/
Vincent Targia
Principal Insurance Examiner

STATE OF NEW YORK)
)SS:
COUNTY OF NEW YORK)

Vincent Targia, being duly sworn, deposes and says that the foregoing report, subscribed by him, is true to the best of his knowledge and belief.

/s/
Vincent Targia

Subscribed and sworn to before me

this__________ day of ____________________

APPOINTMENT NO. 31781

NEW YORK STATE

DEPARTMENT OF FINANCIAL SERVICES

I, MARIA T. VULLO, Superintendent of Financial Services of the State of New York, pursuant to the provisions of the Financial Services Law and the Insurance Law, do hereby appoint:

BRADLEY W. NEFF
(NOBLE CONSULTING SERVICES, INC.)

as a proper person to examine the affairs of the

ANTHEM LIFE & DISABILITY INSURANCE COMPANY

and to make a report to me in writing of the condition of said

COMPANY

with such other information as he shall deem requisite.

In Witness Whereof, I have hereunto subscribed my name
and affixed the official Seal of the Department
at the City of New York

this 31st day of May, 2018

MARIA T. VULLO
Superintendent of Financial Services

By: Mark McLeod

MARK MCLEOD
DEPUTY CHIEF - LIFE BUREAU