

TEXAS HMO SUPPLEMENT

OF THE **UNICARE Health Plans of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION ION / 2. DIVISION **CONSOLIDATED**

(Location)

EXHIBIT II (Filed Annually and Quarterly)

ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES

Indicate Reporting Period: Current Quarter

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)		4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. NON-RISK	9. OTHER
			BASIC	PART D						
1. ENROLLEES AT THE END OF REPT PERIOD.....	43,289	11,934	0	0	23,479	0	0	7,876	0	0
2. MEMBER MONTHS.....	119,868	36,001	0	0	60,255	0	0	23,612	0	0
3. Direct premium income.....	31,438,391	12,344,444	0	0	17,130,370	0	XXXXXXXX	1,963,577	XXXXXXXX	0
4. Net premium income.....	31,438,391	12,344,444	0	0	17,130,370	0	0	1,963,577	XXXXXXXX	0
5. Change in unearned premium reserve & reserve for rate credits.....	(3,842)	(3,842)	0	0	0	0	0	0	0	0
6. Fee-for-service (gross revenues).....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk revenue.....	0	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	0
8. Aggregate write-in for other health related revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-in for other revenue (excluding investment income).....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	31,434,549	12,340,602	0	0	17,130,370	0	0	1,963,577	0	0
11. Hospital & medical.....	26,471,387	12,742,336	0	0	11,921,513	0	0	1,807,538	0	0
12. Net reinsurance recoveries.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	26,471,387	12,742,336	0	0	11,921,513	0	0	1,807,538	0	0
14. Claims adjustment expenses.....	1,380,975	541,036	0	0	753,778	0	0	86,160	0	0
15. General administrative expenses.....	1,601,694	627,508	0	0	874,254	0	0	99,931	0	0
16. Increase in reserves for A&H contracts.....	(1,434,145)	(1,434,145)	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	28,019,910	12,476,735	0	0	13,549,546	0	0	1,993,630	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 less L17).....	3,414,639	(136,133)	0	0	3,580,824	0	0	(30,053)	0	0
19. Net investment income earned.....	396,864	396,864	0	0	0	0	0	0	0	0
20. Net realized capital gains/losses.....	0	0	0	0	0	0	0	0	0	0
21. NET INVESTMENT GAINS/LOSSES (L19 to L20).....	396,864	396,864	0	0	0	0	0	0	0	0
22. Aggregate write-in for other expenses.....	(109,000)	(109,000)	0	0	0	0	0	0	0	0
23. INCOME/LOSSES before FIT + EX Items (L18+L21+L22).....	3,702,503	151,731	0	0	3,580,824	0	0	(30,053)	0	0
24. Extraordinary items & federal & foreign income taxes incurred.....	1,020,038	1,020,038	0	0	0	0	0	0	0	0
25. NET INCOME/LOSS (L30 less L31).....	2,682,465	(868,307)	0	0	3,580,824	0	0	(30,053)	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			0	# of Enrollees in C3-Pt D included in C3-Basic			
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0	# of Member Months in C3-Pt D included in C3-Basic			

* Other (identify products(s); eg PPO): 0

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ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES

Indicate Reporting Period: Year-to-Date

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)		4. MEDICAID (Omit Provider HMO Business)	5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. NON-RISK	9. OTHER
			BASIC	PART D						
1. ENROLLEES AT THE END OF REPT PERIOD.....	43,289	11,934	0	0	23,479	0	0	7,876	0	0
2. MEMBER MONTHS.....	233,674	73,101	0	0	112,836	0	0	47,737	0	0
3. Direct premium income.....	61,440,474	24,963,918	0	0	32,575,184	0	XXXXXXXX	3,901,372	XXXXXXXX	0
4. Net premium income.....	61,440,474	24,963,918	0	0	32,575,184	0	0	3,901,372	XXXXXXXX	0
5. Change in unearned premium reserve & reserve for rate credits.....	(10,057)	(10,057)	0	0	0	0	0	0	0	0
6. Fee-for-service (gross revenues).....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk revenue.....	0	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	0
8. Aggregate write-in for other health related revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-in for other revenue (excluding investment income).....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	61,430,417	24,953,861	0	0	32,575,184	0	0	3,901,372	0	0
11. Hospital & medical.....	50,949,139	22,338,600	0	0	25,090,657	0	0	3,519,882	0	0
12. Net reinsurance recoveries.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	50,949,139	22,338,600	0	0	25,090,657	0	0	3,519,882	0	0
14. Claims adjustment expenses.....	2,783,493	1,130,963	0	0	1,475,782	0	0	176,747	0	0
15. General administrative expenses.....	3,228,371	1,311,721	0	0	1,711,653	0	0	204,996	0	0
16. Increase in reserves for A&H contracts.....	(1,583,660)	(1,583,660)	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	55,377,342	23,197,624	0	0	28,278,093	0	0	3,901,626	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 less L17).....	6,053,075	1,756,237	0	0	4,297,091	0	0	(254)	0	0
19. Net investment income earned.....	709,825	709,825	0	0	0	0	0	0	0	0
20. Net realized capital gains/losses.....	0	0	0	0	0	0	0	0	0	0
21. NET INVESTMENT GAINS/LOSSES (L19 to L20).....	709,825	709,825	0	0	0	0	0	0	0	0
22. Aggregate write-in for other expenses.....	(90,000)	(90,000)	0	0	0	0	0	0	0	0
23. INCOME/LOSSES before FIT + EX Items (L18+L21+L22).....	6,672,900	2,376,062	0	0	4,297,091	0	0	(254)	0	0
24. Extraordinary items & federal & foreign income taxes incurred.....	1,408,503	1,408,503	0	0	0	0	0	0	0	0
25. NET INCOME/LOSS (L30 less L31).....	5,264,397	967,560	0	0	4,297,091	0	0	(254)	0	0
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State				0	# of Enrollees in C3-Pt D included in C3-Basic		
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)				0	# of Member Months in C3-Pt D included in C3-Basic		

* Other (identify products(s); eg PPO): 0