

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**  
(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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	32,192	0	0	32,192	0	0	0	0	0	0
2. MEMBER MONTHS.....	97,423	0	0	97,423	0	0	0	0	0	0
3. Direct Premium Income.....	94,094,883	0	0	94,094,883	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	92,633,689	0	0	92,633,689	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	1,649,654	0	0	1,649,654	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	94,283,343	0	0	94,283,343	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	84,460,981	0	0	84,460,981	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	264,534	0	0	264,534	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	84,196,447	0	0	84,196,447	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	4,629,903	0	0	4,629,903	0	0	0	0	0	0
15. General Administrative Expenses.....	2,133,372	0	0	2,133,372	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	90,959,722	0	0	90,959,722	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,323,621	0	0	3,323,621	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	64,601	0	0	64,601	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(1,693)	0	0	(1,693)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	3,386,529	0	0	3,386,529	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	945,897	0	0	945,897	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,440,632	0	0	2,440,632	0	0	0	0	0	0
24 Medical Loss Ratio	90.9%	0.0%	0.0%	90.9%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(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: 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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	32,192	0	0	32,192	0	0	0	0	0	0
2. MEMBER MONTHS.....	394,201	0	0	394,201	0	0	0	0	0	0
3. Direct Premium Income.....	405,661,911	0	0	405,661,911	0	0	XXXXXXX	0	0	0
4. Net Premium Income.....	402,061,142	0	0	402,061,142	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	2,053,242	0	0	2,053,242	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXX	0	0	0	0	XXXXXXX	XXXXXXX	XXXXXXX	0
7. Risk Revenue.....	0	XXXXXXX	0	0	0	XXXXXXX	XXXXXXX	0	XXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	404,114,384	0	0	404,114,384	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	361,881,719	0	0	361,881,719	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	1,671,343	0	0	1,671,343	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	360,210,376	0	0	360,210,376	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	10,017,874	0	0	10,017,874	0	0	0	0	0	0
15. General Administrative Expenses.....	19,646,590	0	0	19,646,590	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	389,874,840	0	0	389,874,840	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	14,239,544	0	0	14,239,544	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	156,765	0	0	156,765	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(6,073)	0	0	(6,073)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	14,390,236	0	0	14,390,236	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	4,797,642	0	0	4,797,642	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	9,592,594	0	0	9,592,594	0	0	0	0	0	0
24 Medical Loss Ratio	89.6%	0.0%	0.0%	89.6%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

REPORT FOR DIVISION: **Austin**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	7,286	0	0	0	0	0	0	7,286	0	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	8,158	0	0	0	0	0	0	8,158	0	0
6. Current Year Member Months	99,135	0	0	0	0	0	0	99,135	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	160,352	0	0	0	0	0	0	160,352	0	0
8. Non-Physician	94,934	0	0	0	0	0	0	94,934	0	0
9. Total	255,286	0	0	0	0	0	0	255,286	0	0
10. Hospital Patient Days Incurred	14,315	0	0	0	0	0	0	14,315	0	0
11. Number of Inpatient Admissions	2,488	0	0	0	0	0	0	2,488	0	0
12. Health Premiums Written	95,728,730	0	0	0	0	0	0	95,728,730	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	96,348,993	0	0	0	0	0	0	96,348,993	0	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	94,716,495	0	0	0	0	0	0	94,716,495	0	0
18. Amount Incurred for Provision of Health Care Services	85,734,077	0	0	0	0	0	0	85,734,077	0	0

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Austin**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	8,158	0	0	8,158	0	0	0	0	0	0
2. MEMBER MONTHS.....	24,724	0	0	24,724	0	0	0	0	0	0
3. Direct Premium Income.....	22,573,295	0	0	22,573,295	0	0	XXXXXXXX	0	0	0
4. Net Premium Income.....	22,202,004	0	0	22,202,004	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	543,833	0	0	543,833	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	22,745,837	0	0	22,745,837	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	21,200,891	0	0	21,200,891	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	68,833	0	0	68,833	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	21,132,058	0	0	21,132,058	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,098,394	0	0	1,098,394	0	0	0	0	0	0
15. General Administrative Expenses.....	524,302	0	0	524,302	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	22,754,754	0	0	22,754,754	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(8,917)	0	0	(8,917)	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(3,545)	0	0	(3,545)	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(723)	0	0	(723)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(13,185)	0	0	(13,185)	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	(56,726)	0	0	(56,726)	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	43,541	0	0	43,541	0	0	0	0	0	0
24 Medical Loss Ratio	95.2%	0.0%	0.0%	95.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Austin**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	8,158	0	0	8,158	0	0	0	0	0	0
2. MEMBER MONTHS.....	99,135	0	0	99,135	0	0	0	0	0	0
3. Direct Premium Income.....	95,728,730	0	0	95,728,730	0	0	XXXXXXX	0	0	0
4. Net Premium Income.....	94,818,590	0	0	94,818,590	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	620,263	0	0	620,263	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	95,438,853	0	0	95,438,853	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	85,734,077	0	0	85,734,077	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	399,183	0	0	399,183	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	85,334,894	0	0	85,334,894	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	2,362,528	0	0	2,362,528	0	0	0	0	0	0
15. General Administrative Expenses.....	4,633,279	0	0	4,633,279	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	92,330,701	0	0	92,330,701	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,108,152	0	0	3,108,152	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	25,016	0	0	25,016	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(2,506)	0	0	(2,506)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	3,130,662	0	0	3,130,662	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,043,749	0	0	1,043,749	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,086,913	0	0	2,086,913	0	0	0	0	0	0
24 Medical Loss Ratio	90.0%	0.0%	0.0%	90.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

REPORT FOR DIVISION: **Corpus Christi**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	12,112	0	0	0	0	0	0	12,112	0	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	12,388	0	0	0	0	0	0	12,388	0	0
6. Current Year Member Months	146,821	0	0	0	0	0	0	146,821	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	243,496	0	0	0	0	0	0	243,496	0	0
8. Non-Physician	144,158	0	0	0	0	0	0	144,158	0	0
9. Total	387,654	0	0	0	0	0	0	387,654	0	0
10. Hospital Patient Days Incurred	21,737	0	0	0	0	0	0	21,737	0	0
11. Number of Inpatient Admissions	3,778	0	0	0	0	0	0	3,778	0	0
12. Health Premiums Written	161,279,683	0	0	0	0	0	0	161,279,683	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	161,956,404	0	0	0	0	0	0	161,956,404	0	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	159,212,281	0	0	0	0	0	0	159,212,281	0	0
18. Amount Incurred for Provision of Health Care Services	142,101,055	0	0	0	0	0	0	142,101,055	0	0

**TEXAS HMO SUPPLEMENT**

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OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Corpus Christi**  
(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
 ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	12,388	0	0	12,388	0	0	0	0	0	0
2. MEMBER MONTHS.....	37,470	0	0	37,470	0	0	0	0	0	0
3. Direct Premium Income.....	37,970,350	0	0	37,970,350	0	0	XXXXXXXX	0	0	0
4. Net Premium Income.....	37,424,780	0	0	37,424,780	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	624,830	0	0	624,830	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	38,049,610	0	0	38,049,610	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	32,792,801	0	0	32,792,801	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	87,503	0	0	87,503	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	32,705,298	0	0	32,705,298	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,853,843	0	0	1,853,843	0	0	0	0	0	0
15. General Administrative Expenses.....	887,126	0	0	887,126	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	35,446,267	0	0	35,446,267	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	2,603,343	0	0	2,603,343	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	74,002	0	0	74,002	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	2,677,345	0	0	2,677,345	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	812,873	0	0	812,873	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,864,472	0	0	1,864,472	0	0	0	0	0	0
24 Medical Loss Ratio	87.4%	0.0%	0.0%	87.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Corpus Christi**  
(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	12,388	0	0	12,388	0	0	0	0	0	0
2. MEMBER MONTHS.....	146,821	0	0	146,821	0	0	0	0	0	0
3. Direct Premium Income.....	161,279,683	0	0	161,279,683	0	0	XXXXXXX	0	0	0
4. Net Premium Income.....	159,963,354	0	0	159,963,354	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	676,721	0	0	676,721	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	160,640,075	0	0	160,640,075	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	142,101,055	0	0	142,101,055	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	641,885	0	0	641,885	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	141,459,170	0	0	141,459,170	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	3,985,694	0	0	3,985,694	0	0	0	0	0	0
15. General Administrative Expenses.....	7,816,559	0	0	7,816,559	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	153,261,423	0	0	153,261,423	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	7,378,652	0	0	7,378,652	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	90,433	0	0	90,433	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(999)	0	0	(999)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	7,468,086	0	0	7,468,086	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	2,489,827	0	0	2,489,827	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,978,259	0	0	4,978,259	0	0	0	0	0	0
24 Medical Loss Ratio	88.4%	0.0%	0.0%	88.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....	0	0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....	0	0	of Texas enrollees and Federal employees.)			0				

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

REPORT FOR DIVISION: **EI Paso**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	4,209	0	0	0	0	0	0	4,209	0	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	3,787	0	0	0	0	0	0	3,787	0	0
6. Current Year Member Months	49,149	0	0	0	0	0	0	49,149	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	74,436	0	0	0	0	0	0	74,436	0	0
8. Non-Physician	44,069	0	0	0	0	0	0	44,069	0	0
9. Total	118,505	0	0	0	0	0	0	118,505	0	0
10. Hospital Patient Days Incurred	6,645	0	0	0	0	0	0	6,645	0	0
11. Number of Inpatient Admissions	1,155	0	0	0	0	0	0	1,155	0	0
12. Health Premiums Written	48,747,624	0	0	0	0	0	0	48,747,624	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	49,018,373	0	0	0	0	0	0	49,018,373	0	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	48,187,826	0	0	0	0	0	0	48,187,826	0	0
18. Amount Incurred for Provision of Health Care Services	43,442,549	0	0	0	0	0	0	43,442,549	0	0

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**El Paso**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	3,787	0	0	3,787	0	0	0	0	0	0
2. MEMBER MONTHS.....	11,444	0	0	11,444	0	0	0	0	0	0
3. Direct Premium Income.....	10,787,824	0	0	10,787,824	0	0	XXXXXXXX	0	0	0
4. Net Premium Income.....	10,602,905	0	0	10,602,905	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	213,992	0	0	213,992	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	10,816,897	0	0	10,816,897	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	9,634,140	0	0	9,634,140	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	37,020	0	0	37,020	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	9,597,120	0	0	9,597,120	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	546,715	0	0	546,715	0	0	0	0	0	0
15. General Administrative Expenses.....	226,331	0	0	226,331	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	10,370,166	0	0	10,370,166	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	446,731	0	0	446,731	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(4,186)	0	0	(4,186)	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	0	0	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	442,545	0	0	442,545	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	125,036	0	0	125,036	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	317,509	0	0	317,509	0	0	0	0	0	0
24 Medical Loss Ratio	90.5%	0.0%	0.0%	90.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**El Paso**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	3,787	0	0	3,787	0	0	0	0	0	0
2. MEMBER MONTHS.....	49,149	0	0	49,149	0	0	0	0	0	0
3. Direct Premium Income.....	48,747,624	0	0	48,747,624	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	48,273,220	0	0	48,273,220	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	270,749	0	0	270,749	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	48,543,969	0	0	48,543,969	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	43,442,549	0	0	43,442,549	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	225,756	0	0	225,756	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	43,216,793	0	0	43,216,793	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,202,790	0	0	1,202,790	0	0	0	0	0	0
15. General Administrative Expenses.....	2,358,856	0	0	2,358,856	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	46,778,439	0	0	46,778,439	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,765,530	0	0	1,765,530	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	29,530	0	0	29,530	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(340)	0	0	(340)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	1,794,720	0	0	1,794,720	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	598,352	0	0	598,352	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,196,368	0	0	1,196,368	0	0	0	0	0	0
24 Medical Loss Ratio	89.5%	0.0%	0.0%	89.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

REPORT FOR DIVISION: **Rio Grande**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	8,245	0	0	0	0	0	0	8,245	0	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	7,859	0	0	0	0	0	0	7,859	0	0
6. Current Year Member Months	99,096	0	0	0	0	0	0	99,096	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	154,475	0	0	0	0	0	0	154,475	0	0
8. Non-Physician	91,454	0	0	0	0	0	0	91,454	0	0
9. Total	245,929	0	0	0	0	0	0	245,929	0	0
10. Hospital Patient Days Incurred	13,790	0	0	0	0	0	0	13,790	0	0
11. Number of Inpatient Admissions	2,397	0	0	0	0	0	0	2,397	0	0
12. Health Premiums Written	99,905,874	0	0	0	0	0	0	99,905,874	0	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	100,391,383	0	0	0	0	0	0	100,391,383	0	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	98,690,392	0	0	0	0	0	0	98,690,392	0	0
18. Amount Incurred for Provision of Health Care Services	90,604,038	0	0	0	0	0	0	90,604,038	0	0

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Rio Grande**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	7,859	0	0	7,859	0	0	0	0	0	0
2. MEMBER MONTHS.....	23,785	0	0	23,785	0	0	0	0	0	0
3. Direct Premium Income.....	22,763,414	0	0	22,763,414	0	0	XXXXXXXX	0	0	0
4. Net Premium Income.....	22,404,000	0	0	22,404,000	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	266,999	0	0	266,999	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	22,670,999	0	0	22,670,999	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	20,833,149	0	0	20,833,149	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	71,178	0	0	71,178	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	20,761,971	0	0	20,761,971	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,130,951	0	0	1,130,951	0	0	0	0	0	0
15. General Administrative Expenses.....	495,613	0	0	495,613	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	22,388,535	0	0	22,388,535	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	282,464	0	0	282,464	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(1,670)	0	0	(1,670)	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(970)	0	0	(970)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	279,824	0	0	279,824	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	64,714	0	0	64,714	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	215,110	0	0	215,110	0	0	0	0	0	0
24. Medical Loss Ratio	92.7%	0.0%	0.0%	92.7%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2013**

OF THE **Physicians Health Choice of Texas, LLC**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

**Rio Grande**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)  
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date  X

	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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	7,859	0	0	7,859	0	0	0	0	0	0
2. MEMBER MONTHS.....	99,096	0	0	99,096	0	0	0	0	0	0
3. Direct Premium Income.....	99,905,874	0	0	99,905,874	0	0	XXXXXXXX	0	0	0
4. Net Premium Income.....	99,005,978	0	0	99,005,978	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	485,509	0	0	485,509	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	0	0
8. Agg write-in for Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. Aggregate write-ins for other non-health revenues.....	0	0	0	0	0	0	0	0	0	0
10. TOTAL REVENUE (L4 to L9).....	99,491,487	0	0	99,491,487	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	90,604,038	0	0	90,604,038	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	404,519	0	0	404,519	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	90,199,519	0	0	90,199,519	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	2,466,862	0	0	2,466,862	0	0	0	0	0	0
15. General Administrative Expenses.....	4,837,896	0	0	4,837,896	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	97,504,277	0	0	97,504,277	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,987,210	0	0	1,987,210	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	11,786	0	0	11,786	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(2,228)	0	0	(2,228)	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	1,996,768	0	0	1,996,768	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	665,714	0	0	665,714	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,331,054	0	0	1,331,054	0	0	0	0	0	0
24 Medical Loss Ratio	91.1%	0.0%	0.0%	91.1%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				