

**TEXAS HMO SUPPLEMENT**

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2014**

OF THE **Cigna Dental Health 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. OTHER
			BASIC	ADVANTAGE	PART D					
1. ENROLLEES AT THE END OF REPT PERIOD.....	175,699	175,699	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	526,606	526,606	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	8,502,049	8,502,049	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	8,502,049	8,502,049	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	0	0	0	0	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).....	8,502,049	8,502,049	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	3,656,990	3,656,990	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	3,656,990	3,656,990	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	16,935	16,935	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	969,930	969,930	0	0	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).....	4,643,855	4,643,855	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,858,194	3,858,194	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(3,012)	(3,012)	0	0	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).....	3,855,182	3,855,182	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,397,279	1,397,279	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,457,903	2,457,903	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	43.0%	43.0%	0.0%	0.0%	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				

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**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.....	175,699	175,699	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	2,098,483	2,098,483	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	33,656,804	33,656,804	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	33,656,804	33,656,804	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	0	0	0	0	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).....	33,656,804	33,656,804	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	14,909,383	14,909,383	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	14,909,383	14,909,383	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	74,808	74,808	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	4,388,022	4,388,022	0	0	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).....	19,372,213	19,372,213	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	14,284,591	14,284,591	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(6,944)	(6,944)	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	1,146	1,146	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	14,278,793	14,278,793	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	5,160,699	5,160,699	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	9,118,094	9,118,094	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	44.3%	44.3%	0.0%	0.0%	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				