

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2014**

OF THE **Cigna Healthcare 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.....	13,337	13,337	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	41,918	41,918	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	22,848,476	22,848,476	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	22,516,486	22,516,486	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).....	22,516,486	22,516,486	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	19,590,648	19,590,648	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	460,117	460,117	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	19,130,531	19,130,531	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	505,770	505,770	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	3,044,585	3,044,585	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	1,314,420	1,314,420	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	23,995,306	23,995,306	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(1,478,820)	(1,478,820)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	136,407	136,407	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	12,304	12,304	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(1,330,109)	(1,330,109)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	632,524	632,524	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,962,633)	(1,962,633)	0	0	0	0	0	0	0	0
24. Medical Loss Ratio	85.0%	85.0%	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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STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2014**

OF THE **Cigna Healthcare of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION 'ON / 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.....	13,337	13,337	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	85,183	85,183	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	46,371,862	46,371,862	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	45,697,213	45,697,213	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).....	45,697,213	45,697,213	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	39,021,857	39,021,857	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	907,483	907,483	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	38,114,374	38,114,374	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,434,502	1,434,502	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	7,226,295	7,226,295	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	369,850	369,850	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	47,145,021	47,145,021	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(1,447,808)	(1,447,808)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	265,924	265,924	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	12,816	12,816	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(1,169,068)	(1,169,068)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	550,450	550,450	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,719,518)	(1,719,518)	0	0	0	0	0	0	0	0
24. Medical Loss Ratio	83.4%	83.4%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2014**

OF THE **Cigna Healthcare of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(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.....	267	267	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	839	839	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	457,520	457,520	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	450,016	450,016	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).....	450,016	450,016	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	391,813	391,813	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	9,203	9,203	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	382,610	382,610	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	10,115	10,115	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	60,213	60,213	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	26,288	26,288	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	479,227	479,227	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(29,211)	(29,211)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	2,728	2,728	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(120)	(120)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(26,602)	(26,602)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	12,650	12,650	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(39,252)	(39,252)	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	85.0%	85.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		1	(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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STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2014**

OF THE **Cigna Healthcare of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(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.....	267	267	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	1,704	1,704	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	927,988	927,988	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	913,631	913,631	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).....	913,631	913,631	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	780,437	780,437	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	18,150	18,150	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	762,287	762,287	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	28,690	28,690	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	143,847	143,847	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	7,397	7,397	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	942,222	942,222	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(28,591)	(28,591)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	5,318	5,318	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(109)	(109)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(23,381)	(23,381)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	11,009	11,009	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(34,390)	(34,390)	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	83.4%	83.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		1	(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 **JUNE 30, 2014**

OF THE **Cigna Healthcare of Texas, Inc.**

REPORT FOR DIVISION: **Houston**

(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	15,947	37	15,910	0	0	0	0	0	0	0
2. First Quarter	0									
3. Second Quarter	13,070	34	13,036	0	0	0	0	0	0	0
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	83,479	200	83,279	0	0	0	0	0	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	18,894	93	18,801	0	0	0	0	0	0	0
8. Non-Physician	4,647	23	4,624	0	0	0	0	0	0	0
9. Total	23,541	116	23,425	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	1,926	10	1,916	0	0	0	0	0	0	0
11. Number of Inpatient Admissions	266	1	265	0	0	0	0	0	0	0
12. Health Premiums Written	45,444,425	58,750	45,385,675	0	0	0	0	0	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	45,444,425	58,750	45,385,675	0	0	0	0	0	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	37,992,421	178,384	37,814,037	0	0	0	0	0	0	0
18. Amount Incurred for Provision of Health Care Services	38,241,420	188,372	38,053,048	0	0	0	0	0	0	0

TEXAS HMO SUPPLEMENT

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OF THE **Cigna Healthcare of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Houston

(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.....	13,070	13,070	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	41,079	41,079	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	22,390,956	22,390,956	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	22,066,470	22,066,470	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).....	22,066,470	22,066,470	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	19,198,835	19,198,835	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	450,914	450,914	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	18,747,921	18,747,921	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	495,655	495,655	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	2,984,372	2,984,372	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	1,288,132	1,288,132	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	23,516,079	23,516,079	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(1,449,609)	(1,449,609)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	133,679	133,679	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	12,424	12,424	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(1,303,507)	(1,303,507)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	619,874	619,874	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,923,381)	(1,923,381)	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	85.0%	85.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES..... 1 (Examples of non-taxable enrollees are State
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS..... 0 of Texas enrollees and Federal employees.)

* Other (identify products(s); eg Non-Risk Business, PPO):

0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2014**

OF THE **Cigna Healthcare of Texas, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Houston

(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.....	13,070	13,070	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	83,479	83,479	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	45,443,874	45,443,874	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	44,783,582	44,783,582	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).....	44,783,582	44,783,582	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	38,241,420	38,241,420	0	0	0	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	889,333	889,333	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	37,352,087	37,352,087	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,405,812	1,405,812	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	7,082,448	7,082,448	0	0	0	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	362,453	362,453	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	46,202,799	46,202,799	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(1,419,217)	(1,419,217)	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	260,606	260,606	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	12,925	12,925	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(1,145,687)	(1,145,687)	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	539,441	539,441	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,685,128)	(1,685,128)	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	83.4%	83.4%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES..... 1 (Examples of non-taxable enrollees are State
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS..... 0 of Texas enrollees and Federal employees.)

* Other (identify products(s); eg Non-Risk Business, PPO):

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