Print Date: 3/9/2016 2:27 PM;
2015ReptAEx.xls Ex II

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015** OF THE **Scott & White Health Plan**
(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**	200,160	109,875	28,365	0	0	43,923	17,997	0	0	0
2. **MEMBER MONTHS**	599,573	331,756	85,095	0	0	129,449	53,273	0	0	0
3. Direct Premium Income	183,404,565	89,576,008	36,573,726	0	0	27,502,839	29,751,992	XXXXXXXX	0	0
4. Net Premium Income	181,220,162	87,884,964	36,573,726	0	0	27,330,672	29,430,800	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	354,104	0	0	0	0	0	0	0	0	354,104
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)	181,574,266	87,884,964	36,573,726	0	0	27,330,672	29,430,800	0	0	354,104
11. Hospital & Medical Benefits	160,358,758	79,616,456	30,187,991	0	0	21,677,536	28,876,775	0	0	0
12. Net Reins Recoveries Incurred	3,251,796	3,179,443	0	0	0	72,353	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	157,106,962	76,437,013	30,187,991	0	0	21,605,183	28,876,775	0	0	0
14. Claims Adjustment Expenses	4,053,709	2,080,709	944,519	0	0	702,212	326,269	0	0	0
15. General Administrative Expenses	21,386,913	11,446,714	4,418,256	0	0	3,724,631	1,797,312	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)	182,547,584	89,964,436	35,550,766	0	0	26,032,026	31,000,356	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	(973,318)	(2,079,472)	1,022,960	0	0	1,298,646	(1,569,556)	0	0	354,104
19. Net Investments Gains / (Losses)	451,286	451,286	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses	51,222	0	0	0	0	0	0	0	0	51,222
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20)	(470,810)	(1,628,186)	1,022,960	0	0	1,298,646	(1,569,556)	0	0	405,326
22. Federal and foreign income taxes incurred	575,072	575,072	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22)	(1,045,882)	(2,203,258)	1,022,960	0	0	1,298,646	(1,569,556)	0	0	405,326
24 Medical Loss Ratio	86.7%	87.0%	82.5%	0.0%	0.0%	79.1%	98.1%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 46,588
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 314,952

(Examples of non-taxable enrollees are State of Texas enrollees and Federal employees.)

* Other (identify products(s); eg Non-Risk Business, PPO):
0

Print Date: 3/9/2016 2:27 PM;
2015ReptAEx.xls Ex II

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015** OF THE **Scott & White Health Plan**
(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**	200,160	109,875	28,365	0	0	43,923	17,997	0	0	0
2. **MEMBER MONTHS**	2,337,200	1,285,746	337,208	0	0	506,447	207,799	0	0	0
3. Direct Premium Income	696,857,115	345,581,174	124,785,371	0	0	112,963,532	113,527,038	XXXXXXXX	0	0
4. Net Premium Income	688,580,669	339,197,253	124,785,371	0	0	112,294,772	112,303,273	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	1,210,255	0	0	0	0	0	0	0	0	1,210,255
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)	689,790,924	339,197,253	124,785,371	0	0	112,294,772	112,303,273	0	0	1,210,255
11. Hospital & Medical Benefits	613,707,726	308,300,651	121,390,811	0	0	85,437,318	98,578,946	0	0	0
12. Net Reins Recoveries Incurred	8,816,696	8,255,790	0	0	0	560,906	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	604,891,030	300,044,861	121,390,811	0	0	84,876,412	98,578,946	0	0	0
14. Claims Adjustment Expenses	13,509,793	7,026,990	3,114,137	0	0	2,294,208	1,074,458	0	0	0
15. General Administrative Expenses	80,757,033	41,366,206	17,935,106	0	0	14,484,422	6,971,299	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)	699,157,856	348,438,057	142,440,054	0	0	101,655,042	106,624,703	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	(9,366,932)	(9,240,804)	(17,654,683)	0	0	10,639,730	5,678,570	0	0	1,210,255
19. Net Investments Gains / (Losses)	1,483,510	1,483,510	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses	(1,300,531)	0	0	0	0	0	0	0	0	(1,300,531)
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20)	(9,183,953)	(7,757,294)	(17,654,683)	0	0	10,639,730	5,678,570	0	0	(90,276)
22. Federal and foreign income taxes incurred	767,595	767,595	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22)	(9,951,548)	(8,524,889)	(17,654,683)	0	0	10,639,730	5,678,570	0	0	(90,276)
24 Medical Loss Ratio	87.8%	88.5%	97.3%	0.0%	0.0%	75.6%	87.8%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 46,588
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 534,722

(Examples of non-taxable enrollees are State of Texas enrollees and Federal employees.)

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