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TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015** OF THE **Community Health Choice, 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**	295,180	33,612	0	0	0	233,887	0	0	27,052	629
2. **MEMBER MONTHS**	901,259	94,980	0	0	0	721,987	0	0	82,394	1,898
3. Direct Premium Income	240,604,714	28,247,594	0	0	0	196,618,282	0	XXXXXXXX	15,738,838	0
4. Net Premium Income	229,173,710	17,468,319	0	0	0	196,025,032	0	0	15,680,359	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	20,845	0	0	0	0	0	0	0	0	20,845
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)	229,194,555	17,468,319	0	0	0	196,025,032	0	0	15,680,359	20,845
11. Hospital & Medical Benefits	216,047,381	22,733,132	0	0	0	180,256,757	0	0	13,057,492	0
12. Net Reins Recoveries Incurred	4,121,424	3,911,814	0	0	0	209,610	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	211,925,957	18,821,318	0	0	0	180,047,147	0	0	13,057,492	0
14. Claims Adjustment Expenses	3,611,765	409,821	0	0	0	2,967,851	0	0	234,093	0
15. General Administrative Expenses	18,994,750	2,232,863	0	0	0	15,513,038	0	0	1,254,109	(5,260)
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)	234,532,472	21,464,001	0	0	0	198,528,036	0	0	14,545,694	(5,260)
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	(5,337,917)	(3,995,683)	0	0	0	(2,503,005)	0	0	1,134,665	26,105
19. Net Investments Gains / (Losses)	256,797	76,578	0	0	0	167,094	0	0	13,125	0
20. Aggregate write-ins for other expenses	28,000	0	0	0	0	28,000	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20)	(5,053,120)	(3,919,105)	0	0	0	(2,307,911)	0	0	1,147,790	26,105
22. Federal and foreign income taxes incurred	0	0	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22)	(5,053,120)	(3,919,105)	0	0	0	(2,307,911)	0	0	1,147,790	26,105
24 Medical Loss Ratio	92.5%	107.7%	0.0%	0.0%	0.0%	91.8%	0.0%	0.0%	83.3%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 0
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 0

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

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

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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**	295,180	33,612	0	0	0	233,887	0	0	27,052	629
2. **MEMBER MONTHS**	3,570,010	388,843	0	0	0	2,851,651	0	0	320,171	9,345
3. Direct Premium Income	889,028,835	113,194,958	0	0	0	713,843,394	0	XXXXXXXX	61,990,483	.
4. Net Premium Income	851,431,186	77,914,240	0	0	0	711,728,309	0	0	61,788,637	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	80,773	0	0	0	0	0	0	0	0	80,773
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)	851,511,959	77,914,240	0	0	0	711,728,309	0	0	61,788,637	80,773
11. Hospital & Medical Benefits	768,712,732	64,541,032	0	0	0	646,812,652	0	0	57,359,048	0
12. Net Reins Recoveries Incurred	7,314,941	6,015,801	0	0	0	1,299,140	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	761,397,791	58,525,231	0	0	0	645,513,512	0	0	57,359,048	0
14. Claims Adjustment Expenses	14,417,360	1,319,329	0	0	0	12,051,759	0	0	1,046,272	0
15. General Administrative Expenses	71,152,558	17,819,263	0	0	0	48,969,600	0	0	4,251,292	112,403
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)	846,967,709	77,663,823	0	0	0	706,534,871	0	0	62,656,612	112,403
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	4,544,250	250,417	0	0	0	5,193,438	0	0	(867,975)	(31,630)
19. Net Investments Gains / (Losses)	836,833	76,578	0	0	0	699,526	0	0	60,729	0
20. Aggregate write-ins for other expenses	(25,521)	0	0	0	0	(25,521)	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20)	5,355,562	326,995	0	0	0	5,867,443	0	0	(807,246)	(31,630)
22. Federal and foreign income taxes incurred	0	0	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22)	5,355,562	326,995	0	0	0	5,867,443	0	0	(807,246)	(31,630)
24 Medical Loss Ratio	89.4%	75.1%	0.0%	0.0%	0.0%	90.7%	0.0%	0.0%	92.8%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 0
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 0

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

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