

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, 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.....	497,747	7,601	9,918	840	0	423,838	0	0	25,095	30,455
2. MEMBER MONTHS.....	1,506,254	24,074	31,632	2,545	0	1,279,985	0	0	76,076	91,942
3. Direct Premium Income.....	848,925,857	5,545,904	34,834,127	(1,104,232)	0	712,036,437	0	XXXXXXXX	11,190,883	86,422,738
4. Net Premium Income.....	848,722,327	5,394,758	34,832,833	(1,104,334)	0	711,992,229	0	0	11,187,780	86,419,060
5. Change in unearned premium reserve and reserve for rate credits.....	(7,181,089)	0	(1,273,089)	0	0	(5,686,260)	0	0	(290,205)	68,465
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).....	841,541,238	5,394,758	33,559,744	(1,104,334)	0	706,305,969	0	0	10,897,575	86,487,525
11. Hospital & Medical Benefits.....	735,134,037	6,222,195	12,549,100	(3,684,807)	0	630,371,607	0	0	8,172,004	81,503,939
12. Net Reins Recoveries Incurred.....	1,614,720	579,411	0	0	0	1,022,269	0	0	0	13,040
13. TOTAL MEDICAL & HOSP (L11 less L12).....	733,519,318	5,642,784	12,549,100	(3,684,807)	0	629,349,339	0	0	8,172,004	81,490,899
14. Claims Adjustment Expenses.....	19,855,914	198,093	1,111,660	93,986	0	15,363,678	0	0	242,985	2,845,512
15. General Administrative Expenses.....	66,152,079	(795,884)	3,285,496	(734,203)	0	53,985,583	0	0	587,165	9,823,923
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).....	819,527,311	5,044,993	16,946,256	(4,325,024)	0	698,698,599	0	0	9,002,153	94,160,334
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	22,013,927	349,766	16,613,487	3,220,690	0	7,607,370	0	0	1,895,422	(7,672,808)
19. Net Investments Gains / (Losses).....	1,161,571	28,868	101,635	30,275	0	938,352	0	0	(92,245)	154,687
20. Aggregate write-ins for other expenses.....	(55,574)	(55,574)	0	0	0	(0)	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	23,119,923	323,060	16,715,123	3,250,965	0	8,545,721	0	0	1,803,177	(7,518,122)
22. Federal and foreign income taxes incurred.....	9,760,967	434,542	2,571,943	3,809,061	0	1,414,586	0	0	4,754	1,526,082
23. NET INCOME/(LOSS) (L21 less L22).....	13,358,956	(111,482)	14,143,180	(558,096)	0	7,131,135	0	0	1,798,423	(9,044,204)
24 Medical Loss Ratio	86.4%	104.6%	36.0%	333.7%	0.0%	88.4%	0.0%	0.0%	73.0%	94.3%
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, 2015**

OF THE **Superior Healthplan, 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: 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.....	497,747	7,601	9,918	840	0	423,838	0	0	25,095	30,455
2. MEMBER MONTHS.....	5,692,419	102,392	78,747	18,892	0	5,068,576	0	0	300,975	122,837
3. Direct Premium Income.....	2,895,471,630	22,249,351	110,532,561	22,500,274	0	2,582,710,263	0	XXXXXXXX	42,582,993	114,896,188
4. Net Premium Income.....	2,894,479,240	21,453,842	110,529,382	22,499,518	0	2,582,534,362	0	0	42,570,861	114,891,274
5. Change in unearned premium reserve and reserve for rate credits.....	(12,422,430)	0	(1,273,089)	0	0	(10,566,098)	0	0	(651,708)	68,465
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).....	2,882,056,810	21,453,842	109,256,293	22,499,518	0	2,571,968,264	0	0	41,919,153	114,959,739
11. Hospital & Medical Benefits.....	2,540,705,696	19,332,129	81,426,635	20,130,354	0	2,275,000,127	0	0	35,020,804	109,795,648
12. Net Reins Recoveries Incurred.....	2,434,234	1,488,765	0	0	0	932,429	0	0	0	13,040
13. TOTAL MEDICAL & HOSP (L11 less L12).....	2,538,271,463	17,843,364	81,426,635	20,130,354	0	2,274,067,699	0	0	35,020,804	109,782,608
14. Claims Adjustment Expenses.....	67,266,651	837,295	3,486,505	633,877	0	58,272,302	0	0	1,008,081	3,028,591
15. General Administrative Expenses.....	243,840,116	2,458,390	9,397,786	2,184,472	0	215,703,833	0	0	3,767,210	10,328,426
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).....	2,849,378,230	21,139,049	94,310,926	22,948,703	0	2,548,043,833	0	0	39,796,094	123,139,625
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	32,678,580	314,794	14,945,366	(449,185)	0	23,924,431	0	0	2,123,059	(8,179,885)
19. Net Investments Gains / (Losses).....	3,878,014	28,868	147,012	30,275	0	3,460,768	0	0	56,405	154,687
20. Aggregate write-ins for other expenses.....	2,846,625	(267,547)	0	0	0	3,114,172	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	39,403,218	76,115	15,092,379	(418,910)	0	30,499,370	0	0	2,179,464	(8,025,199)
22. Federal and foreign income taxes incurred.....	25,761,096	191,764	976,581	201,111	0	22,989,388	0	0	374,692	1,027,561
23. NET INCOME/(LOSS) (L21 less L22).....	13,642,122	(115,649)	14,115,798	(620,021)	0	7,509,982	0	0	1,804,772	(9,052,760)
24 Medical Loss Ratio	87.7%	83.2%	73.7%	89.5%	0.0%	88.1%	0.0%	0.0%	82.3%	95.6%
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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **San Antonio**

(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	147,228	7,134	0	0	0	0	0	2,806	137,288	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	152,349	7,366	0	0	0	0	0	4,848	140,135	0
6. Current Year Member Months	1,811,193	86,922	0	0	0	0	0	50,148	1,674,123	0
Total Member Ambulatory Encounters for Year:										
7. Physician	982,999	27,772	0	0	0	0	0	125,666	829,562	0
8. Non-Physician	1,288,431	31,430	0	0	0	0	0	27,557	1,229,445	0
9. Total	2,271,431	59,201	0	0	0	0	0	153,223	2,059,006	0
10. Hospital Patient Days Incurred	96,844	486	0	0	0	0	0	12,869	83,489	0
11. Number of Inpatient Admissions	20,026	82	0	0	0	0	0	1,908	18,036	0
12. Health Premiums Written	890,519,104	11,939,990	0	0	0	0	0	58,849,855	819,729,259	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	887,397,713	11,789,278	0	0	0	0	0	58,340,620	817,267,815	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	762,312,328	10,317,693	0	0	0	0	0	50,895,833	701,098,802	0
18. Amount Incurred for Provision of Health Care Services	784,600,744	10,144,372	0	0	0	0	0	58,597,227	715,859,145	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio

(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.....	152,349	0	4,008	840	0	140,135	0	0	7,366	0
2. MEMBER MONTHS.....	461,194	0	12,689	2,545	0	423,715	0	0	22,245	0
3. Direct Premium Income.....	235,858,880	0	7,362,906	(1,104,232)	0	226,471,401	0	XXXXXXXX	3,128,805	0
4. Net Premium Income.....	235,842,241	0	7,362,391	(1,104,334)	0	226,456,269	0	0	3,127,915	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,368,882)	0	(509,235)	0	0	(800,168)	0	0	(59,479)	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).....	234,473,359	0	6,853,156	(1,104,334)	0	225,656,101	0	0	3,068,436	0
11. Hospital & Medical Benefits.....	190,658,121	0	954,060	(3,684,807)	0	190,946,794	0	0	2,442,074	0
12. Net Reins Recoveries Incurred.....	38,928	0	0	0	0	38,928	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	190,619,193	0	954,060	(3,684,807)	0	190,907,866	0	0	2,442,074	0
14. Claims Adjustment Expenses.....	5,429,020	0	441,412	93,986	0	4,824,679	0	0	68,941	0
15. General Administrative Expenses.....	18,145,158	0	1,288,701	(734,203)	0	17,427,136	0	0	163,523	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).....	214,193,371	0	2,684,174	(4,325,024)	0	213,159,682	0	0	2,674,539	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	20,279,988	0	4,168,982	3,220,690	0	12,496,418	0	0	393,897	0
19. Net Investments Gains / (Losses).....	302,220	0	31,754	30,275	0	267,508	0	0	(27,316)	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).....	20,582,208	0	4,200,736	3,250,965	0	12,763,926	0	0	366,581	0
22. Federal and foreign income taxes incurred.....	22,334,201	0	11,887,843	3,809,061	0	6,479,733	0	0	157,565	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,751,993)	0	(7,687,106)	(558,096)	0	6,284,193	0	0	209,016	0
24 Medical Loss Ratio	80.8%	0.0%	13.0%	333.7%	0.0%	84.3%	0.0%	0.0%	78.1%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio

(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.....	152,349	0	4,008	840	0	140,135	0	0	7,366	0
2. MEMBER MONTHS.....	1,811,193	0	31,256	18,892	0	1,674,123	0	0	86,922	0
3. Direct Premium Income.....	890,519,104	0	36,349,581	22,500,274	0	819,729,259	0	XXXXXXXX	11,939,990	0
4. Net Premium Income.....	890,453,710	0	36,348,323	22,499,518	0	819,669,362	0	0	11,936,507	0
5. Change in unearned premium reserve and reserve for rate credits.....	(3,121,391)	0	(509,235)	0	0	(2,461,444)	0	0	(150,712)	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).....	887,332,319	0	35,839,088	22,499,518	0	817,207,918	0	0	11,785,795	0
11. Hospital & Medical Benefits.....	784,600,744	0	38,466,873	20,130,354	0	715,859,145	0	0	10,144,372	0
12. Net Reins Recoveries Incurred.....	(85,350)	0	0	0	0	(85,350)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	784,686,094	0	38,466,873	20,130,354	0	715,944,495	0	0	10,144,372	0
14. Claims Adjustment Expenses.....	21,476,553	0	1,364,102	633,877	0	19,193,936	0	0	284,636	0
15. General Administrative Expenses.....	77,806,950	0	3,621,635	2,184,472	0	70,941,664	0	0	1,059,178	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).....	883,969,597	0	43,452,611	22,948,703	0	806,080,096	0	0	11,488,187	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,362,722	0	(7,613,523)	(449,185)	0	11,127,821	0	0	297,608	0
19. Net Investments Gains / (Losses).....	1,193,969	0	48,224	30,275	0	1,099,612	0	0	15,859	0
20. Aggregate write-ins for other expenses.....	1,375,482	0	0	0	0	1,375,482	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	5,932,173	0	(7,565,299)	(418,910)	0	13,602,915	0	0	313,467	0
22. Federal and foreign income taxes incurred.....	7,931,368	0	320,346	201,111	0	7,304,565	0	0	105,347	0
23. NET INCOME/(LOSS) (L21 less L22).....	(1,999,195)	0	(7,885,644)	(620,021)	0	6,298,350	0	0	208,120	0
24 Medical Loss Ratio	88.1%	0.0%	105.8%	89.5%	0.0%	87.3%	0.0%	0.0%	85.0%	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, 2015**

OF THE **Superior Healthplan, Inc.**

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	64,622	4,669	0	0	0	0	0	0	59,953	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	60,371	4,148	0	0	0	0	0	0	56,223	0
6. Current Year Member Months	742,518	52,165	0	0	0	0	0	0	690,353	0
Total Member Ambulatory Encounters for Year:										
7. Physician	349,043	20,173	0	0	0	0	0	0	328,870	0
8. Non-Physician	159,568	8,977	0	0	0	0	0	0	150,590	0
9. Total	508,610	29,150	0	0	0	0	0	0	479,460	0
10. Hospital Patient Days Incurred	18,083	240	0	0	0	0	0	0	17,843	0
11. Number of Inpatient Admissions	4,863	74	0	0	0	0	0	0	4,789	0
12. Health Premiums Written	162,747,708	6,522,952	0	0	0	0	0	0	156,224,756	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	161,040,501	6,289,225	0	0	0	0	0	0	154,751,276	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	132,357,154	4,752,065	0	0	0	0	0	0	127,605,089	0
18. Amount Incurred for Provision of Health Care Services	134,489,262	4,621,402	0	0	0	0	0	0	129,867,861	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	60,371	0	0	0	0	56,223	0	0	4,148	0
2. MEMBER MONTHS.....	183,507	0	0	0	0	170,739	0	0	12,768	0
3. Direct Premium Income.....	10,835,354	0	0	0	0	9,175,207	0	XXXXXXXX	1,660,147	0
4. Net Premium Income.....	10,828,013	0	0	0	0	9,168,377	0	0	1,659,637	0
5. Change in unearned premium reserve and reserve for rate credits.....	(423,061)	0	0	0	0	(326,468)	0	0	(96,593)	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).....	10,404,952	0	0	0	0	8,841,909	0	0	1,563,044	0
11. Hospital & Medical Benefits.....	34,358,742	0	0	0	0	33,304,380	0	0	1,054,363	0
12. Net Reins Recoveries Incurred.....	(0)	0	0	0	0	(0)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	34,358,743	0	0	0	0	33,304,380	0	0	1,054,363	0
14. Claims Adjustment Expenses.....	948,774	0	0	0	0	913,759	0	0	35,016	0
15. General Administrative Expenses.....	1,828,884	0	0	0	0	1,759,347	0	0	69,537	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).....	37,136,401	0	0	0	0	35,977,485	0	0	1,158,916	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(26,731,449)	0	0	0	0	(27,135,577)	0	0	404,128	0
19. Net Investments Gains / (Losses).....	(143,318)	0	0	0	0	(125,742)	0	0	(17,575)	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).....	(26,874,766)	0	0	0	0	(27,261,319)	0	0	386,553	0
22. Federal and foreign income taxes incurred.....	(33,208,579)	0	0	0	0	(32,702,586)	0	0	(505,993)	0
23. NET INCOME/(LOSS) (L21 less L22).....	6,333,813	0	0	0	0	5,441,267	0	0	892,545	0
24 Medical Loss Ratio	317.3%	0.0%	0.0%	0.0%	0.0%	363.3%	0.0%	0.0%	63.5%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	60,371	0	0	0	0	56,223	0	0	4,148	0
2. MEMBER MONTHS.....	742,518	0	0	0	0	690,353	0	0	52,165	0
3. Direct Premium Income.....	162,747,708	0	0	0	0	156,224,756	0	XXXXXXXX	6,522,952	0
4. Net Premium Income.....	162,717,950	0	0	0	0	156,197,093	0	0	6,520,858	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,707,207)	0	0	0	0	(1,473,480)	0	0	(233,727)	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).....	161,010,743	0	0	0	0	154,723,613	0	0	6,287,131	0
11. Hospital & Medical Benefits.....	134,489,262	0	0	0	0	129,867,861	0	0	4,621,402	0
12. Net Reins Recoveries Incurred.....	(44,535)	0	0	0	0	(44,535)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	134,533,798	0	0	0	0	129,912,396	0	0	4,621,402	0
14. Claims Adjustment Expenses.....	3,891,306	0	0	0	0	3,740,552	0	0	150,755	0
15. General Administrative Expenses.....	14,426,069	0	0	0	0	13,861,027	0	0	565,042	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).....	152,851,173	0	0	0	0	147,513,974	0	0	5,337,199	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	8,159,570	0	0	0	0	7,209,638	0	0	949,932	0
19. Net Investments Gains / (Losses).....	216,651	0	0	0	0	208,192	0	0	8,460	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).....	8,376,222	0	0	0	0	7,417,830	0	0	958,392	0
22. Federal and foreign income taxes incurred.....	1,439,185	0	0	0	0	1,382,988	0	0	56,197	0
23. NET INCOME/(LOSS) (L21 less L22).....	6,937,037	0	0	0	0	6,034,842	0	0	902,194	0
24 Medical Loss Ratio	82.7%	0.0%	0.0%	0.0%	0.0%	83.2%	0.0%	0.0%	70.9%	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, 2015**

OF THE **Superior Healthplan, Inc.**

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	108,695	9,785	0	0	0	0	0	0	98,910	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	109,456	15,850	0	0	0	0	0	0	93,606	0
6. Current Year Member Months	1,347,176	202,940	0	0	0	0	0	0	1,144,236	0
Total Member Ambulatory Encounters for Year:										
7. Physician	505,470	72,371	0	0	0	0	0	0	433,098	0
8. Non-Physician	465,198	72,167	0	0	0	0	0	0	393,031	0
9. Total	970,668	144,538	0	0	0	0	0	0	826,129	0
10. Hospital Patient Days Incurred	35,158	2,908	0	0	0	0	0	0	32,250	0
11. Number of Inpatient Admissions	8,437	608	0	0	0	0	0	0	7,829	0
12. Health Premiums Written	287,813,350	38,553,015	0	0	0	0	0	0	249,260,335	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	285,223,651	38,385,316	0	0	0	0	0	0	246,838,335	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	243,348,737	28,592,577	0	0	0	0	0	0	214,756,160	0
18. Amount Incurred for Provision of Health Care Services	246,178,330	33,285,185	0	0	0	0	0	0	212,893,145	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	109,456	7,601	0	0	0	93,606	0	0	8,249	0
2. MEMBER MONTHS.....	302,298	24,074	0	0	0	284,096	0	0	25,023	(30,895)
3. Direct Premium Income.....	47,886,957	5,545,904	0	0	0	66,601,917	0	XXXXXXXX	4,212,586	(28,473,450)
4. Net Premium Income.....	47,724,623	5,394,758	0	0	0	66,590,553	0	0	4,211,525	(28,472,214)
5. Change in unearned premium reserve and reserve for rate credits.....	(2,676,845)	0	0	0	0	(2,590,969)	0	0	(85,876)	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).....	45,047,778	5,394,758	0	0	0	63,999,584	0	0	4,125,649	(28,472,214)
11. Hospital & Medical Benefits.....	32,688,797	6,222,195	0	0	0	51,614,350	0	0	3,143,961	(28,291,709)
12. Net Reins Recoveries Incurred.....	839,671	579,411	0	0	0	260,260	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	31,849,126	5,642,784	0	0	0	51,354,090	0	0	3,143,961	(28,291,709)
14. Claims Adjustment Expenses.....	1,514,491	198,093	0	0	0	1,408,768	0	0	90,709	(183,079)
15. General Administrative Expenses.....	3,253,632	(795,884)	0	0	0	4,313,282	0	0	240,738	(504,503)
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).....	36,617,249	5,044,993	0	0	0	57,076,140	0	0	3,475,408	(28,979,291)
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	8,430,529	349,766	0	0	0	6,923,445	0	0	650,241	507,077
19. Net Investments Gains / (Losses).....	(19,861)	240,841	0	0	0	(232,948)	0	0	(27,753)	0
20. Aggregate write-ins for other expenses.....	(267,547)	(267,547)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	8,143,121	323,060	0	0	0	6,690,497	0	0	622,488	507,077
22. Federal and foreign income taxes incurred.....	4,058,627	434,542	0	0	0	2,726,516	0	0	399,048	498,521
23. NET INCOME/(LOSS) (L21 less L22).....	4,084,494	(111,482)	0	0	0	3,963,981	0	0	223,440	8,556
24 Medical Loss Ratio	66.7%	104.6%	0.0%	0.0%	0.0%	77.1%	0.0%	0.0%	74.7%	99.4%
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, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	109,456	7,601	0	0	0	93,606	0	0	8,249	0
2. MEMBER MONTHS.....	1,347,176	102,392	0	0	0	1,144,236	0	0	100,548	0
3. Direct Premium Income.....	287,813,350	22,249,351	0	0	0	249,260,335	0	XXXXXXXX	16,303,664	0
4. Net Premium Income.....	286,967,891	21,453,842	0	0	0	249,214,481	0	0	16,299,567	0
5. Change in unearned premium reserve and reserve for rate credits.....	(2,589,699)	0	0	0	0	(2,422,000)	0	0	(167,699)	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).....	284,378,192	21,453,842	0	0	0	246,792,481	0	0	16,131,868	0
11. Hospital & Medical Benefits.....	246,178,330	19,332,129	0	0	0	212,893,145	0	0	13,953,056	0
12. Net Reins Recoveries Incurred.....	1,501,934	1,488,765	0	0	0	13,169	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	244,676,396	17,843,364	0	0	0	212,879,976	0	0	13,953,056	0
14. Claims Adjustment Expenses.....	7,177,734	837,295	0	0	0	5,952,869	0	0	387,570	0
15. General Administrative Expenses.....	26,038,806	2,458,390	0	0	0	22,130,728	0	0	1,449,689	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).....	277,892,936	21,139,049	0	0	0	240,963,573	0	0	15,790,315	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	6,485,256	314,794	0	0	0	5,828,909	0	0	341,553	0
19. Net Investments Gains / (Losses).....	382,651	28,868	0	0	0	332,077	0	0	21,707	0
20. Aggregate write-ins for other expenses.....	(267,547)	(267,547)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	6,600,360	76,115	0	0	0	6,160,986	0	0	363,260	0
22. Federal and foreign income taxes incurred.....	2,541,898	191,764	0	0	0	2,205,940	0	0	144,194	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,058,462	(115,649)	0	0	0	3,955,046	0	0	219,066	0
24 Medical Loss Ratio	85.3%	83.2%	0.0%	0.0%	0.0%	85.4%	0.0%	0.0%	85.6%	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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Lubbock**

(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	37,023	3,912	0	0	0	0	0	0	33,111	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	38,482	4,271	0	0	0	0	0	0	34,211	0
6. Current Year Member Months	454,128	48,747	0	0	0	0	0	0	405,381	0
Total Member Ambulatory Encounters for Year:										
7. Physician	184,014	14,010	0	0	0	0	0	0	170,004	0
8. Non-Physician	265,347	15,093	0	0	0	0	0	0	250,254	0
9. Total	449,361	29,103	0	0	0	0	0	0	420,258	0
10. Hospital Patient Days Incurred	18,585	196	0	0	0	0	0	0	18,389	0
11. Number of Inpatient Admissions	4,230	53	0	0	0	0	0	0	4,177	0
12. Health Premiums Written	183,321,657	5,763,199	0	0	0	0	0	0	177,558,458	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	182,525,172	5,686,205	0	0	0	0	0	0	176,838,967	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	149,049,866	4,749,587	0	0	0	0	0	0	144,300,279	0
18. Amount Incurred for Provision of Health Care Services	157,443,336	4,620,500	0	0	0	0	0	0	152,822,836	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Lubbock

(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.....	38,482	0	0	0	0	34,211	0	0	4,271	0
2. MEMBER MONTHS.....	116,215	0	0	0	0	103,376	0	0	12,839	0
3. Direct Premium Income.....	53,665,956	0	0	0	0	52,045,956	0	XXXXXXXX	1,620,000	0
4. Net Premium Income.....	53,661,704	0	0	0	0	52,042,217	0	0	1,619,486	0
5. Change in unearned premium reserve and reserve for rate credits.....	(172,961)	0	0	0	0	(131,589)	0	0	(41,372)	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).....	53,488,743	0	0	0	0	51,910,628	0	0	1,578,114	0
11. Hospital & Medical Benefits.....	44,188,161	0	0	0	0	43,049,757	0	0	1,138,404	0
12. Net Reins Recoveries Incurred.....	723,081	0	0	0	0	723,081	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	43,465,080	0	0	0	0	42,326,676	0	0	1,138,404	0
14. Claims Adjustment Expenses.....	1,096,110	0	0	0	0	1,060,590	0	0	35,520	0
15. General Administrative Expenses.....	3,870,299	0	0	0	0	3,791,417	0	0	78,882	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).....	48,431,489	0	0	0	0	47,178,683	0	0	1,252,805	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	5,057,254	0	0	0	0	4,731,945	0	0	325,309	0
19. Net Investments Gains / (Losses).....	20,667	0	0	0	0	36,757	0	0	(16,089)	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).....	5,077,921	0	0	0	0	4,768,702	0	0	309,220	0
22. Federal and foreign income taxes incurred.....	(573,937)	0	0	0	0	(511,836)	0	0	(62,102)	0
23. NET INCOME/(LOSS) (L21 less L22).....	5,651,859	0	0	0	0	5,280,538	0	0	371,321	0
24 Medical Loss Ratio	81.0%	0.0%	0.0%	0.0%	0.0%	81.3%	0.0%	0.0%	70.3%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Lubbock

(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.....	38,482	0	0	0	0	34,211	0	0	4,271	0
2. MEMBER MONTHS.....	454,128	0	0	0	0	405,381	0	0	48,747	0
3. Direct Premium Income.....	183,321,657	0	0	0	0	177,558,458	0	XXXXXXXX	5,763,199	0
4. Net Premium Income.....	183,304,989	0	0	0	0	177,543,744	0	0	5,761,244	0
5. Change in unearned premium reserve and reserve for rate credits.....	(796,485)	0	0	0	0	(719,491)	0	0	(76,994)	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).....	182,508,504	0	0	0	0	176,824,253	0	0	5,684,250	0
11. Hospital & Medical Benefits.....	157,443,336	0	0	0	0	152,822,836	0	0	4,620,500	0
12. Net Reins Recoveries Incurred.....	1,063,550	0	0	0	0	1,063,550	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	156,379,786	0	0	0	0	151,759,286	0	0	4,620,500	0
14. Claims Adjustment Expenses.....	4,059,754	0	0	0	0	3,923,288	0	0	136,466	0
15. General Administrative Expenses.....	15,247,000	0	0	0	0	14,736,134	0	0	510,866	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).....	175,686,540	0	0	0	0	170,418,708	0	0	5,267,831	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	6,821,964	0	0	0	0	6,405,545	0	0	416,419	0
19. Net Investments Gains / (Losses).....	245,578	0	0	0	0	237,930	0	0	7,649	0
20. Aggregate write-ins for other expenses.....	253,508	0	0	0	0	253,508	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	7,321,050	0	0	0	0	6,896,983	0	0	424,068	0
22. Federal and foreign income taxes incurred.....	1,631,342	0	0	0	0	1,580,533	0	0	50,808	0
23. NET INCOME/(LOSS) (L21 less L22).....	5,689,709	0	0	0	0	5,316,450	0	0	373,259	0
24 Medical Loss Ratio	85.3%	0.0%	0.0%	0.0%	0.0%	85.5%	0.0%	0.0%	80.2%	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, 2015**

OF THE **Superior Healthplan, Inc.**

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	31,203	1,082	0	0	0	0	0	0	30,121	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	31,379	1,061	0	0	0	0	0	0	30,318	0
6. Current Year Member Months	377,171	12,593	0	0	0	0	0	0	364,578	0
Total Member Ambulatory Encounters for Year:										
7. Physician	168,398	4,827	0	0	0	0	0	0	163,571	0
8. Non-Physician	361,625	2,770	0	0	0	0	0	0	358,855	0
9. Total	530,023	7,597	0	0	0	0	0	0	522,426	0
10. Hospital Patient Days Incurred	15,321	32	0	0	0	0	0	0	15,289	0
11. Number of Inpatient Admissions	2,987	16	0	0	0	0	0	0	2,971	0
12. Health Premiums Written	252,002,606	2,053,187	0	0	0	0	0	0	249,949,418	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	250,683,673	2,030,611	0	0	0	0	0	0	248,653,061	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	214,302,164	1,729,587	0	0	0	0	0	0	212,572,577	0
18. Amount Incurred for Provision of Health Care Services	223,168,084	1,681,474	0	0	0	0	0	0	221,486,610	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	31,379	0	0	0	0	30,318	0	0	1,061	0
2. MEMBER MONTHS.....	95,290	0	0	0	0	92,089	0	0	3,201	0
3. Direct Premium Income.....	70,602,550	0	0	0	0	70,033,205	0	XXXXXXXX	569,344	0
4. Net Premium Income.....	70,599,526	0	0	0	0	70,030,310	0	0	569,217	0
5. Change in unearned premium reserve and reserve for rate credits.....	(474,839)	0	0	0	0	(467,954)	0	0	(6,885)	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).....	70,124,687	0	0	0	0	69,562,356	0	0	562,332	0
11. Hospital & Medical Benefits.....	62,068,364	0	0	0	0	61,675,162	0	0	393,202	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	62,068,364	0	0	0	0	61,675,162	0	0	393,202	0
14. Claims Adjustment Expenses.....	1,457,940	0	0	0	0	1,445,142	0	0	12,798	0
15. General Administrative Expenses.....	5,414,022	0	0	0	0	5,379,538	0	0	34,483	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).....	68,940,326	0	0	0	0	68,499,842	0	0	440,483	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,184,362	0	0	0	0	1,062,514	0	0	121,848	0
19. Net Investments Gains / (Losses).....	148,963	0	0	0	0	152,473	0	0	(3,510)	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).....	1,333,324	0	0	0	0	1,214,986	0	0	118,338	0
22. Federal and foreign income taxes incurred.....	2,013,292	0	0	0	0	1,997,054	0	0	16,238	0
23. NET INCOME/(LOSS) (L21 less L22).....	(679,968)	0	0	0	0	(782,068)	0	0	102,100	0
24 Medical Loss Ratio	87.9%	0.0%	0.0%	0.0%	0.0%	88.1%	0.0%	0.0%	69.1%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(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.....	31,379	0	0	0	0	30,318	0	0	1,061	0
2. MEMBER MONTHS.....	377,171	0	0	0	0	364,578	0	0	12,593	0
3. Direct Premium Income.....	252,002,606	0	0	0	0	249,949,418	0	XXXXXXXX	2,053,187	0
4. Net Premium Income.....	251,990,628	0	0	0	0	249,937,944	0	0	2,052,685	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,318,933)	0	0	0	0	(1,296,357)	0	0	(22,576)	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).....	250,671,695	0	0	0	0	248,641,587	0	0	2,030,109	0
11. Hospital & Medical Benefits.....	223,168,084	0	0	0	0	221,486,610	0	0	1,681,474	0
12. Net Reins Recoveries Incurred.....	(14,406)	0	0	0	0	(14,406)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	223,182,490	0	0	0	0	221,501,016	0	0	1,681,474	0
14. Claims Adjustment Expenses.....	5,680,371	0	0	0	0	5,631,718	0	0	48,653	0
15. General Administrative Expenses.....	21,139,674	0	0	0	0	20,957,239	0	0	182,434	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).....	250,002,535	0	0	0	0	248,089,973	0	0	1,912,561	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	669,161	0	0	0	0	551,614	0	0	117,547	0
19. Net Investments Gains / (Losses).....	337,297	0	0	0	0	334,565	0	0	2,732	0
20. Aggregate write-ins for other expenses.....	558,091	0	0	0	0	558,091	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	1,564,548	0	0	0	0	1,444,269	0	0	120,279	0
22. Federal and foreign income taxes incurred.....	2,240,614	0	0	0	0	2,222,468	0	0	18,146	0
23. NET INCOME/(LOSS) (L21 less L22).....	(676,066)	0	0	0	0	(778,199)	0	0	102,133	0
24 Medical Loss Ratio	88.6%	0.0%	0.0%	0.0%	0.0%	88.6%	0.0%	0.0%	81.9%	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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Dallas**

(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	26,414	0	0	0	0	0	0	0	26,414	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	32,123	0	0	0	0	0	0	2,663	29,460	0
6. Current Year Member Months	364,138	0	0	0	0	0	0	21,418	342,720	0
Total Member Ambulatory Encounters for Year:										
7. Physician	207,962	0	0	0	0	0	0	36,947	171,015	0
8. Non-Physician	399,873	0	0	0	0	0	0	7,480	392,393	0
9. Total	607,835	0	0	0	0	0	0	44,427	563,408	0
10. Hospital Patient Days Incurred	28,230	0	0	0	0	0	0	4,355	23,875	0
11. Number of Inpatient Admissions	4,762	0	0	0	0	0	0	610	4,152	0
12. Health Premiums Written	414,533,962	0	0	0	0	0	0	31,203,655	383,330,308	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	411,818,668	0	0	0	0	0	0	30,821,728	380,996,941	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	327,975,013	0	0	0	0	0	0	11,883,386	316,091,627	0
18. Amount Incurred for Provision of Health Care Services	348,522,534	0	0	0	0	0	0	16,382,566	332,139,968	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, 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.....	32,123	0	2,663	0	0	29,460	0	0	0	0
2. MEMBER MONTHS.....	95,810	0	8,754	0	0	87,056	0	0	0	0
3. Direct Premium Income.....	128,315,969	0	12,109,328	0	0	116,206,642	0	XXXXXXXX	0	0
4. Net Premium Income.....	128,313,555	0	12,108,965	0	0	116,204,590	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,483,973)	0	(381,927)	0	0	(1,102,046)	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).....	126,829,582	0	11,727,038	0	0	115,102,544	0	0	0	0
11. Hospital & Medical Benefits.....	99,580,179	0	4,892,231	0	0	94,687,948	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).....	99,580,179	0	4,892,231	0	0	94,687,948	0	0	0	0
14. Claims Adjustment Expenses.....	2,648,639	0	279,087	0	0	2,369,552	0	0	0	0
15. General Administrative Expenses.....	9,632,566	0	808,813	0	0	8,823,753	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).....	111,861,384	0	5,980,132	0	0	105,881,253	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	14,968,198	0	5,746,906	0	0	9,221,292	0	0	0	0
19. Net Investments Gains / (Losses).....	366,878	0	29,175	0	0	337,703	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).....	15,335,076	0	5,776,081	0	0	9,558,995	0	0	0	0
22. Federal and foreign income taxes incurred.....	(3,113,198)	0	(5,121,398)	0	0	2,008,199	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	18,448,274	0	10,897,478	0	0	7,550,796	0	0	0	0
24 Medical Loss Ratio	77.6%	0.0%	40.4%	0.0%	0.0%	81.5%	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, 2015**

OF THE **Superior Healthplan, 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.....	32,123	0	2,663	0	0	29,460	0	0	0	0
2. MEMBER MONTHS.....	364,138	0	21,418	0	0	342,720	0	0	0	0
3. Direct Premium Income.....	414,533,962	0	31,203,655	0	0	383,330,308	0	XXXXXXXX	0	0
4. Net Premium Income.....	414,525,517	0	31,202,785	0	0	383,322,732	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(2,715,294)	0	(381,927)	0	0	(2,333,367)	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).....	411,810,223	0	30,820,858	0	0	380,989,365	0	0	0	0
11. Hospital & Medical Benefits.....	348,522,534	0	16,382,566	0	0	332,139,968	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).....	348,522,534	0	16,382,566	0	0	332,139,968	0	0	0	0
14. Claims Adjustment Expenses.....	9,185,386	0	858,485	0	0	8,326,901	0	0	0	0
15. General Administrative Expenses.....	33,337,687	0	2,355,680	0	0	30,982,007	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).....	391,045,607	0	19,596,732	0	0	371,448,876	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	20,764,616	0	11,224,126	0	0	9,540,490	0	0	0	0
19. Net Investments Gains / (Losses).....	554,120	0	41,472	0	0	512,648	0	0	0	0
20. Aggregate write-ins for other expenses.....	927,091	0	0	0	0	927,091	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	22,245,827	0	11,265,598	0	0	10,980,229	0	0	0	0
22. Federal and foreign income taxes incurred.....	3,680,942	0	275,490	0	0	3,405,451	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	18,564,885	0	10,990,107	0	0	7,574,778	0	0	0	0
24. Medical Loss Ratio	84.1%	0.0%	52.5%	0.0%	0.0%	86.6%	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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **MRSAWest**

(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	17,361	0	0	0	0	0	0	0	17,361	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	20,614	0	0	0	0	0	0	0	20,614	0
6. Current Year Member Months	240,053	0	0	0	0	0	0	0	240,053	0
Total Member Ambulatory Encounters for Year:										
7. Physician	99,929	0	0	0	0	0	0	0	99,929	0
8. Non-Physician	252,031	0	0	0	0	0	0	0	252,031	0
9. Total	351,960	0	0	0	0	0	0	0	351,960	0
10. Hospital Patient Days Incurred	14,577	0	0	0	0	0	0	0	14,577	0
11. Number of Inpatient Admissions	2,623	0	0	0	0	0	0	0	2,623	0
12. Health Premiums Written	291,591,353	0	0	0	0	0	0	0	291,591,353	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	291,910,840	0	0	0	0	0	0	0	291,910,840	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	233,402,260	0	0	0	0	0	0	0	233,402,260	0
18. Amount Incurred for Provision of Health Care Services	265,464,148	0	0	0	0	0	0	0	265,464,148	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSWest

(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.....	20,614	0	0	0	0	20,614	0	0	0	0
2. MEMBER MONTHS.....	61,890	0	0	0	0	61,890	0	0	0	0
3. Direct Premium Income.....	88,609,047	0	0	0	0	88,609,047	0	XXXXXXXX	0	0
4. Net Premium Income.....	88,607,900	0	0	0	0	88,607,900	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	143,598	0	0	0	0	143,598	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).....	88,751,498	0	0	0	0	88,751,498	0	0	0	0
11. Hospital & Medical Benefits.....	72,915,910	0	0	0	0	72,915,910	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).....	72,915,910	0	0	0	0	72,915,910	0	0	0	0
14. Claims Adjustment Expenses.....	1,594,112	0	0	0	0	1,594,112	0	0	0	0
15. General Administrative Expenses.....	6,425,140	0	0	0	0	6,425,140	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).....	80,935,162	0	0	0	0	80,935,162	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	7,816,336	0	0	0	0	7,816,336	0	0	0	0
19. Net Investments Gains / (Losses).....	269,509	0	0	0	0	269,509	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).....	8,085,845	0	0	0	0	8,085,845	0	0	0	0
22. Federal and foreign income taxes incurred.....	11,919,789	0	0	0	0	11,919,789	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(3,833,944)	0	0	0	0	(3,833,944)	0	0	0	0
24 Medical Loss Ratio	82.3%	0.0%	0.0%	0.0%	0.0%	82.3%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSWest

(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.....	20,614	0	0	0	0	20,614	0	0	0	0
2. MEMBER MONTHS.....	240,053	0	0	0	0	240,053	0	0	0	0
3. Direct Premium Income.....	291,591,353	0	0	0	0	291,591,353	0	XXXXXXXX	0	0
4. Net Premium Income.....	291,586,813	0	0	0	0	291,586,813	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	319,487	0	0	0	0	319,487	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).....	291,906,300	0	0	0	0	291,906,300	0	0	0	0
11. Hospital & Medical Benefits.....	265,464,148	0	0	0	0	265,464,148	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).....	265,464,148	0	0	0	0	265,464,148	0	0	0	0
14. Claims Adjustment Expenses.....	5,995,261	0	0	0	0	5,995,261	0	0	0	0
15. General Administrative Expenses.....	22,224,231	0	0	0	0	22,224,231	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).....	293,683,640	0	0	0	0	293,683,640	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(1,777,340)	0	0	0	0	(1,777,340)	0	0	0	0
19. Net Investments Gains / (Losses).....	392,781	0	0	0	0	392,781	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).....	(1,384,559)	0	0	0	0	(1,384,559)	0	0	0	0
22. Federal and foreign income taxes incurred.....	2,609,187	0	0	0	0	2,609,187	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(3,993,746)	0	0	0	0	(3,993,746)	0	0	0	0
24. Medical Loss Ratio	91.0%	0.0%	0.0%	0.0%	0.0%	91.0%	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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **MRSACentral**

(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	13,055	0	0	0	0	0	0	0	13,055	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	15,551	0	0	0	0	0	0	0	15,551	0
6. Current Year Member Months	180,957	0	0	0	0	0	0	0	180,957	0
Total Member Ambulatory Encounters for Year:										
7. Physician	102,874	0	0	0	0	0	0	0	102,874	0
8. Non-Physician	221,105	0	0	0	0	0	0	0	221,105	0
9. Total	323,978	0	0	0	0	0	0	0	323,978	0
10. Hospital Patient Days Incurred	11,930	0	0	0	0	0	0	0	11,930	0
11. Number of Inpatient Admissions	2,481	0	0	0	0	0	0	0	2,481	0
12. Health Premiums Written	219,620,120	0	0	0	0	0	0	0	219,620,120	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	220,178,647	0	0	0	0	0	0	0	220,178,647	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	183,592,215	0	0	0	0	0	0	0	183,592,215	0
18. Amount Incurred for Provision of Health Care Services	206,224,526	0	0	0	0	0	0	0	206,224,526	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSACentral

(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.....	15,551	0	0	0	0	15,551	0	0	0	0
2. MEMBER MONTHS.....	46,870	0	0	0	0	46,870	0	0	0	0
3. Direct Premium Income.....	67,308,347	0	0	0	0	67,308,347	0	XXXXXXXX	0	0
4. Net Premium Income.....	67,307,294	0	0	0	0	67,307,294	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	327,309	0	0	0	0	327,309	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).....	67,634,603	0	0	0	0	67,634,603	0	0	0	0
11. Hospital & Medical Benefits.....	66,893,699	0	0	0	0	66,893,699	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).....	66,893,699	0	0	0	0	66,893,699	0	0	0	0
14. Claims Adjustment Expenses.....	1,421,499	0	0	0	0	1,421,499	0	0	0	0
15. General Administrative Expenses.....	4,962,265	0	0	0	0	4,962,265	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).....	73,277,463	0	0	0	0	73,277,463	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(5,642,860)	0	0	0	0	(5,642,860)	0	0	0	0
19. Net Investments Gains / (Losses).....	203,023	0	0	0	0	203,023	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).....	(5,439,837)	0	0	0	0	(5,439,837)	0	0	0	0
22. Federal and foreign income taxes incurred.....	3,670,119	0	0	0	0	3,670,119	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(9,109,956)	0	0	0	0	(9,109,956)	0	0	0	0
24 Medical Loss Ratio	99.4%	0.0%	0.0%	0.0%	0.0%	99.4%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSACentral

(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.....	15,551	0	0	0	0	15,551	0	0	0	0
2. MEMBER MONTHS.....	180,957	0	0	0	0	180,957	0	0	0	0
3. Direct Premium Income.....	219,620,120	0	0	0	0	219,620,120	0	XXXXXXXX	0	0
4. Net Premium Income.....	219,615,936	0	0	0	0	219,615,936	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	558,527	0	0	0	0	558,527	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).....	220,174,463	0	0	0	0	220,174,463	0	0	0	0
11. Hospital & Medical Benefits.....	206,224,526	0	0	0	0	206,224,526	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).....	206,224,526	0	0	0	0	206,224,526	0	0	0	0
14. Claims Adjustment Expenses.....	4,552,297	0	0	0	0	4,552,297	0	0	0	0
15. General Administrative Expenses.....	16,865,054	0	0	0	0	16,865,054	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).....	227,641,877	0	0	0	0	227,641,877	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(7,467,414)	0	0	0	0	(7,467,414)	0	0	0	0
19. Net Investments Gains / (Losses).....	296,261	0	0	0	0	296,261	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).....	(7,171,153)	0	0	0	0	(7,171,153)	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,968,017	0	0	0	0	1,968,017	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(9,139,170)	0	0	0	0	(9,139,170)	0	0	0	0
24 Medical Loss Ratio	93.9%	0.0%	0.0%	0.0%	0.0%	93.9%	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, 2015**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **South TX**

(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	0	0	0	0	0	0	0	0	0	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	6,967	0	0	0	0	0	0	3,247	3,720	0
6. Current Year Member Months	52,248	0	0	0	0	0	0	26,073	26,175	0
Total Member Ambulatory Encounters for Year:										
7. Physician	97,379	0	0	0	0	0	0	59,938	37,441	0
8. Non-Physician	151,539	0	0	0	0	0	0	12,135	139,404	0
9. Total	248,918	0	0	0	0	0	0	72,073	176,845	0
10. Hospital Patient Days Incurred	5,078	0	0	0	0	0	0	5,078	0	0
11. Number of Inpatient Admissions	795	0	0	0	0	0	0	795	0	0
12. Health Premiums Written	78,425,581	0	0	0	0	0	0	42,979,325	35,446,256	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	77,305,681	0	0	0	0	0	0	42,597,398	34,708,283	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	47,868,185	0	0	0	0	0	0	18,911,459	28,956,726	0
18. Amount Incurred for Provision of Health Care Services	64,819,084	0	0	0	0	0	0	26,577,196	38,241,888	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

South TX
(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.....	6,967	0	3,247	0	0	3,720	0	0	0	0
2. MEMBER MONTHS.....	20,343	0	10,189	0	0	10,154	0	0	0	0
3. Direct Premium Income.....	30,946,610	0	15,361,893	0	0	15,584,717	0	XXXXXXXX	0	0
4. Net Premium Income.....	30,946,195	0	15,361,477	0	0	15,584,717	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,119,900)	0	(381,927)	0	0	(737,973)	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).....	29,826,295	0	14,979,550	0	0	14,846,744	0	0	0	0
11. Hospital & Medical Benefits.....	21,986,417	0	6,702,809	0	0	15,283,608	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).....	21,986,417	0	6,702,809	0	0	15,283,608	0	0	0	0
14. Claims Adjustment Expenses.....	716,734	0	391,161	0	0	325,573	0	0	0	0
15. General Administrative Expenses.....	2,291,687	0	1,187,982	0	0	1,103,705	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).....	24,994,838	0	8,281,952	0	0	16,712,886	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	4,831,456	0	6,697,598	0	0	(1,866,142)	0	0	0	0
19. Net Investments Gains / (Losses).....	70,777	0	40,707	0	0	30,069	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).....	4,902,233	0	6,738,305	0	0	(1,836,072)	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,633,097	0	(4,194,502)	0	0	5,827,599	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,269,136	0	10,932,808	0	0	(7,663,671)	0	0	0	0
24 Medical Loss Ratio	71.0%	0.0%	43.6%	0.0%	0.0%	98.1%	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, 2015**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

South TX

(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.....	6,967	0	3,247	0	0	3,720	0	0	0	0
2. MEMBER MONTHS.....	52,248	0	26,073	0	0	26,175	0	0	0	0
3. Direct Premium Income.....	78,425,581	0	42,979,325	0	0	35,446,256	0	XXXXXXXX	0	0
4. Net Premium Income.....	78,424,531	0	42,978,274	0	0	35,446,256	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,119,900)	0	(381,927)	0	0	(737,973)	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).....	77,304,631	0	42,596,347	0	0	34,708,283	0	0	0	0
11. Hospital & Medical Benefits.....	64,819,084	0	26,577,196	0	0	38,241,888	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).....	64,819,084	0	26,577,196	0	0	38,241,888	0	0	0	0
14. Claims Adjustment Expenses.....	2,219,397	0	1,263,918	0	0	955,479	0	0	0	0
15. General Administrative Expenses.....	6,426,219	0	3,420,470	0	0	3,005,749	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).....	73,464,700	0	31,261,584	0	0	42,203,116	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,839,930	0	11,334,763	0	0	(7,494,833)	0	0	0	0
19. Net Investments Gains / (Losses).....	104,019	0	57,316	0	0	46,702	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).....	3,943,949	0	11,392,079	0	0	(7,448,130)	0	0	0	0
22. Federal and foreign income taxes incurred.....	690,983	0	380,745	0	0	310,238	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	3,252,966	0	11,011,335	0	0	(7,758,368)	0	0	0	0
24 Medical Loss Ratio	82.7%	0.0%	61.8%	0.0%	0.0%	107.9%	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				