

TEXAS HMO SUPPLEMENT

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

OF THE **Healthspring Life & Health Ins. Co., 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.....	166,636	0	113,514	0	0	53,122	0	0	0	0
2. MEMBER MONTHS.....	497,315	0	337,901	0	0	159,414	0	0	0	0
3. Direct Premium Income.....	562,831,382	0	339,758,490	0	(294,334)	223,367,226	0	XXXXXXXX	0	0
4. Net Premium Income.....	562,831,382	0	339,758,490	0	(294,334)	223,367,226	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.....	1,229,227	0	0	0	0	1,229,227	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).....	564,060,609	0	339,758,490	0	(294,334)	224,596,453	0	0	0	0
11. Hospital & Medical Benefits.....	455,680,895	0	264,821,625	0	(597,551)	191,456,821	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).....	455,680,895	0	264,821,625	0	(597,551)	191,456,821	0	0	0	0
14. Claims Adjustment Expenses.....	40,884,422	0	23,670,707	0	(132,189)	17,345,904	0	0	0	0
15. General Administrative Expenses.....	44,114,145	0	19,857,811	0	127,888	24,128,446	0	0	0	0
16. Increase in Reserves for A&H contracts.....	(16,901,525)	0	0	0	0	(16,901,525)	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	523,777,936	0	308,350,143	0	(601,852)	216,029,645	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	40,282,673	0	31,408,347	0	307,518	8,566,808	0	0	0	0
19. Net Investments Gains / (Losses).....	2,272,396	0	1,419,359	0	714,739	138,298	0	0	0	0
20. Aggregate write-ins for other expenses.....	(170,481)	0	(170,570)	0	89	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	42,384,588	0	32,657,136	0	1,022,346	8,705,106	0	0	0	0
22. Federal and foreign income taxes incurred.....	11,370,473	0	12,564,928	0	(3,773,187)	2,578,732	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	31,014,115	0	20,092,208	0	4,795,533	6,126,374	0	0	0	0
24 Medical Loss Ratio	81.0%	0.0%	77.9%	0.0%	203.0%	85.7%	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 **Healthspring Life & Health Ins. Co., 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.....	166,636	0	113,514	0	0	53,122	0	0	0	0
2. MEMBER MONTHS.....	1,959,109	0	1,334,940	0	0	624,169	0	0	0	0
3. Direct Premium Income.....	2,209,296,062	0	1,381,577,147	0	1,883,575	825,835,340	0	XXXXXXXX	0	0
4. Net Premium Income.....	2,209,296,062	0	1,381,577,147	0	1,883,575	825,835,340	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.....	4,203,769	0	0	0	0	4,203,769	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).....	2,213,499,831	0	1,381,577,147	0	1,883,575	830,039,109	0	0	0	0
11. Hospital & Medical Benefits.....	1,815,181,348	0	1,125,140,520	0	(9,875,961)	699,916,789	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).....	1,815,181,348	0	1,125,140,520	0	(9,875,961)	699,916,789	0	0	0	0
14. Claims Adjustment Expenses.....	143,828,585	0	86,983,297	0	18,986	56,826,301	0	0	0	0
15. General Administrative Expenses.....	223,274,842	0	119,527,844	0	502,097	103,244,902	0	0	0	0
16. Increase in Reserves for A&H contracts.....	(30,245,047)	0	0	0	0	(30,245,047)	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	2,152,039,728	0	1,331,651,662	0	(9,354,878)	829,742,945	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	61,460,103	0	49,925,486	0	11,238,453	296,164	0	0	0	0
19. Net Investments Gains / (Losses).....	8,451,012	0	5,530,563	0	2,597,111	323,338	0	0	0	0
20. Aggregate write-ins for other expenses.....	(607,154)	0	(705,991)	0	98,838	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	69,303,961	0	54,750,057	0	13,934,402	619,502	0	0	0	0
22. Federal and foreign income taxes incurred.....	23,249,251	0	27,062,858	0	3,825,834	(7,639,441)	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	46,054,710	0	27,687,198	0	10,108,568	8,258,943	0	0	0	0
24 Medical Loss Ratio	82.2%	0.0%	81.4%	0.0%	-524.3%	84.8%	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 **Healthspring Life & Health Ins. Co., Inc.**

REPORT FOR DIVISION: **TX HMO**

(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	150,776	0	0	0	0	0	0	104,351	46,425	0
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	161,162	0	0	0	0	0	0	108,040	53,122	0
6. Current Year Member Months	1,893,104	0	0	0	0	0	0	1,268,935	624,169	0
Total Member Ambulatory Encounters for Year:										
7. Physician	4,726,728	0	0	0	0	0	0	3,023,862	1,702,866	0
8. Non-Physician	1,710,276	0	0	0	0	0	0	1,170,169	540,107	0
9. Total	6,437,004	0	0	0	0	0	0	4,194,031	2,242,973	0
10. Hospital Patient Days Incurred	164,321	0	0	0	0	0	0	134,209	30,112	0
11. Number of Inpatient Admissions	26,356	0	0	0	0	0	0	20,784	5,572	0
12. Health Premiums Written	2,155,803,374	0	0	0	0	0	0	1,329,968,034	825,835,340	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	2,166,422,138	0	0	0	0	0	0	1,336,376,948	830,045,190	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	1,766,993,734	0	0	0	0	0	0	1,077,721,742	689,271,993	0
18. Amount Incurred for Provision of Health Care Services	1,781,311,938	0	0	0	0	0	0	1,081,395,150	699,916,789	0

TEXAS HMO SUPPLEMENT

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

OF THE **Healthspring Life & Health Ins. Co., Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

TX HMO

(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.....	161,162	0	108,040	0	0	53,122	0	0	0	0
2. MEMBER MONTHS.....	480,865	0	321,451	0	0	159,414	0	0	0	0
3. Direct Premium Income.....	550,283,249	0	326,916,023	0	0	223,367,226	0	XXXXXXXX	0	0
4. Net Premium Income.....	550,283,249	0	326,916,023	0	0	223,367,226	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.....	1,229,227	0	0	0	0	1,229,227	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).....	551,512,476	0	326,916,023	0	0	224,596,453	0	0	0	0
11. Hospital & Medical Benefits.....	445,987,494	0	254,530,673	0	0	191,456,821	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).....	445,987,494	0	254,530,673	0	0	191,456,821	0	0	0	0
14. Claims Adjustment Expenses.....	40,360,582	0	23,014,678	0	0	17,345,904	0	0	0	0
15. General Administrative Expenses.....	42,894,296	0	18,765,851	0	0	24,128,446	0	0	0	0
16. Increase in Reserves for A&H contracts.....	(16,901,525)	0	0	0	0	(16,901,525)	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	512,340,848	0	296,311,202	0	0	216,029,645	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	39,171,628	0	30,604,820	0	0	8,566,808	0	0	0	0
19. Net Investments Gains / (Losses).....	1,548,232	0	1,409,933	0	0	138,298	0	0	0	0
20. Aggregate write-ins for other expenses.....	(148,679)	0	(148,679)	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	40,571,181	0	31,866,075	0	0	8,705,106	0	0	0	0
22. Federal and foreign income taxes incurred.....	14,521,281	0	11,942,549	0	0	2,578,732	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	26,049,900	0	19,923,526	0	0	6,126,374	0	0	0	0
24 Medical Loss Ratio	81.0%	0.0%	77.9%	0.0%	0.0%	85.7%	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 **Healthspring Life & Health Ins. Co., Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

TX HMO

(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.....	161,162	0	108,040	0	0	53,122	0	0	0	0
2. MEMBER MONTHS.....	1,893,104	0	1,268,935	0	0	624,169	0	0	0	0
3. Direct Premium Income.....	2,155,803,374	0	1,329,968,034	0	0	825,835,340	0	XXXXXXXX	0	0
4. Net Premium Income.....	2,155,803,374	0	1,329,968,034	0	0	825,835,340	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.....	4,203,769	0	0	0	0	4,203,769	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).....	2,160,007,143	0	1,329,968,034	0	0	830,039,109	0	0	0	0
11. Hospital & Medical Benefits.....	1,781,311,938	0	1,081,395,150	0	0	699,916,789	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).....	1,781,311,938	0	1,081,395,150	0	0	699,916,789	0	0	0	0
14. Claims Adjustment Expenses.....	141,100,425	0	84,274,124	0	0	56,826,301	0	0	0	0
15. General Administrative Expenses.....	216,714,277	0	113,469,375	0	0	103,244,902	0	0	0	0
16. Increase in Reserves for A&H contracts.....	(30,245,047)	0	0	0	0	(30,245,047)	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	2,108,881,593	0	1,279,138,648	0	0	829,742,945	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	51,125,550	0	50,829,386	0	0	296,164	0	0	0	0
19. Net Investments Gains / (Losses).....	5,793,406	0	5,470,068	0	0	323,338	0	0	0	0
20. Aggregate write-ins for other expenses.....	(692,014)	0	(692,014)	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	56,226,941	0	55,607,439	0	0	619,502	0	0	0	0
22. Federal and foreign income taxes incurred.....	19,412,117	0	27,051,558	0	0	(7,639,441)	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	36,814,824	0	28,555,881	0	0	8,258,943	0	0	0	0
24 Medical Loss Ratio	82.6%	0.0%	81.3%	0.0%	0.0%	84.8%	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 **Healthspring Life & Health Ins. Co., Inc.**

REPORT FOR DIVISION: **TX Non-HMO**

(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	61,884	0	0	0	0	0	0	1,286	0	60,598
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	1,146	0	0	0	0	0	0	1,146	0	0
6. Current Year Member Months	19,009	0	0	0	0	0	0	19,009	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	33,225	0	0	0	0	0	0	33,225	0	0
8. Non-Physician	37,241	0	0	0	0	0	0	37,241	0	0
9. Total	70,466	0	0	0	0	0	0	70,466	0	0
10. Hospital Patient Days Incurred	2,607	0	0	0	0	0	0	2,607	0	0
11. Number of Inpatient Admissions	442	0	0	0	0	0	0	442	0	0
12. Health Premiums Written	11,569,854	0	0	0	0	0	0	11,251,860	0	317,993
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	9,900,829	0	0	0	0	0	0	11,478,661	0	(1,577,833)
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	(1,132,426)	0	0	0	0	0	0	9,829,549	0	(10,961,975)
18. Amount Incurred for Provision of Health Care Services	7,693,784	0	0	0	0	0	0	9,361,087	0	(1,667,303)

TEXAS HMO SUPPLEMENT

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

OF THE **Healthspring Life & Health Ins. Co., Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

TX Non-HMO

(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.....	1,146	0	1,146	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	8,329	0	8,329	0	0	0	0	0	0	0
3. Direct Premium Income.....	2,671,554	0	2,721,245	0	(49,691)	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	2,671,554	0	2,721,245	0	(49,691)	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).....	2,671,554	0	2,721,245	0	(49,691)	0	0	0	0	0
11. Hospital & Medical Benefits.....	2,018,874	0	2,119,755	0	(100,881)	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	2,018,874	0	2,119,755	0	(100,881)	0	0	0	0	0
14. Claims Adjustment Expenses.....	178,034	0	200,351	0	(22,317)	0	0	0	0	0
15. General Administrative Expenses.....	184,571	0	162,981	0	21,591	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	2,381,479	0	2,483,086	0	(101,607)	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	290,076	0	238,159	0	51,917	0	0	0	0	0
19. Net Investments Gains / (Losses).....	120,665	0	0	0	120,665	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(2,803)	0	(2,818)	0	15	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	407,938	0	235,341	0	172,597	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	(473,908)	0	154,964	0	(628,872)	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	881,846	0	80,377	0	801,469	0	0	0	0	0
24 Medical Loss Ratio	75.6%	0.0%	77.9%	0.0%	203.0%	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 **DECEMBER 31, 2015**

OF THE Healthspring Life & Health Ins. Co., Inc.

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

TX Non-HMO

(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.....	1,146	0	1,146	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	19,009	0	19,009	0	0	0	0	0	0	0
3. Direct Premium Income.....	11,569,854	0	11,251,860	0	317,993	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	11,569,854	0	11,251,860	0	317,993	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).....	11,569,854	0	11,251,860	0	317,993	0	0	0	0	0
11. Hospital & Medical Benefits.....	7,693,784	0	9,361,087	0	(1,667,303)	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	7,693,784	0	9,361,087	0	(1,667,303)	0	0	0	0	0
14. Claims Adjustment Expenses.....	757,971	0	754,766	0	3,205	0	0	0	0	0
15. General Administrative Expenses.....	1,283,476	0	1,198,710	0	84,766	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	9,735,231	0	11,314,562	0	(1,579,332)	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,834,623	0	(62,702)	0	1,897,325	0	0	0	0	0
19. Net Investments Gains / (Losses).....	438,456	0	0	0	438,456	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	8,385	0	(8,302)	0	16,686	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	2,281,463	0	(71,004)	0	2,352,467	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	702,023	0	39,580	0	662,443	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,579,440	0	(110,584)	0	1,690,024	0	0	0	0	0
24 Medical Loss Ratio	66.5%	0.0%	83.2%	0.0%	-524.3%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **DECEMBER 31, 2015**

OF THE **Healthspring Life & Health Ins. Co., Inc.**

REPORT FOR DIVISION: **National Part D**

(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	299,071	0	0	0	0	0	0	5,516	0	293,555
2. First Quarter	0									
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	4,328	0	0	0	0	0	0	4,328	0	0
6. Current Year Member Months	46,996	0	0	0	0	0	0	46,996	0	0
Total Member Ambulatory Encounters for Year:										
7. Physician	71,388	0	0	0	0	0	0	71,388	0	0
8. Non-Physician	31,915	0	0	0	0	0	0	31,915	0	0
9. Total	103,303	0	0	0	0	0	0	103,303	0	0
10. Hospital Patient Days Incurred	6,744	0	0	0	0	0	0	6,744	0	0
11. Number of Inpatient Admissions	1,022	0	0	0	0	0	0	1,022	0	0
12. Health Premiums Written	41,922,834	0	0	0	0	0	0	40,357,253	0	1,565,582
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	32,858,332	0	0	0	0	0	0	40,626,499	0	(7,768,167)
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	(19,031,906)	0	0	0	0	0	0	34,937,344	0	(53,969,250)
18. Amount Incurred for Provision of Health Care Services	26,175,626	0	0	0	0	0	0	34,384,284	0	(8,208,658)

TEXAS HMO SUPPLEMENT

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

OF THE **Healthspring Life & Health Ins. Co., Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

National Part D

(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.....	4,328	0	4,328	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	8,121	0	8,121	0	0	0	0	0	0	0
3. Direct Premium Income.....	9,876,579	0	10,121,222	0	(244,643)	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	9,876,579	0	10,121,222	0	(244,643)	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).....	9,876,579	0	10,121,222	0	(244,643)	0	0	0	0	0
11. Hospital & Medical Benefits.....	7,674,527	0	8,171,197	0	(496,670)	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	7,674,527	0	8,171,197	0	(496,670)	0	0	0	0	0
14. Claims Adjustment Expenses.....	345,806	0	455,678	0	(109,872)	0	0	0	0	0
15. General Administrative Expenses.....	1,035,277	0	928,980	0	106,297	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	9,055,610	0	9,555,855	0	(500,245)	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	820,969	0	565,367	0	255,602	0	0	0	0	0
19. Net Investments Gains / (Losses).....	603,499	0	9,426	0	594,073	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(18,999)	0	(19,073)	0	74	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	1,405,469	0	555,720	0	849,749	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	(2,676,900)	0	467,415	0	(3,144,316)	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	4,082,369	0	88,305	0	3,994,064	0	0	0	0	0
24 Medical Loss Ratio	77.7%	0.0%	80.7%	0.0%	203.0%	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 **DECEMBER 31, 2015**

OF THE **Healthspring Life & Health Ins. Co., Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

National Part D

(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.....	4,328	0	4,328	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	46,996	0	46,996	0	0	0	0	0	0	0
3. Direct Premium Income.....	41,922,834	0	40,357,253	0	1,565,582	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	41,922,834	0	40,357,253	0	1,565,582	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).....	41,922,834	0	40,357,253	0	1,565,582	0	0	0	0	0
11. Hospital & Medical Benefits.....	26,175,626	0	34,384,284	0	(8,208,658)	0	0	0	0	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	26,175,626	0	34,384,284	0	(8,208,658)	0	0	0	0	0
14. Claims Adjustment Expenses.....	1,970,189	0	1,954,408	0	15,781	0	0	0	0	0
15. General Administrative Expenses.....	5,277,090	0	4,859,759	0	417,331	0	0	0	0	0
16. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	33,422,905	0	41,198,451	0	(7,775,546)	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	8,499,930	0	(841,198)	0	9,341,128	0	0	0	0	0
19. Net Investments Gains / (Losses).....	2,219,150	0	60,495	0	2,158,656	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	76,476	0	(5,676)	0	82,152	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	10,795,556	0	(786,379)	0	11,581,935	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	3,135,111	0	(28,280)	0	3,163,391	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	7,660,446	0	(758,099)	0	8,418,544	0	0	0	0	0
24 Medical Loss Ratio	62.4%	0.0%	85.2%	0.0%	-524.3%	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				