

TEXAS HMO SUPPLEMENT

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

OF THE **Sendero Health Plans, 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.....	19,179	4,692	0	0	0	12,506	0	0	1,981	0
2. MEMBER MONTHS.....	57,538	14,076	0	0	0	37,518	0	0	5,944	0
3. Direct Premium Income.....	15,119,335	4,648,623	0	0	0	9,480,694	0	XXXXXXXX	990,018	0
4. Net Premium Income.....	14,742,562	4,465,169	0	0	0	9,313,838	0	0	963,555	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.....	240,203	0	0	0	0	0	0	0	0	240,203
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).....	14,982,765	4,465,169	0	0	0	9,313,838	0	0	963,555	240,203
11. Hospital & Medical Benefits.....	13,873,269	3,226,802	0	0	0	9,502,612	0	0	1,143,855	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	13,873,269	3,226,802	0	0	0	9,502,612	0	0	1,143,855	0
14. Claims Adjustment Expenses.....	983,313	329,268	0	0	0	592,508	0	0	61,537	0
15. General Administrative Expenses.....	2,177,092	1,024,744	0	0	0	1,012,759	0	0	139,589	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).....	17,033,674	4,580,814	0	0	0	11,107,879	0	0	1,344,981	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(2,050,909)	(115,645)	0	0	0	(1,794,041)	0	0	(381,426)	240,203
19. Net Investments Gains / (Losses).....	768	594	0	0	0	155	0	0	19	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).....	(2,050,141)	(115,051)	0	0	0	(1,793,886)	0	0	(381,407)	240,203
22. Federal and foreign income taxes incurred.....	0	0	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(2,050,141)	(115,051)	0	0	0	(1,793,886)	0	0	(381,407)	240,203
24 Medical Loss Ratio	94.1%	72.3%	0.0%	0.0%	0.0%	102.0%	0.0%	0.0%	118.7%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				

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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
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2. MEMBER MONTHS.....	57,538	14,076	0	0	0	37,518	0	0	5,944	0
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4. Net Premium Income.....	14,742,562	4,465,169	0	0	0	9,313,838	0	0	963,555	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.....	240,203	0	0	0	0	0	0	0	0	240,203
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17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16).....	17,033,674	4,580,814	0	0	0	11,107,879	0	0	1,344,981	0
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NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0				