

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **SEPTEMBER 30, 2015**

OF THE **Denticare, 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.....	228,987	228,987	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	683,969	683,969	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	7,445,763	7,445,763	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	7,445,763	7,445,763	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	22,715	22,715	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).....	7,468,478	7,468,478	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	2,441,211	2,441,211	0	0	0	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).....	2,441,211	2,441,211	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	261,256	261,256	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	2,191,371	2,191,371	0	0	0	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).....	4,893,838	4,893,838	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	2,574,640	2,574,640	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	2,420	2,420	0	0	0	0	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).....	2,577,060	2,577,060	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	867,697	867,697	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,709,363	1,709,363	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	32.8%	32.8%	0.0%	0.0%	0.0%	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				

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(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.....	228,987	228,987	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	2,066,412	2,066,412	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	22,516,909	22,516,909	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	22,516,909	22,516,909	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	10,911	10,911	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).....	22,527,820	22,527,820	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	10,731,259	10,731,259	0	0	0	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).....	10,731,259	10,731,259	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	814,945	814,945	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	7,713,174	7,713,174	0	0	0	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).....	19,259,378	19,259,378	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,268,442	3,268,442	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	6,611	6,611	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	35	35	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	3,275,088	3,275,088	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,321,241	1,321,241	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,953,847	1,953,847	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	47.7%	47.7%	0.0%	0.0%	0.0%	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				