

TEXAS HMO SUPPLEMENT

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

OF THE **Cigna Dental Health of Texas, 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.....	162,489	162,489	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	488,996	488,996	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	8,114,172	8,114,172	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	8,114,172	8,114,172	0	0	0	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).....	8,114,172	8,114,172	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	3,403,018	3,403,018	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).....	3,403,018	3,403,018	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	18,295	18,295	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	877,842	877,842	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).....	4,299,155	4,299,155	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	3,815,017	3,815,017	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	(270)	(270)	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(11,506)	(11,506)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	3,803,241	3,803,241	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	1,474,101	1,474,101	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,329,140	2,329,140	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	41.9%	41.9%	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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**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.....	162,489	162,489	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	1,471,894	1,471,894	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	24,081,565	24,081,565	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	24,081,565	24,081,565	0	0	0	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).....	24,081,565	24,081,565	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	10,182,604	10,182,604	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).....	10,182,604	10,182,604	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	41,891	41,891	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	3,338,690	3,338,690	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).....	13,563,185	13,563,185	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	10,518,380	10,518,380	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	2,322	2,322	0	0	0	0	0	0	0	0
20. Aggregate write-ins for other expenses.....	(9,921)	(9,921)	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	10,510,781	10,510,781	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	3,922,344	3,922,344	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	6,588,437	6,588,437	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	42.3%	42.3%	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				