

TEXAS HMO SUPPLEMENT

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

OF THE **United Dental Care 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.....	50,656	50,656	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	149,992	149,992	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	1,387,340	1,387,340	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	1,387,340	1,387,340	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	10,050	10,050	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).....	1,397,390	1,397,390	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	607,533	607,533	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).....	607,533	607,533	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	7,153	7,153	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	453,759	453,759	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).....	1,068,445	1,068,445	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	328,945	328,945	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	7,793	7,793	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).....	336,738	336,738	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	120,561	120,561	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	216,177	216,177	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	43.8%	43.8%	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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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.....	50,656	50,656	0	0	0	0	0	0	0	0
2. MEMBER MONTHS.....	454,529	454,529	0	0	0	0	0	0	0	0
3. Direct Premium Income.....	4,221,153	4,221,153	0	0	0	0	0	XXXXXXXX	0	0
4. Net Premium Income.....	4,221,153	4,221,153	0	0	0	0	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(8,221)	(8,221)	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).....	4,212,932	4,212,932	0	0	0	0	0	0	0	0
11. Hospital & Medical Benefits.....	1,736,522	1,736,522	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).....	1,736,522	1,736,522	0	0	0	0	0	0	0	0
14. Claims Adjustment Expenses.....	20,619	20,619	0	0	0	0	0	0	0	0
15. General Administrative Expenses.....	1,372,718	1,372,718	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).....	3,129,859	3,129,859	0	0	0	0	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,083,073	1,083,073	0	0	0	0	0	0	0	0
19. Net Investments Gains / (Losses).....	23,071	23,071	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).....	1,106,144	1,106,144	0	0	0	0	0	0	0	0
22. Federal and foreign income taxes incurred.....	426,930	426,930	0	0	0	0	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	679,214	679,214	0	0	0	0	0	0	0	0
24 Medical Loss Ratio	41.1%	41.1%	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				