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TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **SEPTEMBER 30, 2015** OF THE **Allegian Insurance Co.**
(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**	13,703	11,857	0	1,846	0	0	0	0	0	0
2. **MEMBER MONTHS**	37,836	32,324	0	5,512	0	0	0	0	0	0
3. Direct Premium Income	14,242,367	10,516,007	0	3,726,360	0	0	0	XXXXXXXX	0	0
4. Net Premium Income	14,191,222	10,516,007	0	3,675,215	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	216,625	0	0	0	0	0	0	0	0	216,625
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)	14,407,847	10,516,007	0	3,675,215	0	0	0	0	0	216,625
11. Hospital & Medical Benefits	11,136,626	7,727,502	0	3,409,124	0	0	0	0	0	0
12. Net Reins Recoveries Incurred	162,725	162,725	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	10,973,901	7,564,777	0	3,409,124	0	0	0	0	0	0
14. Claims Adjustment Expenses	410,233	302,591	0	107,642	0	0	0	0	0	0
15. General Administrative Expenses	2,264,772	1,649,048	0	582,106	0	0	0	0	0	33,618
16. Increase in Reserves for A&H contracts	(292,824)	0	0	(292,824)	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16)	13,356,082	9,516,416	0	3,806,048	0	0	0	0	0	33,618
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	1,051,765	999,591	0	(130,833)	0	0	0	0	0	183,007
19. Net Investments Gains / (Losses)	376,268	277,820	0	98,448	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)	1,428,033	1,277,411	0	(32,385)	0	0	0	0	0	183,007
22. Federal and foreign income taxes incurred	499,811	447,093	0	(11,335)	0	0	0	0	0	64,052
23. NET INCOME/(LOSS) (L21 less L22)	928,222	830,318	0	(21,050)	0	0	0	0	0	118,955
24 Medical Loss Ratio	77.3%	71.9%	0.0%	92.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 3,978
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 35,782

(Examples of non-taxable enrollees are State of Texas enrollees and Federal employees.)

* Other (identify products(s); eg Non-Risk Business, PPO):
0

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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**	13,703	11,857	0	1,846	0	0	0	0	0	0
2. **MEMBER MONTHS**	119,357	103,117	0	16,240	0	0	0	0	0	0
3. Direct Premium Income	41,823,652	30,881,473	0	10,942,179	0	0	0	XXXXXXXX	0	0
4. Net Premium Income	41,341,179	30,881,473	0	10,459,706	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	656,437	0	0	0	0	0	0	0	0	656,437
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)	41,997,616	30,881,473	0	10,459,706	0	0	0	0	0	656,437
11. Hospital & Medical Benefits	33,098,251	21,677,595	0	11,420,656	0	0	0	0	0	0
12. Net Reins Recoveries Incurred	271,868	271,868	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12)	32,826,383	21,405,727	0	11,420,656	0	0	0	0	0	0
14. Claims Adjustment Expenses	1,363,790	856,229	0	507,561	0	0	0	0	0	0
15. General Administrative Expenses	7,998,651	5,881,527	0	1,992,102	0	0	0	0	0	125,022
16. Increase in Reserves for A&H contracts	(878,472)	0	0	(878,472)	0	0	0	0	0	0
17. TOTAL UNDERWRITING DEDUCTIONS (L13 to L16)	41,310,352	28,143,483	0	13,041,847	0	0	0	0	0	125,022
18. NET UNDERWRITING GAIN/LOSS (L10 - L17)	687,264	2,737,990	0	(2,582,141)	0	0	0	0	0	531,415
19. Net Investments Gains / (Losses)	1,066,675	787,600	0	279,075	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)	1,753,939	3,525,590	0	(2,303,066)	0	0	0	0	0	531,415
22. Federal and foreign income taxes incurred	613,878	1,233,956	0	(806,073)	0	0	0	0	0	185,995
23. NET INCOME/(LOSS) (L21 less L22)	1,140,061	2,291,634	0	(1,496,993)	0	0	0	0	0	345,420
24 Medical Loss Ratio	79.4%	69.3%	0.0%	109.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

NON-TAXABLE COMMERCIAL RISK ENROLLEES 3,978
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS 35,782

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