

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, 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.....	486,103	0	9,968	774	0	417,558	0	0	26,668	31,135
2. MEMBER MONTHS.....	1,469,382	0	31,669	2,331	0	1,265,674	0	0	77,493	92,215
3. Direct Premium Income.....	861,847,286	(34,991)	45,147,497	3,635,470	0	716,648,026	0	XXXXXXXX	10,606,679	85,844,604
4. Net Premium Income.....	861,846,945	15,928	45,146,630	3,635,376	0	716,604,486	0	0	10,603,583	85,840,941
5. Change in unearned premium reserve and reserve for rate credits.....	(4,986,733)	0	(6,470,940)	0	0	1,501,460	0	0	51,212	(68,465)
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).....	856,860,212	15,928	38,675,690	3,635,376	0	718,105,946	0	0	10,654,795	85,772,476
11. Hospital & Medical Benefits.....	772,210,887	76,186	30,830,289	2,367,758	0	643,765,264	0	0	9,639,557	85,531,832
12. Net Reins Recoveries Incurred.....	(240,753)	(188,122)	0	0	0	(456,631)	0	0	0	404,000
13. TOTAL MEDICAL & HOSP (L11 less L12).....	772,451,640	264,309	30,830,289	2,367,758	0	644,221,895	0	0	9,639,557	85,127,832
14. Claims Adjustment Expenses.....	18,919,195	(45,878)	888,761	85,950	0	15,893,476	0	0	267,650	1,829,236
15. General Administrative Expenses.....	95,066,419	378,665	2,291,409	230,227	0	80,606,683	0	0	1,277,576	10,281,858
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).....	886,437,254	597,096	34,010,459	2,683,935	0	740,722,054	0	0	11,184,784	97,238,926
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(29,577,042)	(581,168)	4,665,231	951,441	0	(22,616,107)	0	0	(529,989)	(11,466,451)
19. Net Investments Gains / (Losses).....	1,318,999	25	59,535	5,596	0	1,105,408	0	0	16,401	132,033
20. Aggregate write-ins for other expenses.....	12,838	12,838	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(28,245,205)	(568,305)	4,724,766	957,037	0	(21,510,699)	0	0	(513,588)	(11,334,418)
22. Federal and foreign income taxes incurred.....	1,876,366	35	84,693	7,961	0	1,572,520	0	0	23,332	187,826
23. NET INCOME/(LOSS) (L21 less L22).....	(30,121,572)	(568,340)	4,640,074	949,077	0	(23,083,219)	0	0	(536,920)	(11,522,244)
24 Medical Loss Ratio	89.6%	1659.4%	68.3%	65.1%	0.0%	89.9%	0.0%	0.0%	90.9%	99.2%
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.)			1				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, 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: 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.....	486,103	0	9,968	774	0	417,558	0	0	26,668	31,135
2. MEMBER MONTHS.....	1,469,382	0	31,669	2,331	0	1,265,674	0	0	77,493	92,215
3. Direct Premium Income.....	861,847,286	(34,991)	45,147,497	3,635,470	0	716,648,026	0	XXXXXXXX	10,606,679	85,844,604
4. Net Premium Income.....	861,846,945	15,928	45,146,630	3,635,376	0	716,604,486	0	0	10,603,583	85,840,941
5. Change in unearned premium reserve and reserve for rate credits.....	(4,986,733)	0	(6,470,940)	0	0	1,501,460	0	0	51,212	(68,465)
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).....	856,860,212	15,928	38,675,690	3,635,376	0	718,105,946	0	0	10,654,795	85,772,476
11. Hospital & Medical Benefits.....	772,210,887	76,186	30,830,289	2,367,758	0	643,765,264	0	0	9,639,557	85,531,832
12. Net Reins Recoveries Incurred.....	(240,753)	(188,122)	0	0	0	(456,631)	0	0	0	404,000
13. TOTAL MEDICAL & HOSP (L11 less L12).....	772,451,640	264,309	30,830,289	2,367,758	0	644,221,895	0	0	9,639,557	85,127,832
14. Claims Adjustment Expenses.....	18,919,195	(45,878)	888,761	85,950	0	15,893,476	0	0	267,650	1,829,236
15. General Administrative Expenses.....	95,066,419	378,665	2,291,409	230,227	0	80,606,683	0	0	1,277,576	10,281,858
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).....	886,437,254	597,096	34,010,459	2,683,935	0	740,722,054	0	0	11,184,784	97,238,926
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(29,577,042)	(581,168)	4,665,231	951,441	0	(22,616,107)	0	0	(529,989)	(11,466,451)
19. Net Investments Gains / (Losses).....	1,318,999	25	59,535	5,596	0	1,105,408	0	0	16,401	132,033
20. Aggregate write-ins for other expenses.....	12,838	12,838	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(28,245,205)	(568,305)	4,724,766	957,037	0	(21,510,699)	0	0	(513,588)	(11,334,418)
22. Federal and foreign income taxes incurred.....	1,876,366	35	84,693	7,961	0	1,572,520	0	0	23,332	187,826
23. NET INCOME/(LOSS) (L21 less L22).....	(30,121,572)	(568,340)	4,640,074	949,077	0	(23,083,219)	0	0	(536,920)	(11,522,244)
24 Medical Loss Ratio	89.6%	1659.4%	68.3%	65.1%	0.0%	89.9%	0.0%	0.0%	90.9%	99.2%
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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **San Antonio**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	152,349	7,366	0	0	0	0	0	4,848	140,135	0
2. First Quarter	151,868	7,970	0	0	0	0	0	4,776	139,122	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	459,559	23,009	0	0	0	0	0	14,927	421,623	0
Total Member Ambulatory Encounters for Year:										
7. Physician	145,034	1,221	0	0	0	0	0	41,436	102,377	0
8. Non-Physician	278,551	808	0	0	0	0	0	7,823	269,920	0
9. Total	423,585	2,029	0	0	0	0	0	49,259	372,297	0
10. Hospital Patient Days Incurred	98,125	477	0	0	0	0	0	14,379	83,269	0
11. Number of Inpatient Admissions	20,309	90	0	0	0	0	0	2,167	18,052	0
12. Health Premiums Written	241,696,709	2,955,135	0	0	0	0	0	21,025,962	217,715,611	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	241,026,898	2,957,798	0	0	0	0	0	19,341,191	218,727,908	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	212,558,303	2,934,851	0	0	0	0	0	17,391,911	192,231,541	0
18. Amount Incurred for Provision of Health Care Services	217,633,680	3,084,264	0	0	0	0	0	15,458,907	199,090,509	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	151,868	0	4,002	774	0	139,122	0	0	7,970	0
2. MEMBER MONTHS.....	459,559	0	12,596	2,331	0	421,623	0	0	23,009	0
3. Direct Premium Income.....	241,696,709	0	17,390,493	3,635,470	0	217,715,611	0	XXXXXXXX	2,955,135	0
4. Net Premium Income.....	241,680,249	0	17,390,151	3,635,376	0	217,700,506	0	0	2,954,215	0
5. Change in unearned premium reserve and reserve for rate credits.....	(669,811)	0	(1,684,771)	0	0	1,012,297	0	0	2,663	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).....	241,010,438	0	15,705,380	3,635,376	0	218,712,803	0	0	2,956,878	0
11. Hospital & Medical Benefits.....	217,633,680	0	13,091,149	2,367,758	0	199,090,509	0	0	3,084,264	0
12. Net Reins Recoveries Incurred.....	(60,012)	0	0	0	0	(60,012)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	217,693,691	0	13,091,149	2,367,758	0	199,150,520	0	0	3,084,264	0
14. Claims Adjustment Expenses.....	5,625,182	0	351,548	85,950	0	5,112,639	0	0	75,045	0
15. General Administrative Expenses.....	26,828,904	0	927,849	230,227	0	25,316,272	0	0	354,556	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).....	250,147,777	0	14,370,546	2,683,935	0	229,579,431	0	0	3,513,865	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(9,137,339)	0	1,334,834	951,441	0	(10,866,628)	0	0	(556,986)	0
19. Net Investments Gains / (Losses).....	370,997	0	24,176	5,596	0	336,673	0	0	4,552	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).....	(8,766,343)	0	1,359,009	957,037	0	(10,529,955)	0	0	(552,435)	0
22. Federal and foreign income taxes incurred.....	527,768	0	34,392	7,961	0	478,941	0	0	6,475	0
23. NET INCOME/(LOSS) (L21 less L22).....	(9,294,111)	0	1,324,618	949,077	0	(11,008,895)	0	0	(558,910)	0
24 Medical Loss Ratio	90.1%	0.0%	75.3%	65.1%	0.0%	91.5%	0.0%	0.0%	104.4%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

San Antonio

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	151,868	0	4,002	774	0	139,122	0	0	7,970	0
2. MEMBER MONTHS.....	459,559	0	12,596	2,331	0	421,623	0	0	23,009	0
3. Direct Premium Income.....	241,696,709	0	17,390,493	3,635,470	0	217,715,611	0	XXXXXXXX	2,955,135	0
4. Net Premium Income.....	241,680,249	0	17,390,151	3,635,376	0	217,700,506	0	0	2,954,215	0
5. Change in unearned premium reserve and reserve for rate credits.....	(669,811)	0	(1,684,771)	0	0	1,012,297	0	0	2,663	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).....	241,010,438	0	15,705,380	3,635,376	0	218,712,803	0	0	2,956,878	0
11. Hospital & Medical Benefits.....	217,633,680	0	13,091,149	2,367,758	0	199,090,509	0	0	3,084,264	0
12. Net Reins Recoveries Incurred.....	(60,012)	0	0	0	0	(60,012)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	217,693,691	0	13,091,149	2,367,758	0	199,150,520	0	0	3,084,264	0
14. Claims Adjustment Expenses.....	5,625,182	0	351,548	85,950	0	5,112,639	0	0	75,045	0
15. General Administrative Expenses.....	26,828,904	0	927,849	230,227	0	25,316,272	0	0	354,556	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).....	250,147,777	0	14,370,546	2,683,935	0	229,579,431	0	0	3,513,865	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(9,137,339)	0	1,334,834	951,441	0	(10,866,628)	0	0	(556,986)	0
19. Net Investments Gains / (Losses).....	370,997	0	24,176	5,596	0	336,673	0	0	4,552	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).....	(8,766,343)	0	1,359,009	957,037	0	(10,529,955)	0	0	(552,435)	0
22. Federal and foreign income taxes incurred.....	527,768	0	34,392	7,961	0	478,941	0	0	6,475	0
23. NET INCOME/(LOSS) (L21 less L22).....	(9,294,111)	0	1,324,618	949,077	0	(11,008,895)	0	0	(558,910)	0
24 Medical Loss Ratio	90.1%	0.0%	75.3%	65.1%	0.0%	91.5%	0.0%	0.0%	104.4%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **EI Paso**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	60,371	4,148	0	0	0	0	0	0	56,223	0
2. First Quarter	58,270	4,312	0	0	0	0	0	0	53,958	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	176,961	12,557	0	0	0	0	0	0	164,404	0
Total Member Ambulatory Encounters for Year:										
7. Physician	94,497	5,038	0	0	0	0	0	0	89,459	0
8. Non-Physician	46,484	2,331	0	0	0	0	0	0	44,153	0
9. Total	140,981	7,369	0	0	0	0	0	0	133,612	0
10. Hospital Patient Days Incurred	18,768	237	0	0	0	0	0	0	18,531	0
11. Number of Inpatient Admissions	4,827	69	0	0	0	0	0	0	4,758	0
12. Health Premiums Written	39,782,285	1,511,754	0	0	0	0	0	0	38,270,531	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	40,047,146	1,535,949	0	0	0	0	0	0	38,511,197	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	33,979,568	1,233,564	0	0	0	0	0	0	32,746,004	0
18. Amount Incurred for Provision of Health Care Services	34,588,473	1,218,128	0	0	0	0	0	0	33,370,345	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

El Paso

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	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.....	58,270	0	0	0	0	53,958	0	0	4,312	0
2. MEMBER MONTHS.....	176,961	0	0	0	0	164,404	0	0	12,557	0
3. Direct Premium Income.....	39,782,285	0	0	0	0	38,270,531	0	XXXXXXXX	1,511,754	0
4. Net Premium Income.....	39,775,189	0	0	0	0	38,263,937	0	0	1,511,252	0
5. Change in unearned premium reserve and reserve for rate credits.....	264,861	0	0	0	0	240,666	0	0	24,195	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).....	40,040,050	0	0	0	0	38,504,603	0	0	1,535,447	0
11. Hospital & Medical Benefits.....	34,588,473	0	0	0	0	33,370,345	0	0	1,218,128	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	34,588,473	0	0	0	0	33,370,345	0	0	1,218,128	0
14. Claims Adjustment Expenses.....	979,018	0	0	0	0	941,491	0	0	37,527	0
15. General Administrative Expenses.....	4,800,455	0	0	0	0	4,616,338	0	0	184,117	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).....	40,367,946	0	0	0	0	38,928,173	0	0	1,439,772	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(327,896)	0	0	0	0	(423,570)	0	0	95,674	0
19. Net Investments Gains / (Losses).....	61,635	0	0	0	0	59,272	0	0	2,364	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).....	(266,261)	0	0	0	0	(364,299)	0	0	98,038	0
22. Federal and foreign income taxes incurred.....	87,680	0	0	0	0	84,318	0	0	3,362	0
23. NET INCOME/(LOSS) (L21 less L22).....	(353,941)	0	0	0	0	(448,617)	0	0	94,676	0
24 Medical Loss Ratio	87.0%	0.0%	0.0%	0.0%	0.0%	87.2%	0.0%	0.0%	80.6%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

El Paso

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	58,270	0	0	0	0	53,958	0	0	4,312	0
2. MEMBER MONTHS.....	176,961	0	0	0	0	164,404	0	0	12,557	0
3. Direct Premium Income.....	39,782,285	0	0	0	0	38,270,531	0	XXXXXXXX	1,511,754	0
4. Net Premium Income.....	39,775,189	0	0	0	0	38,263,937	0	0	1,511,252	0
5. Change in unearned premium reserve and reserve for rate credits.....	264,861	0	0	0	0	240,666	0	0	24,195	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).....	40,040,050	0	0	0	0	38,504,603	0	0	1,535,447	0
11. Hospital & Medical Benefits.....	34,588,473	0	0	0	0	33,370,345	0	0	1,218,128	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	34,588,473	0	0	0	0	33,370,345	0	0	1,218,128	0
14. Claims Adjustment Expenses.....	979,018	0	0	0	0	941,491	0	0	37,527	0
15. General Administrative Expenses.....	4,800,455	0	0	0	0	4,616,338	0	0	184,117	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).....	40,367,946	0	0	0	0	38,928,173	0	0	1,439,772	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(327,896)	0	0	0	0	(423,570)	0	0	95,674	0
19. Net Investments Gains / (Losses).....	61,635	0	0	0	0	59,272	0	0	2,364	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).....	(266,261)	0	0	0	0	(364,299)	0	0	98,038	0
22. Federal and foreign income taxes incurred.....	87,680	0	0	0	0	84,318	0	0	3,362	0
23. NET INCOME/(LOSS) (L21 less L22).....	(353,941)	0	0	0	0	(448,617)	0	0	94,676	0
24 Medical Loss Ratio	87.0%	0.0%	0.0%	0.0%	0.0%	87.2%	0.0%	0.0%	80.6%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....	0	0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....	0	0	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Austin**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	139,911	15,850	0	0	0	0	0	0	93,606	30,455
2. First Quarter	131,769	8,804	0	0	0	0	0	0	91,830	31,135
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	396,743	25,600	0	0	0	0	0	0	278,928	92,215
Total Member Ambulatory Encounters for Year:										
7. Physician	223,066	7,369	0	0	0	0	0	0	151,276	64,420
8. Non-Physician	265,622	8,673	0	0	0	0	0	0	140,044	116,905
9. Total	488,688	16,042	0	0	0	0	0	0	291,321	181,325
10. Hospital Patient Days Incurred	40,320	480	0	0	0	0	0	0	32,160	7,680
11. Number of Inpatient Admissions	9,196	136	0	0	0	0	0	0	7,941	1,119
12. Health Premiums Written	153,057,390	3,977,128	0	0	0	0	0	0	63,235,658	85,844,604
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	153,176,614	3,984,600	0	0	0	0	0	0	63,415,875	85,776,139
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	141,820,625	6,783,989	0	0	0	0	0	0	51,526,478	83,510,158
18. Amount Incurred for Provision of Health Care Services	139,068,421	3,615,232	0	0	0	0	0	0	49,921,357	85,531,832

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Austin

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	131,769	0	0	0	0	91,830	0	0	8,804	31,135
2. MEMBER MONTHS.....	396,743	0	0	0	0	278,928	0	0	25,600	92,215
3. Direct Premium Income.....	153,057,390	(34,991)	0	0	0	63,235,658	0	XXXXXXXX	4,012,120	85,844,604
4. Net Premium Income.....	153,092,435	15,928	0	0	0	63,224,469	0	0	4,011,097	85,840,941
5. Change in unearned premium reserve and reserve for rate credits.....	119,224	0	0	0	0	180,217	0	0	7,472	(68,465)
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).....	153,211,659	15,928	0	0	0	63,404,686	0	0	4,018,569	85,772,476
11. Hospital & Medical Benefits.....	139,068,421	76,186	0	0	0	49,921,357	0	0	3,539,046	85,531,832
12. Net Reins Recoveries Incurred.....	20,044	(188,122)	0	0	0	(195,834)	0	0	0	404,000
13. TOTAL MEDICAL & HOSP (L11 less L12).....	139,048,378	264,309	0	0	0	50,117,191	0	0	3,539,046	85,127,832
14. Claims Adjustment Expenses.....	3,432,378	(45,878)	0	0	0	1,547,746	0	0	101,273	1,829,236
15. General Administrative Expenses.....	18,744,022	378,665	0	0	0	7,601,666	0	0	481,832	10,281,858
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).....	161,224,777	597,096	0	0	0	59,266,603	0	0	4,122,152	97,238,926
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(8,013,119)	(581,168)	0	0	0	4,138,082	0	0	(103,582)	(11,466,451)
19. Net Investments Gains / (Losses).....	235,845	25	0	0	0	97,601	0	0	6,186	132,033
20. Aggregate write-ins for other expenses.....	12,838	12,838	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(7,764,436)	(568,305)	0	0	0	4,235,684	0	0	(97,396)	(11,334,418)
22. Federal and foreign income taxes incurred.....	335,505	35	0	0	0	138,845	0	0	8,800	187,826
23. NET INCOME/(LOSS) (L21 less L22).....	(8,099,941)	(568,340)	0	0	0	4,096,839	0	0	(106,196)	(11,522,244)
24 Medical Loss Ratio	90.8%	1659.4%	0.0%	0.0%	0.0%	79.3%	0.0%	0.0%	88.2%	99.2%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		17	(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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Austin

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	131,769	0	0	0	0	91,830	0	0	8,804	31,135
2. MEMBER MONTHS.....	396,743	0	0	0	0	278,928	0	0	25,600	92,215
3. Direct Premium Income.....	153,057,390	(34,991)	0	0	0	63,235,658	0	XXXXXXXX	4,012,120	85,844,604
4. Net Premium Income.....	153,092,435	15,928	0	0	0	63,224,469	0	0	4,011,097	85,840,941
5. Change in unearned premium reserve and reserve for rate credits.....	119,224	0	0	0	0	180,217	0	0	7,472	(68,465)
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).....	153,211,659	15,928	0	0	0	63,404,686	0	0	4,018,569	85,772,476
11. Hospital & Medical Benefits.....	139,068,421	76,186	0	0	0	49,921,357	0	0	3,539,046	85,531,832
12. Net Reins Recoveries Incurred.....	20,044	(188,122)	0	0	0	(195,834)	0	0	0	404,000
13. TOTAL MEDICAL & HOSP (L11 less L12).....	139,048,378	264,309	0	0	0	50,117,191	0	0	3,539,046	85,127,832
14. Claims Adjustment Expenses.....	3,432,378	(45,878)	0	0	0	1,547,746	0	0	101,273	1,829,236
15. General Administrative Expenses.....	18,744,022	378,665	0	0	0	7,601,666	0	0	481,832	10,281,858
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).....	161,224,777	597,096	0	0	0	59,266,603	0	0	4,122,152	97,238,926
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(8,013,119)	(581,168)	0	0	0	4,138,082	0	0	(103,582)	(11,466,451)
19. Net Investments Gains / (Losses).....	235,845	25	0	0	0	97,601	0	0	6,186	132,033
20. Aggregate write-ins for other expenses.....	12,838	12,838	0	0	0	0	0	0	0	0
21. INCOME/LOSSES after cap. gains tax before FIT Items (L18 to L20).....	(7,764,436)	(568,305)	0	0	0	4,235,684	0	0	(97,396)	(11,334,418)
22. Federal and foreign income taxes incurred.....	335,505	35	0	0	0	138,845	0	0	8,800	187,826
23. NET INCOME/(LOSS) (L21 less L22).....	(8,099,941)	(568,340)	0	0	0	4,096,839	0	0	(106,196)	(11,522,244)
24 Medical Loss Ratio	90.8%	1659.4%	0.0%	0.0%	0.0%	79.3%	0.0%	0.0%	88.2%	99.2%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		17	(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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Lubbock**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	38,482	4,271	0	0	0	0	0	0	34,211	0
2. First Quarter	38,780	4,453	0	0	0	0	0	0	34,327	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	116,824	13,071	0	0	0	0	0	0	103,753	0
Total Member Ambulatory Encounters for Year:										
7. Physician	57,122	4,351	0	0	0	0	0	0	52,771	0
8. Non-Physician	196,928	4,438	0	0	0	0	0	0	192,490	0
9. Total	254,050	8,789	0	0	0	0	0	0	245,261	0
10. Hospital Patient Days Incurred	18,522	229	0	0	0	0	0	0	18,293	0
11. Number of Inpatient Admissions	4,239	58	0	0	0	0	0	0	4,181	0
12. Health Premiums Written	52,233,918	1,581,501	0	0	0	0	0	0	50,652,417	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	52,547,500	1,595,518	0	0	0	0	0	0	50,951,982	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	43,291,502	1,250,267	0	0	0	0	0	0	42,041,235	0
18. Amount Incurred for Provision of Health Care Services	47,944,754	1,299,291	0	0	0	0	0	0	46,645,463	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Lubbock

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **X**

	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.....	38,780	0	0	0	0	34,327	0	0	4,453	0
2. MEMBER MONTHS.....	116,824	0	0	0	0	103,753	0	0	13,071	0
3. Direct Premium Income.....	52,233,918	0	0	0	0	50,652,417	0	XXXXXXXX	1,581,501	0
4. Net Premium Income.....	52,229,632	0	0	0	0	50,648,653	0	0	1,580,978	0
5. Change in unearned premium reserve and reserve for rate credits.....	313,582	0	0	0	0	299,565	0	0	14,017	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).....	52,543,214	0	0	0	0	50,948,218	0	0	1,594,995	0
11. Hospital & Medical Benefits.....	47,944,754	0	0	0	0	46,645,463	0	0	1,299,291	0
12. Net Reins Recoveries Incurred.....	(200,785)	0	0	0	0	(200,785)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	48,145,538	0	0	0	0	46,846,248	0	0	1,299,291	0
14. Claims Adjustment Expenses.....	1,171,107	0	0	0	0	1,131,245	0	0	39,862	0
15. General Administrative Expenses.....	5,876,874	0	0	0	0	5,685,616	0	0	191,258	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).....	55,193,519	0	0	0	0	53,663,109	0	0	1,530,411	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(2,650,306)	0	0	0	0	(2,714,890)	0	0	64,585	0
19. Net Investments Gains / (Losses).....	80,882	0	0	0	0	78,427	0	0	2,455	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).....	(2,569,424)	0	0	0	0	(2,636,464)	0	0	67,040	0
22. Federal and foreign income taxes incurred.....	115,060	0	0	0	0	111,567	0	0	3,493	0
23. NET INCOME/(LOSS) (L21 less L22).....	(2,684,484)	0	0	0	0	(2,748,031)	0	0	63,547	0
24 Medical Loss Ratio	92.2%	0.0%	0.0%	0.0%	0.0%	92.5%	0.0%	0.0%	82.2%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Lubbock

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	38,780	0	0	0	0	34,327	0	0	4,453	0
2. MEMBER MONTHS.....	116,824	0	0	0	0	103,753	0	0	13,071	0
3. Direct Premium Income.....	52,233,918	0	0	0	0	50,652,417	0	XXXXXXXX	1,581,501	0
4. Net Premium Income.....	52,229,632	0	0	0	0	50,648,653	0	0	1,580,978	0
5. Change in unearned premium reserve and reserve for rate credits.....	313,582	0	0	0	0	299,565	0	0	14,017	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).....	52,543,214	0	0	0	0	50,948,218	0	0	1,594,995	0
11. Hospital & Medical Benefits.....	47,944,754	0	0	0	0	46,645,463	0	0	1,299,291	0
12. Net Reins Recoveries Incurred.....	(200,785)	0	0	0	0	(200,785)	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	48,145,538	0	0	0	0	46,846,248	0	0	1,299,291	0
14. Claims Adjustment Expenses.....	1,171,107	0	0	0	0	1,131,245	0	0	39,862	0
15. General Administrative Expenses.....	5,876,874	0	0	0	0	5,685,616	0	0	191,258	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).....	55,193,519	0	0	0	0	53,663,109	0	0	1,530,411	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(2,650,306)	0	0	0	0	(2,714,890)	0	0	64,585	0
19. Net Investments Gains / (Losses).....	80,882	0	0	0	0	78,427	0	0	2,455	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).....	(2,569,424)	0	0	0	0	(2,636,464)	0	0	67,040	0
22. Federal and foreign income taxes incurred.....	115,060	0	0	0	0	111,567	0	0	3,493	0
23. NET INCOME/(LOSS) (L21 less L22).....	(2,684,484)	0	0	0	0	(2,748,031)	0	0	63,547	0
24 Medical Loss Ratio	92.2%	0.0%	0.0%	0.0%	0.0%	92.5%	0.0%	0.0%	82.2%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Corpus Christi**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	31,379	1,061	0	0	0	0	0	0	30,318	0
2. First Quarter	31,303	1,129	0	0	0	0	0	0	30,174	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	94,421	3,256	0	0	0	0	0	0	91,165	0
Total Member Ambulatory Encounters for Year:										
7. Physician	166,131	7,796	0	0	0	0	0	0	158,335	0
8. Non-Physician	224,186	13,138	0	0	0	0	0	0	211,048	0
9. Total	390,317	20,934	0	0	0	0	0	0	369,383	0
10. Hospital Patient Days Incurred	15,665	29	0	0	0	0	0	0	15,636	0
11. Number of Inpatient Admissions	3,072	14	0	0	0	0	0	0	3,058	0
12. Health Premiums Written	68,378,243	546,170	0	0	0	0	0	0	67,832,073	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	68,516,662	549,035	0	0	0	0	0	0	67,967,627	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	60,465,476	475,984	0	0	0	0	0	0	59,989,492	0
18. Amount Incurred for Provision of Health Care Services	64,466,738	498,828	0	0	0	0	0	0	63,967,910	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Corpus Christi

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	31,303	0	0	0	0	30,174	0	0	1,129	0
2. MEMBER MONTHS.....	94,421	0	0	0	0	91,165	0	0	3,256	0
3. Direct Premium Income.....	68,378,243	0	0	0	0	67,832,073	0	XXXXXXXX	546,170	0
4. Net Premium Income.....	68,375,245	0	0	0	0	67,829,205	0	0	546,040	0
5. Change in unearned premium reserve and reserve for rate credits.....	138,419	0	0	0	0	135,554	0	0	2,865	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).....	68,513,664	0	0	0	0	67,964,759	0	0	548,905	0
11. Hospital & Medical Benefits.....	64,466,738	0	0	0	0	63,967,910	0	0	498,828	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	64,466,738	0	0	0	0	63,967,910	0	0	498,828	0
14. Claims Adjustment Expenses.....	1,539,609	0	0	0	0	1,525,665	0	0	13,943	0
15. General Administrative Expenses.....	7,704,071	0	0	0	0	7,638,258	0	0	65,813	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).....	73,710,418	0	0	0	0	73,131,834	0	0	578,584	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(5,196,754)	0	0	0	0	(5,167,074)	0	0	(29,679)	0
19. Net Investments Gains / (Losses).....	105,466	0	0	0	0	104,621	0	0	845	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).....	(5,091,288)	0	0	0	0	(5,062,454)	0	0	(28,834)	0
22. Federal and foreign income taxes incurred.....	150,032	0	0	0	0	148,830	0	0	1,202	0
23. NET INCOME/(LOSS) (L21 less L22).....	(5,241,320)	0	0	0	0	(5,211,284)	0	0	(30,036)	0
24 Medical Loss Ratio	94.3%	0.0%	0.0%	0.0%	0.0%	94.3%	0.0%	0.0%	91.4%	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				

TEXAS HMO SUPPLEMENT

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Corpus Christi

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	31,303	0	0	0	0	30,174	0	0	1,129	0
2. MEMBER MONTHS.....	94,421	0	0	0	0	91,165	0	0	3,256	0
3. Direct Premium Income.....	68,378,243	0	0	0	0	67,832,073	0	XXXXXXXX	546,170	0
4. Net Premium Income.....	68,375,245	0	0	0	0	67,829,205	0	0	546,040	0
5. Change in unearned premium reserve and reserve for rate credits.....	138,419	0	0	0	0	135,554	0	0	2,865	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).....	68,513,664	0	0	0	0	67,964,759	0	0	548,905	0
11. Hospital & Medical Benefits.....	64,466,738	0	0	0	0	63,967,910	0	0	498,828	0
12. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
13. TOTAL MEDICAL & HOSP (L11 less L12).....	64,466,738	0	0	0	0	63,967,910	0	0	498,828	0
14. Claims Adjustment Expenses.....	1,539,609	0	0	0	0	1,525,665	0	0	13,943	0
15. General Administrative Expenses.....	7,704,071	0	0	0	0	7,638,258	0	0	65,813	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).....	73,710,418	0	0	0	0	73,131,834	0	0	578,584	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(5,196,754)	0	0	0	0	(5,167,074)	0	0	(29,679)	0
19. Net Investments Gains / (Losses).....	105,466	0	0	0	0	104,621	0	0	845	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).....	(5,091,288)	0	0	0	0	(5,062,454)	0	0	(28,834)	0
22. Federal and foreign income taxes incurred.....	150,032	0	0	0	0	148,830	0	0	1,202	0
23. NET INCOME/(LOSS) (L21 less L22).....	(5,241,320)	0	0	0	0	(5,211,284)	0	0	(30,036)	0
24 Medical Loss Ratio	94.3%	0.0%	0.0%	0.0%	0.0%	94.3%	0.0%	0.0%	91.4%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **Dallas**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	32,123	0	0	0	0	0	0	2,663	29,460	0
2. First Quarter	31,277	0	0	0	0	0	0	2,637	28,640	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	94,926	0	0	0	0	0	0	8,570	86,356	0
Total Member Ambulatory Encounters for Year:										
7. Physician	35,307	0	0	0	0	0	0	19,090	16,218	0
8. Non-Physician	42,081	0	0	0	0	0	0	3,333	38,748	0
9. Total	77,388	0	0	0	0	0	0	22,423	54,966	0
10. Hospital Patient Days Incurred	31,681	0	0	0	0	0	0	7,003	24,678	0
11. Number of Inpatient Admissions	5,196	0	0	0	0	0	0	904	4,292	0
12. Health Premiums Written	123,296,192	0	0	0	0	0	0	11,847,256	111,448,936	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	122,034,510	0	0	0	0	0	0	9,872,946	112,161,564	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	99,564,180	0	0	0	0	0	0	7,404,123	92,160,057	0
18. Amount Incurred for Provision of Health Care Services	104,886,621	0	0	0	0	0	0	7,014,949	97,871,673	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	31,277	0	2,637	0	0	28,640	0	0	0	0
2. MEMBER MONTHS.....	94,926	0	8,570	0	0	86,356	0	0	0	0
3. Direct Premium Income.....	123,296,192	0	11,847,256	0	0	111,448,936	0	XXXXXXXX	0	0
4. Net Premium Income.....	123,294,118	0	11,847,018	0	0	111,447,100	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,261,682)	0	(1,974,310)	0	0	712,628	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).....	122,032,436	0	9,872,708	0	0	112,159,728	0	0	0	0
11. Hospital & Medical Benefits.....	104,886,621	0	7,014,949	0	0	97,871,673	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).....	104,886,621	0	7,014,949	0	0	97,871,673	0	0	0	0
14. Claims Adjustment Expenses.....	2,584,408	0	220,074	0	0	2,364,334	0	0	0	0
15. General Administrative Expenses.....	12,824,628	0	559,534	0	0	12,265,094	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).....	120,295,658	0	7,794,556	0	0	112,501,101	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,736,779	0	2,078,152	0	0	(341,373)	0	0	0	0
19. Net Investments Gains / (Losses).....	187,849	0	15,197	0	0	172,652	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).....	1,924,628	0	2,093,349	0	0	(168,721)	0	0	0	0
22. Federal and foreign income taxes incurred.....	267,229	0	21,619	0	0	245,609	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,657,400	0	2,071,730	0	0	(414,330)	0	0	0	0
24 Medical Loss Ratio	85.1%	0.0%	59.2%	0.0%	0.0%	87.8%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

Dallas

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	31,277	0	2,637	0	0	28,640	0	0	0	0
2. MEMBER MONTHS.....	94,926	0	8,570	0	0	86,356	0	0	0	0
3. Direct Premium Income.....	123,296,192	0	11,847,256	0	0	111,448,936	0	XXXXXXXX	0	0
4. Net Premium Income.....	123,294,118	0	11,847,018	0	0	111,447,100	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(1,261,682)	0	(1,974,310)	0	0	712,628	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).....	122,032,436	0	9,872,708	0	0	112,159,728	0	0	0	0
11. Hospital & Medical Benefits.....	104,886,621	0	7,014,949	0	0	97,871,673	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).....	104,886,621	0	7,014,949	0	0	97,871,673	0	0	0	0
14. Claims Adjustment Expenses.....	2,584,408	0	220,074	0	0	2,364,334	0	0	0	0
15. General Administrative Expenses.....	12,824,628	0	559,534	0	0	12,265,094	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).....	120,295,658	0	7,794,556	0	0	112,501,101	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	1,736,779	0	2,078,152	0	0	(341,373)	0	0	0	0
19. Net Investments Gains / (Losses).....	187,849	0	15,197	0	0	172,652	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).....	1,924,628	0	2,093,349	0	0	(168,721)	0	0	0	0
22. Federal and foreign income taxes incurred.....	267,229	0	21,619	0	0	245,609	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	1,657,400	0	2,071,730	0	0	(414,330)	0	0	0	0
24 Medical Loss Ratio	85.1%	0.0%	59.2%	0.0%	0.0%	87.8%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **MRSAWest**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	20,614	0	0	0	0	0	0	0	20,614	0
2. First Quarter	20,603	0	0	0	0	0	0	0	20,603	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	62,011	0	0	0	0	0	0	0	62,011	0
Total Member Ambulatory Encounters for Year:										
7. Physician	29,262	0	0	0	0	0	0	0	29,262	0
8. Non-Physician	81,284	0	0	0	0	0	0	0	81,284	0
9. Total	110,546	0	0	0	0	0	0	0	110,546	0
10. Hospital Patient Days Incurred	14,692	0	0	0	0	0	0	0	14,692	0
11. Number of Inpatient Admissions	2,657	0	0	0	0	0	0	0	2,657	0
12. Health Premiums Written	86,696,030	0	0	0	0	0	0	0	86,696,030	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	86,784,954	0	0	0	0	0	0	0	86,784,954	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	70,446,943	0	0	0	0	0	0	0	70,446,943	0
18. Amount Incurred for Provision of Health Care Services	84,802,184	0	0	0	0	0	0	0	84,802,184	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSAWest

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	20,603	0	0	0	0	20,603	0	0	0	0
2. MEMBER MONTHS.....	62,011	0	0	0	0	62,011	0	0	0	0
3. Direct Premium Income.....	86,696,030	0	0	0	0	86,696,030	0	XXXXXXXX	0	0
4. Net Premium Income.....	86,694,897	0	0	0	0	86,694,897	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	88,924	0	0	0	0	88,924	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).....	86,783,821	0	0	0	0	86,783,821	0	0	0	0
11. Hospital & Medical Benefits.....	84,802,184	0	0	0	0	84,802,184	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).....	84,802,184	0	0	0	0	84,802,184	0	0	0	0
14. Claims Adjustment Expenses.....	1,769,641	0	0	0	0	1,769,641	0	0	0	0
15. General Administrative Expenses.....	9,009,079	0	0	0	0	9,009,079	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).....	95,580,904	0	0	0	0	95,580,904	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(8,797,083)	0	0	0	0	(8,797,083)	0	0	0	0
19. Net Investments Gains / (Losses).....	133,590	0	0	0	0	133,590	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).....	(8,663,493)	0	0	0	0	(8,663,493)	0	0	0	0
22. Federal and foreign income taxes incurred.....	190,041	0	0	0	0	190,041	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(8,853,534)	0	0	0	0	(8,853,534)	0	0	0	0
24 Medical Loss Ratio	97.8%	0.0%	0.0%	0.0%	0.0%	97.8%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSAWest

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	20,603	0	0	0	0	20,603	0	0	0	0
2. MEMBER MONTHS.....	62,011	0	0	0	0	62,011	0	0	0	0
3. Direct Premium Income.....	86,696,030	0	0	0	0	86,696,030	0	XXXXXXXX	0	0
4. Net Premium Income.....	86,694,897	0	0	0	0	86,694,897	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	88,924	0	0	0	0	88,924	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).....	86,783,821	0	0	0	0	86,783,821	0	0	0	0
11. Hospital & Medical Benefits.....	84,802,184	0	0	0	0	84,802,184	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).....	84,802,184	0	0	0	0	84,802,184	0	0	0	0
14. Claims Adjustment Expenses.....	1,769,641	0	0	0	0	1,769,641	0	0	0	0
15. General Administrative Expenses.....	9,009,079	0	0	0	0	9,009,079	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).....	95,580,904	0	0	0	0	95,580,904	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	(8,797,083)	0	0	0	0	(8,797,083)	0	0	0	0
19. Net Investments Gains / (Losses).....	133,590	0	0	0	0	133,590	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).....	(8,663,493)	0	0	0	0	(8,663,493)	0	0	0	0
22. Federal and foreign income taxes incurred.....	190,041	0	0	0	0	190,041	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	(8,853,534)	0	0	0	0	(8,853,534)	0	0	0	0
24. Medical Loss Ratio	97.8%	0.0%	0.0%	0.0%	0.0%	97.8%	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				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **MRSACentral**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	15,551	0	0	0	0	0	0	0	15,551	0
2. First Quarter	15,584	0	0	0	0	0	0	0	15,584	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	46,965	0	0	0	0	0	0	0	46,965	0
Total Member Ambulatory Encounters for Year:										
7. Physician	26,222	0	0	0	0	0	0	0	26,222	0
8. Non-Physician	55,972	0	0	0	0	0	0	0	55,972	0
9. Total	82,194	0	0	0	0	0	0	0	82,194	0
10. Hospital Patient Days Incurred	12,339	0	0	0	0	0	0	0	12,339	0
11. Number of Inpatient Admissions	2,520	0	0	0	0	0	0	0	2,520	0
12. Health Premiums Written	65,363,521	0	0	0	0	0	0	0	65,363,521	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	65,423,197	0	0	0	0	0	0	0	65,423,197	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	55,436,520	0	0	0	0	0	0	0	55,436,520	0
18. Amount Incurred for Provision of Health Care Services	54,765,155	0	0	0	0	0	0	0	54,765,155	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSACentral

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	15,584	0	0	0	0	15,584	0	0	0	0
2. MEMBER MONTHS.....	46,965	0	0	0	0	46,965	0	0	0	0
3. Direct Premium Income.....	65,363,521	0	0	0	0	65,363,521	0	XXXXXXXX	0	0
4. Net Premium Income.....	65,362,470	0	0	0	0	65,362,470	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	59,676	0	0	0	0	59,676	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).....	65,422,146	0	0	0	0	65,422,146	0	0	0	0
11. Hospital & Medical Benefits.....	54,765,155	0	0	0	0	54,765,155	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).....	54,765,155	0	0	0	0	54,765,155	0	0	0	0
14. Claims Adjustment Expenses.....	1,186,088	0	0	0	0	1,186,088	0	0	0	0
15. General Administrative Expenses.....	6,867,823	0	0	0	0	6,867,823	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).....	62,819,066	0	0	0	0	62,819,066	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	2,603,081	0	0	0	0	2,603,081	0	0	0	0
19. Net Investments Gains / (Losses).....	100,707	0	0	0	0	100,707	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).....	2,703,787	0	0	0	0	2,703,787	0	0	0	0
22. Federal and foreign income taxes incurred.....	143,262	0	0	0	0	143,262	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,560,525	0	0	0	0	2,560,525	0	0	0	0
24 Medical Loss Ratio	83.8%	0.0%	0.0%	0.0%	0.0%	83.8%	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				

TEXAS HMO SUPPLEMENT

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

MRSACentral

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	15,584	0	0	0	0	15,584	0	0	0	0
2. MEMBER MONTHS.....	46,965	0	0	0	0	46,965	0	0	0	0
3. Direct Premium Income.....	65,363,521	0	0	0	0	65,363,521	0	XXXXXXXX	0	0
4. Net Premium Income.....	65,362,470	0	0	0	0	65,362,470	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	59,676	0	0	0	0	59,676	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).....	65,422,146	0	0	0	0	65,422,146	0	0	0	0
11. Hospital & Medical Benefits.....	54,765,155	0	0	0	0	54,765,155	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).....	54,765,155	0	0	0	0	54,765,155	0	0	0	0
14. Claims Adjustment Expenses.....	1,186,088	0	0	0	0	1,186,088	0	0	0	0
15. General Administrative Expenses.....	6,867,823	0	0	0	0	6,867,823	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).....	62,819,066	0	0	0	0	62,819,066	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	2,603,081	0	0	0	0	2,603,081	0	0	0	0
19. Net Investments Gains / (Losses).....	100,707	0	0	0	0	100,707	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).....	2,703,787	0	0	0	0	2,703,787	0	0	0	0
22. Federal and foreign income taxes incurred.....	143,262	0	0	0	0	143,262	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	2,560,525	0	0	0	0	2,560,525	0	0	0	0
24 Medical Loss Ratio	83.8%	0.0%	0.0%	0.0%	0.0%	83.8%	0.0%	0.0%	0.0%	0.0%
NON-TAXABLE COMMERCIAL RISK ENROLLEES.....	0	0	(Examples of non-taxable enrollees are State			* Other (identify products(s); eg Non-Risk Business, PPO):				
NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....	0	0	of Texas enrollees and Federal employees.)			0				

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

STATEMENT AS OF **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

REPORT FOR DIVISION: **South TX**

(Location)

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	6,967	0	0	0	0	0	0	3,247	3,720	0
2. First Quarter	6,649	0	0	0	0	0	0	3,329	3,320	0
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	20,972	0	0	0	0	0	0	10,503	10,469	0
Total Member Ambulatory Encounters for Year:										
7. Physician	44,649	0	0	0	0	0	0	29,183	15,466	0
8. Non-Physician	71,234	0	0	0	0	0	0	5,096	66,138	0
9. Total	115,883	0	0	0	0	0	0	34,279	81,604	0
10. Hospital Patient Days Incurred	7,327	0	0	0	0	0	0	7,327	0	0
11. Number of Inpatient Admissions	1,155	0	0	0	0	0	0	1,155	0	0
12. Health Premiums Written	31,342,997	0	0	0	0	0	0	15,909,749	15,433,249	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property & Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	27,303,071	0	0	0	0	0	0	13,097,890	14,205,182	0
Property/Casualty										
16. Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	24,763,457	0	0	0	0	0	0	11,138,035	13,625,422	0
18. Amount Incurred for Provision of Health Care Services	24,054,861	0	0	0	0	0	0	10,724,191	13,330,670	0

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

South TX
(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter X

	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.....	6,649	0	3,329	0	0	3,320	0	0	0	0
2. MEMBER MONTHS.....	20,972	0	10,503	0	0	10,469	0	0	0	0
3. Direct Premium Income.....	31,342,997	0	15,909,749	0	0	15,433,249	0	XXXXXXXX	0	0
4. Net Premium Income.....	31,342,709	0	15,909,461	0	0	15,433,249	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(4,039,926)	0	(2,811,859)	0	0	(1,228,067)	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).....	27,302,783	0	13,097,602	0	0	14,205,182	0	0	0	0
11. Hospital & Medical Benefits.....	24,054,861	0	10,724,191	0	0	13,330,670	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).....	24,054,861	0	10,724,191	0	0	13,330,670	0	0	0	0
14. Claims Adjustment Expenses.....	631,765	0	317,139	0	0	314,627	0	0	0	0
15. General Administrative Expenses.....	2,410,562	0	804,026	0	0	1,606,536	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).....	27,097,189	0	11,845,356	0	0	15,251,833	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	205,595	0	1,252,246	0	0	(1,046,651)	0	0	0	0
19. Net Investments Gains / (Losses).....	42,028	0	20,162	0	0	21,867	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).....	247,623	0	1,272,408	0	0	(1,024,785)	0	0	0	0
22. Federal and foreign income taxes incurred.....	59,788	0	28,681	0	0	31,107	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	187,835	0	1,243,726	0	0	(1,055,891)	0	0	0	0
24 Medical Loss Ratio	76.7%	0.0%	67.4%	0.0%	0.0%	86.4%	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				

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **MARCH 31, 2016**

OF THE **Superior Healthplan, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION

South TX

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Year-to-Date X

	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.....	6,649	0	3,329	0	0	3,320	0	0	0	0
2. MEMBER MONTHS.....	20,972	0	10,503	0	0	10,469	0	0	0	0
3. Direct Premium Income.....	31,342,997	0	15,909,749	0	0	15,433,249	0	XXXXXXXX	0	0
4. Net Premium Income.....	31,342,709	0	15,909,461	0	0	15,433,249	0	0	0	0
5. Change in unearned premium reserve and reserve for rate credits.....	(4,039,926)	0	(2,811,859)	0	0	(1,228,067)	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).....	27,302,783	0	13,097,602	0	0	14,205,182	0	0	0	0
11. Hospital & Medical Benefits.....	24,054,861	0	10,724,191	0	0	13,330,670	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).....	24,054,861	0	10,724,191	0	0	13,330,670	0	0	0	0
14. Claims Adjustment Expenses.....	631,765	0	317,139	0	0	314,627	0	0	0	0
15. General Administrative Expenses.....	2,410,562	0	804,026	0	0	1,606,536	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).....	27,097,189	0	11,845,356	0	0	15,251,833	0	0	0	0
18. NET UNDERWRITING GAIN/LOSS (L10 - L17).....	205,595	0	1,252,246	0	0	(1,046,651)	0	0	0	0
19. Net Investments Gains / (Losses).....	42,028	0	20,162	0	0	21,867	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).....	247,623	0	1,272,408	0	0	(1,024,785)	0	0	0	0
22. Federal and foreign income taxes incurred.....	59,788	0	28,681	0	0	31,107	0	0	0	0
23. NET INCOME/(LOSS) (L21 less L22).....	187,835	0	1,243,726	0	0	(1,055,891)	0	0	0	0
24. Medical Loss Ratio	76.7%	0.0%	67.4%	0.0%	0.0%	86.4%	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				