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HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2015
OF THE CONDITION AND AFFAIRS OF THE

HUMANA HEALTH PLANS OF PUERTO RICO, INC.

NAIC Group Code 0119 (Current) 0119 (Prior) NAIC Company Code 95721 Employer's ID Number 66-0406896

Organized under the Laws of Puerto Rico, State of Domicile or Port of Entry PR

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [X] No [ ]

Incorporated/Organized 12/08/1983 Commenced Business 05/01/1986

Statutory Home Office 383 FD Roosevelt Avenue, San Juan , PR, US 00918-2131
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 383 FD Roosevelt Avenue
(Street and Number)
San Juan , PR, US 00918-2131, 787-282-7900
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 383 FD Roosevelt Avenue, San Juan , PR, US 00918-2131
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 383 FD Roosevelt Avenue
(Street and Number)
San Juan , PR, US 00918-2131, 787-622-5553
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.humana.com

Statutory Statement Contact Wilma Rodriguez, 787-622-5553
(Name) (Area Code) (Telephone Number)
wrodriguez@humana.com, 866-423-7146
(E-mail Address) (FAX Number)

OFFICERS

President	Earl Matthew Harper	Secretary	Luis Angel Torres Olivera
Sr. VP & CFO	Brian Andrew Kane	Assistant Secretary	Joan Olliges Lenahan

OTHER

Alan James Bailey, VP & Treasurer	Bruno Roger Piquin #, President, CarePlus and Puerto Rico Leader	William Mark Preston, VP-Investment Management
Timothy Alan Wheatley, President, Retail Segment		

DIRECTORS OR TRUSTEES

Elizabeth Diane Bierbower	Earl Matthew Harper	Jose Ivan Mercado
Luis Felipe Montaner M.D.	James Elmer Murray (Chairman)	

State of _____
County of _____ SS:

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Earl Matthew Harper
President

Luis Angel Torres Olivera
Secretary

Alan James Bailey
VP & Treasurer

Subscribed and sworn to before me this
9th day of February, 2015

Notary Public.

a. Is this an original filing? ..... Yes [X] No [ ]
b. If no,
1. State the amendment number.....
2. Date filed .....
3. Number of pages attached.....

Affidavit # 11,233

ASSETS

		Current Year			Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)	100,260,439	0	100,260,439	126,099,636
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less $ 0 encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less $ 0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less $ 0 encumbrances)	0	0	0	0
5.	Cash ($ 4,485,680 , Schedule E - Part 1), cash equivalents ($ 0 , Schedule E - Part 2) and short-term investments ($ 3,271,442 , Schedule DA)	7,757,122	0	7,757,122	(713,039)
6.	Contract loans, (including $ 0 premium notes)	0	0	0	0
7.	Derivatives (Schedule DB)	0	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0	0
9.	Receivables for securities	0	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	108,017,561	0	108,017,561	125,386,597
13.	Title plants less $ 0 charged off (for Title insurers only)	0	0	0	0
14.	Investment income due and accrued	473,457	0	473,457	779,890
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	6,458,436	2,169,934	4,288,502	6,244,941
	15.2 Deferred premiums and agents' balances and installments booked but deferred and not yet due (including $ 0 earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums ($ 183,670) and contracts subject to redetermination ($ 6,803,577)	6,987,246	0	6,987,246	313,090
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17.	Amounts receivable relating to uninsured plans	14,505,963	0	14,505,963	7,744,213
18.1	Current federal and foreign income tax recoverable and interest thereon	2,605,819	0	2,605,819	3,073,949
18.2	Net deferred tax asset	0	0	0	0
19.	Guaranty funds receivable or on deposit	0	0	0	0
20.	Electronic data processing equipment and software	1,460,886	1,460,886	0	0
21.	Furniture and equipment, including health care delivery assets ($ 0)	1,243,747	1,243,747	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23.	Receivables from parent, subsidiaries and affiliates	0	0	0	0
24.	Health care ($ 3,843,155) and other amounts receivable	3,899,047	21,306	3,877,741	2,931,180
25.	Aggregate write-ins for other than invested assets	2,757,622	2,757,622	0	3,638,554
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	148,409,784	7,653,495	140,756,289	150,112,414
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	148,409,784	7,653,495	140,756,289	150,112,414
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Prepaid Expenses	1,870,088	1,870,088	0	0
2502.	Prepaid Commissions	775,224	775,224	0	0
2503.	Deposits	112,310	112,310	0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	3,638,554
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,757,622	2,757,622	0	3,638,554

LIABILITIES, CAPITAL AND SURPLUS

		Current Year			Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less $ 0 reinsurance ceded)	41,276,719	2,045,045	43,321,764	59,599,553
2.	Accrued medical incentive pool and bonus amounts	0	0	0	0
3.	Unpaid claims adjustment expenses	377,914	0	377,914	472,493
4.	Aggregate health policy reserves, including the liability of $ 403,401 for medical loss ratio rebate per the Public Health Service Act	11,280,858	0	11,280,858	1,466,670
5.	Aggregate life policy reserves	0	0	0	0
6.	Property/casualty unearned premium reserves	0	0	0	0
7.	Aggregate health claim reserves	20,000	0	20,000	1,684,321
8.	Premiums received in advance	468,958	0	468,958	141,344
9.	General expenses due or accrued	7,056,014	0	7,056,014	8,995,891
10.1	Current federal and foreign income tax payable and interest thereon (including $ 0 on realized capital gains (losses))	0	0	0	0
10.2	Net deferred tax liability	0	0	0	0
11.	Ceded reinsurance premiums payable	16,742	0	16,742	18,877
12.	Amounts withheld or retained for the account of others	859,528	0	859,528	1,593,338
13.	Remittances and items not allocated	40,250	0	40,250	195,429
14.	Borrowed money (including $ 0 current) and interest thereon $ 0 (including $ 0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates	958,140	0	958,140	1,694,163
16.	Derivatives	0	0	0	0
17.	Payable for securities	0	0	0	0
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties (with $ 0 authorized reinsurers, $ 0 unauthorized reinsurers and $ 0 certified reinsurers)	0	0	0	0
20.	Reinsurance in unauthorized and certified ($ 0) companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22.	Liability for amounts held under uninsured plans	86,756	0	86,756	46,396
23.	Aggregate write-ins for other liabilities (including $ 623,041 current)	623,041	0	623,041	4,678,173
24.	Total liabilities (Lines 1 to 23)	63,064,920	2,045,045	65,109,965	80,586,648
25.	Aggregate write-ins for special surplus funds	XXX	XXX	7,640,630	7,380,018
26.	Common capital stock	XXX	XXX	142,525	142,525
27.	Preferred capital stock	XXX	XXX	0	0
28.	Gross paid in and contributed surplus	XXX	XXX	29,088,070	28,681,474
29.	Surplus notes	XXX	XXX	0	0
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	(600,000)	(600,000)
31.	Unassigned funds (surplus)	XXX	XXX	39,375,099	33,921,749
32.	Less treasury stock, at cost:				
	32.1 0 shares common (value included in Line 26 $ 0)	XXX	XXX	0	0
	32.2 0 shares preferred (value included in Line 27 $ 0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	75,646,324	69,525,766
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	140,756,289	150,112,414
	DETAILS OF WRITE-INS				
2301.	Accrued Other	598,230	0	598,230	825,000
2302.	Unclaimed Property	24,811	0	24,811	597,020
2303.	Risk Adjustment Premium Payables	0	0	0	3,256,153
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	623,041	0	623,041	4,678,173
2501.	Special Surplus - Projected HCRL Assessment for the Upcoming Year	XXX	XXX	7,640,630	7,380,018
2502.		XXX	XXX		
2503.		XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	7,640,630	7,380,018
3001.	Aggregate Write-ins for Other than Surplus Fund	XXX	XXX	(600,000)	(600,000)
3002.		XXX	XXX		
3003.		XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099.	Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	(600,000)	(600,000)

STATEMENT OF REVENUE AND EXPENSES

		Current Year		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months	XXX	723,572	682,784
2.	Net premium income (including $ 0 non-health premium income)	XXX	417,399,066	391,594,145
3.	Change in unearned premium reserves and reserve for rate credits	XXX	340,062	(130,218)
4.	Fee-for-service (net of $ 0 medical expenses)	XXX	0	0
5.	Risk revenue	XXX	0	0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0
8.	Total revenues (Lines 2 to 7)	XXX	417,739,128	391,463,927
	Hospital and Medical:			
9.	Hospital/medical benefits	14,802,533	269,994,072	280,104,004
10.	Other professional services	0	2,837,939	6,430,471
11.	Outside referrals	0	0	0
12.	Emergency room and out-of-area	2,596,028	11,207,669	7,929,779
13.	Prescription drugs	0	84,320,375	73,213,065
14.	Aggregate write-ins for other hospital and medical	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts	0	0	0
16.	Subtotal (Lines 9 to 15)	17,398,562	368,360,055	367,677,319
	Less:			
17.	Net reinsurance recoveries	0	0	0
18.	Total hospital and medical (Lines 16 minus 17)	17,398,562	368,360,055	367,677,319
19.	Non-health claims (net)	0	0	0
20.	Claims adjustment expenses, including $ 9,955,923 cost containment expenses	0	11,514,823	9,843,849
21.	General administrative expenses	0	40,568,240	39,839,800
22.	Increase in reserves for life and accident and health contracts (including $ 0 increase in reserves for life only)	0	207,000	(3,853,000)
23.	Total underwriting deductions (Lines 18 through 22)	17,398,562	420,650,118	413,507,968
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(2,910,990)	(22,044,041)
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)	0	3,410,108	3,882,197
26.	Net realized capital gains (losses) less capital gains tax of $ 0	0	1,655,539	(3,942)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	5,065,647	3,878,255
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $ 0) (amount charged off $ 0)]	0	0	0
29.	Aggregate write-ins for other income or expenses	0	6,021,019	(2,909)
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	8,175,676	(18,168,695)
31.	Federal and foreign income taxes incurred	XXX	476,905	0
32.	Net income (loss) (Lines 30 minus 31)	XXX	7,698,771	(18,168,695)
	DETAILS OF WRITE-INS			
0601.		XXX		
0602.		XXX		
0603		XXX		
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699.	Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.		XXX		
0702.		XXX		
0703		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799.	Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.	Miscellaneous Income	0	5,989,996	4,633
2902.	Gain/(Loss) on Disposal	0	31,023	(7,542)
2903				
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	6,021,019	(2,909)

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	69,525,766	87,032,699
34.	Net income or (loss) from Line 32	7,698,771	(18,168,695)
35.	Change in valuation basis of aggregate policy and claim reserves	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $ 0	(6,033)	7,987
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0
38.	Change in net deferred income tax	0	0
39.	Change in nonadmitted assets	(1,978,776)	119,654
40	Change in unauthorized and certified reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles	0	0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus	0	0
45.	Surplus adjustments:		
	45.1 Paid in	406,596	534,121
	45.2 Transferred to capital (Stock Dividend)	0	0
	45.3 Transferred from capital	0	0
46.	Dividends to stockholders	0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	6,120,558	(17,506,933)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	75,646,324	69,525,766
	DETAILS OF WRITE-INS		
4701.			
4702.			
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

CASH FLOW

		1 Current Year	2 Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	422,429,533	409,759,580
2.	Net investment income	4,413,263	4,867,694
3.	Miscellaneous income	0	0
4.	Total (Lines 1 through 3)	426,842,796	414,627,274
5.	Benefit and loss related payments	387,426,639	369,008,036
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	53,582,933	60,242,365
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of $ 0 tax on capital gains (losses)	8,775	0
10.	Total (Lines 5 through 9)	441,018,347	429,250,401
11.	Net cash from operations (Line 4 minus Line 10)	(14,175,551)	(14,623,127)
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	76,417,946	35,486,912
	12.2 Stocks	0	0
	12.3 Mortgage loans	0	0
	12.4 Real estate	0	0
	12.5 Other invested assets	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
	12.7 Miscellaneous proceeds	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	76,417,946	35,486,912
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	49,625,965	22,585,858
	13.2 Stocks	0	0
	13.3 Mortgage loans	0	0
	13.4 Real estate	0	0
	13.5 Other invested assets	0	0
	13.6 Miscellaneous applications	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	49,625,965	22,585,858
14.	Net increase (decrease) in contract loans and premium notes	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	26,791,981	12,901,054
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	406,596	534,121
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	(4,552,866)	(5,863,054)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(4,146,270)	(5,328,933)
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	8,470,161	(7,051,005)
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	(713,039)	6,337,966
	19.2 End of year (Line 18 plus Line 19.1)	7,757,122	(713,039)

Note: Supplemental disclosures of cash flow information for non-cash transactions:

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1.	Net premium income	417,399,066	11,075,476	0	0	0	18,627,069	390,751,590	(3,055,069)	0	0
2.	Change in unearned premium reserves and reserve for rate credit	340,062	340,062	0	0	0	0	0	0	0	0
3.	Fee-for-service (net of $ 0 medical expenses)	0	0	0	0	0	0	0	0	0	XXX
4.	Risk revenue	0	0	0	0	0	0	0	0	0	XXX
5.	Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	XXX
6.	Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7.	Total revenues (Lines 1 to 6)	417,739,128	11,415,538	0	0	0	18,627,069	390,751,590	(3,055,069)	0	0
8.	Hospital/medical benefits	269,934,072	2,685,123	0	0	0	11,739,911	257,355,636	(1,786,599)	0	XXX
9.	Other professional services	2,837,939	171,356	0	0	0	769,142	3,999,131	(2,101,691)	0	XXX
10.	Outside referrals	0	0	0	0	0	0	0	0	0	XXX
11.	Emergency room and out-of-area	11,207,669	1,137,487	0	0	0	0	10,070,182	0	0	XXX
12.	Prescription drugs	84,320,375	1,321,890	0	0	0	6,242,640	76,755,846	0	0	XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	0	0	0	0	0	0	0	0	0	XXX
15.	Subtotal (Lines 8 to 14)	368,360,055	5,315,857	0	0	0	18,751,693	348,180,794	(3,888,289)	0	XXX
16.	Net reinsurance recoveries	0	0	0	0	0	0	0	0	0	XXX
17.	Total medical and hospital (Lines 15 minus 16)	368,360,055	5,315,857	0	0	0	18,751,693	348,180,794	(3,888,289)	0	XXX
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
19.	Claims adjustment expenses including $ 9,955,923 cost containment expenses	11,514,823	255,139	0	0	0	407,947	10,853,562	(1,825)	0	0
20.	General administrative expenses	40,568,240	1,870,833	0	0	0	2,224,965	36,510,608	(38,186)	0	0
21.	Increase in reserves for accident and health contracts	207,000	207,000	0	0	0	0	0	0	0	XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23.	Total underwriting deductions (Lines 17 to 22)	420,650,118	7,648,829	0	0	0	21,384,625	395,544,964	(3,928,301)	0	0
24.	Total underwriting gain or (loss) (Line 7 minus Line 23)	(2,910,990)	3,766,709	0	0	0	(2,757,557)	(4,793,374)	873,231	0	0
	DETAILS OF WRITE-INS										
0501.		0	0	0	0	0	0	0	0	0	XXX
0502.											XXX
0503.											XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	XXX
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	XXX
0601.		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.		0	0	0	0	0	0	0	0	0	XXX
1302.											XXX
1303.											XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	XXX
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)	11,153,327	0	77,851	11,075,476
2. Medicare Supplement	0	0	0	0
3. Dental only	0	0	0	0
4. Vision only	0	0	0	0
5. Federal Employees Health Benefits Plan	18,627,069	0	0	18,627,069
6. Title XVIII - Medicare	390,751,590	0	0	390,751,590
7. Title XIX - Medicaid	(3,055,069)	0	0	(3,055,069)
8. Other health	0	0	0	0
9. Health subtotal (Lines 1 through 8)	417,476,917	0	77,851	417,399,066
10. Life	0	0	0	0
11. Property/casualty	0	0	0	0
12. Totals (Lines 9 to 11)	417,476,917	0	77,851	417,399,066

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1. Payments during the year:										
1.1 Direct	387,426,089	4,944,137	0	0	0	19,118,420	358,160,357	5,203,174	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
1.4 Net	387,426,089	4,944,137	0	0	0	19,118,420	358,160,357	5,203,174	0	0
2. Paid medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	43,321,764	881,896	0	0	0	1,342,714	40,742,514	354,640	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	43,321,764	881,896	0	0	0	1,342,714	40,742,514	354,640	0	0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct	20,000	20,000	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	20,000	20,000	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	0	0	0	0	0	0	0	0	0	0
6. Net healthcare receivables (a)	1,123,924	(213,205)	0	0	0	303,863	1,034,427	(1,161)	0	0
7. Amounts recoverable from reinsurers December 31, current year	0	0	0	0	0	0	0	0	0	0
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct	59,599,553	725,382	0	0	0	1,405,578	49,687,650	7,780,943	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
8.4 Net	59,599,553	725,382	0	0	0	1,405,578	49,687,650	7,780,943	0	0
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct	1,684,321	18,000	0	0	0	0	0	1,666,321	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
9.4 Net	1,684,321	18,000	0	0	0	0	0	1,666,321	0	0
10. Accrued medical incentive pools and bonuses, prior year	0	0	0	0	0	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:										
12.1 Direct	368,360,055	5,315,857	0	0	0	18,751,693	348,180,794	(3,888,289)	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
12.4 Net	368,360,055	5,315,857	0	0	0	18,751,693	348,180,794	(3,888,289)	0	0
13. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0

(a) Excludes $ 0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct	5,417,338	278,044	0	0	0	128,616	5,010,678	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
1.4 Net	5,417,338	278,044	0	0	0	128,616	5,010,678	0	0	0
2. Incurred but Unreported:										
2.1 Direct	34,809,064	603,852	0	0	0	1,214,098	32,991,114	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
2.4 Net	34,809,064	603,852	0	0	0	1,214,098	32,991,114	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct	3,095,362	0	0	0	0	0	2,740,722	354,640	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	3,095,362	0	0	0	0	0	2,740,722	354,640	0	0
4. TOTALS:										
4.1 Direct	43,321,764	881,896	0	0	0	1,342,714	40,742,514	354,640	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	43,321,764	881,896	0	0	0	1,342,714	40,742,514	354,640	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)	1,012,269	3,931,869	11,503	890,393	1,023,771	743,382
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	1,036,059	18,082,361	30,571	1,312,143	1,066,630	1,405,578
6. Title XVIII - Medicare	36,769,852	321,390,506	708,694	40,033,820	37,478,546	49,687,650
7 Title XIX - Medicaid	5,203,174	0	354,640	0	5,557,814	9,447,263
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	44,021,354	343,404,735	1,105,408	42,236,356	45,126,762	61,283,873
10. Healthcare receivables (a)	6,621	3,857,840	0	0	6,621	2,740,536
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0
13. Totals (Lines 9 - 10 + 11 + 12)	44,014,733	339,546,895	1,105,408	42,236,356	45,120,141	58,543,337

(a) Excludes $ 0 loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	2,106	2,177	2,179	21,235	21,234
2. 2011	20,510	22,524	22,570	22,562	22,563
3. 2012	XXX	20,481	22,802	22,791	22,792
4. 2013	XXX	XXX	18,058	18,831	18,847
5. 2014	XXX	XXX	XXX	8,862	9,857
6. 2015	XXX	XXX	XXX	XXX	3,932

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	(44,484)	(44,467)	(44,465)	21,235	21,234
2. 2011	23,690	22,545	22,570	22,562	22,563
3. 2012	XXX	25,869	22,833	22,791	22,792
4. 2013	XXX	XXX	20,392	18,843	18,847
5. 2014	XXX	XXX	XXX	9,593	9,869
6. 2015	XXX	XXX	XXX	XXX	4,822

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2011	29,880	22,563	215	1.0	22,778	76.2	0	0	22,778	76.2
2. 2012	28,492	22,792	217	1.0	23,009	80.8	0	0	23,009	80.8
3. 2013	25,425	18,847	179	0.9	19,026	74.8	0	0	19,026	74.8
4. 2014	12,810	9,857	94	1.0	9,951	77.7	12	0	9,963	77.8
5. 2015	11,075	3,932	37	0.9	3,969	35.8	890	16	4,875	44.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	0	0	0	0	0
2. 2011	0	0	0	0	0
3. 2012	XXX	0	0	0	0
4. 2013	XXX	XXX	0	872	872
5. 2014	XXX	XXX	XXX	10,269	11,305
6. 2015	XXX	XXX	XXX	XXX	18,082

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	0	0	0	0	0
2. 2011	0	0	0	0	0
3. 2012	XXX	0	0	0	0
4. 2013	XXX	XXX	0	874	872
5. 2014	XXX	XXX	XXX	11,673	11,336
6. 2015	XXX	XXX	XXX	XXX	19,394

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2011	0	0	0	0.0	0	0.0	0	0	0	0.0
2. 2012	0	0	0	0.0	0	0.0	0	0	0	0.0
3. 2013	0	872	8	0.9	880	0.0	0	0	880	0.0
4. 2014	12,535	11,305	108	1.0	11,413	91.0	31	0	11,444	91.3
5. 2015	18,627	18,082	172	1.0	18,254	98.0	1,312	0	19,566	105.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	10,852	10,801	11,044	11,094	11,087
2. 2011	104,553	114,415	114,502	114,575	114,607
3. 2012	XXX	134,947	151,125	151,520	151,546
4. 2013	XXX	XXX	196,244	225,601	225,514
5. 2014	XXX	XXX	XXX	306,082	342,887
6. 2015	XXX	XXX	XXX	XXX	321,391

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	(88,192)	(88,364)	(88,177)	11,094	11,087
2. 2011	120,152	114,725	114,586	114,575	114,607
3. 2012	XXX	154,538	151,581	151,538	151,546
4. 2013	XXX	XXX	229,427	226,417	225,555
5. 2014	XXX	XXX	XXX	354,936	343,555
6. 2015	XXX	XXX	XXX	XXX	361,425

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2011	146,364	114,607	1,090	1.0	115,697	79.0	0	0	115,697	79.0
2. 2012	180,575	151,546	1,441	1.0	152,987	84.7	0	0	152,987	84.7
3. 2013	251,894	225,514	2,145	1.0	227,659	90.4	41	0	227,700	90.4
4. 2014	354,761	342,887	3,261	1.0	346,148	97.6	668	6	346,822	97.8
5. 2015	390,752	321,391	3,056	1.0	324,447	83.0	40,034	355	364,836	93.4

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Title XIX

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	58,242	58,102	57,875	399,662	399,662
2. 2011	622,921	682,784	682,208	682,521	688,472
3. 2012	XXX	707,510	782,265	785,354	787,172
4. 2013	XXX	XXX	591,158	616,719	616,719
5. 2014	XXX	XXX	XXX	(12,755)	(12,755)
6. 2015	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Title XIX

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	(668,741)	(678,443)	(678,880)	399,662	399,662
2. 2011	717,764	685,963	682,232	682,521	688,472
3. 2012	XXX	800,380	792,860	785,354	787,172
4. 2013	XXX	XXX	607,094	616,730	616,719
5. 2014	XXX	XXX	XXX	(4,986)	(12,400)
6. 2015	XXX	XXX	XXX	XXX	0

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2011	742,783	688,472	6,547	1.0	695,019	93.6	0	0	695,019	93.6
2. 2012	815,976	787,172	7,486	1.0	794,658	97.4	0	0	794,658	97.4
3. 2013	629,312	616,719	5,865	1.0	622,584	98.9	0	0	622,584	98.9
4. 2014	11,489	(12,755)	(121)	0.9	(12,876)	(112.1)	355	0	(12,521)	(109.0)
5. 2015	(3,055)	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	71,200	71,080	71,098	431,991	431,983
2. 2011	747,984	819,723	819,280	819,658	825,642
3. 2012	XXX	862,938	956,192	959,665	961,510
4. 2013	XXX	XXX	805,460	862,023	861,952
5. 2014	XXX	XXX	XXX	312,458	351,294
6. 2015	XXX	XXX	XXX	XXX	343,405

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2011	2 2012	3 2013	4 2014	5 2015
1. Prior	(801,417)	(811,274)	(811,522)	431,991	431,983
2. 2011	861,606	823,233	819,388	819,658	825,642
3. 2012	XXX	980,787	967,274	959,683	961,510
4. 2013	XXX	XXX	856,913	862,864	861,993
5. 2014	XXX	XXX	XXX	371,216	352,360
6. 2015	XXX	XXX	XXX	XXX	385,641

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2011	919,027	825,642	7,852	1.0	833,494	90.7	0	0	833,494	90.7
2. 2012	1,025,043	961,510	9,144	1.0	970,654	94.7	0	0	970,654	94.7
3. 2013	906,631	861,952	8,197	1.0	870,149	96.0	41	0	870,190	96.0
4. 2014	391,595	351,294	3,342	1.0	354,636	90.6	1,066	6	355,708	90.8
5. 2015	417,399	343,405	3,265	1.0	346,670	83.1	42,236	371	389,277	93.3

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

		1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other
1.	Unearned premium reserves	0	0	0	0	0	0	0	0	0
2.	Additional policy reserves (a)	205,000	205,000	0	0	0	0	0	0	0
3.	Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
4.	Reserve for rate credits or experience rating refunds (including $ 0) for investment income	742,848	724,980	0	0	0	0	17,868	0	0
5.	Aggregate write-ins for other policy reserves	10,333,010	0	0	0	0	0	10,333,010	0	0
6.	Totals (gross)	11,280,858	929,980	0	0	0	0	10,350,878	0	0
7.	Reinsurance ceded	0	0	0	0	0	0	0	0	0
8.	Totals (Net)(Page 3, Line 4)	11,280,858	929,980	0	0	0	0	10,350,878	0	0
9.	Present value of amounts not yet due on claims	0	0	0	0	0	0	0	0	0
10.	Reserve for future contingent benefits	20,000	20,000	0	0	0	0	0	0	0
11.	Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0
12.	Totals (gross)	20,000	20,000	0	0	0	0	0	0	0
13.	Reinsurance ceded	0	0	0	0	0	0	0	0	0
14.	Totals (Net)(Page 3, Line 7)	20,000	20,000	0	0	0	0	0	0	0
	DETAILS OF WRITE-INS									
0501.	Premium Risk Adjustment Payable	10,333,010	0	0	0	0	0	10,333,010	0	0
0502.										
0503.										
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	10,333,010	0	0	0	0	0	10,333,010	0	0
1101.										
1102.										
1103.										
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0

(a) Includes $ 205,000 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

		Claim Adjustment Expenses		3	4	5
		1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent ($ 0 for occupancy of own building)	161,645	5,849	591,126	0	758,620
2.	Salary, wages and other benefits	4,816,184	796,403	17,840,847	0	23,453,434
3.	Commissions (less $ 0 ceded plus $ 0 assumed)	0	0	926,585	0	926,585
4.	Legal fees and expenses	60,332	2,354	293,448	0	356,134
5.	Certifications and accreditation fees	121	22	2,213	0	2,356
6.	Auditing, actuarial and other consulting services	59,382	2,142	217,048	0	278,572
7.	Traveling expenses	138,661	16,162	463,800	0	618,623
8.	Marketing and advertising	376,146	16,082	1,365,045	0	1,757,273
9.	Postage, express and telephone	493,224	53,551	1,664,744	0	2,211,519
10.	Printing and office supplies	172,051	22,121	567,471	0	761,643
11.	Occupancy, depreciation and amortization	52,175	1,866	190,760	0	244,801
12.	Equipment	97,181	3,563	355,041	0	455,785
13.	Cost or depreciation of EDP equipment and software	403,202	14,482	1,473,877	0	1,891,561
14.	Outsourced services including EDP, claims, and other services	2,155,563	139,682	4,902,795	0	7,198,040
15.	Boards, bureaus and association fees	10,729	856	37,422	0	49,007
16.	Insurance, except on real estate	41,660	2,863	147,028	0	191,551
17.	Collection and bank service charges	113,587	4,056	513,193	0	630,836
18.	Group service and administration fees	559,129	467,827	90,116	0	1,117,072
19.	Reimbursements by uninsured plans	0	0	0	0	0
20.	Reimbursements from fiscal intermediaries	0	0	0	0	0
21.	Real estate expenses	118,486	4,495	432,257	0	555,238
22.	Real estate taxes	0	0	0	0	0
23.	Taxes, licenses and fees:					
	23.1 State and local insurance taxes	0	0	191	0	191
	23.2 State premium taxes	0	0	244,774	0	244,774
	23.3 Regulatory authority licenses and fees	0	0	334,694	0	334,694
	23.4 Payroll taxes	0	0	1,068,314	0	1,068,314
	23.5 Other (excluding federal income and real estate taxes)	0	0	7,271,151	0	7,271,151
24.	Investment expenses not included elsewhere	17,976	645	96,793	0	115,414
25.	Aggregate write-ins for expenses	108,489	3,879	(522,493)	0	(410,125)
26.	Total expenses incurred (Lines 1 to 25)	9,955,923	1,558,900	40,568,240	0	(a) 52,083,063
27.	Less expenses unpaid December 31, current year	0	377,914	7,056,014	0	7,433,928
28.	Add expenses unpaid December 31, prior year	55,499	416,994	8,995,891	0	9,468,384
29.	Amounts receivable relating to uninsured plans, prior year	0	0	7,744,213	0	7,744,213
30.	Amounts receivable relating to uninsured plans, current year	0	0	14,505,963	0	14,505,963
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	10,011,422	1,597,980	49,269,867	0	60,879,269
	DETAILS OF WRITE-INS					
2501.	Miscellaneous Administrative Expenses	108,489	3,879	(522,493)	0	(410,125)
2502.						
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	108,489	3,879	(522,493)	0	(410,125)

(a) Includes management fees of $ (17,734,683) to affiliates and $ 0 to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	(a) 5,555	8,082
1.1	Bonds exempt from U.S. tax	(a) 0	0
1.2	Other bonds (unaffiliated)	(a) 3,597,523	3,288,563
1.3	Bonds of affiliates	(a) 0	0
2.1	Preferred stocks (unaffiliated)	(b) 0	0
2.11	Preferred stocks of affiliates	(b) 0	0
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans	(c) 0	0
4.	Real estate	(d) 0	0
5	Contract Loans	0	0
6	Cash, cash equivalents and short-term investments	(e) 13,774	13,774
7	Derivative instruments	(f) 0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	99,689	99,689
10.	Total gross investment income	3,716,541	3,410,108
11.	Investment expenses		(g) 0
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h) 0
14.	Depreciation on real estate and other invested assets		(i) 0
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		0
17.	Net investment income (Line 10 minus Line 16)		3,410,108
	DETAILS OF WRITE-INS		
0901.	Miscellaneous Investment Expenses	99,689	99,689
0902.			
0903.			
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	99,689	99,689
1501.	Investment Expenses		0
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

(a) Includes $ 56,053 accrual of discount less $ 752,775 amortization of premium and less $ 109,889 paid for accrued interest on purchases.

(b) Includes $ 0 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued dividends on purchases.

(c) Includes $ 0 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued interest on purchases.

(d) Includes $ 0 for company's occupancy of its own buildings; and excludes $ 0 interest on encumbrances.

(e) Includes $ 0 accrual of discount less $ 0 amortization of premium and less $ 0 paid for accrued interest on purchases.

(f) Includes $ 0 accrual of discount less $ 0 amortization of premium.

(g) Includes $ 0 investment expenses and $ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes $ 0 interest on surplus notes and $ 0 interest on capital notes.

(i) Includes $ 0 depreciation on real estate and $ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	0	0	0	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	1,655,539	0	1,655,539	(6,033)	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	0	0	0	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	1,655,539	0	1,655,539	(6,033)	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks	0	0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens	0	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income	0	0	0
	4.3 Properties held for sale	0	0	0
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)	0	0	0
11.	Aggregate write-ins for invested assets	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13.	Title plants (for Title insurers only)	0	0	0
14.	Investment income due and accrued	0	0	0
15.	Premiums and considerations:			
	15.1 Uncollected premiums and agents' balances in the course of collection	2,169,934	1,260,988	(908,946)
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due	0	0	0
	15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	0
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0	0	0
17.	Amounts receivable relating to uninsured plans	0	0	0
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2	Net deferred tax asset	0	0	0
19.	Guaranty funds receivable or on deposit	0	0	0
20.	Electronic data processing equipment and software	1,460,886	971,994	(488,892)
21.	Furniture and equipment, including health care delivery assets	1,243,747	1,434,891	191,144
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23.	Receivable from parent, subsidiaries and affiliates	0	0	0
24.	Health care and other amounts receivable	21,306	32,576	11,270
25.	Aggregate write-ins for other than invested assets	2,757,622	1,974,270	(783,352)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	7,653,495	5,674,719	(1,978,776)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
28.	Total (Lines 26 and 27)	7,653,495	5,674,719	(1,978,776)
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Prepaid Expenses	1,870,088	1,392,510	(477,578)
2502.	Prepaid Commissions	775,224	477,220	(298,004)
2503.	Deposits	112,310	104,540	(7,770)
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	2,757,622	1,974,270	(783,352)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	Current Year Member Months
1. Health Maintenance Organizations	60,335	60,085	60,540	62,039	58,192	723,572
2. Provider Service Organizations	0	0	0	0	0	0
3. Preferred Provider Organizations	0	0	0	0	0	0
4. Point of Service	0	0	0	0	0	0
5. Indemnity Only	0	0	0	0	0	0
6. Aggregate write-ins for other lines of business	0	0	0	0	0	0
7. Total	60,335	60,085	60,540	62,039	58,192	723,572
DETAILS OF WRITE-INS						
0601.						
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals	3,102	2,266	2,260	21,336	21,336	7,628
Group Subscribers:						
0299998. Premiums due and unpaid not individually listed	1,491,640	1,398,070	1,391,164	2,148,598	2,148,598	4,280,874
0299999. Total group	1,491,640	1,398,070	1,391,164	2,148,598	2,148,598	4,280,874
0399999. Premiums due and unpaid from Medicare entities	0	0	0	0	0	0
0499999. Premiums due and unpaid from Medicaid entities	0	0	0	0	0	0
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	1,494,742	1,400,336	1,393,424	2,169,934	2,169,934	4,288,502

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed	3,840,440	0	0	21,306	21,306	3,840,441
0199999. Total Pharmaceutical Rebate Receivables	3,840,440	0	0	21,306	21,306	3,840,441
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	2,714	0	0	0	0	2,714
0299999. Total Claim Overpayment Receivables	2,714	0	0	0	0	2,714
0399998. Aggregate Loans and Advances to Providers Not Individually Listed	0	0	0	0	0	0
0399999. Total Loans and Advances to Providers	0	0	0	0	0	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed	0	0	0	0	0	0
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed	0	0	0	0	0	0
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Receivables Not Individually Listed	0	0	0	0	0	0
0699999. Total Other Receivables	0	0	0	0	0	0
0799999 Gross health care receivables	3,843,154	0	0	21,306	21,306	3,843,155

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5	6
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year	Health Care Receivables in Prior Years (Columns 1 + 3)	Estimated Health Care Receivables Accrued as of December 31 of Prior Year
1. Pharmaceutical rebate receivables	3,041,776	10,979,067	6,621	3,855,126	3,048,397	2,737,532
2. Claim overpayment receivables	3,004	0	0	2,714	3,004	3,004
3. Loans and advances to providers	0	0	0	0	0	0
4. Capitation arrangement receivables	0	0	0	0	0	0
5. Risk sharing receivables	0	0	0	0	0	0
6. Other health care receivables	0	0	0	0	0	0
7. Totals (Lines 1 through 6)	3,044,780	10,979,067	6,621	3,857,840	3,051,401	2,740,536

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0199999. Individually listed claims unpaid	0	0	0	0	0	0
0299999. Aggregate accounts not individually listed- uncovered	369,458	23,676	9,740	2,819	3,317	409,010
0399999. Aggregate accounts not individually listed-covered	869,609	55,727	22,925	6,635	7,807	962,703
0499999. Subtotals	1,239,067	79,403	32,665	9,454	11,124	1,371,713
0599999. Unreported claims and other claim reserves						41,950,051
0699999. Total amounts withheld						0
0799999. Total claims unpaid						43,321,764
0899999 Accrued medical incentive pool and bonus amounts						0

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5	6	Admitted	
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	7 Current	8 Non-Current
0399999 Total gross amounts receivable							

NONE

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Humana Inc.	Reimbursements from expenditure made directly by Humana Inc. for the benefit of Humana Health Plans of Puerto Rico Inc. or for the services provided by Humana Inc. for the company. The direct expenditure includes payments for medical related items, trade payables, and payroll related items. The services provided include and are not limited to actuarial underwriting, billing enrollments, claim administration, customer services, utilization management, prior authorization, quality management, accounting, financial analysis, legal, tax, budgeting, data processing, and marketing.	958,140	958,140	0
0199999. Individually listed payables		958,140	958,140	0
0299999. Payables not individually listed		0	0	0
0399999 Total gross payables		958,140	958,140	0

EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	239,031,654	61.7	58,192	100.0	0	239,031,654
2. Intermediaries	0	0.0	0	0.0	0	0
3. All other providers	0	0.0	0	0.0	0	0
4. Total capitation payments	239,031,654	61.7	58,192	100.0	0	239,031,654
Other Payments:						
5. Fee-for-service	14,838,591	3.8	XXX	XXX	0	14,838,591
6. Contractual fee payments	133,555,844	34.5	XXX	XXX	0	133,555,844
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX	0	0
9. Non-contingent salaries	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements	0	0.0	XXX	XXX	0	0
11. All other payments	0	0.0	XXX	XXX	0	0
12. Total other payments	148,394,435	38.3	XXX	XXX	0	148,394,435
13. TOTAL (Line 4 plus Line 12)	387,426,089	100%	XXX	XXX	0	387,426,089

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
	NONE				
9999999 Totals			XXX	XXX	XXX

EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

	Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1.	Administrative furniture and equipment	3,574,174	0	2,797,236	776,937	776,937	0
2.	Medical furniture, equipment and fixtures	0	0	0	0	0	0
3.	Pharmaceuticals and surgical supplies	0	0	0	0	0	0
4.	Durable medical equipment	0	0	0	0	0	0
5.	Other property and equipment	3,797,847	0	3,331,037	466,810	466,810	0
6.	Total	7,372,021	0	6,128,273	1,243,747	1,243,747	0

NOTES TO THE FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of the Company are presented on the basis of accounting practices prescribed or permitted by the Insurance Commissioner of Puerto Rico.

The Insurance Commissioner of Puerto Rico recognizes only statutory accounting practices prescribed or permitted by the Commonwealth of Puerto Rico for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Puerto Rico Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the Commonwealth of Puerto Rico. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices. No deviations from the Codification currently exist.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Commonwealth of Puerto Rico is shown below:

	State of Domicile	2015	2014
Net Income/(Loss)			
1. Humana Health Plans of Puerto Rico, Inc. Puerto Rico basis	PR	$ 7,698,771	$ (18,168,695)
2. State Prescribed Practices that increase/(decrease) NAIC SAP	PR	-	-
3. State Permitted Practices that increase/(decrease) NAIC SAP	PR	-	-
4. NAIC SAP	PR	$ 7,698,771	$ (18,168,695)
Surplus			
5. Humana Health Plans of Puerto Rico, Inc. Puerto Rico basis	PR	$ 75,646,324	$ 69,525,766
6. State Prescribed Practices that increase/(decrease) NAIC SAP	PR	-	-
7. State Permitted Practices that increase/(decrease) NAIC SAP	PR	-	-
8. NAIC SAP	PR	$ 75,646,324	$ 69,525,766

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. These estimates are based on knowledge of current events and anticipated future events, and accordingly, actual results could differ from those estimates.

C. Accounting Policy

Premiums are reported as earned in the period in which members are entitled to receive services, and are net of retroactive membership adjustments. Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. Premiums received prior to such period are recorded as advance premiums.

Benefits incurred and loss adjustment expenses include claim payments, capitation payments, pharmacy costs net of rebates, allocations of certain centralized expenses, legal and administrative costs to settle claims, and various other costs incurred to provide health insurance coverage to members, as well as estimates of future payments to hospitals and others for medical care provided prior to the date of the statements of admitted assets, liabilities and surplus. Capitation payments represent monthly contractual fees disbursed to participating primary care physicians, and other providers who are responsible for providing medical care to members. Pharmacy costs represent payments for members' prescription drug benefits, net of rebates from drug manufacturers.

In addition, the Company uses the following accounting policies:

(1) Short-term investments include investments mainly in U.S. Government obligations with a maturity of twelve months or less from the date of purchase. Short-term investments are recorded at amortized cost. The carrying value of short-term investments approximates fair value due to the short-term maturities of the investments.

(2-4) Investments are valued and classified in accordance with methods prescribed by the NAIC. Bonds with an NAIC rating of 1 or 2 are carried at amortized cost, with all other bonds being recorded at the lower of amortized cost or fair value; redeemable preferred stocks are carried at amortized cost; and non-redeemable preferred stocks are carried at fair value. Common stocks are carried at fair value.

The Company regularly evaluates investment securities for impairment. For all securities other than loan-backed and structured securities, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value, the near term prospects for recovery to carrying value, and the Company's intent and ability to hold the investment until maturity or market recovery is realized. If and when a determination is made that a decline in fair value below the cost basis is other-than-temporary, the related investment is written down to its estimated fair value through earnings.

Amortization of bond premium or discount is computed using the scientific interest method.

NOTES TO THE FINANCIAL STATEMENTS

Income from investments is recorded on an accrual basis. For the purpose of determining realized gains and losses, the cost of securities sold is based upon specific identification. Investment income due and accrued over 90 days past due is nonadmitted.

(5) Not Applicable.

(6) For loan backed and structured securities where the securities fair value is less then the amortized cost, the Company considers several factors to determine if the security's impairment is other-than-temporary. If the Company has the intent to sell the security or if the Company does not have the intent and ability to retain the security until recovery of its fair value, the related investment is written down to its estimated fair value through earnings. If, however, the Company has the intent and ability to retain the security until recovery of its fair value, the Company considers factors affecting the investee, factors affecting the industry the investee operates within, and general debt and equity market trends. The Company also considers the length of time an investment's fair value has been below carrying value and the near term prospects for recovery to carrying value. If the determination is made, based on these factors, that the Company does expect to recover the entire amortized cost of the security, then an other-than-temporary impairment has not occurred. If, however, the determination is made that the Company does not expect to recover the entire amortized cost of the security based on the factors noted above, the Company recognizes a realized loss in earnings for the non-interest related decline. No loss is recognized for the interest impairment.

(7) Not Applicable.

(8) Not Applicable.

(9) Not Applicable.

(10-11) The estimates of future medical benefit payments are developed using actuarial methods and assumptions based upon claim payment patterns, medical cost inflation, historical development such as claim inventory levels and claim receipt patterns, and other relevant factors. Corresponding administrative costs to process outstanding claims are estimated and accrued. Estimates of future payments relating to services incurred in the current and prior periods are continually reviewed by management and adjusted as necessary.

The Company assesses the profitability of its contracts for providing health insurance coverage to its members when current operating results or forecasts indicate probable future losses. The Company records a premium deficiency liability in current operations to the extent that the sum of expected future medical costs, claim adjustment expenses and maintenance costs exceed related future premiums. Investment income is not contemplated in the calculation of the premium deficiency liability.

Management believes the Company's benefits payable and loss adjustment expense are adequate to cover future claims and loss adjustment expense payments required, however, such estimates are based on knowledge of current events and anticipated future events and, therefore, the actual liability could differ from the amounts provided.

(12) The Company has not modified its capitalization policy from the prior period.

Equipment is stated at cost less accumulated depreciation. Depreciation expense is computed using the straight-line method over estimated useful lives generally ranging from three to five years. Improvements to leased facilities are depreciated over the shorter of the remaining lease term or the anticipated life of the improvement.

The Company recognizes an asset or liability for the deferred tax consequences of temporary differences between the tax bases of assets or liabilities and their reported amounts in the financial statements. The temporary differences will result in taxable or deductible amounts in future years when the reported amounts of the assets or liabilities are recovered or settled.

(13) The Company estimates anticipated Pharmacy Rebate Receivables using the analysis of historical recovery patterns.

(14) Not Applicable.

(15) Not Applicable.

2. Accounting Changes and Corrections of Errors

Not Applicable.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not Applicable.

B. Statutory Merger

Not Applicable.

C. Assumption Reinsurance

Not Applicable.

D. Impairment Loss

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

4. Discontinued Operations

Not Applicable.

5. Investments

A. Mortgage Loans, Including Mezzanine Real Estate Loans

Not Applicable.

B. Debt Restructuring

Not Applicable.

C. Reverse Mortgages

Not Applicable.

D. Loan-Backed Securities

(1) Not Applicable.

(2) Not Applicable.

(3) Not Applicable.

(4) The Company does not have any investments in an other-than-temporary impairment position at December 31, 2015.

Gross unrealized losses and related fair value of temporarily impaired securities that have been in a continuous unrealized loss position were as follows at December 31, 2015:

(a)	The aggregate amount of unrealized losses:		
	1. Less than Twelve Months	$	(607,574)
	2. Twelve Months or Longer	$	(1,334,738)
(b)	The aggregate related fair value of securities with unrealized losses:		
	1. Less than Twelve Months	$	39,463,733
	2. Twelve Months or Longer	$	16,281,735

The unrealized losses at December 31, 2015 were primarily due to increases in market interest rates and tighter liquidity conditions in the current markets than when the securities were purchased. All issuers of securities trading at an unrealized loss remain current on all contractual payments and the Company believes it is probable that all amounts due according to the contractual terms of the debt securities are collectible. After taking into account these and other factors, including the severity of the decline and the Company's ability and intent to hold these securities until recovery or maturity, the Company determined the unrealized losses on these investment securities were temporary and, as such, no impairment was required.

(5) Not Applicable.

E. Repurchase Agreements and/or Securities Lending Transactions

(1) The Company has no repurchase agreements or securities lending transactions.

(2) The Company has not pledged any of its assets as collateral.

(3-7) Not Applicable.

F. Real Estate

Not Applicable.

G. Low-Income Housing Tax Credits (LIHTC)

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted from Prior Year	Increase/ (Decrease)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	$ -	$ -	$ -	$ -	-%	-%
b. Collateral held under security lending agreements	-	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-
e. Subject to dollar repurchase agreements	-	-	-	-	-	-
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-
g. Placed under option contracts	-	-	-	-	-	-
h. Letter stock or securities restricted to sale – excluding FHLB capital stock	-	-	-	-	-	-
i. FHLB capital stock	-	-	-	-	-	-
j. On deposit with states	21,744,147	16,201,312	5,542,835	21,744,147	14.65%	15.45%
k. On deposit with other regulatory bodies	-	-	-	-	-	-
l. Pledged collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-
n. Other restricted assets	-	-	-	-	-	-
o. Total Restricted Assets	$ 21,744,147	$ 16,201,312	$ 5,542,835	$ 21,744,147	14.65%	15.45%

(2) Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

(3) Detail of Other Restricted Assets Categories (Contracts that Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not Applicable.

I. Working Capital Finance Investments

Not Applicable.

J. Offsetting and Netting of Assets and Liabilities

Not Applicable.

K. Structured Notes

Not Applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10.0 percent of its admitted assets.

B. The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income

A. Due and accrued income was excluded from surplus on the following basis:

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default.

B. The total amount excluded was $0.

8. Derivative Instruments

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

9. Income Taxes

A. Deferred Tax Assets/(Liabilities)

(1) The components of the net admitted deferred tax asset/(liability) by tax character were as follows:

		December 31, 2015		
		Ordinary	Capital	Total
a.	Gross deferred tax assets	$ 16,832,784	$ -	$ 16,832,784
b.	Statutory valuation allowance adjustments	(16,832,784)	-	(16,832,784)
c.	Adjusted gross deferred tax assets	-	-	-
d.	Deferred tax assets nonadmitted	-	-	-
e.	Net admitted deferred tax assets	-	-	-
f.	Deferred tax liabilities	-	-	-
g.	Net admitted deferred tax asset/(liability)	$ -	$ -	$ -

		December 31, 2014		
		Ordinary	Capital	Total
a.	Gross deferred tax assets	$ 19,616,566	$ -	$ 19,616,566
b.	Statutory valuation allowance adjustments	(19,616,566)	-	(19,616,566)
c.	Adjusted gross deferred tax assets	-	-	-
d.	Deferred tax assets nonadmitted	-	-	-
e.	Net admitted deferred tax assets	-	-	-
f.	Deferred tax liabilities	-	-	-
g.	Net admitted deferred tax asset/(liability)	$ -	$ -	$ -

		Change		
		Ordinary	Capital	Total
a.	Gross deferred tax assets	$ (2,783,782)	$ -	$ (2,783,782)
b.	Statutory valuation allowance adjustments	2,783,782	-	2,783,782
c.	Adjusted gross deferred tax assets	-	-	-
d.	Deferred tax assets nonadmitted	-	-	-
e.	Net admitted deferred tax assets	-	-	-
f.	Deferred tax liabilities	-	-	-
g.	Net admitted deferred tax asset/(liability)	$ -	$ -	$ -

(2) The amount of admitted adjusted gross deferred tax assets under SSAP No. 101 were as follows:

		December 31, 2015		
		Ordinary	Capital	Total
a.	Federal income taxes paid in prior years recoverable through loss carrybacks	$ -	$ -	$ -
b.	Adjusted gross deferred tax assets expected to be realized after application of the threshold limitation	-	-	-
1.	Adjusted gross deferred tax assets expected to be realized following the Balance Sheet date	XXX	XXX	-
2.	Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	-
c.	Adjusted gross deferred tax assets offset by gross deferred tax liabilities	-	-	-
d.	Deferred tax assets admitted as the result of application of SSAP No. 101. Total	$ -	$ -	$ -

		December 31, 2014		
		Ordinary	Capital	Total
a.	Federal income taxes paid in prior years recoverable through loss carrybacks	$ -	$ -	$ -
b.	Adjusted gross deferred tax assets expected to be realized after	-	-	-
1.	Adjusted gross deferred tax assets expected to be realized following the Balance Sheet date	XXX	XXX	-
2.	Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	-
c.	Adjusted gross deferred tax assets offset by gross deferred tax liabilities	-	-	-
d.	Deferred tax assets admitted as the result of application of SSAP No. 101. Total	$ -	$ -	$ -

NOTES TO THE FINANCIAL STATEMENTS

	Change		
	Ordinary	Capital	Total
a. Federal income taxes paid in prior years recoverable through loss carrybacks	$ -	$ -	$ -
b. Adjusted gross deferred tax assets expected to be realized after	-	-	-
1. Adjusted gross deferred tax assets expected to be realized following the Balance Sheet date	XXX	XXX	-
2. Adjusted gross deferred tax assets allowed per limitation threshold	XXX	XXX	-
c. Adjusted gross deferred tax assets offset by gross deferred tax liabilities	-	-	-
d. Deferred tax assets admitted as the result of application of SSAP No. 101. Total	$ -	$ -	$ -

(3) The ratio percentage used to determine recovery period and threshold limitation amount was as follows:

	December 31, 2015	December 31, 2014
a. Ratio percentage used to determine recovery period and threshold limitation amount	748%	660%
b. Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2 b.2 above	76,093,772	69,525,769

(4) The impact of tax planning strategies on adjusted gross DTAs and net admitted DTAs was as follows:

	December 31, 2015	
	Ordinary	Capital
a. Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage		
1. Adjusted gross DTAs amount from note 9A1(c)	$ -	$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%
3. Net admitted adjusted gross DTAs amount from note 9A1(e)	$ -	$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%

	December 31, 2014	
	Ordinary	Capital
a. Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage		
1. Adjusted gross DTAs amount from note 9A1(c)	$ -	$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%
3. Net admitted adjusted gross DTAs amount from note 9A1(c)	$ -	$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%

	Change	
	Ordinary	Capital
a. Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage		
1. Adjusted gross DTAs amount from note 9A1(c)	$ -	$ -
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	0.00%	0.00%
3. Net admitted adjusted gross DTAs amount from note 9A1(e)	$ -	$ -
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	0.00%	0.00%

b. Does the Company's tax planning strategies include the use of reinsurance? Yes [ ] No [X]

B. There are no temporary differences for which a DTL has not been established.

NOTES TO THE FINANCIAL STATEMENTS

C. Current and deferred income taxes

(1) Current income taxes incurred consist of the following major components:

		December 31, 2015	December 31, 2014	Change
a.	Federal	$ 476,905	$ -	$ 476,905
b.	Foreign	-	-	-
c.	Subtotal	476,905	-	476,905
d.	Federal income tax on net capital gains	-	-	-
e.	Utilization of capital loss carryforwards	-	-	-
f.	Other	-	-	-
g.	Federal and foreign income taxes incurred	$ 476,905	$ -	$ 476,905

(2–3) The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

DTAs resulting from Book/Tax Differences in:

		December 31, 2015	December 31, 2014	Change
a.	Ordinary			
	1. Discounting of unpaid losses	$ -	$ -	$ -
	2. Unearned premium reserve	-	-	-
	3. Policyholder reserves	-	-	-
	4. Investments and other	-	-	-
	5. Deferred acquisition costs	-	-	-
	6. Policyholder dividends accrual	-	-	-
	7. Fixed assets	596,874	559,489	37,385
	8. Compensation and benefit accruals	-	-	-
	9. Pension accruals	-	-	-
	10. Receivables – nonadmitted	2,984,863	2,213,140	771,723
	11. Net operating loss carry-forward	11,388,364	14,165,262	(2,776,898)
	12. Tax credit carry-forward	-	-	-
	13. Other	143,835	-	143,835
	14. Bad debts	1,464,451	1,681,831	(217,380)
	15. Accrued litigation	-	-	-
	16. Risk corridor	-	-	-
	17. CMS risk corridor -ACA	-	649,743	(649,743)
	18. Medicare risk adjustment data	-	-	-
	19. Miscellaneous reserves	254,397	347,100	(92,703)
	20. Accrued lease	-	-	-
	21. Section 197 intangible	-	-	-
	22. Reinsurance fee	-	-	-
	99. Subtotal	16,832,784	19,616,566	(2,783,782)
b.	Statutory valuation allowance adjustment	(16,832,784)	(19,616,566)	2,783,782
c.	Nonadmitted	-	-	-
d.	Admitted Ordinary DTAs	-	-	-
e.	Capital			
	1. Investments	-	-	-
	2. Net capital loss carry-forward	-	-	-
	3. Real estate	-	-	-
	4. Other	-	-	-
	99. Subtotal	-	-	-
f.	Statutory valuation allowance adjustment	-	-	-
g.	Nonadmitted	-	-	-
h.	Admitted capital DTAs	-	-	-
i.	Admitted DTAs	$ -	$ -	$ -

NOTES TO THE FINANCIAL STATEMENTS

DTLs resulting from Book/Tax Differences in:

		December 31, 2015	December 31, 2014	Change
a.	Ordinary			
	1. Investments	$ -	$ -	$ -
	2. Fixed assets	-	-	-
	3. Deferred and uncollected premium	-	-	-
	4. Policyholder reserves/salvage & subrogation	-	-	-
	5. Other	-	-	-
	6. Premium acquisition reserve	-	-	-
	99. Subtotal	-	-	-
b.	Capital			
	1. Investments	-	-	-
	2. Real estate	-	-	-
	3. Other	-	-	-
	99. Subtotal	-	-	-
c.	DTLs	$ -	$ -	$ -
(4)	Net deferred tax asset/(liability)	$ -	$ -	$ -

D. The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference as of December 31, 2015 are as follows:

	Amount	Tax Effect	Effective Tax Rate
Income before taxes	$ 8,175,678	$ 3,188,514	39.00%
Tax-exempt interest	-	-	(9.71%)
Dividends received deduction	-	-	0.00%
Proration	400,367	156,143	1.91%
Meals & entertainment, lobbying expenses, etc.	110,589	43,130	0.53%
Statutory valuation allowance adjustment	(7,137,903)	(2,783,782)	(34.05%)
ACA fee	191,552	74,705	0.91%
Change to nonadmits & deferred tax true-up	-	-	0.00%
Other, including prior year true-up	(517,450)	(201,806)	(2.47%)
Total	$ 1,222,833	$ 476,905	5.83%
Federal income taxes incurred [expense/(benefit)]		$ 476,905	5.83%
Tax on capital gains/(losses)		-	0.00%
Change in net deferred income tax [charge/(benefit)]		-	0.00%
Total statutory income taxes		$ 476,905	5.83%

E. Operating loss and tax credit carry-forwards and protective tax deposits

(1) At December 31, 2015, the Company had net operating loss carry-forwards expiring through the year 2025 of $29,200,935.

At December 31, 2015, the Company had no capital loss carry-forwards.

At December 31, 2015, the Company had an AMT credit carry-forwards, which does not expire, in the amount of $143,835.

(2) The following table demonstrates the income tax expense for 2013, 2014 and 2015 that is available for the recoupment in the event of future net losses:

	Ordinary	Capital	Total
2013	$ -	$ -	$ -
2014	-	-	-
2015	-	-	-
Total	$ -	$ -	$ -

(3) There are no deposits admitted under IRC § 6603.

F. The Company is included in a consolidated federal income tax return with its parent Company, Humana Inc. The Company has a written agreement, approved by the Company's Board of Directors, which sets forth the manner in which the total combined federal income tax is allocated to each entity which is a party to the consolidation. Pursuant to this agreement, the Company has the enforceable right to be paid for any future net losses it may incur. The Company has no contingent income tax liabilities. The Company has not adjusted gross deferred tax assets due to changes in judgment about the realizability of the related deferred tax asset. The Company has no deposits under Section 6603 of the Internal Revenue Code.

NOTES TO THE FINANCIAL STATEMENTS

HUMANA INC. AND SUBSIDIARIES INCLUDED IN 2015 CONSOLIDATED FEDERAL INCOME TAX RETURN

CALENDAR YEAR ENDED DECEMBER 31, 2015
AFFILIATIONS SCHEDULE

CORPORATE NAME AND EMPLOYER IDENTIFICATION NUMBER
THE ADDRESS OF EACH COMPANY IS: P. O. BOX 740026, LOUISVILLE, KY 40201

CORP. NO.	CORPORATION NAME	EMPLOYER IDENTIFICATION NUMBER
1	HUMANA INC.	61-0647538
2	154TH STREET MEDICAL PLAZA, INC.	65-0851053
3	516-526 WEST MAIN STREET CONDOMINIUM COUNCIL OF CO-OWNERS, INC.	20-5309363
4	54TH STREET MEDICAL PLAZA, INC.	65-0293220
5	ALAMO CITY MEDICAL GROUP, PLLC	74-2698089
6	AMBULATORY CARE SOLUTIONS OF ARKANSAS, LLC	27-0200477
7	AMBULATORY CARE SOLUTIONS OF OHIO, LLC	26-4179617
8	AMBULATORY CARE SOLUTIONS, LLC	37-1485812
9	AMERICAN CURRENT CARE OF ARIZONA, P.A.	20-8602074
10	AMERICAN CURRENT CARE OF ARKANSAS, P.A.	26-3224187
11	AMERICAN CURRENT CARE OF CALIFORNIA, A MEDICAL CORPORATION	26-0656668
12	AMERICAN CURRENT CARE OF DELAWARE, P.A.	26-2043667
13	AMERICAN CURRENT CARE OF HAWAII, PROF. CORP.	26-2089664
14	AMERICAN CURRENT CARE OF ILLINOIS, PC	46-2548275
15	AMERICAN CURRENT CARE OF KANSAS, PA	47-2063023
16	AMERICAN CURRENT CARE OF MASSACHUSETTS, P.C.	26-2104617
17	AMERICAN CURRENT CARE OF MICHIGAN, P.C.	20-5997415
18	AMERICAN CURRENT CARE OF MISSOURI, P.C.	27-1160021
19	AMERICAN CURRENT CARE OF NEBRASKA, P.C.	26-1809492
20	AMERICAN CURRENT CARE OF NEW JERSEY PA	26-1961910
21	AMERICAN CURRENT CARE OF NORTH CAROLINA, P.C.	26-2018322
22	AMERICAN CURRENT CARE OF OHIO, P.A., CO.	26-3239475
23	AMERICAN CURRENT CARE, P.A.	20-5805198
24	AMERICAN ELDERCARE, INC.	65-0380198
25	ARCADIAN CHOICE, INC.	27-3387971
26	ARCADIAN HEALTH PLAN, INC.	20-1001348
27	ARCADIAN MANAGEMENT SERVICES, INC.	86-0836599
28	CAC MEDICAL CENTER HOLDINGS, INC.	30-0117876
29	CAC-FLORIDA MEDICAL CENTERS, LLC	26-0010657
30	CARENETWORK, INC.	39-1514846
31	CAREPLUS HEALTH PLANS, INC.	59-2598550
32	CARITEN HEALTH PLAN INC.	62-1579044
33	CHA HMO, INC.	61-1279717
34	CHA SERVICE COMPANY, INC.	61-1279716
35	COMPBENEFITS COMPANY	59-2531815
36	COMPBENEFITS CORPORATION	04-3185995
37	COMPBENEFITS DENTAL, INC.	36-3686002
38	COMPBENEFITS DIRECT, INC.	58-2228851
39	COMPBENEFITS INSURANCE COMPANY	74-2552026
40	COMPLEX CLINICAL MANAGEMENT, INC.	45-3713941
41	COMPREHENSIVE HEALTH INSIGHTS, INC.	42-1575099
42	CONCENTRA HEALTH CARE, P.A.	27-4757941
43	CONCENTRA HEALTH SERVICES, INC.	75-2510547
44	CONCENTRA INC.	26-4823524
45	CONCENTRA INTEGRATED SERVICES, INC.	04-2658593
46	CONCENTRA OPERATING CORPORATION	04-3363415
47	CONCENTRA PRIMARY CARE OF NEW JERSEY, PA	45-2897046
48	CONCENTRA PRIMARY CARE OF OHIO, P.A., CO.	45-4091303
49	CONCENTRA PRIMARY CARE, P.A.	32-0346082
50	CONCENTRA SOLUTIONS, INC.	75-2678146
51	CONCENTRA WORKSITE OF ARIZONA, P.A.	27-1743694
52	CONTINUCARE CORPORATION	59-2716023
53	CONTINUCARE MANAGED CARE, INC.	65-0796178
54	CONTINUCARE MEDICAL MANAGEMENT, INC.	65-0791417

NOTES TO THE FINANCIAL STATEMENTS

55	CONTINUCARE MSO, INC.	65-0780986
56	CORPHEALTH PROVIDER LINK, INC.	20-8236655
57	DATALINK SOLUTIONS, INC.	47-4706668
58	DEFENSEWEB TECHNOLOGIES, INC.	33-0916248
59	DENTAL CARE PLUS MANAGEMENT, CORP.	36-3512545
60	DENTICARE, INC.	76-0039628
61	EMPHESYS INSURANCE COMPANY	31-0935772
62	EMPHESYS, INC.	61-1237697
63	HARRIS, ROTHENBERG INTERNATIONAL, INC.	27-1649291
64	HARTE PLACEMENTS, INC.	11-2795529
65	HEALTH VALUE MANAGEMENT, INC.	61-1223418
66	HRI HUMANA OF CALIFORNIA, INC.	46-4912173
67	HUMANA ACTIVE OUTLOOK, INC.	20-4835394
68	HUMANA AT HOME (DALLAS), INC. (fka Reachout Homecare, Inc.)	75-2739333
69	HUMANA AT HOME (HOUSTON), INC. (fka Inteli Home Healthcare, Inc.)	76-0537878
70	HUMANA AT HOME (MA), INC.	04-3580066
71	HUMANA AT HOME (TLC), INC. (f.k.a. TLC Plus of Texas, Inc.)	75-2600512
72	HUMANA AT HOME 1, INC.	65-0274594
73	HUMANA AT HOME, INC.	13-4036798
74	HUMANA BEHAVIORAL HEALTH, INC. (f.k.a. Corphealth, Inc.)	75-2043865
75	HUMANA BENEFIT PLAN OF ILLINOIS, INC.	37-1326199
76	HUMANA DENTAL COMPANY	59-1843760
77	HUMANA DENTAL CONCERN, LTD.	36-3654697
78	HUMANA EMPLOYERS HEALTH PLAN OF GEORGIA, INC.	58-2209549
79	HUMANA GOVERNMENT BUSINESS, INC.	61-1241225
80	HUMANA HEALTH BENEFIT PLAN OF LOUISIANA, INC.	72-1279235
81	HUMANA HEALTH COMPANY OF NEW YORK, INC.	26-2800286
82	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	61-1041514
83	HUMANA HEALTH PLAN OF CALIFORNIA, INC.	26-3473328
84	HUMANA HEALTH PLAN OF OHIO, INC.	31-1154200
85	HUMANA HEALTH PLAN OF TEXAS, INC.	61-0994632
86	HUMANA HEALTH PLAN, INC.	61-1013183
87	HUMANA HOME ADVANTAGE (TX), P.A.	81-0789608
88	HUMANA INNOVATION ENTERPRISES, INC.	61-1343791
89	HUMANA INSURANCE COMPANY	39-1263473
90	HUMANA INSURANCE COMPANY OF KENTUCKY	61-1311685
91	HUMANA INSURANCE COMPANY OF NEW YORK	20-2888723
92	HUMANA MARKETPOINT, INC.	61-1343508
93	HUMANA MEDICAL PLAN OF MICHIGAN, INC.	27-3991410
94	HUMANA MEDICAL PLAN OF PENNSYLVANIA, INC.	27-4460531
95	HUMANA MEDICAL PLAN OF UTAH, INC.	20-8411422
96	HUMANA MEDICAL PLAN, INC.	61-1103898
97	HUMANA PHARMACY SOLUTIONS, INC.	45-2254346
98	HUMANA PHARMACY, INC.	61-1316926
99	HUMANA REGIONAL HEALTH PLAN, INC.	20-2036444
100	HUMANA VETERANS HEALTHCARE SERVICES, INC.	20-8418853
101	HUMANA WISCONSIN HEALTH ORGANIZATION INSURANCE CORPORATION	39-1525003
102	HUMANADENTAL INSURANCE COMPANY	39-0714280
103	HUMANADENTAL, INC.	61-1364005
104	HUMCO, INC.	61-1239538
105	HUM-e-FL, INC.	61-1383567
106	HUM-HOLDINGS INTERNATIONAL, INC.	26-3583438
107	KANAWHA INSURANCE COMPANY	57-0380426
108	KMG AMERICA CORPORATION	20-1377270
109	MANAGED CARE INDEMNITY, INC.	61-1232669
110	METCARE OF FLORIDA, INC.	65-0879131
111	METROPOLITAN HEALTH NETWORKS, INC.	65-0635748
112	NATIONAL HEALTHCARE RESOURCES, INC.	11-3273542
113	OCCSPECIALISTS CORP., A MEDICAL CORPORATION	94-3418907
114	OCCUPATIONAL HEALTH CENTERS OF ARKANSAS, P.A.	75-2688160
115	OCCUPATIONAL HEALTH CENTERS OF CALIFORNIA, A MEDICAL CORPORATION	77-0469725
116	OCCUPATIONAL HEALTH CENTERS OF DELAWARE, P.A.	51-0376661
117	OCCUPATIONAL HEALTH CENTERS OF GEORGIA, P.C.	58-2285009
118	OCCUPATIONAL HEALTH CENTERS OF ILLINOIS, PC	46-2554525
119	OCCUPATIONAL HEALTH CENTERS OF KANSAS, PA	47-2063864
120	OCCUPATIONAL HEALTH CENTERS OF LOUISIANA, A PROFESSIONAL CORPORATION	74-2891603

NOTES TO THE FINANCIAL STATEMENTS

121	OCCUPATIONAL HEALTH CENTERS OF MICHIGAN, P.C.	38-2857561
122	OCCUPATIONAL HEALTH CENTERS OF NEBRASKA, P.C.	47-0827928
123	OCCUPATIONAL HEALTH CENTERS OF NEW JERSEY, P.A.	22-3473542
124	OCCUPATIONAL HEALTH CENTERS OF NEW YORK, P.A.	20-3187863
125	OCCUPATIONAL HEALTH CENTERS OF NORTH CAROLINA, P.C.	26-2484838
126	OCCUPATIONAL HEALTH CENTERS OF OHIO, P.A., CO.	26-3239286
127	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, P.A. (Arizona)	86-0750222
128	OCCUPATIONAL HEALTH CENTERS OF THE SOUTHWEST, P.A. (Texas)	75-2014828
129	OHC OF HAWAII, INC.	74-2731442
130	OMP INSURANCE COMPANY, LTD.	98-0445802
131	ONSITE OCCMED, P.A.	20-0513177
132	PARTNERS IN INTEGRATED CARE, INC.	47-2905609
133	PARTNERS IN PRIMARY CARE OF ARIZONA, P.A.	45-3637057
134	PARTNERS IN PRIMARY CARE OF ILLINOIS, P.A.	45-4041098
135	PARTNERS IN PRIMARY CARE, P.A.	47-1161014
136	PHP COMPANIES, INC.	62-1552091
137	PREFERRED HEALTH PARTNERSHIP, INC.	62-1250945
138	PRESERVATION ON MAIN, INC.	20-1724127
139	PRIMARY CARE HOLDINGS, INC.	46-1225873
140	ROHC, LLC	75-2844854
141	SENIORBRIDGE (NC), INC.	56-2593719
142	SENIORBRIDGE CARE MANAGEMENT, INC.	80-0581269
143	SENIORBRIDGE FAMILY COMPANIES (AZ), INC.	46-0702349
144	SENIORBRIDGE FAMILY COMPANIES (CA), INC.	45-3039782
145	SENIORBRIDGE FAMILY COMPANIES (CT), INC.	27-0452360
146	SENIORBRIDGE FAMILY COMPANIES (FL), INC.	65-1096853
147	SENIORBRIDGE FAMILY COMPANIES (IL), INC.	02-0660212
148	SENIORBRIDGE FAMILY COMPANIES (MD), INC.	81-0557727
149	SENIORBRIDGE FAMILY COMPANIES (MO), INC.	46-0677759
150	SENIORBRIDGE FAMILY COMPANIES (NJ), INC.	36-4484449
151	SENIORBRIDGE FAMILY COMPANIES (NY), INC.	36-4484443
152	SENIORBRIDGE FAMILY COMPANIES (OH), INC.	20-0260501
153	SENIORBRIDGE FAMILY COMPANIES (PA), INC.	38-3643832
154	SENIORBRIDGE FAMILY COMPANIES (TX), INC.	01-0766084
155	SENIORBRIDGE FAMILY COMPANIES (VA), INC.	46-0691871
156	SEREDOR CORPORATION	27-0338595
157	ST MARY'S MEDICAL PARK PHARMACY, INC.	86-0597187
158	SYMPHONY HEALTH PARTNERS, INC.	45-5032192
159	SYMPHONY HEALTH PARTNERS-MIDWEST, LLC	32-0375132
160	TEXAS DENTAL PLANS, INC.	74-2352809
161	TEXAS MEDGROUP, P.A.	75-2891678
162	THE DENTAL CONCERN, INC.	52-1157181
163	THERAPY CENTERS OF SOUTH CAROLINA, P.A.	20-2883662
164	THERAPY CENTERS OF THE SOUTHWEST I, P.A.	20-3033507
165	TRANSCEND COMMUNITY PHYSICIAN NETWORK (AR), P.A. (f.k.a. Arkansas Community Physician Network, P.A.)	47-2770181
166	TRANSCEND COMMUNITY PHYSICIAN NETWORK (KS), P.A. (f.k.a. Kansas City Community Physician Network, P.A.)	47-2111323
167	TRANSCEND COMMUNITY PHYSICIAN NETWORK, P.C. (f.k.a. Alabama Community Physician Network, P.C.)	47-2750105
168	TRANSCEND INSIGHTS, INC. (f.k.a. Certify Data Systems, Inc.)	80-0072760
169	U.S. MEDGROUP OF ARKANSAS, P.A.	26-4101338
170	U.S. MEDGROUP OF DELAWARE, P.A.	22-3867212
171	U.S. MEDGROUP OF ILLINOIS, PC	46-2689388
172	U.S. MEDGROUP OF KANSAS, PA	47-2063567
173	U.S. MEDGROUP OF MASSACHUSETTS, P.C.	20-3760561
174	U.S. MEDGROUP OF MICHIGAN, P.C.	75-2972185
175	U.S. MEDGROUP OF NEW JERSEY, P.A.	22-3869772
176	U.S. MEDGROUP OF NEW YORK, P.A.	26-3598351
177	U.S. MEDGROUP OF NORTH CAROLINA, P.C.	26-2502158
178	U.S. MEDGROUP OF OHIO, P.A., CO.	26-3239579
179	U.S. MEDGROUP, P.A. (Arizona)	75-2645352
180	U.S. MEDGROUP, P.A. (Texas)	75-2612924
181	VALOR HEALTHCARE, INC.	20-3585174
182	VIRGINIA COMMUNITY PHYSICIAN NETWORK, P.C.	47-3950146

NOTES TO THE FINANCIAL STATEMENTS

10. Information Concerning Parent, Subsidiaries and Affiliates

A.-F. The Company has one management contract with Humana Insurance of Puerto Rico, Inc. (HIPR) whereby the Company provided with medical and executive management, information systems, claims processing, billing and enrollment, and telemarketing and other services as required by HIPR. Management fees charged to operations for the years ended December 31, 2015 and 2014 were $(17,705,226) and $(16,042,785) respectively. As a part of this agreement, HIPR makes cash disbursements on behalf of the Company which includes, but is not limited to, medical related items, general and administrative expenses, commissions and payroll. The Company is reimbursed by HIPR monthly. The Company continues to be primarily liable for any outstanding payments made on behalf of HIPR, should HIPR not be able to fulfill its obligations.

No dividends were paid by the Company as of December 31, 2015.

At December 31, 2015, the Company reported $958,140 due to HIPR Amounts due to or from affiliate are generally settled within 30 days.

G. All outstanding shares of the Company are owned by the Parent Company.

H. Not Applicable.

I. Not Applicable.

J. Not Applicable.

K. Not Applicable.

L. Not Applicable.

M. Not Applicable.

N. Not Applicable.

11. Debt

A. Debt Including Capital Notes

The Company has no debentures outstanding.

The Company has no capital notes outstanding.

The Company does not have any reverse repurchase agreements.

B. Federal Home Loan Bank (FHLB) Agreements

The Company does not have any FHLB agreements.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A.-D. Defined Benefit Plans

Not Applicable.

E. Defined Contribution Plans

Not Applicable.

F. Multiemployer Plans

Not Applicable.

G. Consolidated/Holding Company Plans

The Company employees are eligible to participate in the Humana Retirement and Savings Plan ("the Plan"), a defined contribution plan, sponsored by Humana Inc. The Plan maintains two accounts, the Savings Account and the Retirement Account.

Humana Inc.'s total contributions paid to the Savings and Retirement accounts of the Humana Retirement Savings Plan were $186,060,971 and $174,594,222 for the years ended December 31, 2015 and 2014, respectively. Of these contributions, the Company contributed $1,647,212 and $1,703,658 during 2015 and 2014, respectively. As of December 31, 2015 and 2014, the fair market value of the Humana Retirement Savings Plan's assets was $39,065,093 and $37,450,943, respectively.

H. Postemployment Benefits and Compensated Absences

Not Applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) The Company has $5 par value common stock with 1,000,000 shares authorized and 28,505 shares issued and 28,505 outstanding. All shares are common stock shares.

(2) The Company has no preferred stock outstanding.

(3-5) Dividends are noncumulative and are paid as determined by the Board of Directors. Dividends are subject to the approval of the Insurance Commissioner of Puerto Rico if such dividend distribution exceeds the lesser of the Company's prior year net operating profits or 10 percent of policyholders surplus funds derived from realized net operating profits.

Within the limitations above, there are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders.

No dividends were paid by the Company as of December 31, 2015.

(6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

(7) Not Applicable.

(8) Not Applicable.

(9) Changes in balances of special surplus funds from the prior year is due to the estimated health insurance industry fee that will be payable on September 30, 2016.

(10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is $(6,033).

(11) Not Applicable.

(12) Not Applicable.

(13) Not Applicable.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not Applicable.

B. Assessments

Not Applicable.

C. Gain Contingencies

Not Applicable.

D. Claims related extra contractual obligation and bad faith losses stemming from lawsuits

Not Applicable.

E. Joint and Several Liabilities

Not Applicable.

F. All Other Contingencies

During the ordinary course of business, the Company is subject to pending and threatened legal actions. Management of the Company does not believe that any of these actions will have a material adverse effect on the Company's surplus, results of operations or cash flows. However, the likelihood or outcome of current or future legal proceedings cannot be accurately predicted, and they could adversely affect the Company's surplus, results of operations and cash flows.

The Company is not aware of any other material contingent liabilities as of December 31, 2015.

15. Leases

A. Lessee Operating Lease

(1) The Company has entered into operating leases for medical and administrative office space and equipment with lease terms ranging from one to two years. Operating lease rental payments charged to expenses for the years ended December 31, 2015 and 2014 was $2,216,298 and $1,748,196, respectively.

NOTES TO THE FINANCIAL STATEMENTS

(2) Noncancelable Lease Terms:

a) At January 1, 2016, the minimum aggregate rental commitments are as follows:

Year ending December 31,

2016	$	2,129,798
2017		2,220,984
2018		-
2019		-
2020		-
Thereafter		-
Total Minimum Lease Payments	$	4,350,782

b) Certain rental commitments have renewal options extending through the year 2017. Some of these renewals are subject to adjustments in future periods.

(3) The Company is not involved in any sales-leaseback transactions.

B. Lessor Leases

Not Applicable.

16. Information about Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no investment in Financial Instruments with Off-Balance Sheet Risk or Concentrations of Credit Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not Applicable.

B. Transfer and Servicing of Financial Assets

Not Applicable.

C. Wash Sales

Not Applicable.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Not Applicable.

B. ASC Plans

Not Applicable.

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract

(1) The Company records no revenue explicitly attributable to the cost share and reinsurance components of administered Medicare products.

(2) As of December 31, 2015, the Company has recorded a receivable from CMS of $14,505,963 related to the cost share and reinsurance components of administered Medicare products. The Company does not have any additional receivables greater than 10% of the Company's accounts receivable from uninsured accident and health plans or $10,000.

(3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare contracts, the Company has recorded no allowances and reserves for adjustment of recorded revenues and receivables.

(4) The Company has made no adjustment to revenue resulting from audit of receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

20. Fair Value Measurements

A. (1) The fair value of financial assets at December 31, 2015 were as follows:

	Level 1	Level 2	Level 3	Total
a. Assets at fair value				
Bonds				
U.S. governments	$ -	$ -	$ -	$ -
Tax-exempt municipal	-	-	-	-
Residential mortgage-backed	-	-	-	-
Corporate debt securities	-	132,000	-	132,000
Total bonds	-	132,000	-	132,000
Total assets at fair value	$ -	$ 132,000	$ -	$ 132,000
b. Liabilities at fair value	$ -	$ -	$ -	$ -
Total liabilities at fair value	$ -	$ -	$ -	$ -

The Company reports transfers between Level 1 and Level 2 of the fair value hierarchy levels at the end of the reporting period. There were no transfers between Level 1 and Level 2 of the fair value hierarchy between December 31, 2014 and December 31, 2015.

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Not Applicable.

(3) The Company reports transfers into or out of Level 3 of the fair value hierarchy levels at the end of the reporting period. There were no transfers into or out of Level 3 of the fair value hierarchy levels between December 31, 2014 and December 31, 2015.

(4) Fair value of actively traded debt securities are based on quoted market prices. Fair value of other debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates generally using a market valuation approach, or, less frequently, an income valuation approach and are generally classified as Level 2. The Company generally obtains one quoted price for each security from a third party pricing service. These prices are generally derived from recently reported trades for identical or similar securities, including adjustments through the reporting date based upon observable market information. When quoted prices are not available, the third party pricing service may use quoted market prices of comparable securities or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include benchmark yields, reported trades, credit spreads, broker quotes, default rates and prepayment speeds. The Company is responsible for the determination of fair value and as such, the Company performs analysis on the prices received from the third party pricing service to determine whether the prices are reasonable estimates of fair value. The Company's analysis includes a review of monthly price fluctuations as well as a quarterly comparison of the prices received from the pricing service to prices reported by the Company's third party investment advisor. Based on the Company's internal price verification procedures and review of fair value methodology documentation provided by the third party pricing service, there were no material adjustments to the prices obtained from the third party pricing service during the year ended December 31, 2015.

(5) Derivative Fair Values

Not Applicable.

B. Other Fair Value Disclosures

Not Applicable.

C. Fair Values for All Financial Instruments by Levels 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Not Practicable (Carrying Value)
Bonds	$ 132,000	$ 132,000	$ -	$ 132,000	$ -	$ -

D. Financial Instruments for which Not Practicable to Estimate Fair Values

Not Applicable.

21. Other Items

A. Unusual or Infrequent Items

Not Applicable.

B. Troubled Debt Restructuring: Debtors

Not Applicable.

C. Other Disclosures

Not Applicable.

D. Business Interruption Insurance Recoveries

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

E. State Transferable and Non-transferable Tax Credits

Not Applicable.

F. Subprime Mortgage Related Risk Exposure

(1) The Company consults with its external investment managers to assess its subprime mortgage related risk exposure. Certain characteristics are utilized to determine if a mortgage-backed security has subprime exposure. The main characteristics reviewed when determining this are the collateral and structure of the security, the loan purpose, loan documentation, occupancy, geographical location, loan size and type. Subprime mortgage borrowers typically have lower credit scores, lower loan balances and higher loan-to-values than other conforming loans. Management's practices include reviewing quantitative and qualitative credit models that analyze loan-level collateral composition, historical underwriter performance trends, the impact of macroeconomic factors, and issuer risks; as well as reviewing the estimation of security cash flows and monthly model calibrations.

(2) Direct exposure through investments in sub-prime mortgage loans.

The Company has no direct exposure through investment to sub-prime mortgage loans.

(3) Direct exposure through other investments:

a. Residential mortgage backed securities – No substantial exposure noted.
b. Commercial mortgage backed securities – No substantial exposure noted.
c. Collateralized debt obligations – No substantial exposure noted.
d. Structured securities – No substantial exposure noted.
e. Equity investment in SCAs – No substantial exposure noted.
f. Other assets – No substantial exposure noted.
g. Total – No substantial exposure noted.

(4) Underwriting exposure to sub-prime mortgage risk through Mortgage Guaranty coverage, Financial Guaranty coverage, Directors and Officers liability coverage, or Errors and Omissions liability coverage.

Not Applicable.

Classification of mortgage related securities is primarily based on information from outside data services, including rating agency actions. When considering our exposure, the Company evaluated the percentage of full documentation loans, percent of owner occupied properties, FICO scores, average margin for ARM loans, percent of loans with prepayment penalties, the existence of non-traditional underwriting standards, among other factors.

G. Retained Assets

Not Applicable.

H. Insurance Linked Securities

Not Applicable

22. Events Subsequent

On January 1, 2016, the Company will be subject to an annual fee under section 9010 of the Federal Affordable Care Act (ACA). This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1 of the year the fee is due. As of December 31, 2015, the Company has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2016, and estimates their portion of the annual health insurance industry fee to be payable on September 30, 2016 to be $7,640,630. This amount is reflected in special surplus. This assessment is expected to impact risk based capital (RBC) by 10.04%. Reporting the ACA assessment as of December 31, 2015 would not have triggered an RBC action level. The Company expects to offset the impact of the health insurance industry fee on its results of operations in 2016 through pretax income improvement; however, there can be no assurance that it will be able to do so.

NOTES TO THE FINANCIAL STATEMENTS

The Company is not aware of any events or transactions occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition. Subsequent events have been considered through February 24, 2016 for the Statutory Statement issued on February 24, 2016.

		Current Year	Prior Year
A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the federal Affordable Care Act (YES/NO)?	Yes	
B.	ACA fee assessment payable for the upcoming year	$ 7,640,630	$ 7,380,018
C.	ACA fee assessment paid	$ 7,181,779	$ 4,850,656
D.	Premiums written subject to ACA 9010 assessment	$ 417,307,368	$ 391,421,609
E.	Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 14)	$ 76,093,772	69,525,766
F.	Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)	$ 68,453,142	62,145,748
G.	Authorized Control Level after surplus adjustment (Five-Year Historical Line 15)	$ 10,177,707	10,554,764
H.	Would reporting the ACA assessment as of December 31, 2015, have triggered an RBC action level (YES/NO)	No	

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10.0 percent or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10.0 percent or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes ( ) No (X)

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

Section 3 – Ceded Reinsurance Report – Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. $0

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No (X)

B. Uncollectible Reinsurance

Not Applicable.

C. Commutation of Ceded Reinsurance

Not Applicable.

NOTES TO THE FINANCIAL STATEMENTS

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

Not Applicable.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. The Company estimates accrued retrospective premium adjustments for its Medicare business through a mathematical approach using an algorithm based upon settlement procedures defined by contracts with CMS.

The Company estimates accrued retrospective premium adjustments for its Commercial business based on experience to date, knowledge of the marketplace, and the terms of the risk corridors program with HHS.

B. The Company records accrued retrospective premium as an adjustment to earned premiums.

C. The amount of net premiums written by the Company at December 31, 2015 that are subject to retrospective rating features was $402,208,636, or 96.28% of the total net premiums written. No other net premiums written by the Company are subject to retrospective rating features.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

	Individual	Small Group Employer	Large Group Employer	Other Categories with rebates	Total
Prior Reporting Year:					
Medical loss ratio rebates incurred	$ -	$ -	$ 734,363	$ -	$ 734,363
Medical loss ratio rebates paid	-	-	604,146	-	604,146
Medical loss rebates unpaid	-	-	743,462	-	743,462
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	$ 743,462
Current Reporting Year-to-date:					
Medical loss ratio rebates incurred	$ -	$ 80,502	$ (193,947)	$ -	$ (113,445)
Medical loss ratio rebates paid	-	80,502	146,115	-	226,617
Medical loss rebates unpaid	-	-	403,401	-	403,400
Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	-
Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	-
Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	$ 403,400

E. Risk Sharing Provisions of the Affordable Care Act

Not Applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2014 were $61,866,683. As of December 31, 2015, $50,101,232 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $1,115,920 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a $10,649,530 favorable prior-year development since December 31, 2014. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The amounts presented in this footnote exclude any impact related to Pharmacy Rebates and other Healthcare Receivable activity. Impact of such receivables can be seen on Exhibit 3 & 3a as well as Footnote 28. The Company did not experience any material prior year claim development on retrospectively rated policies.

26. Intercompany Pooling Arrangements

Not Applicable.

27. Structured Settlements

The Company has no structured settlements.

NOTES TO THE FINANCIAL STATEMENTS

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimate Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More than 181 Days after Billing
12/31/2015	$ 3,861,746	$ 3,861,746	$ -	$ -	$ -
9/30/2015	4,163,249	4,163,249	4,153,322	-	-
6/30/2015	3,291,604	3,291,604	3,286,937	-	-
3/31/2015	3,526,201	3,526,201	3,525,032	-	1,146
12/31/2014	2,737,532	2,737,532	2,731,599	1,996	3,800
9/30/2014	2,526,042	2,526,042	2,513,016	-	6,475
6/30/2014	2,294,126	2,294,126	2,266,719	16,867	10,541
3/31/2014	1,509,428	1,509,428	1,471,963	27,986	9,480
12/31/2013	1,066,049	1,066,049	1,053,513	12,028	508
9/30/2013	920,574	920,574	918,791	-	1,783
6/30/2013	1,040,707	1,040,707	1,040,701	-	6
3/31/2013	1,784,566	1,784,566	1,437,328	307,304	39,934

B. Risk Sharing Receivables

Delete

29. Participating Policies

The Company has no participating policies.

30. Premium Deficiency Reserves

1.	Liability carried for premium deficiency reserves	$ 205,000
2.	Date of the most recent evaluation of this liability	December 31, 2015
3.	Was anticipated investment income utilized in the calculation?	Yes ( ) No (X)

The Company did recognize the time value of money by discounting future losses at an annual interest rate of 0.30%.

31. Anticipated Salvage and Subrogation

Not Applicable.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [X] No [ ]
If yes, complete Schedule Y, Parts 1, 1A and 2

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? ..... Yes [X] No [ ] N/A [ ]

1.3 State Regulating? ..... Puerto Rico

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [X] No [ ]

2.2 If yes, date of change: 08/21/2015

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2014

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2011

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/19/2014

3.4 By what department or departments?
Insurance Commissioner of Puerto Rico .....

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [X] No [ ] N/A [ ]

3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [X] No [ ] N/A [ ]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? ..... Yes [ ] No [X]
4.12 renewals? ..... Yes [ ] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? ..... Yes [ ] No [X]
4.22 renewals? ..... Yes [ ] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [X]

5.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [X]

6.2 If yes, give full information:

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? ..... Yes [ ] No [X]

7.2 If yes,
7.21 State the percentage of foreign control; ..... 0.0 %
7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [X]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

PricewaterhouseCoopers LLC, 500 West Main Street, Suite 1800, Louisville, Kentucky 40202-4264

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

N/A .....

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

N/A .....

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [X] No [ ] N/A [ ]

10.6 If the response to 10.5 is no or n/a, please explain

N/A .....

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Jonathan Albert Canine, Vice President and Appointed Actuary, 500 West Main Street, Louisville, KY 40203 .....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [X]

12.11 Name of real estate holding company .....

12.12 Number of parcels involved 0

12.13 Total book/adjusted carrying value ..... $ 0

12.2 If, yes provide explanation:

.....

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

Not Applicable. .....

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]

13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [X] No [ ]

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

.....

14.2 Has the code of ethics for senior managers been amended? ..... Yes [X] No [ ]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

Revised based on general policy and regulatory changes .....

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

.....

GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [X] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [X] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [X] No [ ]

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers ..... $ 0
- 20.12 To stockholders not officers ..... $ 0
- 20.13 Trustees, supreme or grand (Fraternal Only) ..... $ 0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers ..... $ 0
- 20.22 To stockholders not officers ..... $ 0
- 20.23 Trustees, supreme or grand (Fraternal Only) ..... $ 0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others ..... $ 0
- 21.22 Borrowed from others ..... $ 0
- 21.23 Leased from others ..... $ 0
- 21.24 Other ..... $ 0

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [X]

22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment $ 0
- 22.22 Amount paid as expenses ..... $ 0
- 22.23 Other amounts paid ..... $ 0

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [X]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... $ 0

INVESTMENT

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03) ..... Yes [X] No [ ]

24.02 If no, give full and complete information relating thereto

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? ..... Yes [ ] No [ ] N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. ..... $ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs. ..... $ 0

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [X]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [X]

24.09 Does the reporting entity or the reporting entity 's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [X]

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 0
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	$ 0
24.103	Total payable for securities lending reported on the liability page	$ 0

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03) ..... Yes [X] No [ ]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21	Subject to repurchase agreements	$ 0
25.22	Subject to reverse repurchase agreements	$ 0
25.23	Subject to dollar repurchase agreements	$ 0
25.24	Subject to reverse dollar repurchase agreements	$ 0
25.25	Placed under option agreements	$ 0
25.26	Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	$ 0
25.27	FHLB Capital Stock	$ 0
25.28	On deposit with states	$ 21,744,147
25.29	On deposit with other regulatory bodies	$ 0
25.30	Pledged as collateral - excluding collateral pledged to an FHLB	$ 0
25.31	Pledged as collateral to FHLB - including assets backing funding agreements	$ 0
25.32	Other	$ 0

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ] N/A [ ]
If no, attach a description with this statement.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? ..... Yes [ ] No [X]

27.2 If yes, state the amount thereof at December 31 of the current year ..... $ 0

28. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? ..... Yes [X] No [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
JP Morgan Chase	4 Metro Tech Center, 16th Floor Mail Code: NY1-C512, Brooklyn, NY 11245, Attn: Barbara J. Walsh

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? ..... Yes [ ] No [X]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

28.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of brokers/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
107105.00	Blackrock, Inc.	55 East 52nd Street, New York, NY 10055

GENERAL INTERROGATORIES

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [ ] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
29.2999 - Total		0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	103,531,881	101,747,796	(1,784,085)
30.2 Preferred stocks	0	0	0
30.3 Totals	103,531,881	101,747,796	(1,784,085)

30.4 Describe the sources or methods utilized in determining the fair values:

Fair value of actively traded debt and equity securities are based on quoted market prices. Fair value of inactively traded debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates using either a market or income valuation.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [ ] No [X]

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [ ] No [ ]

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

Fair value of actively traded debt and equity securities are based on quoted market prices. Fair value of inactively traded debt securities are based on quoted market prices of identical or similar securities or based on observable inputs like interest rates using either a market or income valuation.

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No [ ]

32.2 If no, list exceptions:

GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? ..... $ 156,976

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Natural Awakenings Corp	150,337

34.1 Amount of payments for legal expenses, if any? ..... $ 333,911

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
PIETRANTONI MENDEZ & ALVAREZ LLP	176,543
SCHUSTER AGUILO LLC	145,033

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? ..... $ 0

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? ..... Yes [ ] No [X]

1.2 If yes, indicate premium earned on U.S. business only. ..... $ 0

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? ..... $ 0

1.31 Reason for excluding

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above ..... $ 0

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. ..... $ 0

1.6 Individual policies:

Most current three years:

1.61 Total premium earned ..... $ 0

1.62 Total incurred claims ..... $ 0

1.63 Number of covered lives 0

All years prior to most current three years:

1.64 Total premium earned ..... $ 0

1.65 Total incurred claims ..... $ 0

1.66 Number of covered lives 0

1.7 Group policies:

Most current three years:

1.71 Total premium earned ..... $ 0

1.72 Total incurred claims ..... $ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned ..... $ 0

1.75 Total incurred claims ..... $ 0

1.76 Number of covered lives 0

2. Health Test:

		1 Current Year	2 Prior Year
2.1	Premium Numerator	417,399,066	391,594,145
2.2	Premium Denominator	417,399,066	391,594,145
2.3	Premium Ratio (2.1/2.2)	1.000	1.000
2.4	Reserve Numerator	54,622,622	62,750,544
2.5	Reserve Denominator	54,622,622	62,750,544
2.6	Reserve Ratio (2.4/2.5)	1.000	1.000

3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? ..... Yes [ ] No [X]

3.2 If yes, give particulars:

4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? ..... Yes [X] No [ ]

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? ..... Yes [ ] No [X]

5.1 Does the reporting entity have stop-loss reinsurance? ..... Yes [X] No [ ]

5.2 If no, explain:

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical ..... $ 3,000,000

5.32 Medical Only ..... $ 0

5.33 Medicare Supplement ..... $ 0

5.34 Dental & Vision ..... $ 0

5.35 Other Limited Benefit Plan ..... $ 0

5.36 Other ..... $ 0

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:

Provider contracts include hold harmless and continuation of benefits provisions. HMO has an indemnity agreement with the parent company.

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? ..... Yes [X] No [ ]

7.2 If no, give details

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year 12,958

8.2 Number of providers at end of reporting year 7,253

9.1 Does the reporting entity have business subject to premium rate guarantees? ..... Yes [ ] No [X]

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months ..... $ 0

9.22 Business with rate guarantees over 36 months ..... $ 0

GENERAL INTERROGATORIES

10.1 Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts? ..... Yes [ ] No [X]

10.2 If yes:

10.21 Maximum amount payable bonuses ..... $ 0
10.22 Amount actually paid for year bonuses ..... $ 0
10.23 Maximum amount payable withholds ..... $ 0
10.24 Amount actually paid for year withholds ..... $ 0

11.1 Is the reporting entity organized as:

11.12 A Medical Group/Staff Model, ... Yes [ ] No [X]
11.13 An Individual Practice Association (IPA), or, . Yes [ ] No [X]
11.14 A Mixed Model (combination of above)? ..... Yes [ ] No [X]

11.2 Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements? ..... Yes [ ] No [ ]
11.3 If yes, show the name of the state requiring such minimum capital and surplus. ..... Puerto Rico
11.4 If yes, show the amount required. ..... $ 20,325,710
11.5 Is this amount included as part of a contingency reserve in stockholder's equity? ..... Yes [ ] No [ ]
11.6 If the amount is calculated, show the calculation
See RBC calculation or state regulation.

12. List service areas in which reporting entity is licensed to operate:

1 Name of Service Area
Puerto Rico - Albonito, Arecibo, Arroryo, Aguas Buenas, Barranquitas, Bayamon, Carolina, Cayey, Cidra, Coamo, Caguas, Guayama, Gurabo, Humacao, Juan Diaz, Juncos, Las Piedras, Maunabo, Mayaguez, Naguabo, Orocovis, Patillas, Ponce, Salinas, San Juan, San Lorenzo, Santa Isabil, Villalba, Yabucoa

13.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [X]

13.2 If yes, please provide the amount of custodial funds held as of the reporting date. ..... $ 0

13.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [X]

13.4 If yes, please provide the balance of funds administered as of the reporting date. ..... $ 0

14.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? ..... Yes [ ] No [X] N/A [ ]
14.2 If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written ..... $ 0
15.2 Total Incurred Claims ..... $ 0
15.3 Number of Covered Lives 0

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurarantee)
Universal Life (with or without secondary gurarantee)
Variable Universal Life (with or without secondary gurarantee)

FIVE-YEAR HISTORICAL DATA

		1 2015	2 2014	3 2013	4 2012	5 2011
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)	140,756,289	150,112,414	189,490,517	260,821,262	226,287,628
2.	Total liabilities (Page 3, Line 24)	65,109,965	80,586,648	102,457,818	158,325,250	143,874,680
3.	Statutory minimum capital and surplus requirement	20,325,710	21,109,527	600,000	600,000	600,000
4.	Total capital and surplus (Page 3, Line 33)	75,646,324	69,525,766	87,032,699	102,496,012	82,412,948
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	417,739,128	391,463,927	907,212,559	1,025,150,166	917,724,977
6.	Total medical and hospital expenses (Line 18)	368,360,055	367,677,319	843,803,471	932,858,820	831,648,379
7.	Claims adjustment expenses (Line 20)	11,514,823	9,843,849	15,146,086	16,832,138	20,155,456
8.	Total administrative expenses (Line 21)	40,568,240	39,839,800	64,905,040	50,567,314	47,876,429
9.	Net underwriting gain (loss) (Line 24)	(2,910,990)	(22,044,041)	(20,495,038)	24,891,894	18,044,713
10.	Net investment gain (loss) (Line 27)	5,065,647	3,878,255	3,749,019	4,268,411	3,266,354
11.	Total other income (Lines 28 plus 29)	6,021,019	(2,909)	756	2,532	2,072
12.	Net income or (loss) (Line 32)	7,698,771	(18,168,695)	(14,982,476)	19,645,828	14,632,310
	Cash Flow (Page 6)					
13.	Net cash from operations (Line 11)	(14,175,551)	(14,623,127)	(63,401,465)	50,599,284	85,044,644
	Risk-Based Capital Analysis					
14.	Total adjusted capital	75,646,324	69,525,766	87,032,699	102,496,012	82,412,948
15.	Authorized control level risk-based capital	10,162,855	10,554,764	35,122,855	37,807,234	34,488,482
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	58,192	60,335	46,811	568,004	560,709
17.	Total members months (Column 6, Line 7)	723,572	682,784	5,303,170	6,809,448	6,635,363
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)	88.2	93.9	93.0	91.0	90.6
20.	Cost containment expenses	2.4	2.2	1.5	1.6	1.6
21.	Other claims adjustment expenses	0.4	0.3	0.1	0.1	0.6
22.	Total underwriting deductions (Line 23)	100.7	105.6	102.3	97.6	98.0
23.	Total underwriting gain (loss) (Line 24)	(0.7)	(5.6)	(2.3)	2.4	2.0
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 13, Col. 5)	45,120,141	62,935,029	109,590,914	115,942,181	80,904,604
25.	Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	58,543,337	63,734,676	121,626,192	123,324,774	110,861,985
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	0
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30.	Affiliated mortgage loans on real estate	0	0	0	0	0
31.	All other affiliated	0	0	0	0	0
32.	Total of above Lines 26 to 31	0	0	0	0	0
33.	Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	0

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? ..... Yes [ ] No [ ]

If no, please explain: .....

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. San Juan, PR (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2015 NAIC Company Code 95721

	1	Comprehensive (Hospital & Medical) 2	3	4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	60,335	297	3,974	0	0	0	5,820	50,244	0	0
2. First Quarter	60,085	306	3,927	0	0	0	6,535	49,317	0	0
3. Second Quarter	60,540	381	3,940	0	0	0	6,617	49,602	0	0
4. Third Quarter	62,039	559	3,890	0	0	0	6,668	50,922	0	0
5. Current Year	58,192	783	3,874	0	0	0	6,733	46,802	0	0
6. Current Year Member Months	723,572	5,472	47,329	0	0	0	78,414	592,357	0	0
Total Member Ambulatory Encounters for Year:										
7 Physician	1,102,833	2,958	24,924	0	0	0	51,408	1,023,543	0	0
8. Non-Physician	557,218	1,937	12,448	0	0	0	27,527	515,306	0	0
9. Total	1,660,051	4,895	37,372	0	0	0	78,935	1,538,849	0	0
10. Hospital Patient Days Incurred	77,472	372	1,206	0	0	0	1,493	74,401	0	0
11. Number of Inpatient Admissions	10,537	161	181	0	0	0	363	9,832	0	0
12. Health Premiums Written (b)	417,476,917	1,051,124	10,102,203	0	0	0	18,627,069	390,751,590	(3,055,069)	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	417,816,979	1,051,124	10,442,265	0	0	0	18,627,069	390,751,590	(3,055,069)	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	387,426,089	2,944,041	2,000,096	0	0	0	19,118,420	358,160,357	5,203,174	0
18 Amount Incurred for Provision of Health Care Services	368,360,055	2,833,872	2,481,985	0	0	0	18,751,694	348,180,794	(3,888,289)	0

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $ 390,751,590

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. San Juan, PR (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2015 NAIC Company Code 95721

	1	Comprehensive (Hospital & Medical) 2	3	4	5	6	7	8	9	10
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	60,335	297	3,974	0	0	0	5,820	50,244	0	0
2. First Quarter	60,085	306	3,927	0	0	0	6,535	49,317	0	0
3. Second Quarter	60,540	381	3,940	0	0	0	6,617	49,602	0	0
4. Third Quarter	62,039	559	3,890	0	0	0	6,668	50,922	0	0
5. Current Year	58,192	783	3,874	0	0	0	6,733	46,802	0	0
6. Current Year Member Months	723,572	5,472	47,329	0	0	0	78,414	592,357	0	0
Total Member Ambulatory Encounters for Year:										
7 Physician	1,102,833	2,958	24,924	0	0	0	51,408	1,023,543	0	0
8. Non-Physician	557,218	1,937	12,448	0	0	0	27,527	515,306	0	0
9. Total	1,660,051	4,895	37,372	0	0	0	78,935	1,538,849	0	0
10. Hospital Patient Days Incurred	77,472	372	1,206	0	0	0	1,493	74,401	0	0
11. Number of Inpatient Admissions	10,537	161	181	0	0	0	363	9,832	0	0
12. Health Premiums Written (b)	417,476,917	1,051,124	10,102,203	0	0	0	18,627,069	390,751,590	(3,055,069)	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	417,816,979	1,051,124	10,442,265	0	0	0	18,627,069	390,751,590	(3,055,069)	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	387,426,089	2,944,041	2,000,096	0	0	0	19,118,420	358,160,357	5,203,174	0
18 Amount Incurred for Provision of Health Care Services	368,360,055	2,833,872	2,481,985	0	0	0	18,751,694	348,180,794	(3,888,289)	0

(a) For health business: number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0 .
(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $ 390,751,590

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief 11 Current Year	Outstanding Surplus Relief 12 Prior Year	13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
37273	39-1338397	10/01/2015	AXIS INSURANCE COMPANY	IL	SSL/A/G	CAM	16,919	0	0	0	0	0	0
88340	59-2859797	10/01/2014	HANNOVER LIFE REASSURANCE CO OF AMERICA	FL	SSL/A/G	CAM	26,201	0	0	0	0	0	0
10357	52-1952955	10/01/2014	RENAISSANCE REINSURANCE U.S. INC.	MD	SSL/A/G	CAM	34,731	0	0	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							77,851	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							77,851	0	0	0	0	0	0
1199999. Total General Account Authorized							77,851	0	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified							77,851	0	0	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified							0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified							0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							77,851	0	0	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							0	0	0	0	0	0	0
9999999 - Totals							77,851	0	0	0	0	0	0

Schedule S - Part 4

NONE

Schedule S - Part 4 - Bank Footnote

NONE

Schedule S - Part 5

NONE

Schedule S - Part 5 - Bank Footnote

NONE

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)

		1 2015	2 2014	3 2013	4 2012	5 2011
	A. OPERATIONS ITEMS					
1.	Premiums	78	91	0	0	0
2.	Title XVIII - Medicare	0	0	0	0	0
3.	Title XIX - Medicaid	0	0	0	0	0
4.	Commissions and reinsurance expense allowance	0	0	0	0	0
5.	Total hospital and medical expenses	0	0	0	0	0
	B. BALANCE SHEET ITEMS					
6.	Premiums receivable	0	0	0	0	0
7.	Claims payable	0	0	0	0	0
8.	Reinsurance recoverable on paid losses	0	0	0	0	0
9.	Experience rating refunds due or unpaid	0	0	0	0	0
10.	Commissions and reinsurance expense allowances due	0	0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
12.	Offset for reinsurance with Certified Reinsurers	0	0	0	0	XXX
	C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13.	Funds deposited by and withheld from (F)	0	0	0	0	0
14.	Letters of credit (L)	0	0	0	0	0
15.	Trust agreements (T)	0	0	0	0	0
16.	Other (O)	0	0	0	0	0
	D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17.	Multiple Beneficiary Trust	0	0	0	0	XXX
18.	Funds deposited by and withheld from (F)	0	0	0	0	XXX
19.	Letters of credit (L)	0	0	0	0	XXX
20.	Trust agreements (T)	0	0	0	0	XXX
21.	Other (O)	0	0	0	0	XXX

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

		1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	108,017,561	0	108,017,561
2.	Accident and health premiums due and unpaid (Line 15)	11,275,748	0	11,275,748
3.	Amounts recoverable from reinsurers (Line 16.1)	0	0	0
4.	Net credit for ceded reinsurance	XXX	(16,742)	(16,742)
5.	All other admitted assets (Balance)	21,462,980	0	21,462,980
6.	Total assets (Line 28)	140,756,289	(16,742)	140,739,547
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)	43,321,764	0	43,321,764
8.	Accrued medical incentive pool and bonus payments (Line 2)	0	0	0
9.	Premiums received in advance (Line 8)	468,958	0	468,958
10.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0	0	0
11.	Reinsurance in unauthorized companies (Line 20 minus inset amount)	0	0	0
12.	Reinsurance with Certified Reinsurers (Line 20 inset amount)	0	0	0
13.	Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0	0	0
14.	All other liabilities (Balance)	21,319,243	(16,742)	21,302,501
15.	Total liabilities (Line 24)	65,109,965	(16,742)	65,093,223
16.	Total capital and surplus (Line 33)	75,646,324	XXX	75,646,324
17.	Total liabilities, capital and surplus (Line 34)	140,756,289	(16,742)	140,739,547
	NET CREDIT FOR CEDED REINSURANCE			
18.	Claims unpaid	0		
19.	Accrued medical incentive pool	0		
20.	Premiums received in advance	0		
21.	Reinsurance recoverable on paid losses	0		
22.	Other ceded reinsurance recoverables	0		
23.	Total ceded reinsurance recoverables	0		
24.	Premiums receivable	0		
25.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26.	Unauthorized reinsurance	0		
27.	Reinsurance with Certified Reinsurers	0		
28.	Funds held under reinsurance treaties with Certified Reinsurers	0		
29.	Other ceded reinsurance payables/offsets	16,742		
30.	Total ceded reinsurance payables/offsets	16,742		
31.	Total net credit for ceded reinsurance	(16,742)		

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, etc.		1 Active Status	Direct Business Only 2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Plan Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	9 Deposit-Type Contracts
1. Alabama	AL	N	0	0	0	0	0	0	0	0
2. Alaska	AK	N	0	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0	0
9. District of Columbia	DC	N	0	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0	0
15. Indiana	IN	N	0	0	0	0	0	0	0	0
16. Iowa	IA	N	0	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0	0
34. North Carolina	NC	N	0	0	0	0	0	0	0	0
35. North Dakota	ND	N	0	0	0	0	0	0	0	0
36. Ohio	OH	N	0	0	0	0	0	0	0	0
37. Oklahoma	OK	N	0	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0	0
39. Pennsylvania	PA	N	0	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0	0
41. South Carolina	SC	N	0	0	0	0	0	0	0	0
42. South Dakota	SD	N	0	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0	0
54. Puerto Rico	PR	L	11,153,327	390,751,590	(3,055,069)	18,627,069	0	0	417,476,917	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0	0
57. Canada	CAN	N	0	0	0	0	0	0	0	0
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal		XXX	11,153,327	390,751,590	(3,055,069)	18,627,069	0	0	417,476,917	0
60. Reporting entity contributions for Employee Benefit Plans		XXX	0	0	0	0	0	0	0	0
61. Total (Direct Business)		(a) 1	11,153,327	390,751,590	(3,055,069)	18,627,069	0	0	417,476,917	0
DETAILS OF WRITE-INS										
58001.		XXX								
58002.		XXX								
58003.		XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX	0	0	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, premiums by state, etc.

The company allocates group premiums to the situs of the contract and individual premiums based on residence.

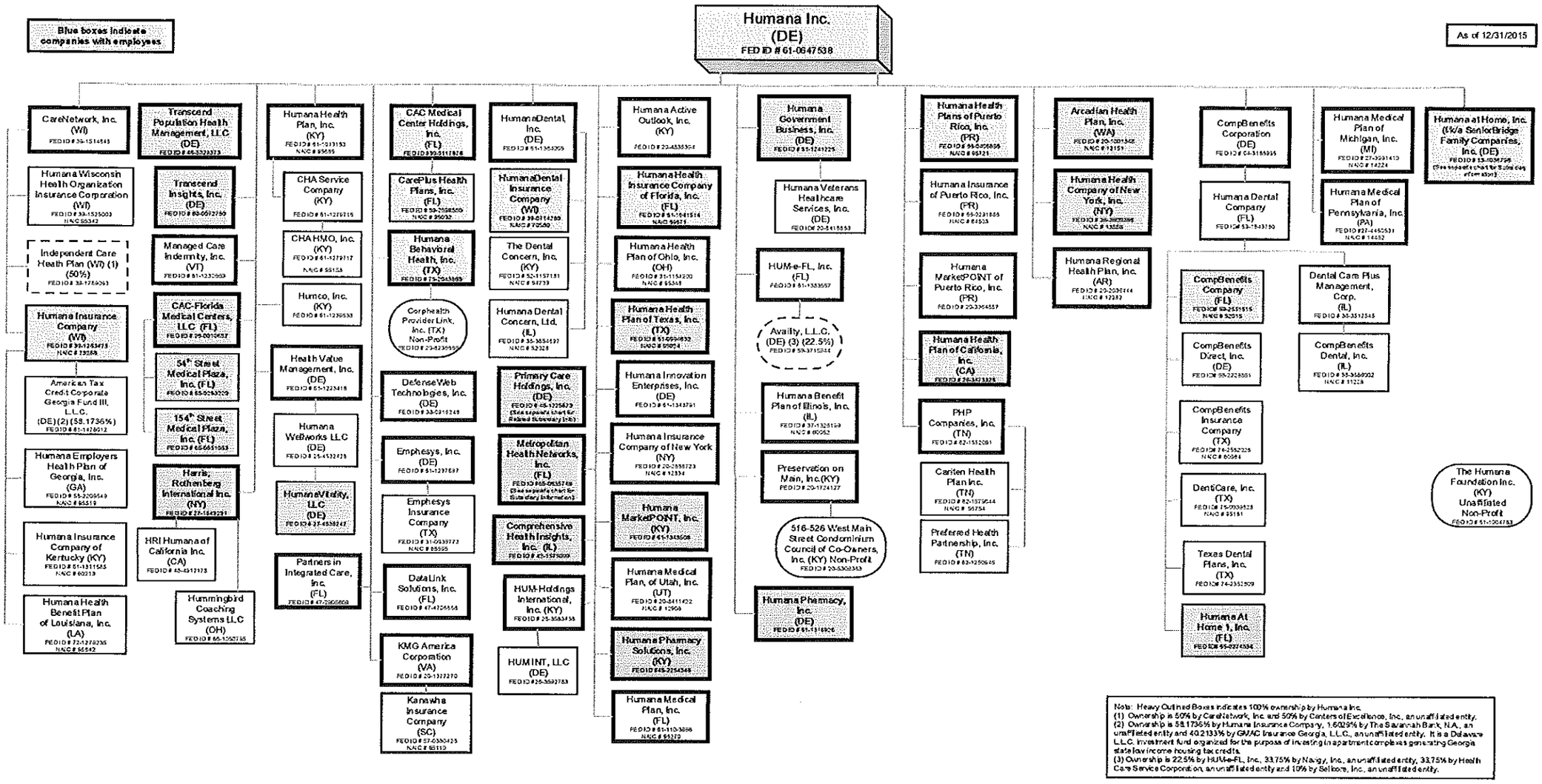
(a) Insert the number of L responses except for Canada and Other Alien.

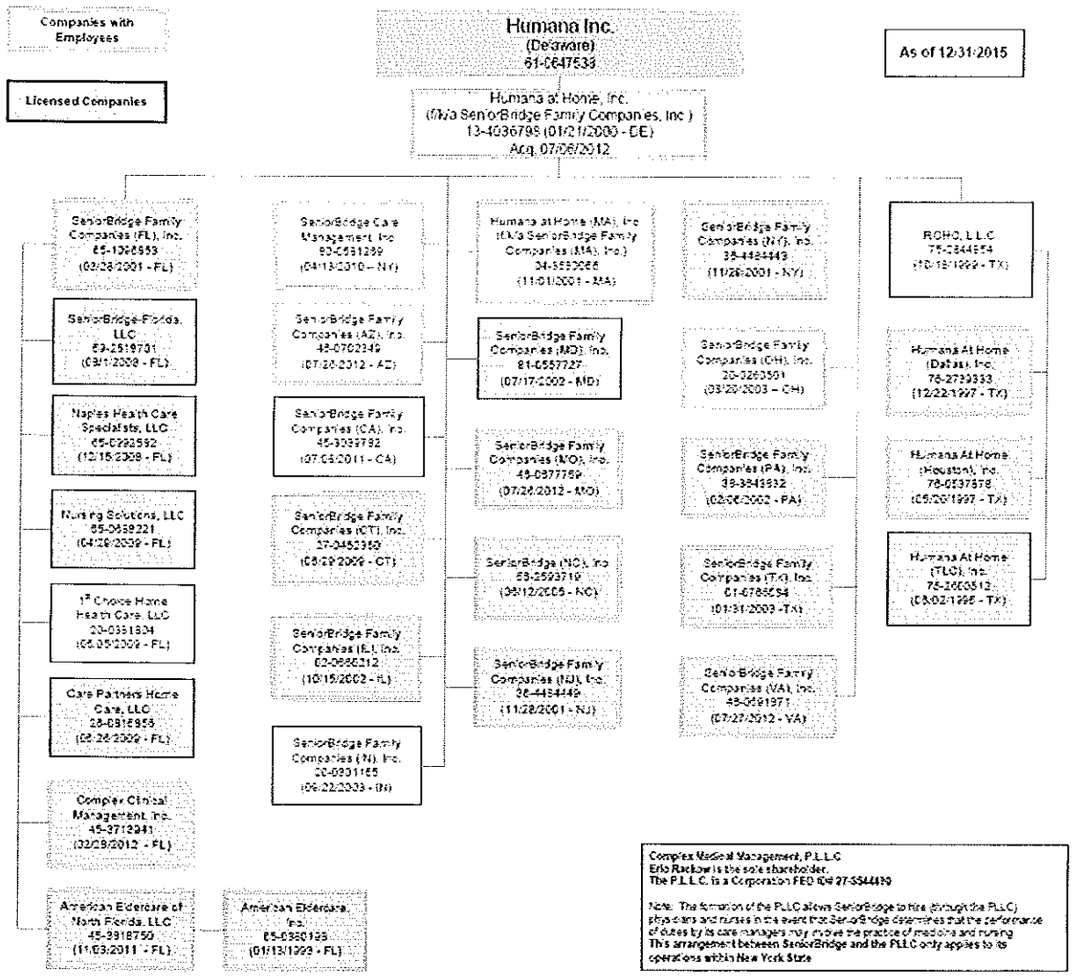
SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

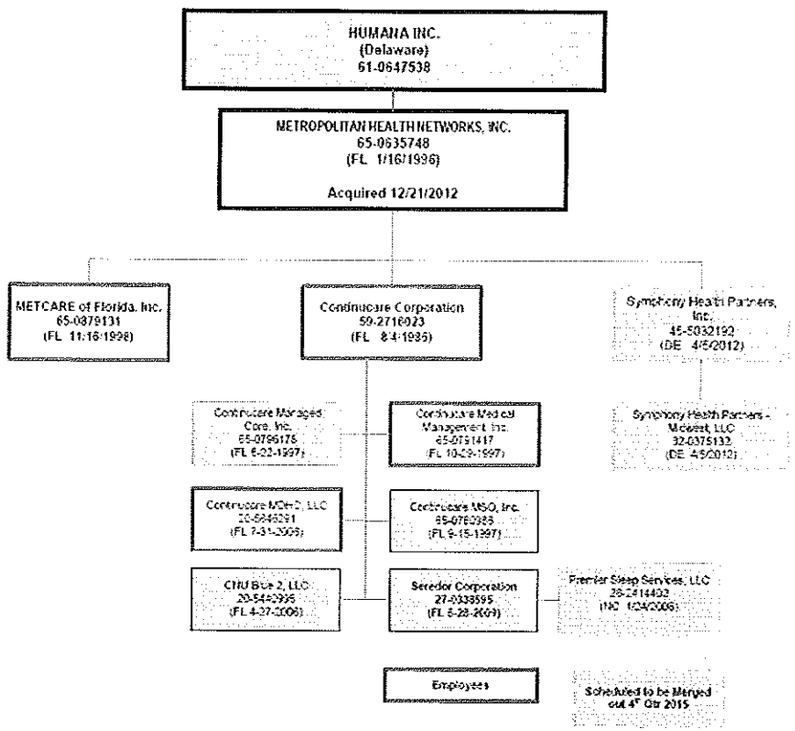
States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL						
2. Alaska	AK						
3. Arizona	AZ						
4. Arkansas	AR						
5. California	CA						
6. Colorado	CO						
7. Connecticut	CT						
8. Delaware	DE						
9. District of Columbia	DC						
10. Florida	FL						
11. Georgia	GA						
12. Hawaii	HI						
13. Idaho	ID						
14. Illinois	IL						
15. Indiana	IN						
16. Iowa	IA						
17. Kansas	KS						
18. Kentucky	KY						
19. Louisiana	LA						
20. Maine	ME						
21. Maryland	MD						
22. Massachusetts	MA						
23. Michigan	MI						
24. Minnesota	MN						
25. Mississippi	MS						
26. Missouri	MO						
27. Montana	MT						
28. Nebraska	NE						
29. Nevada	NV						
30. New Hampshire	NH						
31. New Jersey	NJ						
32. New Mexico	NM						
33. New York	NY						
34. North Carolina	NC						
35. North Dakota	ND						
36. Ohio	OH						
37. Oklahoma	OK						
38. Oregon	OR						
39. Pennsylvania	PA						
40. Rhode Island	RI						
41. South Carolina	SC						
42. South Dakota	SD						
43. Tennessee	TN						
44. Texas	TX						
45. Utah	UT						
46. Vermont	VT						
47. Virginia	VA						
48. Washington	WA						
49. West Virginia	WV						
50. Wisconsin	WI						
51. Wyoming	WY						
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico	PR						
55. U.S. Virgin Islands	VI						
56. Northern Mariana Islands	MP						
57. Canada	CAN						
58. Aggregate Other Alien	OT						
59. Total							

NONE


Blue boxes indicate companies with employees
As of 12/31/2015
Humana Inc. (DE) FED ID # 61-0647538
CareNetwork, Inc. (WI) FED ID # 39-1514548
Humana Wisconsin Health Organization Insurance Corporation (WI) FED ID # 39-1525003 NAIC # 95342
Independent Care Health Plan (WI) (1) (50%) FED ID # 39-1759063
Humana Insurance Company (WI) FED ID # 39-1283478 NAIC # 73288
American Tax Credit Corporate Georgia Fund III, L.L.C. (DE) (2) (58.1736%) FED ID # 81-1428012
Humana Employers Health Plan of Georgia, Inc. (GA) FED ID # 58-2206549 NAIC # 95519
Humana Insurance Company of Kentucky (KY) FED ID # 61-1311585 NAIC # 60219
Humana Health Benefit Plan of Louisiana, Inc. (LA) FED ID # 72-1272235 NAIC # 95542
Transcend Population Health Management, LLC (DE) FED ID # 46-3229373
Transcend Insights, Inc. (DE) FED ID # 80-0692760
Managed Care Indemnity, Inc. (VT) FED ID # 81-1232959
CAC-Florida Medical Centers, LLC (FL) FED ID # 26-0010437
54th Street Medical Plaza, Inc. (FL) FED ID # 65-0263209
154th Street Medical Plaza, Inc. (FL) FED ID # 65-0651553
Harris, Rothenberg International Inc. (NY) FED ID # 27-1649231
HRI Humana of California Inc. (CA) FED ID # 45-4312173
Hummingbird Coaching Systems LLC (OH) FED ID # 85-1057155
Humana Health Plan, Inc. (KY) FED ID # 61-1217153 NAIC # 95695
CHA Service Company (KY) FED ID # 61-1279315
CHA HMO, Inc. (KY) FED ID # 61-1279317 NAIC # 95153
Humco, Inc. (KY) FED ID # 61-1230533
Health Value Management, Inc. (DE) FED ID # 61-1223415
Humana WebWorks LLC (DE) FED ID # 26-4532478
HumanaVitality, LLC (DE) FED ID # 27-4538247
Partners in Integrated Care, Inc. (FL) FED ID # 47-2965668
CAC Medical Center Holdings, Inc. (FL) FED ID # 59-3511878
CarePlus Health Plans, Inc. (FL) FED ID # 59-2558559 NAIC # 95032
Humana Behavioral Health, Inc. (TX) FED ID # 75-2543649
Corphealth Provider Link, Inc. (TX) Non-Profit FED ID # 20-8239559
DefenseWeb Technologies, Inc. (DE) FED ID # 33-0316249
Emphesys, Inc. (DE) FED ID # 61-1237697
Emphesys Insurance Company (TX) FED ID # 31-0539773 NAIC # 85555
DataLink Solutions, Inc. (FL) FED ID # 47-4734556
KMG America Corporation (VA) FED ID # 20-1327270
Kanawha Insurance Company (SC) FED ID # 57-0550435 NAIC # 55113
HumanaDental, Inc. (DE) FED ID # 61-1358205
HumanaDental Insurance Company (WI) FED ID # 39-0714269 NAIC # 70580
The Dental Concern, Inc. (KY) FED ID # 62-1157181 NAIC # 51733
Humana Dental Concern, Ltd. (IL) FED ID # 36-3854497 NAIC # 52328
Primary Care Holdings, Inc. (DE) FED ID # 46-1225823 (See separate chart for Related Ownership Info)
Metropolitan Health Networks, Inc. (FL) FED ID # 65-0427758 (See separate chart for Subsidiary Information)
Comprehensive Health Insights, Inc. (IL) FED ID # 45-1575099
HUM-Holdings International, Inc. (KY) FED ID # 26-3583458
HUMINT, LLC (DE) FED ID # 26-3597783
Humana Active Outlook, Inc. (KY) FED ID # 20-4836564
Humana Health Insurance Company of Florida, Inc. (FL) FED ID # 61-1041514 NAIC # 95627
Humana Health Plan of Ohio, Inc. (OH) FED ID # 31-1154200 NAIC # 95368
Humana Health Plan of Texas, Inc. (TX) FED ID # 61-0994832 NAIC # 95024
Humana Innovation Enterprises, Inc. (DE) FED ID # 61-1343751
Humana Insurance Company of New York (NY) FED ID # 20-2558723 NAIC # 12334
Humana MarketPOINT, Inc. (KY) FED ID # 61-1343508
Humana Medical Plan, of Utah, Inc. (UT) FED ID # 20-8411452 NAIC # 15966
Humana Pharmacy Solutions, Inc. (KY) FED ID # 45-2254348
Humana Medical Plan, Inc. (FL) FED ID # 61-1103856 NAIC # 95370
Humana Government Business, Inc. (DE) FED ID # 35-1241225
Humana Veterans Healthcare Services, Inc. (DE) FED ID # 20-8115553
HUM-e-FL, Inc. (FL) FED ID # 61-1383557
Availity, L.L.C. (DE) (3) (22.5%) FED ID # 59-3715244
Humana Benefit Plan of Illinois, Inc. (IL) FED ID # 37-1329159 NAIC # 60052
Preservation on Main, Inc.(KY) FED ID # 20-1724127
516-526 West Main Street Condominium Council of Co-Owners, Inc. (KY) Non-Profit FED ID # 20-5302343
Humana Pharmacy, Inc. (DE) FED ID # 61-1318924
Humana Health Plans of Puerto Rico, Inc. (PR) FED ID # 66-0406836 NAIC # 95321
Humana Insurance of Puerto Rico, Inc. (PR) FED ID # 66-0221865 NAIC # 61925
Humana MarketPOINT of Puerto Rico, Inc. (PR) FED ID # 20-3364557
Humana Health Plan of California, Inc. (CA) FED ID # 26-3373325
PHP Companies, Inc. (TN) FED ID # 62-1532091
Cariten Health Plan Inc. (TN) FED ID # 62-1575044 NAIC # 56754
Preferred Health Partnership, Inc. (TN) FED ID # 62-1250545
Arcadian Health Plan, Inc. (WA) FED ID # 26-1081562 NAIC # 13151
Humana Health Company of New York, Inc. (NY) FED ID # 26-2823396 NAIC # 13258
Humana Regional Health Plan, Inc. (AR) FED ID # 20-2364144 NAIC # 12282
CompBenefits Corporation (DE) FED ID # 04-3165935
Humana Dental Company (FL) FED ID # 59-1943150
CompBenefits Company (FL) FED ID # 59-2551515 NAIC # 52618
CompBenefits Direct, Inc. (DE) FED ID # 59-2228551
CompBenefits Insurance Company (TX) FED ID # 74-2552225 NAIC # 95584
DentiCare, Inc. (TX) FED ID # 75-2039523 NAIC # 95181
Texas Dental Plans, Inc. (TX) FED ID # 74-2352509
Humana At Home 1, Inc. (FL) FED ID # 59-2271584
Humana Medical Plan of Michigan, Inc. (MI) FED ID # 27-0991410 NAIC # 14224
Humana Medical Plan of Pennsylvania, Inc. (PA) FED ID # 27-1455531 NAIC # 14452
Dental Care Plus Management, Corp. (IL) FED ID # 36-3512545
CompBenefits Dental, Inc. (IL) FED ID # 36-3569902 NAIC # 11228
Humana at Home, Inc. (f/k/a SeniorBridge Family Companies, Inc. (DE) FED ID # 33-1039795 (See separate chart for Subsidiary Information)
The Humana Foundation Inc. (KY) Unaffiliated Non-Profit FED ID # 61-1204783
Note: Heavy Outlined Boxes indicates 100% ownership by Humana Inc.
(1) Ownership is 50% by CareNetwork, Inc. and 50% by Centers of Excellence, Inc., an unaffiliated entity.
(2) Ownership is 58.1736% by Humana Insurance Company, 1.6029% by The Savannah Bank, N.A., an unaffiliated entity and 40.2133% by GMAC Insurance Georgia, L.L.C., an unaffiliated entity. It is a Delaware L.L.C. investment fund organized for the purpose of investing in apartment complexes generating Georgia state low income housing tax credits.
(3) Ownership is 22.5% by HUM-e-FL, Inc., 33.75% by Navigy, Inc., an unaffiliated entity, 33.75% by Health Care Service Corporation, an unaffiliated entity and 10% by Sellcore, Inc., an unaffiliated entity.


Companies with Employees
Licensed Companies
Humana Inc.
(Delaware)
61-0647538
As of 12/31/2015
Humana at Home, Inc.
(f/k/a SeniorBridge Family Companies, Inc.)
13-4036798 (01/21/2000 - DE)
Acq. 07/06/2012
SeniorBridge Family Companies (FL), Inc.
65-1306553
(02/28/2001 - FL)
SeniorBridge-Florida, LLC
59-2519701
(08/1/2008 - FL)
Naples Health Care Specialists, LLC
65-0992592
(12/15/2009 - FL)
Nursing Solutions, LLC
65-0659221
(04/28/2009 - FL)
1st Choice Home Health Care, LLC
20-0351834
(06/05/2009 - FL)
Care Partners Home Care, LLC
26-0818955
(06/26/2009 - FL)
Complex Clinical Management, Inc.
45-3712941
(02/28/2012 - FL)
American Eldercare of North Florida, LLC
45-3918750
(11/03/2011 - FL)
American Eldercare, Inc.
65-0360195
(01/13/1999 - FL)
SeniorBridge Care Management, Inc.
80-0551289
(04/13/2010 - NY)
SeniorBridge Family Companies (AZ), Inc.
46-0702249
(07/26/2012 - AZ)
SeniorBridge Family Companies (CA), Inc.
45-3039792
(07/06/2011 - CA)
SeniorBridge Family Companies (CT), Inc.
27-0452350
(08/29/2009 - CT)
SeniorBridge Family Companies (IL), Inc.
82-0666212
(10/15/2002 - IL)
SeniorBridge Family Companies (IN), Inc.
20-0931165
(06/22/2009 - IN)
Humana at Home (MA), Inc.
(f/k/a SeniorBridge Family Companies (MA), Inc.)
04-3552068
(11/01/2001 - MA)
SeniorBridge Family Companies (MD), Inc.
81-0557727
(07/17/2002 - MD)
SeniorBridge Family Companies (MO), Inc.
46-0377759
(07/26/2012 - MO)
SeniorBridge (NC), Inc.
56-2593719
(06/12/2006 - NC)
SeniorBridge Family Companies (NJ), Inc.
36-4484449
(11/28/2001 - NJ)
SeniorBridge Family Companies (NY), Inc.
36-4484449
(11/28/2001 - NY)
SeniorBridge Family Companies (OH), Inc.
20-0263551
(03/20/2003 - OH)
SeniorBridge Family Companies (PA), Inc.
36-3845932
(02/06/2002 - PA)
SeniorBridge Family Companies (TX), Inc.
61-0785554
(01/31/2003 - TX)
SeniorBridge Family Companies (VA), Inc.
46-0691971
(07/27/2012 - VA)
ROHO, L.L.C.
75-2844554
(10/18/1999 - TX)
Humana At Home (Dallas), Inc.
76-2739333
(12/22/1997 - TX)
Humana At Home (Houston), Inc.
76-0137578
(05/20/1997 - TX)
Humana At Home (TLC), Inc.
75-2600512
(05/02/1996 - TX)
Complex Medical Management, P.L.L.C.
Eric Rackow is the sole shareholder.
The P.L.L.C. is a Corporation FEID # 27-5544439
Note: The formation of the PLLC allows SeniorBridge to hire (through the PLLC) physicians and nurses in the event that SeniorBridge determines that the performance of duties by its care managers may involve the practice of medicine and nursing. This arrangement between SeniorBridge and the PLLC only applies to its operations within New York State

As of 12-31-2015



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15
0119	Humana Inc.	00000	65-0651053				154th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0381804				1st Choice Home Health Care, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5309363				515-5264 MainSt CondoCouncilofCo-Owners	KY	NIA	Preservation on Main, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0293220				54th Street Medical Plaza, Inc.	FL	NIA	CAC-Florida Medical Centers, LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3818750				American Eldercare of North Florida, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0380198				American Eldercare, Inc.	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12151	20-1001348				Arcadian Health Plan, Inc.	WA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0836599				Arcadian Management Services, Inc.	DE		Arcadian Management Services, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-3715944				Availity, L.L.C.	DE	OTH	See Footnote 1	Board of Directors	0.000	Humana Inc.	1
0119	Humana Inc.	00000	30-0117876				CAC Medical Center Holdings, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0010657				CAC-Florida Medical Centers, LLC	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-0815856				Care Partners Home Care, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1514846				CareNetwork, Inc.	WI	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95092	59-2598550				CarePlus Health Plans, Inc.	FL	IA	CPHP Holdings, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95754	62-1579044				Cariten Health Plan Inc.	TN	IA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95158	61-1279717				CHA HMO, Inc.	KY	IA	CHA Service Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1279716				CHA Service Company	KY	NIA	Humana Health Plan, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5440995				CNU Blue 2, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52015	59-2531815				CorpBenefits Company	FL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3185995				CorpBenefits Corporation	DE		Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	11228	36-3686002				CorpBenefits Dental, Inc.	IL	NIA	Dental Care Plus Management Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	58-2228851				CorpBenefits Direct, Inc.	DE	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60984	74-2552026				CorpBenefits Insurance Company	TX	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3713941				Complex Clinical Management, Inc.	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	42-1575099				Comprehensive Health Insights, Inc.	IL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-2716023				Continucare Corporation	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0796178				Continucare Managed Care, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-5646291				Continucare MDHC, LLC	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0791417				Continucare Medical Management, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0780986				Continucare MSO, Inc.	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8236655				Corphealth Provider Link, Inc.	TX	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2043865				Humana Behavioral Health, Inc.	TX	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	33-0916248				Defenseweb Technologies, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	36-3512545				Dental Care Plus Management Corp.	IL	IA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95161	76-0039628				DentiCare, Inc.	TX		Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	88595	31-0935772				Emphesys Insurance Company	TX	IA	Emphesys, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1237697				Emphesys, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-1649291				Harris, Rothenberg International Inc.	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1223418				Health Value Management, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-4912173				HRI Humana of California Inc.	CA	NIA	Harris, Rothenberg International Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3592783				HUH INT, LLC	DE	NIA	HUH-Holdings International, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-4835394				Humana Active Outlook, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2739333				Humana At Home (Dallas), Inc.	TX	NIA	RCHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	76-0537878				Humana At Home (Houston), Inc.	TX	NIA	RCHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	04-3580066				Humana at Home (MA), Inc.	MA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0274594				Humana At Home 1, Inc.	FL	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0119	Humana Inc.	00000	13-4036798				Humana at Home, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60052	37-1326199				Humana Benefit Plan of Illinois, Inc.	IL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-1843760				Humana Dental Company	FL	NIA	CorpBenefits Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	52028	36-3654697				Humana Dental Concern, Ltd.	IL	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95519	58-2209549				Humana Employers Health Plan of GA, Inc.	GA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1241225				Humana Government Business, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95642	72-1279235				Humana Health Benefit Plan of LA, Inc.	LA	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	13558	26-2600286				Humana Health Company of New York, Inc.	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	69671	61-1041514				Humana Health Ins. Co. of Florida, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3473328				Humana Health Plan of California, Inc.	CA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95348	31-1154200				Humana Health Plan of Ohio, Inc.	OH	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95024	61-0994632				Humana Health Plan of Texas, Inc.	TX	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95885	61-1013183				Humana Health Plan, Inc.	KY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95721	66-0406896				Humana Health Plans of Puerto Rico, Inc.	PR	RE	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-0647538			NYSE	Humana Inc.	DE	UDP		Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343791				Humana Innovation Enterprises, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	73288	39-1263473				Humana Insurance Company	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	60219	61-1311685				Humana Insurance Company of Kentucky	KY	IA	Humana Insurance Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12634	20-2888723				Humana Insurance Company of New York	NY	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	84603	66-0291866				Humana Insurance of Puerto Rico, Inc.	PR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-3364857				Humana MarketPOINT of Puerto Rico, Inc.	PR	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1343508				Humana MarketPOINT, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14224	27-3991410				Humana Medical Plan of Michigan, Inc.	MI	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	14462	27-4660531				Humana Medical Plan of Pennsylvania, Inc	PA	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12908	20-8411422				Humana Medical Plan of Utah, Inc.	UT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95270	61-1103898				Humana Medical Plan, Inc.	FL	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-2254346				Humana Pharmacy Solutions, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1316926				Humana Pharmacy, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	12282	20-2036444				Humana Regional Health Plan, Inc.	AR	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-8418853				Humana Veterans Healthcare Services, Inc.	DE	NIA	Humana Government Business, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-4522426				Humana WellWorks LLC	DE	NIA	Health Value Management, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	95342	39-1525003				Humana Wisc. Health Org. Ins. Corp.	WI	IA	CareNetwork, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	70580	39-0714280				HumanaDental Insurance Company	WI	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1364005				HumanaDental, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-4535747				HumanaVitality, LLC	DE	NIA	HumanaWellworks LLC	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1239538				Hurco, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1383567				HUM-e-FL, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	26-3583438				HUM-Holdings International, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-1050795				Hummingbird Coaching Systems LLC	OH	NIA	Corphealth, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	39-1769093				Independent Care Health Plan	WI	OTH	See Footnote 2	Other	100.000	Humana Inc.	2
0119	Humana Inc.	65110	57-0380426				Kanawha Insurance Company	SC	IA	KMG America Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-1377270				KMG America Corporation	VA	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	61-1232669				Managed Care Indemnity, Inc.	VT	IA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0879131				METCARE of Florida, Inc.	FL	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0635728				Metropolitan Health Networks, Inc.	FL	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0992582				Naples Health Care Specialists, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-0688221				Nursing Solutions, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1552091				PHP Companies, Inc.	TN	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	62-1250945				Preferred Health Partnership, Inc.	TN	NIA	PHP Companies, Inc.	Ownership	100.000	Humana Inc.	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0119	Humana Inc.	00000	20-1724127				Preservation on Main, Inc.	KY	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-1225873				Primary Care Holdings, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2844854				ROHC, L.L.C.	TX	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	56-2593719				SeniorBridge (NC), Inc.	NC	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	80-0581269				SeniorBridge Care Management, Inc.	NY	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-0702349				SeniorBridge Family Companies (AZ), Inc.	AZ	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	45-3039782				SeniorBridge Family Companies (CA), Inc.	CA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-0452360				SeniorBridge Family Companies (CT), Inc.	CT	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	65-1096853				SeniorBridge Family Companies (FL), Inc.	FL	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	02-0660212				SeniorBridge Family Companies (IL), Inc.	IL	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0301155				SeniorBridge Family Companies (IN), Inc.	IN	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	81-0557727				SeniorBridge Family Companies (MD), Inc.	MD	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-0677759				SeniorBridge Family Companies (MO), Inc.	MO	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	36-4484449				SeniorBridge Family Companies (NJ), Inc.	NJ	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	36-4484443				SeniorBridge Family Companies (NY), Inc.	NY	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	20-0266501				SeniorBridge Family Companies (OH), Inc.	OH	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	38-3643832				SeniorBridge Family Companies (PA), Inc.	PA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	01-0766084				SeniorBridge Family Companies (TX), Inc.	TX	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-0691871				SeniorBridge Family Companies (VA), Inc.	VA	NIA	Humana at Home, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	59-2518701				SeniorBridge-Florida, LLC	FL	NIA	SeniorBridge Family Companies (FL), Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	27-0338595				Seredor Corporation	FL	NIA	Continucare Corporation	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	86-0597187				St. Mary's Medical Park Pharmacy, Inc.	AZ	NIA	Humana Pharmacy, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	32-0375132				Symphony Health Partners - Midwest, LLC	DE	NIA	See Footnote 3	Ownership	0.000	Humana Inc.	3
0119	Humana Inc.	00000	45-5032192				Symphony Health Partners, Inc.	DE	NIA	Metropolitan Health Networks, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	74-2352809				Texas Dental Plans, Inc.	TX	NIA	Humana Dental Company	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	54739	52-1157181				The Dental Concern, Inc.	KY	IA	HumanaDental, Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	75-2600512				Humana at Home (TLC), Inc.	TX	NIA	ROHC, L.L.C.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	80-0072760				Transcend Insights, Inc.	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0
0119	Humana Inc.	00000	46-5329373				Transcend, LLC	DE	NIA	Humana Inc.	Ownership	100.000	Humana Inc.	0

Asterisk	Explanation
1	Availity, L.L.C., a Delaware limited liability company, was formed by affiliates of Humana Inc. and Blue Cross and Blue Shield of Florida, Inc. to develop and operate an Internet site on the World Wide Web to permit health plans to communicate and engage in electronic transactions with health care service providers initially in the State of Florida. HUM-e-FL, Inc., a subsidiary of Humana Inc., is a Member with a 22.5% ownership interest. Navigy, Inc., a subsidiary of Blue Cross and Blue Shield of Florida, Inc., is a Member with a 33.75% ownership interest, Health Care Service Corporation, a Member, has a 33.75% ownership interest, and Sellcore, Inc., a subsidiary of WellPoint and a Member, has a 10% ownership interest.
2	Independent Care Health Plan, a Wisconsin corporation licensed as an HMO, operates an integrated, coordinated medical and social service managed care program for chronically disabled Medicaid recipients in Milwaukee, Wisconsin. CareNetwork, Inc. owns 50% of the company's stock. Centers of Excellence, Inc. owns the other 50%.
3	Ownership is 80% Symphony Health Partners, Inc. and 20% Humana Inc. of Symphony Health Partners Midwest, LLC.

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	65-0851053	154th Street Medical Plaza, Inc.	0	0	0	0	(696,513)	0	0	0	(696,513)	0
00000	20-0381804	1st Choice Home Health Care, LLC	0	0	0	0	0	0	0	0	0	0
00000	20-5309363	515-526W MainSt CondoCouncilofCo-Owners	0	0	0	0	347	0	0	0	347	0
00000	65-0293220	54th Street Medical Plaza, Inc.	0	0	0	0	(627,231)	0	0	0	(627,231)	0
00000	27-0200477	Ambulatory Care Solutions of Arkansas LLC	0	0	0	0	0	0	0	0	0	0
00000	26-4179617	Ambulatory Care Solutions of Ohio LLC	0	0	0	0	0	0	0	0	0	0
00000	37-1485812	Ambulatory Care Solutions, LLC	0	0	0	0	0	0	0	0	0	0
00000	45-3818750	American Eldercare of North Florida, LLC	0	0	0	0	3,668,809	0	0	0	3,668,809	0
00000	65-0380198	American Eldercare, Inc.	0	35,000,000	0	0	(20,205,052)	0	0	0	14,794,948	0
00000	27-3387971	Arcadian Choice, Inc.	0	0	0	0	0	0	0	0	0	0
12151	20-1001348	Arcadian Health Plan, Inc.	0	0	0	0	(4,846,212)	0	0	0	(4,846,212)	0
00000	86-0836599	Arcadian Management Services, Inc.	0	0	0	0	0	0	0	0	0	0
00000	59-3715944	Availity, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	30-0117876	CAC Medical Center Holdings, Inc.	0	0	0	0	(156,649)	0	0	0	(156,649)	0
00000	26-0010657	CAC-Florida Medical Centers, LLC	0	0	0	0	(10,895,649)	0	0	0	(10,895,649)	0
00000	13-4106498	Cambridge Companions, LLC	0	0	0	0	0	0	0	0	0	0
00000	13-4076893	Cambridge Personal Care, LLC	0	0	0	0	0	0	0	0	0	0
00000	26-0815856	Care Partners Home Care, LLC	0	0	0	0	0	0	0	0	0	0
00000	39-1514846	CareNetwork, Inc.	0	0	0	0	837,343	0	0	0	837,343	0
95092	59-2598550	CarePlus Health Plans, Inc.	(56,800,000)	0	0	0	(115,775,877)	0	0	0	(172,575,877)	0
95754	62-1579044	Cariten Health Plan Inc.	(16,000,000)	0	0	0	(103,899,557)	0	0	0	(119,899,557)	0
00000	80-0072760	Certify Data Systems, Inc.	0	0	0	0	342,298	0	0	0	342,298	0
95158	61-1279717	CHA HMO, Inc.	0	0	0	0	(7,179,330)	0	0	0	(7,179,330)	0
00000	61-1279716	CHA Service Company	0	0	0	0	347	0	0	0	347	0
00000	01-0510161	CM Occupational Health, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	20-5440995	CNU Blue 2, LLC	0	0	0	0	0	0	0	0	0	0
52015	59-2531815	CompBenefits Company	(15,000,000)	0	0	0	(23,859,501)	0	0	0	(38,859,501)	0
00000	04-3185995	CompBenefits Corporation	0	0	0	0	(1,122,254)	0	0	0	(1,122,254)	0
11228	36-3686002	CompBenefits Dental, Inc.	(2,000,000)	0	0	0	(4,003,377)	0	0	0	(6,003,377)	0
00000	58-2228851	CompBenefits Direct, Inc.	0	0	0	0	(11,023)	0	0	0	(11,023)	0
60984	74-2552026	CompBenefits Insurance Company	(10,000,000)	0	0	0	(18,708,966)	0	0	0	(28,708,966)	0
00000	45-3713941	Complex Clinical Management, Inc.	0	0	0	0	(1,451,256)	0	0	0	(1,451,256)	0
00000	42-1575099	Comprehensive Health Insights, Inc.	0	0	0	0	(522,545)	0	0	0	(522,545)	0
00000	20-0114482	Concentra Akron, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	62-1691148	Concentra Arkansas, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	75-2510547	Concentra Health Services, Inc.	0	0	0	0	0	0	0	0	0	0
00000	26-4823524	Concentra Inc.	0	0	0	0	(11,619,814)	0	0	0	(11,619,814)	0
00000	04-2658593	Concentra Integrated Services, Inc.	0	0	0	0	0	0	0	0	0	0
00000	76-0546504	Concentra Laboratory, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	75-2857879	Concentra Occ Health Research Institute	0	0	0	0	0	0	0	0	0	0
00000	23-2901126	Concentra Occ Healthcare Harrisburg, L.P	0	0	0	0	0	0	0	0	0	0
00000	04-3363415	Concentra Operating Corporation	0	0	0	0	0	0	0	0	0	0
00000	75-2678146	Concentra Solutions, Inc.	0	0	0	0	0	0	0	0	0	0

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	75-2784513	Concentra South Carolina, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	75-2821236	Concentra St. Louis, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	22-3675361	Concentra-UPMC, L.L.C.	0	0	0	0	0	0	0	0	0	0
00000	59-2716023	Continucare Corporation	0	0	0	0	6,267,809	0	0	0	6,267,809	0
00000	65-0796178	Continucare Managed Care, Inc.	0	0	0	0	0	0	0	0	0	0
00000	20-5646291	Continucare MDHC, LLC	0	0	0	0	(307,356)	0	0	0	(307,356)	0
00000	65-0791417	Continucare Medical Management, Inc.	0	0	0	0	(8,335,289)	0	0	0	(8,335,289)	0
00000	65-0780986	Continucare MSO, Inc.	0	0	0	0	(838,317)	0	0	0	(838,317)	0
00000	20-8236655	Corphealth Provider Link, Inc.	0	0	0	0	0	0	0	0	0	0
00000	33-0916248	Defenseweb Technologies, Inc.	0	0	0	0	14,398	0	0	0	14,398	0
00000	36-3512545	Dental Care Plus Management Corp.	0	0	0	0	17,767	0	0	0	17,767	0
95161	76-0039628	DentiCare, Inc.	(1,000,000)	0	0	0	(10,109,647)	0	0	0	(11,109,647)	0
88595	31-0935772	Ephesys Insurance Company	0	0	0	0	24,144	0	0	0	24,144	0
00000	61-1237697	Ephesys, Inc.	0	0	0	0	17,835	0	0	0	17,835	0
00000	27-1649291	Harris, Rothenberg International Inc.	0	0	0	0	(4,583,448)	0	0	0	(4,583,448)	0
00000	11-2795529	Harte Placements, Inc.	0	0	0	0	0	0	0	0	0	0
00000	61-1223418	Health Value Management, Inc.	0	0	0	0	48,288	0	0	0	48,288	0
00000	46-4912173	HRI Humana of California Inc.	0	0	0	0	27,322	0	0	0	27,322	0
00000	26-3592783	HUM INT, LLC	0	0	0	0	0	0	0	0	0	0
00000	20-4835394	Humana Active Outlook, Inc.	0	0	0	0	527	0	0	0	527	0
00000	04-3580066	Humana at Home (MA), Inc.	0	0	0	0	261,340	0	0	0	261,340	0
00000	65-0274594	Humana at Home 1, Inc.	0	0	0	0	(57,303,466)	0	0	0	(57,303,466)	0
00000	13-4036798	Humana at Home, Inc.	0	0	0	0	(4,298,583)	0	0	0	(4,298,583)	0
00000	75-2043865	Humana Behavioral Health, Inc.	0	0	0	0	(17,929,626)	0	0	0	(17,929,626)	0
60052	37-1326199	Humana Benefit Plan of Illinois, Inc.	0	70,000,000	0	0	(56,454,838)	0	0	0	13,545,162	0
00000	59-1843760	Humana Dental Company	0	0	0	0	46,674	0	0	0	46,674	0
52028	36-3654697	Humana Dental Concern, Ltd.	0	0	0	0	(70,298)	0	0	0	(70,298)	0
95519	58-2209549	Humana Employers Health Plan of GA. Inc.	0	675,000,000	0	0	(165,671,754)	0	0	0	509,328,246	0
00000	61-1241225	Humana Government Business, Inc.	0	0	0	0	(2,866,960)	0	0	0	(2,866,960)	0
95642	72-1279235	Humana Health Benefit Plan of LA, Inc.	(75,000,000)	0	0	0	(167,387,175)	0	0	0	(242,387,175)	0
13558	26-2800286	Humana Health Company of New York, Inc.	0	0	0	0	(4,439,676)	0	0	0	(4,439,676)	0
69671	61-1041514	Humana Health Ins. Co. of Florida, Inc.	0	0	0	0	163,672,219	0	0	0	163,672,219	0
00000	26-3473328	Humana Health Plan of California, Inc.	0	35,000,000	0	0	(23,938,236)	0	0	0	11,061,764	0
95348	31-1154200	Humana Health Plan of Ohio, Inc.	0	55,000,000	0	0	(32,962,847)	0	0	0	22,037,153	0
95024	61-0994632	Humana Health Plan of Texas, Inc.	0	155,000,000	0	0	(60,366,693)	0	0	0	94,633,307	0
95885	61-1013183	Humana Health Plan, Inc.	0	125,000,000	0	0	(562,987,176)	0	0	0	(437,987,176)	0
00000	66-0406896	Humana Health Plans of Puerto Rico, Inc.	0	0	0	0	17,705,226	0	0	0	17,705,226	0
00000	61-0647538	Humana Inc.	463,300,000	(1,245,000,000)	0	0	2,924,868,337	0	0	0	2,143,168,337	0
00000	61-1343791	Humana Innovation Enterprises, Inc.	0	0	0	0	(157,970)	0	0	0	(157,970)	0
73288	39-1263473	Humana Insurance Company	75,000,000	(125,000,000)	0	0	(197,285,343)	1,955,019	0	0	(245,330,324)	30,610,726
60219	61-1311685	Humana Insurance Company of Kentucky	0	25,000,000	0	0	(6,796,230)	(14,292,524)	0	0	3,911,246	(277,154,612)
12634	20-2888723	Humana Insurance Company of New York	0	0	0	0	(27,782,447)	0	0	0	(27,782,447)	0
00000	66-0291866	Humana Insurance of Puerto Rico, Inc.	0	0	0	0	(17,487,298)	0	0	0	(17,487,298)	0
00000	20-3364857	Humana MarketPOINT of Puerto Rico, Inc.	0	0	0	0	0	0	0	0	0	0

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	61-1343508	Humana Marketpoint, Inc.	0	0	0	0	(752,192)	0	0	0	(752,192)	0
00000	27-3991410	Humana Medical Plan of Michigan, Inc.	0	0	0	0	(10,584,538)	0	0	0	(10,584,538)	0
14462	27-4660531	Humana Medical Plan of Pennsylvania, Inc.	0	15,000,000	0	0	(4,084,076)	0	0	0	10,915,924	0
12908	20-8411422	Humana Medical Plan of Utah, Inc.	(5,000,000)	15,000,000	0	0	(8,232,829)	0	0	0	1,767,171	0
95270	61-1103898	Humana Medical Plan, Inc.	(305,000,000)	100,000,000	0	0	(919,417,887)	0	0	0	(1,124,417,887)	0
00000	46-5329373	Humana MSO, LLC	0	0	0	0	2,437,905	0	0	0	2,437,905	0
00000	45-2254346	Humana Pharmacy Solutions, Inc.	0	0	0	0	(73,796,510)	0	0	0	(73,796,510)	0
00000	61-1316926	Humana Pharmacy, Inc.	0	0	0	0	(204,880,328)	0	0	0	(204,880,328)	0
12282	20-2036444	Humana Regional Health Plan, Inc.	(1,500,000)	0	0	0	(1,771,742)	0	0	0	(3,271,742)	0
00000	20-8418853	Humana Veterans Healthcare Services, Inc.	0	0	0	0	(57,728)	0	0	0	(57,728)	0
00000	26-4522426	Humana WellWorks LLC	0	0	0	0	(58,028)	0	0	0	(58,028)	0
95342	39-1525003	Humana Wisc. Health Org. Ins. Corp.	0	65,000,000	0	0	(41,322,271)	0	0	0	23,677,729	0
70580	39-0714280	HumanaDental Insurance Company	(35,000,000)	0	0	0	(15,846,427)	574,310	0	0	(50,272,117)	(19,304)
00000	61-1364005	HumanaDental, Inc.	0	0	0	0	657,051	0	0	0	657,051	0
00000	27-4535747	HumanaVitality, LLC	0	0	0	0	(13,633,872)	0	0	0	(13,633,872)	0
00000	61-1239538	Humco, Inc.	0	0	0	0	146,732	0	0	0	146,732	0
00000	61-1383567	HUM-e-FL, Inc.	0	0	0	0	295,744	0	0	0	295,744	0
00000	26-3583438	HUM-Holdings International, Inc.	0	0	0	0	35,158	0	0	0	35,158	0
00000	86-1050795	Hummingbird Coaching Systems LLC	0	0	0	0	1,704,837	0	0	0	1,704,837	0
00000	39-1769093	Independent Care Health Plan	0	0	0	0	0	0	0	0	0	0
00000	76-0537878	Inteli Home Healthcare, Inc.	0	0	0	0	176,728	0	0	0	176,728	0
65110	57-0380426	Kanawha Insurance Company	0	0	0	0	(46,192,778)	11,763,195	0	0	(34,429,583)	246,563,191
00000	20-1377270	KMG America Corporation	0	0	0	0	4,154	0	0	0	4,154	0
00000	61-1232669	Managed Care Indemnity, Inc.	(15,000,000)	0	0	0	(5,630,493)	0	0	0	(20,630,493)	0
00000	65-0879131	METCARE of Florida, Inc.	0	0	0	0	(1,667,405)	0	0	0	(1,667,405)	0
00000	65-0635728	Metropolitan Health Networks, Inc.	0	0	0	0	413,808	0	0	0	413,808	0
00000	65-0992582	Naples Health Care Specialists, LLC	0	0	0	0	0	0	0	0	0	0
00000	11-3273542	National Healthcare Resources, Inc.	0	0	0	0	0	0	0	0	0	0
00000	65-0688221	Nursing Solutions, LLC	0	0	0	0	0	0	0	0	0	0
00000	04-3353031	OHR/Baystate, LLC	0	0	0	0	0	0	0	0	0	0
00000	04-3353031	OHR/MMC, Limited Liability Company	0	0	0	0	0	0	0	0	0	0
00000	98-0445802	OMP Insurance Company, Ltd.	0	0	0	0	0	0	0	0	0	0
00000	62-1552091	PHP Companies, Inc.	0	0	0	0	(870)	0	0	0	(870)	0
00000	62-1250945	Preferred Health Partnership, Inc.	0	0	0	0	(196)	0	0	0	(196)	0
00000	20-1724127	Preservation on Main, Inc.	0	0	0	0	(1,372,873)	0	0	0	(1,372,873)	0
00000	46-1225873	Primary Care Holdings, Inc.	0	0	0	0	10,611,649	0	0	0	10,611,649	0
00000	75-2739333	Reachout Homecare, Inc.	0	0	0	0	590,208	0	0	0	590,208	0
00000	75-2844854	ROHC, L.L.C.	0	0	0	0	262,920	0	0	0	262,920	0
00000	58-2593719	SeniorBridge (NC), Inc.	0	0	0	0	(7,696,833)	0	0	0	(7,696,833)	0
00000	80-0581269	SeniorBridge Care Management, Inc.	0	0	0	0	154,578	0	0	0	154,578	0
00000	46-0702349	SeniorBridge Family Companies (AZ), Inc.	0	0	0	0	(3,310,572)	0	0	0	(3,310,572)	0
00000	45-3039782	SeniorBridge Family Companies (CA), Inc.	0	0	0	0	245,317	0	0	0	245,317	0
00000	27-0452360	SeniorBridge Family Companies (CT), Inc.	0	0	0	0	425,531	0	0	0	425,531	0

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
00000	65-1096853	SeniorBridge Family Companies (FL), Inc.	0	0	0	0	(1,193,000)	0	0	0	(1,193,000)	0
00000	02-0660212	SeniorBridge Family Companies (IL), Inc.	0	0	0	0	241,093	0	0	0	241,093	0
00000	20-0301155	SeniorBridge Family Companies (IN), Inc.	0	0	0	0	579,653	0	0	0	579,653	0
00000	81-0557727	SeniorBridge Family Companies (MD), Inc.	0	0	0	0	153,721	0	0	0	153,721	0
00000	46-0677759	SeniorBridge Family Companies (MO), Inc.	0	0	0	0	(1,197,533)	0	0	0	(1,197,533)	0
00000	36-4484449	SeniorBridge Family Companies (NJ), Inc.	0	0	0	0	1,344,022	0	0	0	1,344,022	0
00000	36-4484443	SeniorBridge Family Companies (NY), Inc.	0	0	0	0	2,424,780	0	0	0	2,424,780	0
00000	20-0260501	SeniorBridge Family Companies (OH), Inc.	0	0	0	0	(3,526,480)	0	0	0	(3,526,480)	0
00000	38-3643832	SeniorBridge Family Companies (PA), Inc.	0	0	0	0	216,797	0	0	0	216,797	0
00000	01-0766084	SeniorBridge Family Companies (TX), Inc.	0	0	0	0	(7,380,772)	0	0	0	(7,380,772)	0
00000	46-0691871	SeniorBridge Family Companies (VA), Inc.	0	0	0	0	(4,616,304)	0	0	0	(4,616,304)	0
00000	59-2518701	SeniorBridge-Florida, LLC	0	0	0	0	2,052	0	0	0	2,052	0
00000	27-0338595	Seredor Corporation	0	0	0	0	(7,169)	0	0	0	(7,169)	0
00000	86-0597187	St. Mary's Medical Park Pharmacy, Inc.	0	0	0	0	0	0	0	0	0	0
00000	32-0375132	Symphony Health Partners - Midwest, LLC	0	0	0	0	464	0	0	0	464	0
00000	45-5032192	Symphony Health Partners, Inc.	0	0	0	0	6,845	0	0	0	6,845	0
00000	74-2352809	Texas Dental Plans, Inc.	0	0	0	0	(135,406)	0	0	0	(135,406)	0
54739	52-1157181	The Dental Concern, Inc.	(1,000,000)	0	0	0	(6,644,186)	0	0	0	(7,644,186)	0
00000	75-2600512	TLC Plus of Texas, Inc.	0	0	0	0	0	0	0	0	0	0
00000	20-3585174	Valor Healthcare, Inc.	0	0	0	0	0	0	0	0	0	0
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	WAIVED
2.	Will an actuarial opinion be filed by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
	APRIL FILING	
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
	JUNE FILING	
8.	Will an audited financial report be filed by June 1?	YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
	AUGUST FILING	
10.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	MARCH FILING	
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
12.	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
13.	Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	NO
14.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
18.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
19.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
20.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
	APRIL FILING	
21.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
22.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
23.	Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?	NO
24.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	YES
25.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	YES
	AUGUST FILING	
26.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Explanations:

11. The deadline for Puerto Rico State of Domicile is March 30.
12. This type of business is not written.
13. This type of business is not written.
14. This type of business is not written.
15. This type of business is not written.
16. This type of business is not written.
17. This type of business is not written.
18. No relief will be requested
19. No relief will be requested
20. No relief will be requested
21. This type of business is not written.
22. This type of business is not written.
23. This type of business is not written.

Bar Codes:

1. Supplemental Compensation Exhibit [Document Identifier 460]

11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]

12. Life Supplement [Document Identifier 205]

13. Property/Casualty Supplement [Document Identifier 207]

14. SIS Stockholder Information Supplement [Document Identifier 420]

15. Participating Opinion for Exhibit 5 [Document Identifier 371]

16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]

17. Medicare Part D Coverage Supplement [Document Identifier 365]

18. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

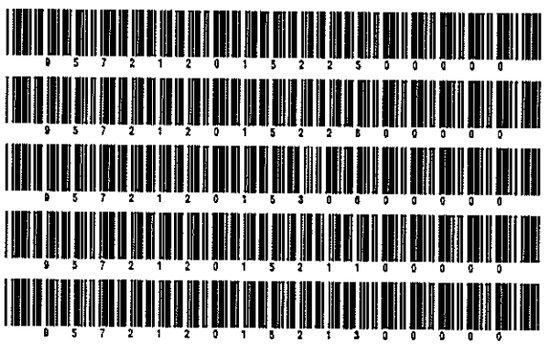
19. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]

20. Relief from the Requirements for Audit Committees [Document Identifier 226]

21. Long-Term Care Experience Reporting Forms [Document Identifier 306]

22. Life Supplement [Document Identifier 211]

23. Property/Casualty Supplement Insurance Expense Exhibit [Document Identifier 213]



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
2504. Risk Adjustment Premium Receivables	0	0	0	3,638,554
2597. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	3,638,554

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage
1. Bonds:						
1.1 U.S. treasury securities	616,255	0.571	616,255	0	616,255	0.571
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies	0	0.000	0	0	0	0.000
1.22 Issued by U.S. government sponsored agencies	21,576,989	19.975	21,576,989	0	21,576,989	19.975
1.3 Non-U.S. government (including Canada, excluding mortgaged-backed securities)	0	0.000	0	0	0	0.000
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S. :						
1.41 States, territories and possessions general obligations	127,839	0.118	127,839	0	127,839	0.118
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations	0	0.000	0	0	0	0.000
1.43 Revenue and assessment obligations	280,785	0.260	280,785	0	280,785	0.260
1.44 Industrial development and similar obligations	0	0.000	0	0	0	0.000
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA	870,331	0.806	870,331	0	870,331	0.806
1.512 Issued or guaranteed by FNMA and FHLMC	33,958,222	31.438	33,958,222	0	33,958,222	31.438
1.513 All other	0	0.000	0	0	0	0.000
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	0	0.000	0	0	0	0.000
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521	0	0.000	0	0	0	0.000
1.523 All other	23,850,944	22.081	23,850,944	0	23,850,944	22.081
2. Other debt and other fixed income securities (excluding short-term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)	18,979,073	17.570	18,979,073	0	18,979,073	17.570
2.2 Unaffiliated non-U.S. securities (including Canada)	0	0.000	0	0	0	0.000
2.3 Affiliated securities	0	0.000	0	0	0	0.000
3. Equity interests:						
3.1 Investments in mutual funds	0	0.000	0	0	0	0.000
3.2 Preferred stocks:						
3.21 Affiliated	0	0.000	0	0	0	0.000
3.22 Unaffiliated	0	0.000	0	0	0	0.000
3.3 Publicly traded equity securities (excluding preferred stocks):						
3.31 Affiliated	0	0.000	0	0	0	0.000
3.32 Unaffiliated	0	0.000	0	0	0	0.000
3.4 Other equity securities:						
3.41 Affiliated	0	0.000	0	0	0	0.000
3.42 Unaffiliated	0	0.000	0	0	0	0.000
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated	0	0.000	0	0	0	0.000
3.52 Unaffiliated	0	0.000	0	0	0	0.000
4. Mortgage loans:						
4.1 Construction and land development	0	0.000	0	0	0	0.000
4.2 Agricultural	0	0.000	0	0	0	0.000
4.3 Single family residential properties	0	0.000	0	0	0	0.000
4.4 Multifamily residential properties	0	0.000	0	0	0	0.000
4.5 Commercial loans	0	0.000	0	0	0	0.000
4.6 Mezzanine real estate loans	0	0.000	0	0	0	0.000
5. Real estate investments:						
5.1 Property occupied by company	0	0.000	0	0	0	0.000
5.2 Property held for production of income (including $ 0 of property acquired in satisfaction of debt)	0	0.000	0	0	0	0.000
5.3 Property held for sale (including $ 0 property acquired in satisfaction of debt)	0	0.000	0	0	0	0.000
6. Contract loans	0	0.000	0	0	0	0.000
7. Derivatives	0	0.000	0	0	0	0.000
8. Receivables for securities	0	0.000	0	0	0	0.000
9. Securities Lending (Line 10, Asset Page reinvested collateral)	0	0.000	0	XXX	XXX	XXX
10. Cash, cash equivalents and short-term investments	7,757,122	7.181	7,757,122	0	7,757,122	7.181
11. Other invested assets	0	0.000	0	0	0	0.000
12. Total invested assets	108,017,561	100.000	108,017,561	0	108,017,561	100.000

Schedule A - Verification - Real Estate

NONE

Schedule B - Verification - Mortgage Loans

NONE

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16	
	3.2 Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase (decrease):	
	5.1 Totals, Part 1, Column 13	
	5.2 Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 15	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
	9.1 Totals, Part 1, Column 17	
	9.2 Totals, Part 3, Column 14	
10.	Deduct current year's other than temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15	
	10.2 Totals, Part 3, Column 11	
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	
12.	Deduct total nonadmitted amounts	
13.	Statement value at end of current period (Line 11 minus Line 12)	

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year		126,099,636
2.	Cost of bonds and stocks acquired, Part 3, Column 7		49,625,965
3.	Accrual of discount		56,053
4.	Unrealized valuation increase (decrease):		
	4.1. Part 1, Column 12	(6,033)	
	4.2. Part 2, Section 1, Column 15	0	
	4.3. Part 2, Section 2, Column 13	0	
	4.4. Part 4, Column 11	0	(6,033)
5.	Total gain (loss) on disposals, Part 4, Column 19		1,655,539
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7		76,417,946
7.	Deduct amortization of premium		752,775
8.	Total foreign exchange change in book/adjusted carrying value:		
	8.1. Part 1, Column 15	0	
	8.2. Part 2, Section 1, Column 19	0	
	8.3. Part 2, Section 2, Column 16	0	
	8.4. Part 4, Column 15	0	0
9.	Deduct current year's other than temporary impairment recognized:		
	9.1. Part 1, Column 14	0	
	9.2. Part 2, Section 1, Column 17	0	
	9.3. Part 2, Section 2, Column 14	0	
	9.4. Part 4, Column 13	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		100,260,439
11.	Deduct total nonadmitted amounts		0
12.	Statement value at end of current period (Line 10 minus Line 11)		100,260,439

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description			1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS	1.	United States	23,063,576	22,834,758	23,386,328	22,608,983
Governments (including all obligations guaranteed by governments)	2.	Canada	0	0	0	0
	3.	Other Countries	0	0	0	0
	4.	Totals	23,063,576	22,834,758	23,386,328	22,608,983
U.S. States, Territories and Possessions (Direct and guaranteed)	5.	Totals	127,839	125,000	139,008	125,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6.	Totals	0	0	0	0
U.S. Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of governments and their political subdivisions	7.	Totals	34,239,007	33,659,097	34,362,621	32,573,731
Industrial and Miscellaneous and Hybrid Securities (unaffiliated)	8.	United States	40,530,475	39,608,151	40,624,541	39,150,905
	9.	Canada	449,851	442,413	449,852	450,000
	10.	Other Countries	1,849,691	1,806,935	1,848,749	1,860,207
	11.	Totals	42,830,017	41,857,499	42,923,142	41,461,112
Parent, Subsidiaries and Affiliates	12.	Totals	0	0	0	0
	13.	Total Bonds	100,260,439	98,476,354	100,811,099	96,768,826
PREFERRED STOCKS	14.	United States	0	0	0	
Industrial and Miscellaneous (unaffiliated)	15.	Canada	0	0	0	
	16.	Other Countries	0	0	0	
	17.	Totals	0	0	0	
Parent, Subsidiaries and Affiliates	18.	Totals	0	0	0	
	19.	Total Preferred Stocks	0	0	0	
COMMON STOCKS	20.	United States	0	0	0	
Industrial and Miscellaneous (unaffiliated)	21.	Canada	0	0	0	
	22.	Other Countries	0	0	0	
	23.	Totals	0	0	0	
Parent, Subsidiaries and Affiliates	24.	Totals	0	0	0	
	25.	Total Common Stocks	0	0	0	
	26.	Total Stocks	0	0	0	
	27.	Total Bonds and Stocks	100,260,439	98,476,354	100,811,099	

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 9.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments											
1.1 NAIC 1	7,256,918	13,913,937	1,022,389	0	870,331	23,063,575	22.3	21,516,312	17.0	23,063,575	0
1.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	7,256,918	13,913,937	1,022,389	0	870,331	23,063,575	22.3	21,516,312	17.0	23,063,575	0
2. All Other Governments											
2.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions etc., Guaranteed											
3.1 NAIC 1	0	127,839	0	0	0	127,839	0.1	129,175	0.1	127,839	0
3.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	0	127,839	0	0	0	127,839	0.1	129,175	0.1	127,839	0
4. U.S. Political Subdivisions of States, Territories and Possessions , Guaranteed											
4.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed											
5.1 NAIC 1	0	231,662	0	7,424,220	26,508,124	34,164,006	33.0	46,320,086	36.5	34,164,006	0
5.2 NAIC 2	75,000	0	0	0	0	75,000	0.1	0	0.0	75,000	0
5.3 NAIC 3	0	0	0	0	0	0	0.0	75,604	0.1	0	0
5.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	75,000	231,662	0	7,424,220	26,508,124	34,239,006	33.1	46,395,690	36.6	34,239,006	0

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 9.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)											
6.1 NAIC 1	3,271,442	7,352,189	2,049,028	538,157	22,782,655	35,993,471	34.8	38,995,460	30.8	35,993,471	0
6.2 NAIC 2	61,080	4,002,831	4,264,689	0	672,655	9,001,255	8.7	19,036,063	15.0	9,001,255	0
6.3 NAIC 3	24,994	381,932	699,809	0	0	1,106,735	1.1	672,586	0.5	1,106,735	0
6.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
6.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
6.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	3,357,516	11,736,952	7,013,526	538,157	23,455,310	46,101,461	44.5	58,704,109	46.3	46,101,461	0
7. Hybrid Securities											
7.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
7.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
7.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
7.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	0
8.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 9.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
9. Total Bonds Current Year											
9.1 NAIC 1	(d) 10,528,360	21,625,627	3,071,417	7,962,377	50,161,110	93,348,891	90.2	XXX	XXX	93,348,891	0
9.2 NAIC 2	(d) 136,080	4,002,831	4,264,689	0	672,655	9,076,255	8.8	XXX	XXX	9,076,255	0
9.3 NAIC 3	(d) 24,994	381,932	699,809	0	0	1,106,735	1.1	XXX	XXX	1,106,735	0
9.4 NAIC 4	(d) 0	0	0	0	0	0	0.0	XXX	XXX	0	0
9.5 NAIC 5	(d) 0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
9.6 NAIC 6	(d) 0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
9.7 Totals	10,689,434	26,010,390	8,035,915	7,962,377	50,833,765	(b) 103,531,881	100.0	XXX	XXX	103,531,881	0
9.8 Line 9.7 as a % of Col. 6	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	0.0
10. Total Bonds Prior Year											
10.1 NAIC 1	8,815,958	24,090,625	9,057,523	2,146,537	62,850,390	XXX	XXX	106,961,033	84.4	106,961,033	0
10.2 NAIC 2	1,949,266	5,917,001	8,218,432	2,277,236	674,128	XXX	XXX	19,036,063	15.0	19,036,063	0
10.3 NAIC 3	0	483,837	239,353	25,000	0	XXX	XXX	748,190	0.6	748,190	0
10.4 NAIC 4	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.5 NAIC 5	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
10.6 NAIC 6	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
10.7 Totals	10,765,224	30,491,463	17,515,308	4,448,773	63,524,518	XXX	XXX	(b) 126,745,286	100.0	126,745,286	0
10.8 Line 10.7 as a % of Col. 8	8.5	24.1	13.8	3.5	50.1	XXX	XXX	100.0	XXX	100.0	0.0
11. Total Publicly Traded Bonds											
11.1 NAIC 1	10,528,360	21,625,627	3,071,417	7,962,377	50,161,110	93,348,891	90.2	106,961,033	84.4	93,348,891	XXX
11.2 NAIC 2	136,080	4,002,831	4,264,689	0	672,655	9,076,255	8.8	19,036,063	15.0	9,076,255	XXX
11.3 NAIC 3	24,994	381,932	699,809	0	0	1,106,735	1.1	748,190	0.6	1,106,735	XXX
11.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	0	XXX
11.7 Totals	10,689,434	26,010,390	8,035,915	7,962,377	50,833,765	103,531,881	100.0	126,745,286	100.0	103,531,881	XXX
11.8 Line 11.7 as a % of Col. 6	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	XXX
11.9 Line 11.7 as a % of Line 9.7, Col. 6, Section 9	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	XXX
12. Total Privately Placed Bonds											
12.1 NAIC 1	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.2 NAIC 2	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 NAIC 3	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 NAIC 4	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 NAIC 5	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.6 NAIC 6	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.7 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.8 Line 12.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
12.9 Line 12.7 as a % of Line 9.7, Col. 6, Section 9	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes $ 0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes $ 0 current year, $ 0 prior year of bonds with Z designations and $ 0 , current year $ 0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.

(c) Includes $ 0 current year, $ 0 prior year of bonds with 5* designations and $ 0 , current year $ 0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 $ 3,271,442 ; NAIC 2 $ 0 ; NAIC 3 $ 0 ; NAIC 4 $ 0 ; NAIC 5 $ 0 ; NAIC 6 $ 0

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 9.5	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments											
1.1 Issuer Obligations	7,256,918	13,913,937	1,022,389	0	0	22,193,244	21.4	21,516,312	17.0	22,193,244	0
1.2 Residential Mortgage-Backed Securities	0	0	0	0	870,331	870,331	0.8	0	0.0	870,331	0
1.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Totals	7,256,918	13,913,937	1,022,389	0	870,331	23,063,575	22.3	21,516,312	17.0	23,063,575	0
2. All Other Governments											
2.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions, Guaranteed											
3.1 Issuer Obligations	0	127,839	0	0	0	127,839	0.1	129,175	0.1	127,839	0
3.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 Totals	0	127,839	0	0	0	127,839	0.1	129,175	0.1	127,839	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
4.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed											
5.1 Issuer Obligations	75,000	205,785	0	0	0	280,785	0.3	282,844	0.2	280,785	0
5.2 Residential Mortgage-Backed Securities	0	25,877	0	7,424,220	26,508,124	33,958,221	32.8	45,908,959	36.2	33,958,221	0
5.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	203,887	0.2	0	0
5.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 Totals	75,000	231,662	0	7,424,220	26,508,124	34,239,006	33.1	46,395,690	36.6	34,239,006	0
6. Industrial and Miscellaneous											
6.1 Issuer Obligations	3,357,516	10,735,414	6,813,528	74,701	1,269,358	22,250,517	21.5	38,277,279	30.2	22,250,517	0
6.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
6.3 Commercial Mortgage-Backed Securities	0	0	0	463,456	22,185,953	22,649,409	21.9	20,426,830	16.1	22,649,409	0
6.4 Other Loan-Backed and Structured Securities	0	1,001,537	199,998	0	0	1,201,535	1.2	0	0.0	1,201,535	0
6.5 Totals	3,357,516	11,736,951	7,013,526	538,157	23,455,311	46,101,461	44.5	58,704,109	46.3	46,101,461	0
7. Hybrid Securities											
7.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
7.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
7.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
7.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
7.5 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates											
8.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	0	0
8.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
8.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
8.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	0	0
8.5 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 9.5	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
9. Total Bonds Current Year											
9.1 Issuer Obligations	10,689,434	24,982,975	7,835,917	74,701	1,269,358	44,852,385	43.3	XXX	XXX	44,852,385	0
9.2 Residential Mortgage-Backed Securities	0	25,877	0	7,424,220	27,378,455	34,828,552	33.6	XXX	XXX	34,828,552	0
9.3 Commercial Mortgage-Backed Securities	0	0	0	463,456	22,185,953	22,649,409	21.9	XXX	XXX	22,649,409	0
9.4 Other Loan-Backed and Structured Securities	0	1,001,537	199,998	0	0	1,201,535	1.2	XXX	XXX	1,201,535	0
9.5 Totals	10,689,434	26,010,389	8,035,915	7,962,377	50,833,766	103,531,881	100.0	XXX	XXX	103,531,881	0
9.6 Line 9.5 as a % of Col. 6	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	0.0
10. Total Bonds Prior Year											
10.1 Issuer Obligations	10,765,224	30,441,704	15,551,855	2,772,699	674,128	XXX	XXX	60,205,610	47.5	60,205,610	0
10.2 Residential Mortgage-Backed Securities	0	49,759	0	1,676,074	44,183,126	XXX	XXX	45,908,959	36.2	45,908,959	0
10.3 Commercial Mortgage-Backed Securities	0	0	1,963,453	0	18,667,264	XXX	XXX	20,630,717	16.3	20,630,717	0
10.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	XXX	0	0.0	0	0
10.5 Totals	10,765,224	30,491,463	17,515,308	4,448,773	63,524,518	XXX	XXX	126,745,286	100.0	126,745,286	0
10.6 Line 10.5 as a % of Col. 8	8.5	24.1	13.8	3.5	50.1	XXX	XXX	100.0	XXX	100.0	0.0
11. Total Publicly Traded Bonds											
11.1 Issuer Obligations	10,689,434	24,982,975	7,835,917	74,701	1,269,358	44,852,385	43.3	60,205,610	47.5	44,852,385	XXX
11.2 Residential Mortgage-Backed Securities	0	25,877	0	7,424,220	27,378,455	34,828,552	33.6	45,908,959	36.2	34,828,552	XXX
11.3 Commercial Mortgage-Backed Securities	0	0	0	463,456	22,185,953	22,649,409	21.9	20,630,717	16.3	22,649,409	XXX
11.4 Other Loan-Backed and Structured Securities	0	1,001,537	199,998	0	0	1,201,535	1.2	0	0.0	1,201,535	XXX
11.5 Totals	10,689,434	26,010,389	8,035,915	7,962,377	50,833,766	103,531,881	100.0	126,745,286	100.0	103,531,881	XXX
11.6 Line 11.5 as a % of Col. 6	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	XXX
11.7 Line 11.5 as a % of Line 9.5, Col. 6, Section 9	10.3	25.1	7.8	7.7	49.1	100.0	XXX	XXX	XXX	100.0	XXX
12. Total Privately Placed Bonds											
12.1 Issuer Obligations	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.2 Residential Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.5 Totals	0	0	0	0	0	0	0.0	0	0.0	XXX	0
12.6 Line 12.5 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
12.7 Line 12.5 as a % of Line 9.5, Col. 6, Section 9	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1 Total	2 Bonds	3 Mortgage Loans	4 Other Short-term Investment Assets (a)	5 Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	645,649	645,649	0	0	0
2. Cost of short-term investments acquired	153,695,201	153,695,201	0	0	0
3. Accrual of discount	0	0	0	0	0
4. Unrealized valuation increase (decrease)	0	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0	0
6. Deduct consideration received on disposals	151,069,408	151,069,408	0	0	0
7. Deduct amortization of premium	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0	0
10. Book adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	3,271,442	3,271,442	0	0	0
11. Deduct total nonadmitted amounts	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	3,271,442	3,271,442	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of Derivatives

NONE

Schedule E - Verification - Cash Equivalents

NONE

Schedule A - Part 1 - Real Estate Owned

NONE

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 1 - Mortgage Loans Owned

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
CUSIP Identification	Description	3 Code	4 Foreign	5 Bond Char	NAIC Des.	Actual Cost	8 Rate Used to Obtain Fair Value	9 Fair Value	Par Value	Book/ Adjusted Carrying Value	12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amortization) Accretion	14 Current Year's Other-Than-Temporary Impairment Recognized	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due and Accrued	20 Amount Received During Year	21 Acquired	22 Stated Contractual Maturity Date
313014-GJ-5	FEDERAL HOME LOAN BANK AGCY FTSE	SD			1FE	2,030,372	99.7480	1,994,960	2,000,000	2,027,430	0	(2,942)	0	0	1.125	0.520	AO	4,125	11,250	09/30/2015	04/25/2018
313370-TW-8	FED HOME LN BANK	SD			1FE	6,891,060	100.8440	6,655,704	6,600,000	6,640,663	0	(58,541)	0	0	2.000	1.090	MS	41,667	132,000	08/23/2011	09/09/2016
313376-BR-5	FEDERAL HOME LOAN BANK AGCY FTSE	SD			1FE	6,270,040	101.0370	6,188,516	6,125,000	6,261,223	0	(8,817)	0	0	1.750	0.980	JD	5,662	53,594	10/20/2015	12/14/2018
313379-Q6-9	FEDERAL HOME LOAN BANK AGCY FTSE	SD			1FE	1,023,202	99.8770	998,770	1,000,000	1,022,389	0	(813)	0	0	2.125	1.750	JD	1,240	10,625	09/30/2015	06/10/2022
313383-VN-8	FEDERAL HOME LOAN BANK AGCY FTSE	SD			1FE	5,187,874	101.3700	5,068,500	5,000,000	5,176,188	0	(11,687)	0	0	2.000	1.020	MS	30,000	0	09/30/2015	09/13/2019
3133G0-F7-3	FED NTL MTG ASSO AGCY FTST				1FE	449,063	98.2670	442,201	450,000	449,097	0	30	0	0	1.500	1.540	MN	581	769	10/21/2015	11/30/2020
912828-F0-8	UNITED STATES TREASURY GOVERNMENT	SD			1	664,084	102.6200	615,720	600,000	616,265	0	(26,024)	0	0	4.875	0.500	FA	11,048	29,250	02/26/2014	08/15/2016
0199999. Subtotal - Bonds - U.S. Governments - Issuer Obligations						22,515,695	XXX	21,964,371	21,775,000	22,193,245	0	(108,797)	0	0	XXX	XXX	XXX	93,123	237,468	XXX	XXX
36179R-LP-2	GOVERNMENT NATIONAL MORTGAGE GNMA				1	870,633	104.3650	870,387	833,983	870,331	0	(924)	0	0	3.500	3.150	MON	1,946	7,297	08/25/2015	08/07/2045
0299999. Subtotal - Bonds - U.S. Governments - Residential Mortgage-Backed Securities						870,633	XXX	870,387	833,983	870,331	0	(924)	0	0	XXX	XXX	XXX	1,946	7,297	XXX	XXX
0599999. Total - U.S. Government Bonds						23,386,328	XXX	22,834,758	22,608,983	23,063,576	0	(109,721)	0	0	XXX	XXX	XXX	95,069	244,765	XXX	XXX
1099999. Total - All Other Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
837147-E4-5	S CAROLINA ST PUBLIC SERVICE MUNI				1	139,008	100.0000	125,000	125,000	127,839	0	(1,336)	0	0	5.250	4.050	JJ	3,281	6,563	01/18/2006	01/01/2018
1199999. Subtotal - Bonds - U.S. States, Territories and Possessions - Issuer Obligations						139,008	XXX	125,000	125,000	127,839	0	(1,336)	0	0	XXX	XXX	XXX	3,281	6,563	XXX	XXX
1799999. Total - U.S. States, Territories and Possessions Bonds						139,008	XXX	125,000	125,000	127,839	0	(1,336)	0	0	XXX	XXX	XXX	3,281	6,563	XXX	XXX
2499999. Total - U.S. Political Subdivisions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
011415-KW-7	ALAMO TEX COMMUNITY COLLEGE MUNI			1	1FE	216,512	107.1150	214,230	200,000	205,785	0	(1,454)	0	0	5.000	4.130	FA	3,778	10,000	05/04/2007	08/15/2019
472653-AX-0	JEFFERSON AL SALES TAX MUNI			1	2FE	80,389	100.0000	75,000	75,000	75,000	0	(604)	0	0	5.250	4.410	JJ	1,969	3,938	12/21/2004	01/01/2016
2599999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations						296,901	XXX	289,230	275,000	280,785	0	(2,058)	0	0	XXX	XXX	XXX	5,747	13,938	XXX	XXX
31283P-TZ-6	FED NTL MTG ASSO FNMA				1	602	101.3000	589	582	583	0	(3)	0	0	5.500	5.000	MON	3	32	12/18/2002	01/01/2017
3128JB-P2-8	FGOLD 30 YR FHLMC				1	59,364	113.6550	66,703	58,690	59,223	0	(160)	0	0	6.000	5.890	MON	293	3,523	08/20/2008	06/01/2038
3128JB-RT-3	FGOLD 30YR GNMV FHLMC				1	75,312	106.6350	74,753	70,102	75,120	0	(901)	0	0	4.000	3.350	MON	234	2,805	11/25/2014	04/01/2041
3132GK-Z0-2	FGOLD 30 YR FHLMC				1	65,965	106.5140	65,436	61,435	65,836	0	(749)	0	0	4.000	3.360	MON	205	2,457	11/25/2014	11/01/2041
3132GU-KH-6	FEDERAL HOME LOAN MTGE CO FHLMC				1	763,182	103.2200	744,896	721,659	759,083	0	(6,130)	0	0	3.500	3.050	MON	2,105	25,258	06/28/2012	06/01/2042
3132HQ-4Q-2	FEDERAL HOME LOAN MTGE CO 30YR				1	2,570,007	100.0320	2,468,984	2,468,194	2,561,294	0	(10,650)	0	0	3.000	2.680	MON	6,170	74,046	01/08/2013	12/01/2042
31371K-KX-5	FED NTL MTG ASSO FNMA				1	5,633	101.9560	5,550	5,443	5,484	0	(39)	0	0	5.500	4.550	MON	25	299	12/24/2002	03/01/2017
31385X-AZ-0	FED NTL MTG ASSO FNMA				1	0	0.0000	0	0	0	0	0	0	0	5.500	0.000	MON	4,543	0	09/01/2009	05/01/2033
3138EK-FB-8	FED NTL MTG ASSO FNMA				1	7,733,770	103.4450	7,561,848	7,310,018	7,698,626	0	(70,597)	0	0	3.500	3.030	MON	21,321	255,851	02/11/2013	01/01/2042
3138EK-G7-4	FANNIE MAE FNMA				1	7,799,871	103.4380	7,625,963	7,372,497	7,765,296	0	(71,686)	0	0	3.500	3.040	MON	21,503	258,037	02/22/2013	08/01/2042
3138EK-GJ-3	FED NTL MTG ASSO FNMA				1	168,040	108.0850	167,109	154,608	167,889	0	(1,718)	0	0	4.500	3.730	MON	580	2,319	07/30/2015	03/01/2042
3138EP-AH-7	FED NTL MTG ASSO FNMA				1	775,374	107.9850	771,471	714,425	774,777	0	(6,445)	0	0	4.500	3.800	MON	2,679	10,716	07/31/2015	02/01/2045
3138EP-LC-6	FED NTL MTG ASSO FNMA				1	636,954	108.1810	633,868	586,042	636,404	0	(4,389)	0	0	4.500	3.750	MON	2,198	8,791	07/30/2015	01/01/2043
3138EP-S4-7	FED NTL MTG ASSO FNMA				1	409,746	106.1090	407,584	384,118	409,494	0	(2,057)	0	0	4.000	3.470	MON	1,280	5,122	08/04/2015	07/01/2045
3138EP-TZ-7	FED NTL MTG ASSO FNMA				1	1,822,541	103.3740	1,800,668	1,741,696	1,821,619	0	(2,471)	0	0	3.000	2.330	MON	4,355	9,370	10/21/2015	06/01/2030
3138EQ-CS-9	FED NTL MTG ASSO FNMA				1	544,678	103.2780	536,468	519,437	544,540	0	(330)	0	0	3.000	2.310	MON	1,299	1,299	10/21/2015	09/01/2030
3138EQ-HY-1	FED NTL MTG ASSO FNMA				1	453,436	106.2590	451,747	425,138	453,404	0	(32)	0	0	4.000	3.470	MON	1,417	0	12/02/2015	10/01/2045
3138W1-4Q-7	FED NTL MTG ASSO 30YR				1	2,977,499	100.1890	2,881,508	2,876,073	2,969,481	0	(10,768)	0	0	3.000	2.730	MON	7,190	86,281	04/03/2013	03/01/2043
3138W9-K0-2	FED NTL MTG ASSO FNMA				1	59,518	100.1660	59,366	59,268	59,515	0	(10)	0	0	3.000	2.960	MON	148	593	07/30/2015	08/01/2043
3138W9-6X-4	FED NTL MTG ASSO FNMA				1	24,603	100.6850	24,050	23,899	24,570	0	(83)	0	0	2.500	2.040	MON	50	397	04/06/2015	02/01/2030
3138WE-AC-3	FED NTL MTG ASSO FNMA				1	2,853,581	103.3730	2,809,783	2,718,101	2,847,140	0	(18,622)	0	0	3.000	2.300	MON	6,795	61,157	03/06/2015	03/01/2030
3138WE-AJ-8	FED NTL MTG ASSO FNMA				1	242,908	103.2800	239,142	231,548	242,365	0	(1,450)	0	0	3.000	2.310	MON	579	5,210	03/05/2015	02/01/2030
3138WE-AM-1	FED NTL MTG ASSO FNMA				1	407,848	103.3730	401,588	388,484	406,921	0	(2,659)	0	0	3.000	2.300	MON	971	8,741	03/05/2015	02/01/2030
3138WE-C0-0	FED NTL MTG ASSO FNMA				1	1,107,468	106.6900	1,081,213	1,022,788	1,106,838	0	(2,456)	0	0	4.000	3.340	MON	3,409	10,228	08/24/2015	03/01/2045
3138WE-H4-4	FED NTL MTG ASSO FNMA				1	366,952	100.8850	358,709	355,562	366,478	0	(1,015)	0	0	2.500	2.060	MON	741	5,926	04/06/2015	04/01/2030
3138WF-6F-0	FED NTL MTG ASSO FNMA				1	324,149	106.2590	322,800	303,786	324,126	0	(23)	0	0	4.000	3.460	MON	1,013	0	12/02/2015	11/01/2045
3138WF-Y9-1	FED NTL MTG ASSO FNMA				1	621,762	106.2590	618,992	582,532	621,717	0	(44)	0	0	4.000	3.460	MON	1,942	0	12/02/2015	11/01/2045
3138WP-JE-5	FNMA 15YR				1	227,001	101.3040	220,107	217,274	225,320	0	(1,849)	0	0	2.500	1.880	MON	453	5,432	04/09/2013	04/01/2028
3138WQ-BE-0	FED NTL MTG ASSO FNMA				1	769,272	103.3700	698,365	675,597	707,558	0	(5,093)	0	0	3.000	2.260	MON	1,689	15,201	03/05/2015	04/01/2029
3138YF-E3-4	FED NTL MTG ASSO FNMA				1	159,115	103.3710	156,670	151,561	158,754	0	(713)	0	0	3.000	2.300	MON	379	3,410	03/05/2015	02/01/2030
31390H-ET-5	FED NTL MTG ASSO FNMA				1	19,517	114.2800	21,820	19,093	19,369	0	(22)	0	0	6.500	6.290	MON	103	1,241	06/18/2002	07/01/2032
31392C-AV-6	FED NTL MTG ASSO FNMA				1	17,125	114.6340	18,959	16,538	16,917	0	(70)	0	0	7.000	6.650	MON	96	1,158	02/12/2002	02/25/2032
31394E-KS-6	FNMA REMIC TRUST 2005-66				1	42,669	99.6820	42,661	42,669	42,669	0	0	0	0	0.450	1.410	MON	3	188	07/12/2005	07/25/2035

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Code	Foreign	Bond Char	NAIC Des.	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
31400J-DD-9	FED NTL MTG ASSO FNMA				1	20,308	103.8490	20,496	19,734	19,832	0	(112)	0	0	5.000	4.560	MON	82	985	02/26/2003	03/01/2018
2699999. Subtotal - Bonds - U.S. Special Revenues - Residential Mortgage-Backed Securities						34,065,720	XXX	33,369,867	32,298,731	33,858,222	0	(223,546)	0	0	XXX	XXX	XXX	95,853	866,071	XXX	XXX
3199999. Total - U.S. Special Revenues Bonds						34,362,621	XXX	33,659,097	32,573,731	34,239,007	0	(225,604)	0	0	XXX	XXX	XXX	101,600	880,009	XXX	XXX
00206R-AR-3	A T & T CORPORATION CORPORATE				1	2FE	348,912	110.3440	386,204	350,000	349,569	0	115	0	0	5.800	5.840	FA	7,669	20,300	01/29/2009	02/15/2019
002824-AU-4	ABBOTT LABORATORIES CORPORATE				1	1FE	870,216	109.5070	957,091	874,000	872,509	0	391	0	0	5.125	5.180	AO	11,198	44,793	02/26/2009	04/01/2019
00287Y-AL-3	ABBVIE INC CORPORATE					2FE	248,390	96.8140	242,035	250,000	248,841	0	150	0	0	2.900	2.970	MN	1,168	7,250	11/05/2012	11/06/2022
00287Y-AQ-2	ABBVIE INC CORPORATE					2FE	69,878	98.7060	69,094	70,000	69,882	0	4	0	0	3.600	3.620	MN	329	1,260	05/05/2015	05/14/2025
025816-DT-3	AMERICAN EXPRESS CO CORPORATE				1	1FE	61,186	106.0000	64,657	61,186	61,186	0	0	0	0	5.250	5.250	JJ	1,347	3,212	01/20/2011	07/31/2021
029912-BC-5	AMERICAN TOWER CORP CORPORATE				1	2FE	384,623	99.2720	382,197	385,000	384,661	0	38	0	0	2.375	2.390	MN	889	4,572	05/20/2015	05/26/2020
05367A-AE-3	AVIATION CAPITAL GROUP TRUST CORPORATE					2FE	564,322	107.9530	609,934	565,000	564,611	0	65	0	0	5.050	5.060	MS	9,511	28,533	08/11/2010	09/01/2020
09062X-AF-0	BIOGEN INC CORPORATE					2FE	200,000	102.0000	204,000	200,000	200,000	0	0	0	0	4.625	4.620	JJ	3,880	9,250	01/14/2013	01/31/2018
097023-BP-9	BOEING CO/THE CORPORATE					1FE	78,994	96.8090	78,415	81,000	79,021	0	27	0	0	4.050	4.070	MS	1,371	0	09/10/2015	09/15/2025
120111-BN-8	BUILDING MATERIALS CORP CORPORATE					3FE	445,000	102.0000	453,900	445,000	445,000	0	0	0	0	2.600	2.880	AO	363	0	10/28/2015	10/30/2025
142339-AE-0	CARLISLE COMPANIES INC CORPORATE				1	2FE	721,738	106.5700	772,633	725,000	723,163	0	314	0	0	6.000	6.000	AO	5,637	0	09/22/2015	10/15/2025
151020-AQ-7	CELGENE CORPORATION CORPORATE					2FE	349,433	99.2850	347,498	350,000	349,457	0	34	0	0	5.125	5.180	JD	1,651	37,156	12/06/2010	12/15/2020
15189T-AN-7	CENTERPOINT ENERGY INC CORPORATE				1	2FE	149,612	104.3330	156,500	150,000	149,937	0	47	0	0	2.875	2.900	FA	3,801	0	08/12/2015	08/15/2020
166764-BD-1	CHEVRONTEXACO CORP CORPORATE					1FE	45,000	100.7210	45,324	45,000	45,000	0	0	0	0	5.950	5.980	FA	3,719	8,925	02/01/2007	02/01/2017
172967-JP-7	CIT GROUP INC CORPORATE					2FE	79,851	98.2190	78,575	80,000	79,857	0	6	0	0	3.326	3.320	MN	183	0	11/09/2015	11/17/2025
178566-AC-9	CITY NATIONAL CORPORATION CORPORATE				1	1FE	124,673	111.0860	138,858	125,000	124,815	0	32	0	0	5.250	5.280	MS	1,932	6,563	09/08/2010	09/15/2020
20030N-AM-1	COMCAST STORER INC CORPORATE				1	1FE	149,964	109.3190	163,979	150,000	149,979	0	4	0	0	5.300	5.300	MN	1,093	8,550	05/05/2008	05/15/2018
21036P-AF-5	CONSTELLATION BRANDS INC CORPORATE				1	3FE	383,438	106.5000	399,375	375,000	376,932	0	(1,329)	0	0	7.250	6.840	MN	3,474	27,188	04/22/2010	05/15/2017
224044-BU-0	COX COMMUNICASTIONS CORPORATE				1	2FE	226,372	115.8890	202,806	175,000	185,590	0	(6,112)	0	0	9.375	5.140	JJ	7,565	16,406	05/04/2010	01/15/2019
225433-AJ-0	CREDIT SUISSE GROUP FUNDING GUERNS					2FE	209,605	99.5910	209,141	210,000	209,607	0	2	0	0	3.125	3.160	JD	383	0	12/07/2015	12/10/2020
251591-AY-9	DEVELOPERS DIVERSIFIED REALTY CORP				1	2FE	223,459	104.6230	235,402	225,000	224,435	0	222	0	0	4.750	4.860	AO	2,256	10,688	03/02/2011	04/15/2018
25468P-DF-0	THE WALT DISNEY COMPANY CORPORATE					1FE	259,381	101.1490	262,987	260,000	259,389	0	7	0	0	3.150	3.170	MS	2,366	0	09/14/2015	09/17/2025
27876Q-BE-7	ECHOSTAR DBS CORPORATION CORPORATE				1	3FE	24,829	100.3130	25,078	25,000	24,994	0	21	0	0	7.125	7.220	FA	742	1,781	02/16/2006	02/01/2016
316200-AR-7	FIDELITY NATIONAL INFORMATION SERV					2FE	329,106	103.2200	340,626	330,000	329,095	0	(11)	0	0	5.000	5.030	AO	3,254	0	10/13/2015	10/15/2025
34628T-AB-3	FORETHOUGHT FINANCIAL GROUP INC				1	2FE	75,000	113.2260	84,920	75,000	75,000	0	0	0	0	8.625	8.620	AO	1,366	6,469	04/15/2011	04/15/2021
35804G-AX-4	FRESENIUS US FINANCE II INC CORPORATE					3FE	100,000	101.0000	101,000	100,000	100,000	0	0	0	0	4.500	4.500	JJ	1,200	0	09/16/2015	01/15/2023
37247D-AP-1	GENWORTH FINANCIAL INC CORPORATE					3FE	0	0.0000	0	0	0	0	0	0	0	7.625	0.000	MS	381	0	03/08/2012	09/24/2021
37331N-AB-7	GEORGIA PACIFIC LLC CORPORATE				1	2FE	99,413	110.3410	110,341	100,000	99,669	0	57	0	0	5.400	5.470	MN	900	5,400	10/27/2010	11/01/2020
375558-BF-9	GILEAD SCIENCES INC CORPORATE					1FE	74,697	100.8890	75,667	75,000	74,701	0	4	0	0	3.650	3.690	MS	814	0	09/09/2015	03/01/2026
38141G-FM-1	GOLDMAN SACHS & CO CORPORATE					1FE	1,457,279	108.5930	1,574,599	1,450,000	1,451,906	0	(835)	0	0	6.150	6.080	AO	22,294	89,175	04/22/2008	04/01/2018
40428H-PY-8	HSBC BANK USA CORPORATE					1FE	654,424	100.0530	655,347	655,000	654,457	0	33	0	0	2.750	2.760	FA	7,205	0	08/04/2015	08/07/2020
406216-BH-3	HALLIBURTON CO CORPORATE					1FE	234,810	98.4220	231,292	235,000	234,806	0	(3)	0	0	3.375	3.380	MN	1,058	0	11/05/2015	11/15/2022
421946-AH-7	HEALTHCARE REALTY TRUST INC CORPORATE					2FE	495,895	97.6840	489,420	500,000	496,858	0	364	0	0	3.750	3.840	AO	3,958	18,750	03/19/2013	04/15/2023
460690-BK-5	INTERPUBLIC GROUP CORPORATE					2FE	324,022	96.2270	312,738	325,000	324,306	0	82	0	0	3.750	3.780	FA	4,604	12,188	11/05/2012	02/15/2023
46625H-JC-9	JP MORGAN CHASE CORPORATE					1FE	557,150	101.5550	558,558	550,000	556,408	0	652	0	0	3.625	3.660	MN	2,658	19,938	11/13/2014	05/13/2024
46625H-KA-7	JP MORGAN CHASE & CO CORPORATE					1FE	493,930	98.4160	492,080	500,000	494,626	0	696	0	0	2.250	2.530	JJ	4,938	5,625	06/08/2015	01/23/2020
46625H-KC-3	JP MORGAN CHASE & CO CORPORATE					1FE	224,501	97.2890	218,900	225,000	224,538	0	38	0	0	3.125	3.150	JJ	3,086	3,516	01/15/2015	01/23/2025
46625H-KX-4	JP MORGAN CHASE & CO CORPORATE					1FE	174,820	99.1100	173,443	175,000	174,822	0	3	0	0	2.550	2.570	AO	769	0	10/22/2015	10/29/2020
50075N-BA-1	KRAFT FOODS INC CORPORATE					2FE	793,408	111.0940	888,752	800,000	796,809	0	665	0	0	5.375	5.460	FA	16,842	43,000	02/04/2010	02/10/2020
50076Q-AE-6	KRAFT FOODS CORPORATE					2FE	677,064	100.6860	604,116	600,000	672,655	0	(1,472)	0	0	5.000	4.230	JD	2,250	30,000	11/13/2012	06/04/2042
59156R-BG-0	METLIFE FUNDING INC CORPORATE					1FE	59,995	100.7700	60,462	60,000	59,993	0	(2)	0	0	3.600	3.600	MN	288	0	11/08/2015	11/13/2025
594918-BG-8	MICROSOFT CORP CORPORATE					1FE	309,752	100.0390	310,121	310,000	309,756	0	4	0	0	2.000	2.010	MN	999	0	10/29/2015	11/03/2020
629400-AA-3	NSG HOLDING LLC CORPORATE				1	3FE	22,809	108.0000	24,634	22,809	22,809	0	0	0	0	7.750	7.750	JD	79	1,738	03/06/2007	12/15/2025
665772-CN-7	NORTHERN STATES POWER CORPORATE					1FE	98,367	97.8000	97,800	100,000	98,374	0	7	0	0	4.000	4.090	FA	1,511	0	08/04/2015	08/15/2045
67059T-AC-9	NUSTAR LOGISTICS CORPORATE					3FE	149,648	88.0000	132,000	150,000	132,000	(6,033)	33	0	0	4.750	4.780	FA	2,969	7,125	01/30/2012	02/01/2022
69353R-EP-9	PNC BANK NA CORPORATE					1FE	523,793	99.1220	520,391	525,000	523,921	0	129	0	0	2.300	2.340	JD	1,006	6,038	05/27/2015	06/01/2020
747262-AH-6	QVC INC CORPORATE					2FE	142,846	99.6880	134,579	135,000	140,796	0	(758)	0	0	5.125	4.350	JJ	3,440	3,459	02/28/2013	07/02/2022
808513-AL-9	CHARLES SCHWAB CORP CORPORATE					1FE	24,895	98.3610	24,590	25,000	24,902	0	7	0	0	3.000	3.040	MS	231	375	03/03/2015	03/10/2025
832248-AQ-1	SMITHFIELD FOODS INC CORPORATE					3FE	5,000	106.7500	5,338	5,000	5,000	0	0	0	0	7.750	7.750	JJ	194	388	06/19/2007	07/01/2017
845467-AE-9	SOUTHWESTERN ENERGY COMPANY CORPORATE				1	2FE	40,000	85.0000	34,000	40,000	40,000	0	0	0	0	7.500	7.500	FA	1,250	3,000	01/11/2008	02/01/2018
871658-AJ-2	SYNCHRONY CORPORATE					2FE	99,974	99.6680	99,668	100,000	99,974	0	0	0	0	2.600	2.600	JJ	195	0	12/01/2015	01/15/2019

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
CUSIP Identification	Description	3 Code	4 Foreign	5 Bond Char	NAIC Des.	Actual Cost	8 Rate Used to Obtain Fair Value	9 Fair Value	Par Value	Book/ Adjusted Carrying Value	12 Unrealized Valuation Increase/ (Decrease)	13 Current Year's (Amortization) Accretion	14 Current Year's Other-Than-Temporary Impairment Recognized	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value	16 Rate of	17 Effective Rate of	18 When Paid	19 Admitted Amount Due and Accrued	20 Amount Received During Year	21 Acquired	22 Stated Contractual Maturity Date
893045-AE-4	TRANS-ALLEGHENY INTERSTATE LINE CO				2FE	1,538,830	100.0170	1,540,262	1,540,000	1,538,875	0	68	0	0	3.850	3.850	JD	4,941	57,643	12/08/2014	06/01/2025
893570-BH-0	TRANSCONTINENTAL GAS PIPE LINE CORP			1	2FE	30,000	101.2260	30,368	30,000	30,000	0	0	0	0	6.400	6.400	AO	605	1,920	04/06/2006	04/15/2016
90345K-AA-8	US AIRWAYS GROUP INC CORPORATE			1	1FE	124,160	112.0000	139,059	124,160	124,160	0	0	0	0	6.250	6.250	AO	1,487	7,760	12/15/2010	10/22/2024
907818-ED-6	UNION PACIFIC CORP CORPORATE				1FE	179,698	101.6700	177,923	175,000	179,627	0	(71)	0	0	3.250	2.920	FA	2,149	0	10/28/2015	08/15/2025
92345Y-AC-0	VERISK ANALYTICS INC CORPORATE				2FE	77,814	100.8110	75,608	75,000	77,072	0	(269)	0	0	4.125	3.650	MS	937	3,094	02/25/2013	09/12/2022
92826C-AB-8	92826CAB8 CORPORATE				1FE	249,788	99.9240	249,810	250,000	249,788	0	1	0	0	2.200	2.210	JD	260	0	12/09/2015	12/14/2020
949746-GK-0	WELLS FARGO CO CORPORATE				1FE	498,330	92.2010	461,005	500,000	498,328	0	(2)	0	0	3.900	3.910	MN	3,250	9,804	04/23/2015	05/01/2045
949746-GM-6	WELLS FARGO & CO CORPORATE				1FE	309,826	99.7860	309,337	310,000	309,838	0	12	0	0	2.600	2.610	JJ	3,560	0	07/15/2015	07/22/2020
98310K-AB-4	WYNDHAM WORLDWIDE CORP CORPORATE			1	2FE	6,383	103.8310	6,230	6,000	6,069	0	(72)	0	0	6.000	4.700	JD	30	360	03/22/2011	12/01/2016
984121-BP-7	XEROX CORPORATION CORPORATE			1	2FE	14,912	100.9220	15,138	15,000	14,994	0	10	0	0	5.850	5.920	MS	258	960	03/15/2006	03/15/2016
98412J-BA-1	XEROX CORPORATION CORPORATE				2FE	10,600	101.2930	10,129	10,000	10,017	0	(76)	0	0	7.200	6.400	AO	180	720	10/31/2005	04/01/2016
780082-AC-7	ROYAL BANK OF CANADA CORPORATE		A		1FE	449,852	98.3140	442,413	450,000	449,851	0	0	0	0	2.100	2.100	AO	2,021	0	10/06/2015	10/14/2020
000784-AJ-9	ABN AMRO N AMERICA CORPORATE		F		1FE	199,720	99.1410	198,282	200,000	199,722	0	2	0	0	2.450	2.480	JD	368	0	12/01/2015	06/04/2020
00507U-AR-2	ACTAVIS FUNDING SCS CORP SCH B		R		2FE	179,740	100.1600	180,284	180,000	179,765	0	20	0	0	3.450	3.470	MS	1,826	3,156	03/03/2015	03/15/2022
709629-AL-3	PENTAIR FINANCE SA		F		2FE	589,472	94.0800	555,072	590,000	589,612	0	49	0	0	3.150	3.160	MS	5,472	18,580	11/13/2012	09/15/2022
3299999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						19,035,326	XXX	19,347,782	18,914,155	18,979,073	(6,033)	(7,900)	0	0	XXX	XXX	XXX	189,819	597,928	XXX	XXX
059500-AD-0	BACM_06-3 CMBS				1FM	249,872	100.5260	224,024	222,850	248,464	0	(1,579)	0	0	5.890	5.120	MON	1,094	13,187	01/27/2012	07/10/2044
073888-AF-4	BEAR STEARNS CO. CMBS				1FM	174,924	102.9710	162,788	158,090	174,292	0	(3,191)	0	0	5.317	4.660	MON	700	10,520	08/07/2013	02/01/2044
126310-BG-7	COMM_14-CR18 CMBS				1FM	234,519	100.9510	227,140	225,000	234,545	0	128	0	0	4.900	4.640	MON	905	10,805	08/29/2014	05/01/2047
126320-BC-6	COMM TRUST CMBS				1FM	804,547	99.9670	774,748	775,000	804,060	0	(396)	0	0	4.898	4.670	MON	3,164	37,238	08/28/2014	07/01/2047
12650Y-AA-1	CSMC_15-GLPB CMBS				1FE	463,500	102.6430	461,894	450,000	463,456	0	(43)	0	0	3.639	3.150	MON	1,365	0	12/04/2015	11/01/2034
173110-BK-5	CIT GROUP INC CMBS				1FM	611,266	103.3320	532,681	515,500	608,185	0	(1,061)	0	0	5.887	4.810	MON	2,529	29,824	12/10/2012	12/01/2049
200474-BH-6	COMM_15-LC19 CMBS				1FE	7,066,164	95.7510	6,952,779	7,261,312	7,066,881	0	735	0	0	4.405	4.560	MON	26,659	52,456	09/22/2015	02/01/2048
201730-AE-1	GCCFC 07-GG9 CMBS				1FM	1,276,863	102.2240	1,144,983	1,120,062	1,266,237	0	(29,520)	0	0	5.444	4.530	MON	5,081	64,308	11/27/2012	03/10/2039
201736-AF-5	CMLTI CMBS				1FM	559,214	104.8730	516,393	492,395	581,380	0	(5,362)	0	0	6.240	5.110	MON	2,560	30,135	08/20/2013	12/01/2049
22545L-AD-1	CSMC_06-C5 CMBS				1FM	627,358	101.0440	584,585	578,543	623,716	0	(3,111)	0	0	5.311	4.760	MON	2,561	31,021	01/18/2012	12/15/2039
46629P-AC-2	JPMCC_06-LDP9 CMBS				1FM	2,568,608	101.8450	2,312,675	2,270,766	2,585,331	0	(14,726)	0	0	5.336	4.500	MON	10,097	123,582	11/15/2012	05/01/2047
46629Y-AC-3	JPMORGAN CHASE 07-CB18 CMBS				1FM	1,027,708	102.3970	921,592	900,018	1,022,990	0	(9,827)	0	0	5.440	4.610	MON	4,060	49,122	02/04/2013	06/01/2047
46632H-AG-6	JPMCC_07-LD12 CMBS				1FM	197,215	104.7070	181,325	173,174	196,665	0	(462)	0	0	5.850	5.020	MON	844	10,131	08/07/2013	02/01/2051
50179A-AE-7	LB-UBS CMBS 2007-C1				1FM	341,914	102.2880	315,481	308,421	339,425	0	(1,333)	0	0	5.424	4.720	MON	929	16,722	01/13/2012	02/11/2040
50180A-AD-7	LBUBS 07-C2 CMBS				1FM	310,010	102.6250	292,069	284,597	308,848	0	(638)	0	0	5.430	4.830	MON	859	15,451	09/05/2013	02/15/2040
55312V-AD-0	ML-CFC COML MTG TR 2006-4				1FM	930,109	101.6100	828,972	815,829	925,841	0	(17,441)	0	0	5.170	4.400	MON	3,515	42,195	09/26/2012	12/12/2049
60687V-AF-2	MLCFC_06-3 CMBS				1FM	108,553	101.2990	99,740	98,461	108,235	0	(398)	0	0	5.409	4.780	MON	444	5,421	08/13/2013	07/01/2046
61750N-AS-2	MSC-99 CMBS				1FM	846,151	101.9880	783,801	768,519	843,165	0	(5,224)	0	0	5.319	4.690	MON	3,406	40,878	07/18/2013	12/01/2043
61756U-AE-1	MSC-99 CMBS				1FM	1,761,956	104.4540	1,554,040	1,487,765	1,752,471	0	(40,009)	0	0	5.809	4.750	MON	7,202	89,290	09/26/2012	12/01/2049
61763K-BF-0	MSBAM_14-C15 CMBS				1FM	104,219	100.5410	100,542	100,000	104,142	0	(58)	0	0	4.899	4.640	MON	408	4,965	08/20/2014	04/01/2047
61764P-BU-5	MSBAM_14-C19 CMBS				1FM	1,235,980	101.1030	1,213,242	1,200,000	1,235,355	0	(605)	0	0	3.526	3.370	MON	3,526	42,312	12/09/2014	12/01/2047
92978P-AF-6	WBCMT 03 CMBS				1FM	275,836	102.2100	255,986	250,449	275,115	0	(2,074)	0	0	5.297	4.700	MON	1,106	14,266	09/04/2013	11/01/2048
78478Y-AA-2	STRIP_12 CMBS		R	5	1FE	879,812	98.1000	873,293	890,206	880,590	0	7,770	0	0	1.500	1.540	MON	223	13,238	12/13/2012	12/25/2044
3499999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Commercial Mortgage-Backed Securities						22,686,298	XXX	21,314,773	21,346,957	22,649,409	0	(128,425)	0	0	XXX	XXX	XXX	83,257	747,067	XXX	XXX
345280-DF-8	FORDF_14-1:A2 ABS FTST				1FE	1,001,520	99.6620	996,620	1,000,000	1,001,537	0	14	0	0	0.730	0.560	MON	288	3,953	03/30/2015	02/15/2019
87165L-AT-8	SYNCT_15-4:A ABS FTST				1FE	199,998	99.1620	198,324	200,000	199,998	0	0	0	0	1.610	1.610	MON	143	991	09/25/2015	09/15/2023
3599999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Other Loan-Backed and Structured Securities						1,201,518	XXX	1,194,944	1,200,000	1,201,535	0	14	0	0	XXX	XXX	XXX	431	4,944	XXX	XXX
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						42,923,142	XXX	41,857,499	41,461,112	42,830,017	(6,033)	(136,311)	0	0	XXX	XXX	XXX	273,507	1,349,939	XXX	XXX
4899999. Total - Hybrid Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
5599999. Total - Parent, Subsidiaries and Affiliates Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7799999. Total - Issuer Obligations						41,986,930	XXX	41,726,383	41,089,155	41,580,942	(6,033)	(120,091)	0	0	XXX	XXX	XXX	291,970	855,917	XXX	XXX
7899999. Total - Residential Mortgage-Backed Securities						34,936,353	XXX	34,240,254	33,132,714	34,828,553	0	(224,470)	0	0	XXX	XXX	XXX	97,799	873,368	XXX	XXX
7999999. Total - Commercial Mortgage-Backed Securities						22,686,298	XXX	21,314,773	21,346,957	22,649,409	0	(128,425)	0	0	XXX	XXX	XXX	83,257	747,067	XXX	XXX

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Code	Foreign	Bond Char	NAIC Des.	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
8099999. Total - Other Loan-Backed and Structured Securities						1,201,518	XXX	1,194,944	1,200,000	1,201,535	0	14	0	0	XXX	XXX	XXX	431	4,944	XXX	XXX
8399999 - Total Bonds						100,811,099	XXX	98,476,354	98,768,826	100,260,439	(6,033)	(472,972)	0	0	XXX	XXX	XXX	473,457	2,481,296	XXX	XXX

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned

NONE

Schedule D - Part 2 - Section 2 - Common Stocks Owned

NONE

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1 CUSIP Identification	2 Description		3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
3130A4-GJ-5	FEDERAL HOME LOAN BANK	AGCY FTSE		09/30/2015	PAINE WEBBER PUERTO RICO		2,030,372	2,000,000	9,750
3133T6-BR-5	FEDERAL HOME LOAN BANK	AGCY FTSE		10/20/2015	PAINE WEBBER PUERTO RICO		6,270,040	6,125,000	37,813
3133T9-Q6-9	FEDERAL HOME LOAN BANK	AGCY FTSE		09/30/2015	PAINE WEBBER PUERTO RICO		1,023,202	1,000,000	6,552
3133X0-VN-8	FEDERAL HOME LOAN BANK	AGCY FTSE		09/30/2015	PAINE WEBBER PUERTO RICO		5,187,874	5,000,000	5,000
3133X0-FF-3	FED NTL MTG ASSO	AGCY FTST		10/21/2015	NOMURA SECURITIES		449,067	450,000	56
36179R-LP-2	GOVERNMENT NATIONAL MORTGAGE	GNMA		08/25/2015	CREDIT SUISSE SECURITIES (USA) LLC		885,539	848,261	1,649
0599999. Subtotal - Bonds - U.S. Governments							15,846,094	15,423,261	60,820
3138EX-GU-3	FED NTL MTG ASSO	FNMA		07/30/2015	MERRILL LYNCH		188,474	173,409	260
3138EP-AH-7	FED NTL MTG ASSO	FNMA		07/31/2015	J.P. MORGAN		852,817	785,780	1,179
3138EP-LC-6	FED NTL MTG ASSO	FNMA		07/30/2015	MERRILL LYNCH		686,589	631,709	948
3138EP-S4-7	FED NTL MTG ASSO	FNMA		08/04/2015	GOLDMAN SACHS		439,450	411,948	549
3138EP-TZ-7	FED NTL MTG ASSO	FNMA		10/21/2015	CREDIT SUISSE SECURITIES (USA) LLC		1,858,779	1,776,567	2,369
3138EQ-CS-9	FED NTL MTG ASSO	FNMA		10/21/2015	WELLS		548,837	523,403	698
3138EQ-HY-1	FED NTL MTG ASSO	FNMA		12/02/2015	WELLS		453,456	425,138	425
3138L9-K0-2	FED NTL MTG ASSO	FNMA		07/30/2015	J.P. MORGAN		61,173	60,916	61
3138L0-6Y-4	FED NTL MTG ASSO	FNMA		04/06/2015	J.P. MORGAN		26,308	25,491	34
3138WE-AC-3	FED NTL MTG ASSO	FNMA		03/05/2015	MORGAN STANLEY		3,127,197	2,978,726	4,220
3138WE-AJ-8	FED NTL MTG ASSO	FNMA		03/05/2015	MORGAN STANLEY		263,442	251,122	356
3138WE-AM-1	FED NTL MTG ASSO	FNMA		03/05/2015	MORGAN STANLEY		451,338	429,910	609
3138WE-CD-0	FED NTL MTG ASSO	FNMA		08/24/2015	GOLDMAN SACHS		1,131,332	1,044,809	1,509
3138WE-H4-4	FED NTL MTG ASSO	FNMA		04/06/2015	J.P. MORGAN		385,090	373,137	492
3138WF-4F-0	FED NTL MTG ASSO	FNMA		12/02/2015	J.P. MORGAN		324,149	303,786	304
3138WF-Y9-1	FED NTL MTG ASSO	FNMA		12/02/2015	J.P. MORGAN		621,762	582,532	583
3138X0-BE-0	FED NTL MTG ASSO	FNMA		03/05/2015	MORGAN STANLEY		785,399	748,110	1,060
3138YF-E3-4	FED NTL MTG ASSO	FNMA		03/05/2015	MORGAN STANLEY		166,827	158,908	225
3199999. Subtotal - Bonds - U.S. Special Revenues							12,372,379	11,685,399	15,881
00287Y-AQ-2	ABBVIE INC	CORPORATE		05/05/2015	MERRILL LYNCH		69,878	70,000	0
025816-DT-3	AMERICAN EXPRESS CO	CORPORATE		05/20/2015	DEUTSCHE BANK		384,623	385,000	0
090572-AF-0	BIOGEN INC	CORPORATE		09/10/2015	MERRILL LYNCH, PIERCE, FENNER & SMI		114,729	115,000	0
097023-BP-9	BOEING CO/THE	CORPORATE		10/28/2015	BNP PARIBAS		78,994	81,000	18
120111-BN-8	BUILDING MATERIALS CORP	CORPORATE		09/22/2015	DEUTSCHE BANK		445,000	445,000	0
12650T-AA-1	CSMC_15-GLPB	CMBS		12/04/2015	CREDIT SUISSE SECURITIES (USA) LLC		463,500	450,000	555
151020-AQ-7	CELGENE CORPORATION	CORPORATE		08/12/2015	VARIOUS		349,433	350,000	19
166764-BD-1	CHEVRONTEXACO CORP	CORPORATE		11/09/2015	J.P. MORGAN		45,000	45,000	0
172967-JP-7	CIT GROUP INC	CORPORATE		04/22/2015	CITIGROUP GLOBAL MARKETS INC		79,851	80,000	0
20047A-BH-8	COMM_15-LC19	CMBS		09/22/2015	DEUTSCHE BANK		7,066,834	7,262,000	20,641
225433-AJ-0	CREDIT SUISSE GROUP FUNDING GUERNS			12/07/2015	CREDIT SUISSE SECURITIES (USA) LLC		209,605	210,000	0
254687-DF-0	THE WALT DISNEY COMPANY	CORPORATE		09/14/2015	GOLDMAN SACHS		259,381	260,000	0
31620M-AR-7	FIDELITY NATIONAL INFORMATION SERV			10/13/2015	MERRILL LYNCH, PIERCE, FENNER & SMI		329,106	330,000	0
345397-DF-8	FORDF_14-1:A2	ABS FTST		03/30/2015	HSBC SECURITIES INC.		1,001,523	1,000,000	233
35804G-AK-4	FRESENIUS US FINANCE II INC	CORPORATE		09/18/2015	GOLDMAN SACHS		100,000	100,000	0
375558-BF-9	GILEAD SCIENCES INC	CORPORATE		09/09/2015	J.P. MORGAN		74,697	75,000	0
40428H-PV-8	HSBC BANK USA	CORPORATE		08/04/2015	HSBC SECURITIES INC.		874,230	875,000	0
406216-BH-3	HALLIBURTON CO	CORPORATE		11/05/2015	MERRILL LYNCH, PIERCE, FENNER & SMI		234,810	235,000	0
46625H-KA-7	JP MORGAN CHASE & CO	CORPORATE		06/08/2015	J.P. MORGAN		493,930	500,000	4,313
46625H-KC-3	JP MORGAN CHASE & CO	CORPORATE		01/15/2015	J.P. MORGAN		224,501	225,000	0
46625H-KX-4	JP MORGAN CHASE & CO	CORPORATE		10/22/2015	J.P. MORGAN		174,820	175,000	0
59156R-BQ-0	METLIFE FUNDING INC	CORPORATE		11/09/2015	DEUTSCHE BANK		59,995	60,000	0
594918-BG-8	MICROSOFT CORP	CORPORATE		10/29/2015	J.P. MORGAN		309,752	310,000	0
665772-CN-7	NORTHERN STATES POWER	CORPORATE		08/04/2015	MORGAN STANLEY		98,367	100,000	0
69353R-EP-9	PNC BANK NA	CORPORATE		05/27/2015	CITIGROUP GLOBAL MARKETS INC		523,793	525,000	0
808513-AL-9	CHARLES SCHWAB CORP	CORPORATE		03/03/2015	WELLS		24,895	25,000	0
87165B-AJ-2	SYNCHRONY	CORPORATE		12/01/2015	CITIGROUP GLOBAL MARKETS INC		99,974	100,000	0
87165L-AT-8	SYNCT_15-4:A	ABS FTST		09/25/2015	BARCLAYS CAPITAL		199,998	200,000	0
907818-ED-6	UNION PACIFIC CORP	CORPORATE		10/28/2015	VARIOUS		179,698	175,000	2,072
92826C-AB-8	92826CAB8	CORPORATE		12/09/2015	MERRILL LYNCH, PIERCE, FENNER & SMI		249,788	250,000	0
949746-GK-0	WELLS FARGO CO	CORPORATE		04/23/2015	WELLS		498,330	500,000	0
949763-GN-6	WELLS FARGO & CO	CORPORATE		07/15/2015	WELLS FARGO		309,826	310,000	0
78008Z-AC-7	ROYAL BANK OF CANADA	CORPORATE	A	10/06/2015	RBC DOMINION SECURITIES CORP.		449,852	450,000	0
000840-AJ-9	ABN AMRO N AMERICA	CORPORATE	F	12/01/2015	MORGAN STANLEY		199,720	200,000	53
00507U-AR-2	ACTAVIS FUNDING SCS	CORP SCH B	R	03/03/2015	J.P. MORGAN		179,743	180,000	0
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)							16,458,176	16,653,000	28,310
8399997. Total - Bonds - Part 3							44,676,649	43,761,660	105,011

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends
8399998. Total - Bonds - Part 5						4,949,316	4,871,832	4,878
8399999. Total - Bonds						49,625,965	48,633,492	109,689
8999997. Total - Preferred Stocks - Part 3						0	XXX	0
8999998. Total - Preferred Stocks - Part 5						0	XXX	0
8999999. Total - Preferred Stocks						0	XXX	0
9799997. Total - Common Stocks - Part 3						0	XXX	0
9799998. Total - Common Stocks - Part 5						0	XXX	0
9799999. Total - Common Stocks						0	XXX	0
9899999. Total - Preferred and Common Stocks						0	XXX	0
9999999 - Totals						49,625,965	XXX	109,689

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1 CUSIP Identification	2 Description	3 Foreign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value: 11 Unrealized Valuation Increase/ Decrease	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other-Than-Temporary Impairment Recognized	14 Total Change in Book/ Adjusted Carrying Value (11+12-13)	15 Total Foreign Exchange Change in Book/ Adjusted Carrying Value	16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Contractual Maturity Date
313371-62-4	FED HOME LN BANK		09/28/2015	MATURITY		4,950,000	4,950,000	5,144,684	4,985,753	0	(35,753)	0	(35,753)	0	4,950,000	0	0	0	80,438	09/28/2015
313380-SR-9	FED HOME LN BANK		10/19/2015	CALLED SECURITY at 100.000		5,315,000	5,315,000	5,315,000	5,315,000	0	0	0	0	0	5,315,000	0	0	0	66,438	10/18/2022
313382-J9-4	FED HOME LN BANK		04/28/2015	CALLED SECURITY at 100.000		3,905,000	3,905,000	3,862,045	3,874,076	0	30,924	0	30,924	0	3,905,000	0	0	0	32,542	02/28/2018
36179R-LP-2	GOVERNMENT NATIONAL MORTGAGE GNMA		12/21/2015	MBS PAYDOWN		14,278	14,278	14,906	0	0	(5)	0	(5)	0	14,278	0	0	0	94	08/07/2045
0599999. Subtotal - Bonds - U.S. Governments						14,184,278	14,184,278	14,336,635	14,174,829	0	(4,834)	0	(4,834)	0	14,184,278	0	0	0	179,512	XXX
3128GP-TZ-6	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		577	577	593	578	0	(1)	0	(1)	0	577	0	0	0	17	01/01/2017
3128LD-JL-9	FHLMC PC GOLD COMB 30		05/27/2015	VARIOUS		1,757,345	1,582,410	1,640,267	1,631,771	0	(8,756)	0	(8,756)	0	1,623,014	0	134,331	134,331	39,339	12/01/2037
3128M6-P2-8	FGOLD 30 YR FNMA		12/01/2015	MBS PAYDOWN		17,460	17,460	17,628	17,481	0	(21)	0	(21)	0	17,460	0	0	0	559	06/01/2038
3128M8-RT-3	FGOLD 30YR GIANT FHLMC		12/01/2015	MBS PAYDOWN		10,750	10,750	11,527	10,812	0	(62)	0	(62)	0	10,750	0	0	0	238	04/01/2041
3128M9-SG-8	FGOLD 30YR GIANT FHLMC		06/22/2015	VARIOUS		117,679	110,378	118,553	118,544	0	(517)	0	(517)	0	118,027	0	(348)	(348)	2,451	06/01/2043
3132GK-ZQ-2	FGOLD 30 YR FHLMC		12/01/2015	MBS PAYDOWN		8,850	8,850	9,505	8,898	0	(49)	0	(49)	0	8,850	0	0	0	194	11/01/2041
3132GU-KH-6	FEDERAL HOME LOAN MTGE CO FHLMC		12/01/2015	MBS PAYDOWN		99,101	99,101	104,803	99,482	0	(381)	0	(381)	0	99,101	0	0	0	1,926	06/01/2042
3132HQ-4Q-2	FEDERAL HOME LOAN MTGE CO 30YR		12/01/2015	MBS PAYDOWN		207,092	207,092	215,635	207,503	0	(411)	0	(411)	0	207,092	0	0	0	3,552	12/01/2042
31371K-NX-5	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		7,007	7,007	7,252	7,028	0	(21)	0	(21)	0	7,007	0	0	0	189	05/01/2017
31385X-AZ-0	FED NTL MTG ASSO FNMA		06/05/2015	VARIOUS		1,448,536	1,326,298	1,386,810	1,375,699	0	(6,309)	0	(6,309)	0	1,369,391	0	79,146	79,146	36,276	05/01/2033
3138EK-F8-6	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		1,142,772	1,142,772	1,209,017	1,147,700	0	(4,928)	0	(4,928)	0	1,142,772	0	0	0	21,532	01/01/2042
3138EK-G7-4	FANNIE MAE FNMA		12/01/2015	MBS PAYDOWN		1,168,942	1,168,942	1,236,704	1,174,099	0	(5,158)	0	(5,158)	0	1,168,942	0	0	0	23,225	08/01/2042
3138EK-GU-3	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		18,801	18,801	20,434	0	0	(66)	0	(66)	0	18,801	0	0	0	190	03/01/2042
3138EM-TR-2	FNMA 30 YR POOL FNMA		09/25/2015	VARIOUS		7,474,636	7,351,069	7,318,908	7,319,248	0	2,746	0	2,746	0	7,321,994	0	152,642	152,642	168,391	09/01/2043
3138EN-BG-3	FNMA 30 YR POOL FNMA		06/30/2015	VARIOUS		138,184	129,541	139,135	139,125	0	(662)	0	(662)	0	138,463	0	(279)	(279)	2,863	07/01/2044
3138EP-AH-7	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		71,355	71,355	77,443	0	0	(239)	0	(239)	0	71,355	0	0	0	649	02/01/2045
3138EP-LC-6	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		45,668	45,668	49,635	0	0	(128)	0	(128)	0	45,668	0	0	0	424	01/01/2043
3138EP-S4-7	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		27,828	27,828	29,684	0	0	(52)	0	(52)	0	27,828	0	0	0	205	07/01/2045
3138EP-TZ-7	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		34,671	34,671	36,238	0	0	(18)	0	(18)	0	34,671	0	0	0	153	06/01/2030
3138EQ-CS-9	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		3,967	3,967	4,160	0	0	0	0	0	0	3,967	0	0	0	10	09/01/2030
3138W1-4Q-7	FED NTL MTG ASSO 30YR		12/01/2015	MBS PAYDOWN		245,324	245,324	253,968	245,739	0	(415)	0	(415)	0	245,324	0	0	0	4,060	03/01/2043
3138W9-KQ-2	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		1,648	1,648	1,655	0	0	0	0	0	0	1,648	0	0	0	10	08/01/2043
3138WA-EE-3	FED NTL MTG ASSO CMBS		06/02/2015	VARIOUS		203,428	189,841	203,901	203,687	0	(820)	0	(820)	0	203,066	0	362	362	3,933	11/01/2043
3138WD-6X-4	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		1,652	1,652	1,705	0	0	(3)	0	(3)	0	1,652	0	0	0	16	02/01/2030
3138WE-AC-3	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		260,625	260,625	273,616	0	0	(810)	0	(810)	0	260,625	0	0	0	3,496	03/01/2030
3138WE-AJ-8	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		19,574	19,574	20,535	0	0	(54)	0	(54)	0	19,574	0	0	0	252	02/01/2030
3138WE-AM-1	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		41,426	41,426	43,491	0	0	(132)	0	(132)	0	41,426	0	0	0	551	02/01/2030
3138WE-CQ-0	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		22,020	22,020	23,844	0	0	(17)	0	(17)	0	22,020	0	0	0	131	03/01/2045
3138WE-HH-4	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		17,575	17,575	18,138	0	0	(22)	0	(22)	0	17,575	0	0	0	166	04/01/2030
3138WP-JE-5	FNMA 15YR		12/01/2015	MBS PAYDOWN		33,733	33,733	35,243	33,863	0	(130)	0	(130)	0	33,733	0	0	0	456	04/01/2028
3138X0-TP-5	FNMA 30 YR POOL FNMA		06/30/2015	VARIOUS		711,687	668,696	718,378	718,326	0	(3,075)	0	(3,075)	0	715,251	0	(3,565)	(3,565)	14,919	01/01/2044
3138X0-BE-0	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		72,513	72,513	76,127	0	0	(235)	0	(235)	0	72,513	0	0	0	863	04/01/2029
3138Y3-ZN-6	FNMA 30 YR POOL FNMA		06/30/2015	VARIOUS		4,881,305	4,691,612	4,875,977	4,875,704	0	(9,289)	0	(9,289)	0	4,866,414	0	14,891	14,891	85,443	10/01/2044
3138YF-E3-4	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		7,346	7,346	7,712	0	0	(15)	0	(15)	0	7,346	0	0	0	87	02/01/2030
31390N-ET-5	FED NTL MTG ASSO FNMA		12/28/2015	MBS PAYDOWN		613	613	626	613	0	0	0	0	0	613	0	0	0	22	07/01/2032
31392C-AV-6	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		2,347	2,347	2,430	2,352	0	(5)	0	(5)	0	2,347	0	0	0	95	02/25/2032
31394E-KS-6	FNMA REMIC TRUST 2005-66		12/28/2015	MBS PAYDOWN		15,713	15,713	15,713	15,713	0	0	0	0	0	15,713	0	0	0	35	07/25/2035
31398Y-TM-8	FH06590: BA CMO		04/15/2015	MBS PAYDOWN		441,176	441,176	471,665	467,749	0	(26,572)	0	(26,572)	0	441,176	0	0	0	4,752	02/01/2039
31400J-DQ-9	FED NTL MTG ASSO FNMA		12/01/2015	MBS PAYDOWN		16,082	16,082	16,550	16,121	0	(39)	0	(39)	0	16,082	0	0	0	403	03/01/2018
31412N-JB-2	FED NTL MTG ASSO FNMA		08/10/2015	VARIOUS		755,451	681,345	726,724	720,531	0	(5,947)	0	(5,947)	0	714,584	0	40,867	40,867	24,849	03/01/2038
31414C-JH-2	FNMA 30YR TBA FNMA		08/10/2015	VARIOUS		1,299,504	1,180,613	1,259,243	1,248,958	0	(14,610)	0	(14,610)	0	1,234,348	0	65,156	65,156	41,052	05/01/2038
31415M-2B-0	FNMA 30YR TBA FNMA		08/31/2015	VARIOUS		1,455,972	1,337,237	1,426,299	1,414,748	0	(23,767)	0	(23,767)	0	1,390,981	0	64,991	64,991	39,670	07/01/2038
31417F-Y4-4	FED NTL MTG ASSO FNMA		07/31/2015	VARIOUS		437,682	434,867	432,693	432,726	0	173	0	173	0	432,898	0	4,784	4,784	8,434	03/01/2043
3199999. Subtotal - Bonds - U.S. Special Revenues						24,745,617	23,748,115	24,540,164	23,654,938	0	(110,817)	0	(110,817)	0	24,192,639	0	552,978	552,978	536,158	XXX
002824-AU-4	ABBOTT LABORATORIES CORPORATE		12/15/2015	MARKETTAXESS CORPORATION		87,859	80,000	79,654	79,828	0	35	0	35	0	79,862	0	7,997	7,997	4,977	04/01/2019
023135-AN-6	AMAZON.COM INC CORPORATE		06/03/2015	MORGAN STANLEY		857,021	850,000	846,923	846,922	0	128	0	128	0	847,050	0	9,971	9,971	16,419	12/05/2024
023767-AA-4	AMERICAN AIRLINES INC CORPORATE		07/31/2015	CALLED SECURITY at 100.000		7,848	7,848	7,848	7,848	0	0	0	0	0	7,848	0	0	0	307	07/31/2021
0258M0-DA-4	AMERICAN EXPRESS CO CORPORATE		09/15/2015	MATURITY		75,000	75,000	74,562	74,933	0	67	0	67	0	75,000	0	0	0	2,063	09/15/2015

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/Decrease	Current Year's (Amortization)/Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date
032511-AX-5	ANADARKO PETROLEUM CORPORATE		11/05/2015	BANCORP SOUTH BK		77,732	75,000	74,683	74,924	0	35	0	35	0	74,958	0	2,774	2,774	5,826	09/15/2016
				CALLED SECURITY at																
037411-AS-4	APACHE CORP CORPORATE		09/01/2015	106.765		53,382	50,000	50,153	50,037	0	(14)	0	(14)	0	50,022	0	3,360	3,360	3,172	01/15/2017
059500-AD-0	BAOM_06-3 CMBS		12/10/2015	MBS PAYDOWN		10,508	10,508	11,782	10,542	0	(34)	0	(34)	0	10,508	0	0	0	439	07/10/2044
073888-AF-4	BEAR STEARNS CO. CMBS		12/11/2015	VARIOUS		29,671	29,671	32,831	29,846	0	(175)	0	(175)	0	29,671	0	0	0	736	02/01/2044
125896-BA-7	CMS ENERGY CORPORATION CORPORATE		07/27/2015	AMHERST SECURITIES		103,454	95,000	109,131	102,474	0	(1,651)	0	(1,651)	0	100,823	0	2,631	2,631	6,447	07/17/2017
125896-BG-4	CMS ENERGY CORPORATION CORPORATE		06/22/2015	J.P. MORGAN		655,572	605,000	664,538	639,977	0	(5,216)	0	(5,216)	0	634,762	0	20,810	20,810	26,309	02/15/2018
138616-AB-3	CANTOR FITZGERALD LP CORPORATE		06/26/2015	MATURITY		475,000	475,000	473,395	474,808	0	192	0	192	0	475,000	0	0	0	15,141	06/26/2015
14309U-AA-0	CARLYLE HOLDINGS FINANCE LLC CORPORATE		07/27/2015	BARCLAYS CAPITAL		76,420	75,000	74,975	74,978	0	3	0	3	0	74,981	0	1,439	1,439	2,898	02/01/2023
172967-EM-9	CIT GROUP INC CORPORATE		07/29/2015	STIFEL NICOLAUS AND CO		328,647	300,000	336,113	319,200	0	(3,756)	0	(3,756)	0	315,444	0	13,203	13,203	12,863	11/21/2017
186108-CH-7	CLEVELAND ELECTRIC ILLUMINATING		08/11/2015	WELLS		1,198,180	1,000,000	1,272,900	1,150,308	0	(22,350)	0	(22,350)	0	1,127,958	0	70,222	70,222	66,316	11/15/2018
				CALLED SECURITY at																
191216-AM-2	COCA-COLA CO		03/30/2015	112.795		2,819,875	2,500,000	2,476,925	2,488,718	0	717	0	717	0	2,489,436	0	330,439	330,439	66,016	03/15/2019
200474-BH-6	COMM_15-LC19 CMBS		12/03/2015	MBS PAYDOWN		688	688	670	0	0	0	0	0	0	688	0	0	0	5	02/01/2048
20173Q-AE-1	COGFC 07-C9 CMBS		12/11/2015	MBS PAYDOWN		207,098	207,098	236,091	208,753	0	(1,655)	0	(1,655)	0	207,098	0	0	0	5,913	03/10/2039
20173N-AF-5	CMLTI CMBS		12/10/2015	MBS PAYDOWN		24,563	24,563	27,896	24,640	0	(77)	0	(77)	0	24,563	0	0	0	1,242	12/01/2049
22545L-AD-1	CSMC_06-C5 CMBS		12/17/2015	VARIOUS		28,632	28,632	31,048	28,796	0	(164)	0	(164)	0	28,632	0	0	0	1,102	12/15/2039
235851-AH-5	DANAHER CORPORATION CORPORATE		12/23/2015	WELLS FARGO		853,740	775,000	774,473	774,681	0	55	0	55	0	774,736	0	79,004	79,004	69,285	03/01/2019
				MITSUBISHI UFJ																
26441C-AD-7	DUKE ENERGY CORP CORPORATE		12/11/2015	SECURITIES (USA) INC		1,206,150	1,100,000	1,095,853	1,097,731	0	401	0	401	0	1,098,132	0	108,018	108,018	69,592	09/15/2019
304071-AA-1	FAIRFAX (US) INC CORPORATE		11/10/2015	BARCLAYS CAPITAL		385,905	400,000	396,104	396,199	0	264	0	264	0	396,463	0	(10,558)	(10,558)	24,408	08/13/2024
				MITSUBISHI UFJ																
320867-AB-0	FIRST MIDWEST CAPITAL TRUST CORPORATE		11/10/2015	SECURITIES (USA) INC		232,864	225,000	223,801	224,488	0	236	0	236	0	224,723	0	8,140	8,140	12,998	11/22/2016
337738-AH-1	FISERV INC CORPORATE		06/23/2015	WELLS		176,038	175,000	174,603	174,931	0	35	0	35	0	174,967	0	1,071	1,071	4,026	10/01/2015
345397-VW-0	FORD MOTOR CREDIT CORPORATE		01/15/2015	MATURITY		400,000	400,000	400,000	400,000	0	0	0	0	0	400,000	0	0	0	7,750	01/15/2015
345397-WA-7	FUEL TRUST CORPORATE		07/27/2015	J.P. MORGAN		1,329,640	1,300,000	1,300,000	1,300,000	0	0	0	0	0	1,300,000	0	29,640	29,640	32,370	12/15/2022
37247D-AP-1	GENWORTH FINANCIAL INC CORPORATE		03/20/2015	VARIOUS		534,473	525,000	540,750	537,091	0	(243)	0	(243)	0	536,848	0	(2,376)	(2,376)	20,010	09/24/2021
38141E-A2-5	GOLDMAN SACHS & CO CORPORATE		06/05/2015	GOLDMAN SACHS		4,283,093	3,650,000	4,597,585	4,299,950	0	(66,086)	0	(66,086)	0	4,233,864	0	49,228	49,228	224,323	02/15/2019
40428H-PV-8	HSBC BANK USA CORPORATE		10/07/2015	HSBC SECURITIES INC.		221,093	220,000	219,806	0	0	2	0	2	0	219,808	0	1,285	1,285	1,109	08/07/2020
42217K-AY-2	HEALTH CARE REIT INC CORPORATE		07/29/2015	WELLS		448,248	425,000	423,700	424,142	0	110	0	110	0	424,252	0	23,995	23,995	14,707	04/01/2019
428236-BQ-5	HEWLET-PACKARD COMPANY CORPORATE		08/11/2015	MORGAN STANLEY		177,072	170,000	169,687	169,765	0	22	0	22	0	169,787	0	7,285	7,285	6,797	09/15/2021
46625H-GN-4	JP MORGAN CHASE CORP		06/05/2015	MORGAN STANLEY		217,400	200,000	227,096	213,275	0	(2,280)	0	(2,280)	0	210,994	0	6,406	6,406	5,547	06/27/2017
46629P-AC-2	JPMCC_06-LDP9 CMBS		12/15/2015	MBS PAYDOWN		74,127	74,127	84,829	74,285	0	(158)	0	(158)	0	74,127	0	0	0	2,113	05/01/2047
46629Y-AC-3	JPMORGAN CHASE 07-C818 CMBS		12/14/2015	VARIOUS		61,558	61,558	70,291	61,960	0	(403)	0	(403)	0	61,558	0	0	0	2,637	06/01/2047
46632H-AG-6	JPMCC_07-LD12 CMBS		12/15/2015	MBS PAYDOWN		1,642	1,642	1,870	1,644	0	(2)	0	(2)	0	1,642	0	0	0	52	02/01/2051
494568-AF-8	KINDER MORGAN INC CORPORATE		11/06/2015	J.P. MORGAN		309,397	350,000	348,593	348,591	0	101	0	101	0	348,691	0	(39,295)	(39,295)	14,465	06/01/2025
50179K-AE-7	LB-UBS CMBS 2007-C1		12/22/2015	VARIOUS		7,260	7,260	8,048	7,347	0	(87)	0	(87)	0	7,260	0	0	0	192	02/11/2040
50180J-AD-7	LBUBS 07-C2 CMBS		12/17/2015	VARIOUS		1,526	1,526	1,662	1,540	0	(14)	0	(14)	0	1,526	0	0	0	43	02/15/2040
53217V-AB-5	LIFE TECHNOLOGIES CORP CORPORATE		03/01/2015	MATURITY		350,000	350,000	354,898	350,178	0	(178)	0	(178)	0	350,000	0	0	0	7,700	03/01/2015
55312V-AD-0	ML-CFC COML MTG TR 2006-4		12/14/2015	VARIOUS		129,614	129,614	147,771	131,245	0	(1,630)	0	(1,630)	0	129,614	0	0	0	3,557	12/12/2049
585055-BM-7	MEDTRONIC INC CORPORATE		06/03/2015	MERRILL LYNCH		477,760	475,000	470,450	470,463	0	133	0	133	0	470,596	0	7,163	7,163	8,220	03/15/2025
60687V-AF-2	MLCFC_06-3 CMBS		12/14/2015	VARIOUS		2,706	2,706	2,983	2,719	0	(13)	0	(13)	0	2,706	0	0	0	65	07/01/2046
617459-AD-4	MORGAN STANLEY CAP I 2011-C2		10/20/2015	MORGAN STANLEY		2,155,816	1,950,000	1,969,426	1,963,453	0	(1,518)	0	(1,518)	0	1,961,935	0	193,882	193,882	81,296	05/01/2021
61750H-AS-2	MSC-99 CMBS		12/15/2015	MBS PAYDOWN		41,220	41,220	45,384	41,334	0	(114)	0	(114)	0	41,220	0	0	0	1,518	12/01/2043
61756U-AE-1	MSC-99 CMBS		12/14/2015	MBS PAYDOWN		214,354	214,354	253,859	215,995	0	(1,640)	0	(1,640)	0	214,354	0	0	0	9,585	12/01/2049
627180-AA-3	MURRAY STREET INVESTMENT TRUST		07/30/2015	GOLDMAN SACHS		967,550	925,000	936,738	930,555	0	(1,460)	0	(1,460)	0	929,095	0	38,455	38,455	29,015	03/09/2017
				CALLED SECURITY at																
629400-AA-3	NSG HOLDING LLC CORPORATE		12/22/2015	100.000		2,191	2,191	2,191	2,191	0	0	0	0	0	2,191	0	0	0	100	12/15/2025
641423-BK-3	NEVADA POWER COMPANY CORPORATE		01/15/2015	MATURITY		10,000	10,000	10,000	10,000	0	0	0	0	0	10,000	0	0	0	294	01/15/2015
709599-AK-0	PENSKE TRUCK LEASING COMPANY LP		06/05/2015	WELLS		267,691	260,000	264,524	262,839	0	(376)	0	(376)	0	262,463	0	5,228	5,228	6,459	03/15/2018
				U.S. BANCORP																
709599-AL-8	PENSKE TRUCK LEASING COMPANY LP		07/27/2015	INVESTMENTS, INC		25,370	25,000	24,946	24,964	0	6	0	6	0	24,970	0	401	401	743	07/17/2018
747262-AH-6	QVC INC CORPORATE		11/04/2015	VARIOUS		142,964	140,000	140,000	140,000	0	0	0	0	0	140,000	0	2,964	2,964	5,817	07/02/2022
781172-AB-7	RUBY PIPELINE CORPORATE		11/13/2015	BARCLAYS CAPITAL		155,567	150,000	150,000	150,000	0	0	0	0	0	150,000	0	5,567	5,567	10,175	04/01/2022
				CALLED SECURITY at																
858119-AR-1	STEEL DYNAMICS INC CORPORATE		03/16/2015	100.000		100,000	100,000	102,250	101,353	0	(1,353)	0	(1,353)	0	100,000	0	0	0	3,834	03/15/2020
858271-AA-7	STEELRIVER TRANSMISSION COMPANY LL		04/23/2015	VARIOUS		899,853	863,145	863,145	863,145	0	0	0	0	0	863,145	0	36,708	36,708	13,081	06/30/2017
880451-AS-8	TENNESSEE GAS PIPELINE CORPORATE		12/09/2015	J.P. MORGAN		344,790	345,000	396,484	389,838	0	(2,533)	0	(2,533)	0	387,305	0	(42,515)	(42,515)	30,120	03/15/2027

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1	2		3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
											11	12	13	14	15						
CUSIP Identification	Description		For-eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ Decrease	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Contractual Maturity Date
90345K-AA-8	US AIRWAYS GROUP INC	CORPORATE		10/22/2015	CALLED SECURITY at 100.000		11,298	11,298	11,298	11,298	0	0	0	0	0	11,298	0	0	0	530	10/22/2024
91913Y-AQ-3	VALERO ENERGY CORP	CORPORATE		02/01/2015	MATURITY		150,000	150,000	150,165	149,991	0	9	0	9	0	150,000	0	0	0	3,375	02/01/2015
92890K-BF-1	VERBS_14-C22	CMBS		06/22/2015	WELLS		1,205,613	1,150,000	1,184,459	1,184,388	0	(142)	0	(142)	0	1,184,244	0	21,369	21,369	31,835	09/01/2057
92978P-AF-6	VMOMT_03	CMBS		12/17/2015	VARIOUS		17,978	17,978	19,801	18,008	0	(30)	0	(30)	0	17,978	0	0	0	696	11/01/2048
13643E-AG-0	CANADIAN OIL SANDS LTD	CORPORATE	A	09/29/2015	VARIOUS		285,175	340,000	337,351	337,944	0	203	0	203	0	338,147	0	(52,972)	(52,972)	15,343	04/01/2022
02364W-AV-7	AMERICA MOVIL SAB	CORPORATE	F	12/09/2015	CITIGROUP GLOBAL MARKETS INC		544,390	500,000	496,780	498,072	0	308	0	308	0	498,380	0	46,010	46,010	30,139	03/30/2020
055550-BH-0	BP AMOCO CAPITAL	CORPORATE	F	03/10/2015	MATURITY		2,500,000	2,500,000	2,497,225	2,499,679	0	321	0	321	0	2,500,000	0	0	0	48,438	03/10/2015
404280-AK-5	HSBC HOLDINGS PLC	CORPORATE	F	12/09/2015	J.P. MORGAN		588,609	525,000	523,661	524,179	0	105	0	105	0	524,284	0	64,524	64,524	31,907	04/05/2021
44328M-AB-0	HSBC BANK PLC USA	CORPORATE	F	06/28/2015	MATURITY		600,000	600,000	599,508	599,945	0	55	0	55	0	600,000	0	0	0	10,500	06/28/2015
45326Y-AA-5	INCITEC PIVOT LTD	CORPORATE	F	08/11/2015	BARCLAYS CAPITAL		403,000	400,000	396,800	399,357	0	400	0	400	0	399,757	0	3,243	3,243	10,978	12/07/2015
78478Y-AA-2	STRIP_12	CMBS	R	11/25/2015	VARIOUS		1,177,705	1,177,706	1,163,955	1,172,149	0	5,556	0	5,556	0	1,177,705	0	0	0	8,138	12/25/2044
85235X-AC-9	STADSHYPOTEK AB	CORPORATE	F	08/24/2015	RBS GREENWICH CAPITAL MARKETS INC		561,680	500,000	557,692	558,396	0	211	0	211	0	558,615	0	3,067	3,067	9,474	10/02/2019
893830-BL-6	TRANSOCEAN INC	CORPORATE	F	05/29/2015	VARIOUS		129,647	125,000	124,883	124,949	0	11	0	11	0	124,959	0	4,690	4,690	2,946	12/15/2016
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)							32,501,117	30,590,333	32,139,636	31,323,777	0	(105,631)	0	(105,631)	0	31,438,643	0	1,062,473	1,062,473	1,168,493	XXX
8399997. Total - Bonds - Part 4							71,431,012	68,522,726	71,016,435	69,153,604	0	(221,282)	0	(221,282)	0	69,815,560	0	1,615,451	1,615,451	1,882,163	XXX
8399998. Total - Bonds - Part 5							4,986,934	4,871,832	4,949,316	0	0	(2,470)	0	(2,470)	0	4,946,846	0	40,088	40,088	46,231	XXX
8399999. Total - Bonds							76,417,946	73,394,558	75,965,751	69,153,604	0	(223,752)	0	(223,752)	0	74,762,406	0	1,655,539	1,655,539	1,928,394	XXX
8999997. Total - Preferred Stocks - Part 4							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8999998. Total - Preferred Stocks - Part 5							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8999999. Total - Preferred Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799997. Total - Common Stocks - Part 4							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799998. Total - Common Stocks - Part 5							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799999. Total - Common Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9899999. Total - Preferred and Common Stocks							0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9999999 - Totals							76,417,946	XXX	75,965,751	69,153,604	0	(223,752)	0	(223,752)	0	74,762,406	0	1,655,539	1,655,539	1,928,394	XXX

SCHEDULE D - PART 5

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

1	2		3	4	5	6	7	8	9	10	11	Change in Book/Adjusted Carrying Value					17	18	19	20	21
												12	13	14	15	16					
CUSIP Identification	Description		For-eign	Date Acquired	Name of Vendor	Disposal Date	Name of Purchaser	Par Value (Bonds) or Number of Shares (Stock)	Actual Cost	Consid-eration	Book/ Adjusted Carrying Value at Disposal	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amort-ization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Valu (12 + 13 - 14)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Interest and Dividends Received During Year	Paid for Accrued Interest and Dividends
3138EH-Y9-4	FED NTL MTG ASSO	FNMA		07/30/2015	GOLDMAN SACHS	10/07/2015	VARIOUS	822,625	831,237	886,680	879,848	0	(1,390)	0	(1,390)	0	0	6,832	6,832	6,623	1,097
31418A-YS-4	FED NTL MTG ASSO	FNMA		07/30/2015	J.P. MORGAN	09/30/2015	VARIOUS	809,207	812,621	821,084	812,591	0	(29)	0	(29)	0	0	8,493	8,493	2,894	809
3199999. Subtotal - Bonds - U.S. Special Revenues								1,631,832	1,693,858	1,707,764	1,692,439	0	(1,419)	0	(1,419)	0	0	15,325	15,325	9,517	1,906
023135-AW-8	AMAZON.COM INC	CORPORATE		06/03/2015	MORGAN STANLEY	10/20/2015	VARIOUS	850,000	866,082	883,796	865,194	0	(888)	0	(888)	0	0	18,602	18,602	10,753	234
12189L-AY-7	BURLINGTON NORTH	CORPORATE		08/14/2015	VARIOUS	11/04/2015	BNP PARIBAS	220,000	219,356	224,365	219,357	0	1	0	1	0	0	5,008	5,008	1,573	0
235851-AQ-5	DANAHER CORPORATION	CORPORATE		09/10/2015	SALOMON SMITH BARNEY	11/20/2015	ROBERT BAIRD	45,000	44,936	45,667	44,935	0	0	0	0	0	0	732	732	293	0
437076-BG-6	HOME DEPOT INC	CORPORATE		05/28/2015	J.P. MORGAN	10/23/2015	DEUTSCHE BANK	210,000	209,227	211,970	209,265	0	38	0	38	0	0	2,704	2,704	2,236	0
46625H-MH-7	JP MORGAN CHASE	CORPORATE		07/14/2015	JP MORGAN CHASE BANK	07/29/2015	BNP PARIBAS	250,000	249,060	253,033	249,060	0	0	0	0	0	0	3,973	3,973	325	0
585055-BG-0	MEDTRONIC INC	CORPORATE		06/03/2015	MORGAN STANLEY	11/20/2015	MORGAN STANLEY	475,000	478,297	480,657	477,691	0	(306)	0	(306)	0	0	2,666	2,666	8,247	2,738
61761J-B3-2	MORGAN STANLEY GROUP	CORPORATE		06/11/2015	MORGAN STANLEY	11/20/2015	MORGAN STANLEY	905,000	903,914	914,553	903,978	0	64	0	64	0	0	10,575	10,575	9,812	0
928668-AV-4	VOLKSWAGEN OF AMERICA	CORPORATE		05/19/2015	GOLDMAN SACHS	11/20/2015	BARCLAYS CAPITAL	285,000	284,586	265,129	284,627	0	39	0	39	0	0	(19,497)	(19,497)	3,475	0
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)								3,240,000	3,255,458	3,279,170	3,254,407	0	(1,051)	0	(1,051)	0	0	24,763	24,763	36,714	2,972
8399998. Total - Bonds								4,871,832	4,949,316	4,986,934	4,946,846	0	(2,470)	0	(2,470)	0	0	40,088	40,088	46,231	4,878
8999998. Total - Preferred Stocks									0	0	0	0	0	0	0	0	0	0	0	0	0
9799998. Total - Common Stocks									0	0	0	0	0	0	0	0	0	0	0	0	0
9899999. Total - Preferred and Common Stocks									0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 - Totals									4,949,316	4,986,934	4,946,846	0	(2,470)	0	(2,470)	0	0	40,088	40,088	46,231	4,878

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

NONE

Schedule D - Part 6 - Section 2

NONE

SCHEDULE DA - PART 1

Showing All SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1	2	Codes		5	6	7	8	Change in Book/Adjusted Carrying Value				13	14	Interest						21
		3	4					9	10	11	12			15	16	17	18	19	20	
CUSIP Identi-fication	Description	Code	For-eign	Date Acquired	Name of Vendor	Maturity Date	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Par Value	Actual Cost	Amount Due and Accrued Dec. 31 of Current Year on Bonds not in Default	Non-Admitted Due and Accrued	Rate of	Effective Rate of	When Paid	Amount Received During Year	Paid for Accrued Interest
0599999. Total - U.S. Government Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
1099999. Total - All Other Government Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
1799999. Total - U.S. States, Territories and Possessions Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
2499999. Total - U.S. Political Subdivisions Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
3199999. Total - U.S. Special Revenues Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
4899999. Total - Hybrid Securities							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
5599999. Total - Parent, Subsidiaries and Affiliates Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7799999. Total - Issuer Obligations							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7899999. Total - Residential Mortgage-Backed Securities							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
7999999. Total - Commercial Mortgage-Backed Securities							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
8099999. Total - Other Loan-Backed and Structured Securities							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
8399999. Total Bonds							0	0	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0
8699999. Total - Parent, Subsidiaries and Affiliates							0	0	0	0	0	XXX	0	0	0	XXX	XXX	XXX	0	0
CITI00-00-8	CITIBANK O/N SWEEP M/F			12/31/2015	CITIBANK	XXX	2,883,575	0	0	0	0	0	2,883,575	0	0	0.000	0.000	MON	918	0
113088-LH-8	RAM TAX FREE FUND			12/31/2015	VARIOUS	XXX	387,867	0	0	0	0	0	387,867	0	0	0.000	0.000	MON	21	0
8999999. Subtotal - Class One Money Market Mutual Funds							3,271,442	0	0	0	0	XXX	3,271,442	0	0	XXX	XXX	XXX	939	0
9199999 - Totals							3,271,442	0	0	0	0	XXX	3,271,442	0	0	XXX	XXX	XXX	939	0

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

NONE

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open

NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

NONE

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

SCHEDULE E - PART 1 - CASH

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Year	5 Amount of Interest Accrued December 31 of Current Year	6 Balance	7 *
CITIBANK ..... San Juan, Puerto Rico		0.000	0	0	(6,219,554)	XXX
ORIENTAL ..... San Juan, Puerto Rico		0.000	0	0	632,628	XXX
CITIBANK ..... San Juan, Puerto Rico		0.000	0	0	227,444	XXX
CITIBANK ..... San Juan, Puerto Rico		0.000	0	0	10,357	XXX
CITIBANK ..... San Juan, Puerto Rico		0.000	0	0	10,440,097	XXX
CITIBANK ..... San Juan, Puerto Rico		0.000	0	0	(606,792)	XXX
0199998 Deposits in ... 0 depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	XXX	XXX	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	4,484,180	XXX
0299998 Deposits in ... 0 depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	XXX	XXX	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	4,484,180	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	1,500	XXX
0599999 Total - Cash	XXX	XXX	0	0	4,485,680	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January	(1,146,541)	4. April	3,461,547	7. July	2,603,862	10. October	7,609,238
2. February	2,137,548	5. May	5,698,666	8. August	4,826,958	11. November	12,256,498
3. March	2,683,154	6. June	17,988,472	9. September	11,823,017	12. December	4,485,680

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due and Accrued	8 Amount Received During Year
NONE							
8699999 - Total Cash Equivalents							

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1 Type of Deposit	2 Purpose of Deposit	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
			3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama AL			0	0	0	0
2. Alaska AK			0	0	0	0
3. Arizona AZ			0	0	0	0
4. Arkansas AR			0	0	0	0
5. California CA			0	0	0	0
6. Colorado CO			0	0	0	0
7. Connecticut CT			0	0	0	0
8. Delaware DE			0	0	0	0
9. District of Columbia DC			0	0	0	0
10. Florida FL			0	0	0	0
11. Georgia GA			0	0	0	0
12. Hawaii HI			0	0	0	0
13. Idaho ID			0	0	0	0
14. Illinois IL			0	0	0	0
15. Indiana IN			0	0	0	0
16. Iowa IA			0	0	0	0
17. Kansas KS			0	0	0	0
18. Kentucky KY			0	0	0	0
19. Louisiana LA			0	0	0	0
20. Maine ME			0	0	0	0
21. Maryland MD			0	0	0	0
22. Massachusetts MA			0	0	0	0
23. Michigan MI			0	0	0	0
24. Minnesota MN			0	0	0	0
25. Mississippi MS			0	0	0	0
26. Missouri MO			0	0	0	0
27. Montana MT			0	0	0	0
28. Nebraska NE			0	0	0	0
29. Nevada NV			0	0	0	0
30. New Hampshire NH			0	0	0	0
31. New Jersey NJ			0	0	0	0
32. New Mexico NM			0	0	0	0
33. New York NY			0	0	0	0
34. North Carolina NC			0	0	0	0
35. North Dakota ND			0	0	0	0
36. Ohio OH			0	0	0	0
37. Oklahoma OK			0	0	0	0
38. Oregon OR			0	0	0	0
39. Pennsylvania PA			0	0	0	0
40. Rhode Island RI			0	0	0	0
41. South Carolina SC			0	0	0	0
42. South Dakota SD			0	0	0	0
43. Tennessee TN			0	0	0	0
44. Texas TX			0	0	0	0
45. Utah UT			0	0	0	0
46. Vermont VT			0	0	0	0
47. Virginia VA			0	0	0	0
48. Washington WA			0	0	0	0
49. West Virginia WV			0	0	0	0
50. Wisconsin WI			0	0	0	0
51. Wyoming WY			0	0	0	0
52. American Samoa AS			0	0	0	0
53. Guam GU			0	0	0	0
54. Puerto Rico PR	B	001	21,744,147	21,522,170	0	0
55. U.S. Virgin Islands VI			0	0	0	0
56. Northern Mariana Islands MP			0	0	0	0
57. Canada CAN			0	0	0	0
58. Aggregate Alien and Other OT	XXX	XXX	0	0	0	0
59. Subtotal	XXX	XXX	21,744,147	21,522,170	0	0
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX	0	0	0	0
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

United States Policy Forms Direct Business Only
For The Year Ended December 31, 2015
(To Be Filed By April 1)

NAIC Group Code 0119 NAIC Company Code 95721

	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1	5 Number of Policies or Certificates as of Dec. 31	6 Number of Covered Lives as of Dec. 31	7 Member Months
A. INDIVIDUAL BUSINESS							
1. Comprehensive Major Medical							
1.1 With Contract Reserves	1,051,124	2,833,872	0	269.6	631	783	5,472
1.2 Without Contract Reserves	0	0	0	0.0	0	0	0
1.3 Subtotal	1,051,124	2,833,872	0	269.6	631	783	5,472
2. Short-Term Medical							
2.1 With Contract Reserves	0	0	0	0.0	0	0	0
2.2 Without Contract Reserves	0	0	0	0.0	0	0	0
2.3 Subtotal	0	0	0	0.0	0	0	0
3. Other Medical (Non-Comprehensive)							
3.1 With Contract Reserves	0	0	0	0.0	0	0	0
3.2 Without Contract Reserves	0	0	0	0.0	0	0	0
3.3 Subtotal	0	0	0	0.0	0	0	0
4. Specified/Named Disease							
4.1 With Contract Reserves	0	0	0	0.0	0	0	0
4.2 Without Contract Reserves	0	0	0	0.0	0	0	0
4.3 Subtotal	0	0	0	0.0	0	0	0
5. Limited Benefit							
5.1 With Contract Reserves	0	0	0	0.0	0	0	0
5.2 Without Contract Reserves	0	0	0	0.0	0	0	0
5.3 Subtotal	0	0	0	0.0	0	0	0
6. Student							
6.1 With Contract Reserves	0	0	0	0.0	0	0	0
6.2 Without Contract Reserves	0	0	0	0.0	0	0	0
6.3 Subtotal	0	0	0	0.0	0	0	0
7. Accident Only or AD&D							
7.1 With Contract Reserves	0	0	0	0.0	0	0	0
7.2 Without Contract Reserves	0	0	0	0.0	0	0	0
7.3 Subtotal	0	0	0	0.0	0	0	0
8. Disability Income - Short - Term							
8.1 With Contract Reserves	0	0	0	0.0	0	0	0
8.2 Without Contract Reserves	0	0	0	0.0	0	0	0
8.3 Subtotal	0	0	0	0.0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1	5 Number of Policies or Certificates as of Dec. 31	6 Number of Covered Lives as of Dec. 31	7 Member Months
A. INDIVIDUAL BUSINESS (Continued)							
9. Disability Income - Long - Term							
9.1 With Contract Reserves	0	0	0	0.0	0	0	0
9.2 Without Contract Reserves	0	0	0	0.0	0	0	0
9.3 Subtotal	0	0	0	0.0	0	0	0
10. Long-Term Care							
10.1 With Contract Reserves	0	0	0	0.0	0	0	0
10.2 Without Contract Reserves	0	0	0	0.0	0	0	0
10.3 Subtotal	0	0	0	0.0	0	0	0
11. Medicare Supplement (Medigap)							
11.1 With Contract Reserves	0	0	0	0.0	0	0	0
11.2 Without Contract Reserves	0	0	0	0.0	0	0	0
11.3 Subtotal	0	0	0	0.0	0	0	0
12. Dental							
12.1 With Contract Reserves	0	0	0	0.0	0	0	0
12.2 Without Contract Reserves	0	0	0	0.0	0	0	0
12.3 Subtotal	0	0	0	0.0	0	0	0
13. State Children's Health Insurance Program							
13.1 With Contract Reserves	0	0	0	0.0	0	0	0
13.2 Without Contract Reserves	0	0	0	0.0	0	0	0
13.3 Subtotal	0	0	0	0.0	0	0	0
14. Medicare							
14.1 With Contract Reserves	0	0	0	0.0	0	0	0
14.2 Without Contract Reserves	367,050,484	327,602,062	0	89.3	43,072	43,072	548,886
14.3 Subtotal	367,050,484	327,602,062	0	89.3	43,072	43,072	548,886
15. Medicaid							
15.1 With Contract Reserves	0	0	0	0.0	0	0	0
15.2 Without Contract Reserves	(3,055,069)	(3,888,289)	0	127.3	0	0	(19)
15.3 Subtotal	(3,055,069)	(3,888,289)	0	127.3	0	0	(19)
16. Medicare Part D - Stand-Alone							
16.1 With Contract Reserves	0	0	0	0.0	0	0	0
16.2 Without Contract Reserves	0	0	0	0.0	0	0	0
16.3 Subtotal	0	0	0	0.0	0	0	0
17. Other Individual Business							
17.1 With Contract Reserves	0	0	0	0.0	0	0	0
17.2 Without Contract Reserves	0	0	0	0.0	0	0	0
17.3 Subtotal	0	0	0	0.0	0	0	0
18. Total Individual Business							
18.1 With Contract Reserves	1,051,124	2,833,872	0	269.6	631	783	5,472
18.2 Without Contract Reserves	363,995,415	323,713,773	0	88.9	43,072	43,072	548,867
19. Grand Total Individual	365,046,539	326,547,645	0	89.5	43,703	43,855	554,339

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1	5 Number of Policies or Certificates as of Dec. 31	6 Number of Covered Lives as of Dec. 31	7 Member Months
B. GROUP BUSINESS							
Comprehensive Major Medical							
1. Single Employer							
1.1 Small Employer	0	0	0	0.0	0	0	0
1.2 Other Employer	10,442,265	2,481,985	2,000	23.8	123	3,874	47,329
1.3 Single Employer Subtotal	10,442,265	2,481,985	2,000	23.8	123	3,874	47,329
2. Multiple Employer Assns and Trusts	0	0	0	0.0	0	0	0
3. Other Associations and Discretionary Trusts	0	0	0	0.0	0	0	0
4. Other Comprehensive Major Medical	0	0	0	0.0	0	0	0
5. Comprehensive/Major Medical Subtotal	10,442,265	2,481,985	2,000	23.8	123	3,874	47,329
Other Medical (Non-Comprehensive)							
6. Specified/Named Disease	0	0	0	0.0	0	0	0
7. Limited Benefit	0	0	0	0.0	0	0	0
8. Student	0	0	0	0.0	0	0	0
9. Accident Only or AD&D	0	0	0	0.0	0	0	0
10. Disability Income - Short-term	0	0	0	0.0	0	0	0
11. Disability Income - Long-term	0	0	0	0.0	0	0	0
12. Long-Term Care	0	0	0	0.0	0	0	0
13. Medicare Supplement (Medigap)	0	0	0	0.0	0	0	0
14. Federal Employees Health Benefits Plans	18,627,069	18,751,694	0	100.7	4,135	6,733	78,414
15. Tricare	0	0	0	0.0	0	0	0
16. Dental	0	0	0	0.0	0	0	0
17. Medicare	23,701,106	20,578,731	0	86.8	3,730	3,730	43,490
18. Medicare Part D - Stand-Alone	0	0	0	0.0	0	0	0
19. Other Group Care	0	0	0	0.0	0	0	0
20. Grand Total Group Business	52,770,440	41,812,410	2,000	79.2	7,988	14,337	169,233
C. OTHER BUSINESS							
1. Credit (Individual and Group)	0	0	0	0.0	0	0	0
2. Stop Loss/Excess Loss	0	0	0	0.0	0	0	0
3. Administrative Services Only	XXX	XXX	XXX	XXX	0	0	0
4. Administrative Services Contracts	XXX	XXX	XXX	XXX	0	0	0
5. Grand Total Other Business	0	0	0	0.0	0	0	0
D. TOTAL BUSINESS							
1. Total Non U.S. Policy Forms	0	0	0	0.0	0	0	0
2. Grand Total Individual, Group and Other Business	417,816,979	368,360,055	2,000	88.2	51,691	58,192	723,572

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

PART 1 – INDIVIDUAL POLICIES
SUMMARY

Description	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1
1. U.S. Forms Direct Business	365,046,539	326,547,645	0	89.5
2. Other Forms Direct Business	0	0	0	0.0
3. Total Direct Business	365,046,539	326,547,645	0	89.5
4. Reinsurance Assumed	0	0	0	0.0
5. Less Reinsurance Ceded	3,193	0	0	0.0
6. Total	365,043,346	326,547,645	0	89.5

PART 2 – GROUP POLICIES
SUMMARY

Description	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1
1. U.S. Forms Direct Business	52,770,440	41,812,410	2,000	79.2
2. Other Forms Direct Business	0	0	0	0.0
3. Total Direct Business	52,770,440	41,812,410	2,000	79.2
4. Reinsurance Assumed	0	0	0	0.0
5. Less Reinsurance Ceded	74,658	0	0	0.0
6. Total	52,695,782	41,812,410	2,000	79.4

PART 3 – CREDIT POLICIES (Individual and Group)
SUMMARY

Description	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1
1. U.S. Forms Direct Business				
2. Other Forms Direct Business				
3. Total Direct Business				
4. Reinsurance Assumed				
5. Less Reinsurance Ceded				
6. Total				

NONE

PART 4 – ALL INDIVIDUAL, GROUP AND CREDIT POLICIES
SUMMARY

Description	1 Premiums Earned	2 Incurred Claims Amount	3 Change in Contract Reserves	4 Loss Ratio (2+3)/1
1. U.S. Forms Direct Business	417,816,979	368,360,055	2,000	88.2
2. Other Forms Direct Business	0	0	0	0.0
3. Total Direct Business	417,816,979	368,360,055	2,000	88.2
4. Reinsurance Assumed	0	0	0	0.0
5. Less Reinsurance Ceded	77,851	0	0	0.0
6. Total	417,739,128	368,360,055	2,000	88.2

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes - See Cautionary Statement at http://www.naic.org/committees_e_app_blanks.htm)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2015 NAIC Company Code 95721

	Business Subject to MLR														
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9	10	11	12	13	14	15
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14
1. Premium:															
1.1 Health premiums earned (From Part 2, Line 1.11)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923	XXX	417,193,923
1.2 Federal high risk pools	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923	XXX	417,193,923
1.5 Federal taxes and federal assessments	20,355	0	606,929	0	0	0	0	0	0	(51,049)	268	7,633,845	8,210,367	0	8,210,367
1.6 State insurance, premium and other taxes (Similar local taxes of $ 8,893)	8,893	0	249,043	0	0	0	0	0	0	29	18	115,417	373,400	0	373,400
1.6a Community Benefit Expenditures (informational only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.7 Regulatory authority licenses and fees	1,195	0	31,561	0	0	0	0	0	0	77	73	273,187	306,093	0	306,093
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	1,020,681	0	27,685,098	0	0	0	0	0	0	(3,004,126)	(378)	382,602,788	408,304,063	XXX	408,304,063
1.9 Net Assumed less Ceded reinsurance premiums earned	(3,193)	0	(74,658)	0	0	0	0	0	0	0	0	0	(77,851)	XXX	(77,851)
1.10 Other Adjustments due to MLR calculations - Premiums	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.11 Risk Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	1,017,488	0	27,610,440	0	0	0	0	0	0	(3,004,126)	(378)	382,602,788	408,226,212	XXX	408,226,212
2. Claims:															
2.1 Incurred claims excluding prescription drugs	2,533,846	0	13,474,472	0	0	0	0	0	0	(3,888,289)	0	271,298,595	283,418,624	XXX	283,418,624
2.2 Prescription drugs	335,338	0	7,897,409	0	0	0	0	0	0	0	0	91,261,891	99,494,638	XXX	99,494,638
2.3 Pharmaceutical rebates	35,312	0	632,907	0	0	0	0	0	0	0	0	14,506,045	15,174,264	XXX	15,174,264
2.4 State stop loss, market stabilization and claim/census based assessments (informational only)	(8)	0	(244)	0	0	0	0	0	0	0	0	(3,406)	(3,658)	XXX	(3,658)
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 3) (From Part 2, Line 2.15)	2,833,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,064,440	367,738,998	XXX	367,738,998
5.1 Net Assumed less Ceded reinsurance claims incurred	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
5.2 Other Adjustments due to MLR calculations - Claims	205,000	0	113,445	0	0	0	0	0	0	0	0	0	318,445	XXX	318,445
5.3 Rebates paid	0	0	226,617	0	0	0	0	0	0	XXX	XXX	0	226,617	XXX	226,617
5.4 Estimated rebates unpaid prior year	0	0	743,462	0	0	0	0	0	0	XXX	XXX	0	743,462	XXX	743,462
5.5 Estimated rebates unpaid current year	0	0	403,401	0	0	0	0	0	0	XXX	XXX	0	403,400	XXX	403,400
5.6 Fee for service and co-pay revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	3,038,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,064,440	367,943,998	XXX	367,943,998
6. Improving Health Care Quality Expenses Incurred:															
6.1 Improve health outcomes	5,074	0	169,982	0	0	0	0	0	0	(155)	0	2,560,090	2,734,991	0	2,734,991
6.2 Activities to prevent hospital readmissions	1,691	0	59,289	0	0	0	0	0	0	24	0	1,159,109	1,220,113	0	1,220,113
6.3 Improve patient safety and reduce medical errors	2,446	0	80,278	0	0	0	0	0	0	(8)	0	1,639,576	1,722,293	0	1,722,293
6.4 Wellness and health promotion activities	2,855	0	97,691	0	0	0	0	0	0	(93)	0	1,749,854	1,850,308	0	1,850,308
6.5 Health Information Technology expenses related to health improvement	0	0	527	0	0	0	0	0	0	0	0	2,751	3,278	0	3,278
6.6 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1+6.2+6.3+6.4+6.5)	12,066	0	407,768	0	0	0	0	0	0	(232)	0	7,111,380	7,530,982	0	7,530,982
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.6 - Footnote 2.0)/Line 1.8	2.788	0.000	0.764	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	0.928	XXX	XXX	XXX
8. Claims Adjustment Expenses:															
8.1 Cost containment expenses not included in quality of care expenses in Line 6.6	4,552	0	147,398	0	0	0	0	0	0	(1,316)	165	2,274,142	2,424,940	0	2,424,940
8.2 All other claims adjustment expenses	5,758	0	85,546	0	0	0	0	0	0	(277)	0	1,467,805	1,558,831	0	1,558,831
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	10,309	0	232,944	0	0	0	0	0	0	(1,593)	165	3,741,946	3,983,772	0	3,983,772
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)	0.010	0.000	0.008	0.000	0.000	0.000	0.000	0.000	0.000	0.001	(0.436)	0.010	XXX	XXX	XXX

216-1.PR

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1 (Continued)

	Business Subject to MLR								9	10	11	12	13	14	15
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans								
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14
10. General and Administrative (G&A) Expenses:															
10.1 Direct sales salaries and benefits	7,628	0	316,843	0	0	0	0	0	0	(28)	4,198	6,897,599	7,226,631	0	7,226,631
10.2 Agents and brokers fees and commissions	967	0	35,825	0	0	0	0	0	0	95	99	889,599	926,585	0	926,585
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	4	0	161	0	0	0	0	0	0	(1)	0	21,797	21,961	0	21,961
10.4 Other general and administrative expenses	65,549	0	2,750,863	0	0	0	0	0	0	12,692	5,450	20,668,598	23,503,152	0	23,503,152
10.4a Community Benefit Expenditures (informational only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)	74,148	0	3,103,692	0	0	0	0	0	0	12,757	9,747	28,477,994	31,678,328	0	31,678,328
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5)	(2,117,907)	0	3,127,061	0	0	0	0	0	0	873,231	(10,291)	(4,782,963)	(2,910,868)	XXX	(2,910,868)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,086,666	XXX	11,086,666
14. Federal income taxes (excluding taxes on Line 1.5 above)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	476,905	XXX	476,905
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,698,894	XXX	7,698,894
16. ICD-10 Implementation Expenses (informational only; already included in general expenses and line 6.5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16a. ICD-10 Implementation Expenses (informational only; already included in line 6.5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER INDICATORS:															
1. Number of certificates/policies	691	0	4,258	0	0	0	0	0	0	0	0	46,802	51,691	0	51,691
2. Number of Covered Lives	783	0	10,607	0	0	0	0	0	0	0	0	46,802	58,192	0	58,192
3. Number of Groups	XXX	(66)	103	XXX	0	0	0	0	0	0	0	4	21	0	21
4. Member Months	5,472	0	125,743	0	0	0	0	0	0	(19)	0	592,376	723,572	0	723,572

Is run off business reported in Columns 1 through 9 or 12? Yes [ ] No [X] If yes, show the amount of premiums and claims included. Premiums $ 0 Claims $ 0

AFFORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES and PAYABLES				
	Current Year		Prior Year	
	Comprehensive Health Coverage		Comprehensive Health Coverage	
	1 Individual Plans	2 Small Group Employer Plans	3 Individual Plans	4 Small Group Employer Plans
ACA Receivables and Payables				
1. Permanent ACA Risk Adjustment Program				
1.0 Premium adjustments receivable/(payable)	0	0	0	0
2. Transitional ACA Reinsurance Program				
2.0 Total amounts recoverable for claims (paid & unpaid)	0	XXX	0	XXX
3. Temporary ACA Risk Corridors Program				
3.1 Accrued retrospective premium	0	0	0	0
3.2 Reserve for rate credits or policy experience refunds	0	0	0	0
ACA Receipts and Payments				
4. Permanent ACA Risk Adjustment Program				
4.0 Premium adjustments receipts/(payments)	0	0	0	0
5. Transitional ACA Reinsurance Program				
5.0 Amounts received for claims	0	XXX	0	XXX
6. Temporary ACA Risk Corridors Program				
6.1 Retrospective premium received	0	0	0	0
6.2 Rate credits or policy experience refunds paid	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2015 NAIC Company Code 95721

	Business Subject to MLR												
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans:		9	10	11	12	13
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Total (a)
1. Health Premiums Earned:													
1.1 Direct premiums written	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923
1.2 Unearned premium prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Unearned premium current year	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Change in unearned premium (Lines 1.2 - 1.3)	0	0	0	0	0	0	0	0	0	0	0	0	0
1.5 Paid rate credits	0	0	226,617	0	0	0	0	0	0	0	0	(13,523)	213,094
1.6 Reserve for rate credits current year	0	0	724,981	0	0	0	0	0	0	0	0	(165,802)	559,179
1.7 Reserve for rate credits prior year	0	0	1,448,299	0	0	0	0	0	0	0	0	(52,971)	1,395,328
1.8 Change in reserve for rate credits (Lines 1.6 - 1.7)	0	0	(723,319)	0	0	0	0	0	0	0	0	(112,831)	(836,150)
1.9 Premium balances written off	0	0	0	0	0	0	0	0	0	0	0	0	0
1.10 Group conversion charge	0	0	0	0	0	0	0	0	0	0	0	0	0
1.11 Total direct premiums earned (Lines 1.1 + 1.4 - 1.9 + 1.10)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923
1.12 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
1.13 Net Assumed less Ceded premiums earned from affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
1.14 Ceded premiums earned to non-affiliates	3,193	0	74,658	0	0	0	0	0	0	0	0	0	77,851
1.15 Other Adjustments due to MLR calculation - Premiums	0	0	0	0	0	0	0	0	0	0	0	0	0
1.16 Net premiums earned (Lines 1.11 - 1.5 - 1.8 + 1.12 + 1.13 - 1.14 + 1.15)	1,047,931	0	28,994,676	0	0	0	0	0	0	(3,055,069)	0	390,751,590	417,739,128
2. Direct Claims Incurred:													
2.1 Paid claims during the year	2,952,964	9,993	21,163,974	0	0	0	0	0	0	5,203,174	0	358,190,561	387,460,666
2.2 Direct claim liability current year	193,886	105,983	1,924,741	0	0	0	0	0	0	354,640	0	40,742,514	43,321,763
2.3 Direct claim liability prior year	58,160	115,754	1,957,047	0	0	0	0	0	0	7,780,943	0	49,687,650	59,599,553
2.4 Direct claim reserves current year	(217,556)	0	237,556	0	0	0	0	0	0	0	0	0	20,000
2.5 Direct claim reserves prior year	1,000	0	17,000	0	0	0	0	0	0	1,666,321	0	0	1,684,321
2.6 Direct contract reserves current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.7 Direct contract reserves prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.8 Paid rate credits	0	0	226,617	0	0	0	0	0	0	0	0	(13,523)	213,094
2.9 Reserve for rate credits current year	0	0	724,981	0	0	0	0	0	0	0	0	(165,802)	559,179
2.10 Reserve for rate credits prior year	0	0	1,448,299	0	0	0	0	0	0	0	0	(52,971)	1,395,328
2.11 Incurred medical incentive pools and bonuses (Lines 2.11a + 2.11b - 2.11c)	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11a Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11b Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11c Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.12 Net healthcare receivables (Lines 2.12a - 2.12b)	36,262	223	56,546	0	0	0	0	0	0	(1,161)	0	1,064,631	1,156,501
2.12a Healthcare receivables current year	70,558	8,135	65,453	0	0	0	0	0	0	0	0	3,720,315	3,864,460
2.12b Healthcare receivables prior year	34,296	7,912	8,907	0	0	0	0	0	0	1,161	0	2,655,684	2,707,959
2.13 Group conversion charge	0	0	0	0	0	0	0	0	0	0	0	0	0
2.14 Multi-option coverage blended rate adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
2.15 Total incurred claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 + 2.9 - 2.10 + 2.11 - 2.12 + 2.13 + 2.14)	2,833,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,054,440	367,738,998
2.16 Assumed incurred claims from non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.17 Net assumed less ceded incurred claims from affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.18 Ceded incurred claims to non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.19 Other adjustments due to MLR calculation - Claims	205,000	0	0	0	0	0	0	0	0	0	0	0	205,000
2.20 Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19)	3,038,872	0	21,235,677	0	0	0	0	0	0	(3,888,289)	0	348,180,794	368,567,054
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0	0	0	0	0	1,122,532	1,122,532

(a) Column 13, Line 1.1 includes direct written premium of $ 0 for stand-alone dental and $ 0 for stand-alone vision policies.

216-3.PR

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Puerto Rico DURING THE YEAR 2015 NAIC Company Code 95721

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
1.	Individual Comprehensive Coverage Expenses:										
	1.1 Salaries (including $ 5,577 for affiliated services)	2,648	882	1,276	1,488	0	6,292	2,386	3,414	43,677	55,769
	1.2 Outsourced Services	854	292	375	493	0	2,014	609	541	11,681	14,845
	1.3 EDP Equipment and Software (incl $ 509 for affiliated services)	302	105	123	178	0	707	151	122	4,105	5,086
	1.4 Other Equipment (excl. EDP) (incl $ 25 for affiliated services)	15	5	6	9	0	36	7	5	204	253
	1.5 Accreditation and Certification (incl $ 1 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	5	5
	1.6 Other Expenses (incl $ 2,056 for affiliated services)	1,257	407	666	687	0	3,017	1,397	1,674	14,472	20,561
	1.7 Subtotal before Reimbursements and Taxes (Lines 1.1 to 1.6)	5,074	1,691	2,446	2,855	0	12,066	4,552	5,758	74,144	96,519
	1.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4
	1.10 Total (1.7 to 1.9)	5,074	1,691	2,446	2,855	0	12,066	4,552	5,758	74,148	96,523
	1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	705	0	0	705
2.	Small Group Comprehensive Coverage Expenses:										
	2.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	2.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	2.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.7 Subtotal before Reimbursements and Taxes (Lines 2.1 to 2.6)	0	0	0	0	0	0	0	0	0	0
	2.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	2.10 Total (2.7 to 2.9)	0	0	0	0	0	0	0	0	0	0
	2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
3.	Large Group Comprehensive Coverage Expenses:										
	3.1 Salaries (including $ 218,668 for affiliated services)	68,511	50,427	41,468	50,853	275	211,534	76,719	42,486	1,855,939	2,186,679
	3.2 Outsourced Services	29,156	10,998	13,357	16,985	91	70,587	19,276	9,450	504,720	604,032
	3.3 EDP Equipment and Software (incl $ 21,148 for affiliated services)	10,338	3,626	4,293	6,065	33	24,315	5,152	1,918	180,092	211,477
	3.4 Other Equipment (excl. EDP) (incl $ 1,068 for affiliated services)	522	183	215	307	2	1,229	260	97	9,095	10,681
	3.5 Accreditation and Certification (incl $ 23 for affiliated services)	0	XXX	XXX	XXX	XXX	0	7	2	224	233
	3.6 Other Expenses (incl $ 72,864 for affiliated services)	41,455	14,056	20,985	23,482	126	100,104	45,985	31,592	550,962	728,643
	3.7 Subtotal before Reimbursements and Taxes (Lines 3.1 to 3.6)	169,982	59,289	80,278	97,691	527	407,768	147,398	85,546	3,101,032	3,741,743
	3.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	3.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	3.10 Total (3.7 to 3.9)	169,982	59,289	80,278	97,691	527	407,768	147,398	85,546	3,101,032	3,741,743
	3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	56,703	0	0	56,703

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
4.	Individual Mini-Med Plans Expenses:										
	4.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	4.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	4.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.7 Subtotal before Reimbursements and Taxes (Lines 4.1 to 4.6)	0	0	0	0	0	0	0	0	0	0
	4.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	4.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	4.10 Total (4.7 to 4.9)	0	0	0	0	0	0	0	0	0	0
	4.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
5.	Small Group Mini-Med Plans Expenses:										
	5.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	5.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	5.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.7 Subtotal before Reimbursements and Taxes (Lines 5.1 to 5.6)	0	0	0	0	0	0	0	0	0	0
	5.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	5.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	5.10 Total (5.7 to 5.9)	0	0	0	0	0	0	0	0	0	0
	5.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
6.	Large Group Mini-Med Plans Expenses:										
	6.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	6.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	6.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.7 Subtotal before Reimbursements and Taxes (Lines 6.1 to 6.6)	0	0	0	0	0	0	0	0	0	0
	6.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	6.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	6.10 Total (6.7 to 6.9)	0	0	0	0	0	0	0	0	0	0
	6.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
7.	Small Group Expatriate Plans Expenses:										
	7.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	7.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	7.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.7 Subtotal before Reimbursements and Taxes (Lines 7.1 to 7.6)	0	0	0	0	0	0	0	0	0	0
	7.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	7.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	7.10 Total (7.7 to 7.9)	0	0	0	0	0	0	0	0	0	0
	7.11 Total Fraud and Abuse Detection/Recovery Expenses Included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
8.	Large Group Expatriate Plans Expenses:										
	8.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	8.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	8.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.7 Subtotal before Reimbursements and Taxes (Lines 8.1 to 8.6)	0	0	0	0	0	0	0	0	0	0
	8.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	8.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	8.10 Total (8.7 to 8.9)	0	0	0	0	0	0	0	0	0	0
	8.11 Total Fraud and Abuse Detection/Recovery Expenses Included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
9.	Student Health Plans Expenses:										
	9.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	9.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	9.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.7 Subtotal before Reimbursements and Taxes (Lines 9.1 to 9.6)	0	0	0	0	0	0	0	0	0	0
	9.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	9.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	9.10 Total (9.7 to 9.9)	0	0	0	0	0	0	0	0	0	0
	9.11 Total Fraud and Abuse Detection/Recovery Expenses Included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes - See Cautionary Statement at http://www.naic.org/committees_e_app_blanks.htm)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2015 NAIC Company Code 95721

	Business Subject to MLR														
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9	10	11	12	13	14	15
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14
1. Premium:															
1.1 Health premiums earned (From Part 2, Line 1.11)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923	XXX	417,193,923
1.2 Federal high risk pools	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923	XXX	417,193,923
1.5 Federal taxes and federal assessments	20,355	0	606,929	0	0	0	0	0	0	(51,049)	288	7,633,845	8,210,367	0	8,210,367
1.6 State insurance, premium and other taxes (Similar local taxes of $ 8,893)	8,893	0	249,043	0	0	0	0	0	0	29	18	115,417	373,400	0	373,400
1.6a Community Benefit Expenditures (informational only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1.7 Regulatory authority licenses and fees	1,195	0	31,561	0	0	0	0	0	0	77	73	273,187	306,093	0	306,093
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	1,020,681	0	27,685,098	0	0	0	0	0	0	(3,004,126)	(378)	382,602,788	408,304,063	XXX	408,304,063
1.9 Net Assumed less Ceded reinsurance premiums earned	(3,193)	0	(74,658)	0	0	0	0	0	0	0	0	0	(77,851)	XXX	(77,851)
1.10 Other Adjustments due to MLR calculations - Premiums	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.11 Risk Revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	1,017,488	0	27,610,440	0	0	0	0	0	0	(3,004,126)	(378)	382,602,788	406,226,212	XXX	406,226,212
2. Claims:															
2.1 Incurred claims excluding prescription drugs	2,533,846	0	13,474,472	0	0	0	0	0	0	(3,888,289)	0	271,298,595	283,418,624	XXX	283,418,624
2.2 Prescription drugs	335,338	0	7,897,409	0	0	0	0	0	0	0	0	91,261,891	99,494,638	XXX	99,494,638
2.3 Pharmaceutical rebates	35,312	0	632,907	0	0	0	0	0	0	0	0	14,506,045	15,174,264	XXX	15,174,264
2.4 State stop loss, market stabilization and claim/census based assessments (informational only)	(8)	0	(244)	0	0	0	0	0	0	0	0	(3,406)	(3,658)	XXX	(3,658)
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 3) (From Part 2, Line 2.15)	2,833,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,054,440	367,738,998	XXX	367,738,998
5.1 Net Assumed less Ceded reinsurance claims incurred	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
5.2 Other Adjustments due to MLR calculations - Claims	205,000	0	113,445	0	0	0	0	0	0	0	0	0	318,445	XXX	318,445
5.3 Rebates paid	0	0	226,617	0	0	0	0	0	0	XXX	XXX	0	226,617	XXX	226,617
5.4 Estimated rebates unpaid prior year	0	0	743,462	0	0	0	0	0	0	XXX	XXX	0	743,462	XXX	743,462
5.5 Estimated rebates unpaid current year	0	0	403,401	0	0	0	0	0	0	XXX	XXX	0	403,400	XXX	403,400
5.6 Fee for service and co-pay revenue	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	3,038,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,054,440	367,943,998	XXX	367,943,998
6. Improving Health Care Quality Expenses Incurred:															
6.1 Improve health outcomes	5,074	0	169,982	0	0	0	0	0	0	(155)	0	2,560,090	2,734,991	0	2,734,991
6.2 Activities to prevent hospital readmissions	1,691	0	59,289	0	0	0	0	0	0	24	0	1,159,109	1,220,113	0	1,220,113
6.3 Improve patient safety and reduce medical errors	2,446	0	80,278	0	0	0	0	0	0	(8)	0	1,639,576	1,722,293	0	1,722,293
6.4 Wellness and health promotion activities	2,855	0	97,691	0	0	0	0	0	0	(93)	0	1,749,854	1,850,308	0	1,850,308
6.5 Health Information Technology expenses related to health improvement	0	0	527	0	0	0	0	0	0	0	0	2,751	3,278	0	3,278
6.6 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1+6.2+6.3+6.4+6.5)	12,066	0	407,768	0	0	0	0	0	0	(232)	0	7,111,380	7,530,982	0	7,530,982
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.6 - Footnote 2.0)/Line 1.8	2.788	0.000	0.764	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	0.928	XXX	XXX	XXX
8. Claims Adjustment Expenses:															
8.1 Cost containment expenses not included in quality of care expenses in Line 6.6	4,552	0	147,398	0	0	0	0	0	0	(1,318)	165	2,274,142	2,424,940	0	2,424,940
8.2 All other claims adjustment expenses	5,758	0	85,546	0	0	0	0	0	0	(277)	0	1,467,805	1,558,831	0	1,558,831
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	10,309	0	232,944	0	0	0	0	0	0	(1,593)	165	3,741,946	3,983,772	0	3,983,772
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)	0.010	0.000	0.008	0.000	0.000	0.000	0.000	0.000	0.000	0.001	(0.436)	0.010	XXX	XXX	XXX

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1 (Continued)

	Business Subject to MLR									10	11	12	13	14	15
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9						
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14
10. General and Administrative (G&A) Expenses:															
10.1 Direct sales salaries and benefits	7,628	0	316,843	0	0	0	0	0	0	(28)	4,198	6,897,989	7,226,631	0	7,226,631
10.2 Agents and brokers fees and commissions	967	0	35,825	0	0	0	0	0	0	95	99	889,599	926,585	0	926,585
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	4	0	161	0	0	0	0	0	0	(1)	0	21,797	21,961	0	21,961
10.4 Other general and administrative expenses	65,549	0	2,750,863	0	0	0	0	0	0	12,692	5,450	20,668,598	23,503,152	0	23,503,152
10.4a Community Benefit Expenditures (informational only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)	74,148	0	3,103,692	0	0	0	0	0	0	12,757	9,747	28,477,984	31,678,328	0	31,678,328
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5)	(2,117,907)	0	3,127,661	0	0	0	0	0	0	873,231	(10,291)	(4,782,963)	(2,910,868)	XXX	(2,910,868)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,086,666	XXX	11,086,666
14. Federal income taxes (excluding taxes on Line 1.5 above)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	476,905	XXX	476,905
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,698,894	XXX	7,698,894
16. ICD-10 Implementation Expenses (informational only; already included in general expenses and line 6.5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. 16a ICD-10 Implementation Expenses (informational only; already included in line 6.5)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER INDICATORS:															
1. Number of certificates/policies	631	0	4,258	0	0	0	0	0	0	0	0	46,802	51,691	0	51,691
2. Number of Covered Lives	783	0	10,607	0	0	0	0	0	0	0	0	46,802	58,192	0	58,192
3. Number of Groups	XXX	(66)	103	XXX	0	0	0	0	0	0	0	4	21	0	21
4. Member Months	5,472	0	125,743	0	0	0	0	0	0	(19)	0	592,376	723,572	0	723,572

Is run off business reported in Columns 1 through 9 or 12? Yes [ ] No [ ] If yes, show the amount of premiums and claims included. Premiums $ 0 Claims $ 0

AFFORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES and PAYABLES				
	Current Year		Prior Year	
	Comprehensive Health Coverage		Comprehensive Health Coverage	
	1 Individual Plans	2 Small Group Employer Plans	3 Individual Plans	4 Small Group Employer Plans
ACA Receivables and Payables				
1. Permanent ACA Risk Adjustment Program				
1.0 Premium adjustments receivable/(payable)	0	0	0	0
2. Transitional ACA Reinsurance Program				
2.0 Total amounts recoverable for claims (paid & unpaid)	0	XXX	0	XXX
3. Temporary ACA Risk Corridors Program				
3.1 Accrued retrospective premium	0	0	0	0
3.2 Reserve for rate credits or policy experience refunds	0	0	0	0
ACA Receipts and Payments				
4. Permanent ACA Risk Adjustment Program				
4.0 Premium adjustments receipts/(payments)	0	0	0	0
5. Transitional ACA Reinsurance Program				
5.0 Amounts received for claims	0	XXX	0	XXX
6. Temporary ACA Risk Corridors Program				
6.1 Retrospective premium received	0	0	0	0
6.2 Rate credits or policy experience refunds paid	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2015 NAIC Company Code 95721

	Business Subject to MLR												
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans:		9	10	11	12	13
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Total (a)
1. Health Premiums Earned:													
1.1 Direct premiums written	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923
1.2 Unearned premium prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
1.3 Unearned premium current year	0	0	0	0	0	0	0	0	0	0	0	0	0
1.4 Change in unearned premium (Lines 1.2 - 1.3)	0	0	0	0	0	0	0	0	0	0	0	0	0
1.5 Paid rate credits	0	0	226,617	0	0	0	0	0	0	0	0	(13,523)	213,094
1.6 Reserve for rate credits current year	0	0	724,981	0	0	0	0	0	0	0	0	(165,802)	559,179
1.7 Reserve for rate credits prior year	0	0	1,448,299	0	0	0	0	0	0	0	0	(52,971)	1,395,328
1.8 Change in reserve for rate credits (Lines 1.6 - 1.7)	0	0	(723,319)	0	0	0	0	0	0	0	0	(112,831)	(836,150)
1.9 Premium balances written off	0	0	0	0	0	0	0	0	0	0	0	0	0
1.10 Group conversion charge	0	0	0	0	0	0	0	0	0	0	0	0	0
1.11 Total direct premiums earned (Lines 1.1 + 1.4 - 1.9 + 1.10)	1,051,124	0	28,572,632	0	0	0	0	0	0	(3,055,069)	0	390,625,237	417,193,923
1.12 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
1.13 Net Assumed less Ceded premiums earned from affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
1.14 Ceded premiums earned to non-affiliates	3,193	0	74,658	0	0	0	0	0	0	0	0	0	77,851
1.15 Other Adjustments due to MLR calculation - Premiums	0	0	0	0	0	0	0	0	0	0	0	0	0
1.16 Net premiums earned (Lines 1.11 - 1.5 - 1.8 + 1.12 + 1.13 - 1.14 + 1.15)	1,047,931	0	28,994,676	0	0	0	0	0	0	(3,055,069)	0	390,751,590	417,739,128
2. Direct Claims Incurred:													
2.1 Paid claims during the year	2,952,964	9,993	21,103,974	0	0	0	0	0	0	5,203,174	0	358,190,561	387,460,666
2.2 Direct claim liability current year	193,886	105,983	1,924,741	0	0	0	0	0	0	354,640	0	40,742,514	43,321,763
2.3 Direct claim liability prior year	58,160	115,754	1,957,047	0	0	0	0	0	0	7,780,943	0	49,687,650	59,599,553
2.4 Direct claim reserves current year	(217,556)	0	237,556	0	0	0	0	0	0	0	0	0	20,000
2.5 Direct claim reserves prior year	1,000	0	17,000	0	0	0	0	0	0	1,666,321	0	0	1,684,321
2.6 Direct contract reserves current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.7 Direct contract reserves prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.8 Paid rate credits	0	0	226,617	0	0	0	0	0	0	0	0	(13,523)	213,094
2.9 Reserve for rate credits current year	0	0	724,981	0	0	0	0	0	0	0	0	(165,802)	559,179
2.10 Reserve for rate credits prior year	0	0	1,448,299	0	0	0	0	0	0	0	0	(52,971)	1,395,328
2.11 Incurred medical incentive pools and bonuses (Lines 2.11a + 2.11b - 2.11c)	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11a Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11b Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.11c Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0	0	0	0	0	0	0
2.12 Net healthcare receivables (Lines 2.12a - 2.12b)	36,262	223	56,546	0	0	0	0	0	0	(1,161)	0	1,064,631	1,156,501
2.12a Healthcare receivables current year	70,558	8,135	65,453	0	0	0	0	0	0	0	0	3,720,315	3,864,460
2.12b Healthcare receivables prior year	34,296	7,912	8,907	0	0	0	0	0	0	1,161	0	2,655,684	2,707,959
2.13 Group conversion charge	0	0	0	0	0	0	0	0	0	0	0	0	0
2.14 Multi-option coverage blended rate adjustment	0	0	0	0	0	0	0	0	0	0	0	0	0
2.15 Total incurred claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 + 2.9 - 2.10 + 2.11 - 2.12 + 2.13 + 2.14)	2,833,872	0	20,738,975	0	0	0	0	0	0	(3,888,289)	0	348,054,440	367,738,998
2.16 Assumed incurred claims from non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.17 Net assumed less ceded incurred claims from affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.18 Ceded incurred claims to non-affiliates	0	0	0	0	0	0	0	0	0	0	0	0	0
2.19 Other adjustments due to MLR calculation - Claims	205,000	0	0	0	0	0	0	0	0	0	0	0	205,000
2.20 Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19)	3,038,872	0	21,235,677	0	0	0	0	0	0	(3,888,289)	0	348,180,794	368,567,054
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0	0	0	0	0	1,122,532	1,122,532

(a) Column 13, Line 1.1 includes direct written premium of $ 0 for stand-alone dental and $ 0 for stand-alone vision policies.

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION HUMANA HEALTH PLANS OF PUERTO RICO, INC. 2. 383 FD Roosevelt Avenue San Juan, PR 00918-2131 (LOCATION)

NAIC Group Code 0119 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2015 NAIC Company Code 95721

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
1.	Individual Comprehensive Coverage Expenses:										
	1.1 Salaries (including $ 5,577 for affiliated services)	2,646	882	1,276	1,488	0	6,292	2,386	3,414	43,677	55,769
	1.2 Outsourced Services	854	292	375	493	0	2,014	609	541	11,681	14,845
	1.3 EDP Equipment and Software (incl $ 509 for affiliated services)	302	105	123	178	0	707	151	122	4,105	5,086
	1.4 Other Equipment (excl. EDP) (incl $ 25 for affiliated services)	15	5	6	9	0	36	7	6	204	253
	1.5 Accreditation and Certification (incl $ 1 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	5	5
	1.6 Other Expenses (incl $ 2,056 for affiliated services)	1,257	407	666	687	0	3,017	1,397	1,674	14,472	20,561
	1.7 Subtotal before Reimbursements and Taxes (Lines 1.1 to 1.6)	5,074	1,691	2,446	2,855	0	12,068	4,552	5,758	74,144	96,519
	1.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4
	1.10 Total (1.7 to 1.9)	5,074	1,691	2,446	2,855	0	12,068	4,552	5,758	74,148	96,523
	1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	705	0	0	705
2.	Small Group Comprehensive Coverage Expenses:										
	2.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	2.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	2.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	2.7 Subtotal before Reimbursements and Taxes (Lines 2.1 to 2.6)	0	0	0	0	0	0	0	0	0	0
	2.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	2.10 Total (2.7 to 2.9)	0	0	0	0	0	0	0	0	0	0
	2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
3.	Large Group Comprehensive Coverage Expenses:										
	3.1 Salaries (including $ 218,668 for affiliated services)	68,511	30,427	41,468	50,853	275	211,534	76,719	42,486	1,855,939	2,186,679
	3.2 Outsourced Services	29,156	10,998	13,357	16,985	91	70,587	19,276	9,450	504,720	604,032
	3.3 EDP Equipment and Software (incl $ 21,148 for affiliated services)	10,338	3,626	4,293	6,065	33	24,315	5,152	1,918	180,092	211,477
	3.4 Other Equipment (excl. EDP) (incl $ 1,068 for affiliated services)	522	183	215	307	2	1,229	260	97	9,095	10,681
	3.5 Accreditation and Certification (incl $ 23 for affiliated services)	0	XXX	XXX	XXX	XXX	0	7	2	224	233
	3.6 Other Expenses (incl $ 72,864 for affiliated services)	41,455	14,056	20,985	23,482	126	100,104	45,965	31,592	550,982	728,643
	3.7 Subtotal before Reimbursements and Taxes (Lines 3.1 to 3.6)	169,982	59,289	80,278	97,691	527	407,768	147,398	85,546	3,101,032	3,741,743
	3.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	3.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	3.10 Total (3.7 to 3.9)	169,982	59,289	80,278	97,691	527	407,768	147,398	85,546	3,101,032	3,741,743
	3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	36,703	0	0	36,703

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
4.	Individual Mini-Med Plans Expenses:										
	4.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	4.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	4.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	4.7 Subtotal before Reimbursements and Taxes (Lines 4.1 to 4.6)	0	0	0	0	0	0	0	0	0	0
	4.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	4.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	4.10 Total (4.7 to 4.9)	0	0	0	0	0	0	0	0	0	0
	4.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
5.	Small Group Mini-Med Plans Expenses:										
	5.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	5.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	5.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	5.7 Subtotal before Reimbursements and Taxes (Lines 5.1 to 5.6)	0	0	0	0	0	0	0	0	0	0
	5.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	5.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	5.10 Total (5.7 to 5.9)	0	0	0	0	0	0	0	0	0	0
	5.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
6.	Large Group Mini-Med Plans Expenses:										
	6.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	6.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	6.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	6.7 Subtotal before Reimbursements and Taxes (Lines 6.1 to 6.6)	0	0	0	0	0	0	0	0	0	0
	6.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	6.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	6.10 Total (6.7 to 6.9)	0	0	0	0	0	0	0	0	0	0
	6.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3 (Continued)

	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 HIT Expenses	6 Total (1 to 5)	7 Cost Containment Expenses	8 Other Claims Adjustment Expenses	General Administrative Expenses	Total Expenses (6 to 9)
7.	Small Group Expatriate Plans Expenses:										
	7.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	7.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	7.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	7.7 Subtotal before Reimbursements and Taxes (Lines 7.1 to 7.6)	0	0	0	0	0	0	0	0	0	0
	7.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	7.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	7.10 Total (7.7 to 7.9)	0	0	0	0	0	0	0	0	0	0
	7.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
8.	Large Group Expatriate Plans Expenses:										
	8.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	8.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	8.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	8.7 Subtotal before Reimbursements and Taxes (Lines 8.1 to 8.6)	0	0	0	0	0	0	0	0	0	0
	8.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	8.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	8.10 Total (8.7 to 8.9)	0	0	0	0	0	0	0	0	0	0
	8.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
9.	Student Health Plans Expenses:										
	9.1 Salaries (including $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.2 Outsourced Services	0	0	0	0	0	0	0	0	0	0
	9.3 EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.4 Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
	9.6 Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
	9.7 Subtotal before Reimbursements and Taxes (Lines 9.1 to 9.6)	0	0	0	0	0	0	0	0	0	0
	9.8 Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
	9.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
	9.10 Total (9.7 to 9.9)	0	0	0	0	0	0	0	0	0	0
	9.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

SUPPLEMENT FOR THE YEAR 2015 OF THE Humana Health Plans of Puerto Rico Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT'S EXPENSE ALLOCATION REPORT

(To Be Filed by April 1)

NAIC Group Code 0119 NAIC Company Code 95721

Description of allocation methodology:
Allocations are based on detailed cost examination and interview processes to identify the product and market supported by the department. Quality improvement activities are also identified for each department. Each department's expenses are allocated to the Entity, State, Product and Segment using the market/product information with membership as the primary source. Segment is calculated using the total average employee counts with data that was solicited from the actual groups. We utilize 50 or 100 as the upper limit for our definition of small group, based on state preferences and elections. Payments to third party vendors who contract with others to provide clinical services are included in administrative expenses and are included in this methodology.

Detailed Description of Quality Improvement Expenses:

Expense Type from Part 3	New	Detailed Description of Expense
1. Improve Health Outcomes		
01.0001. Salaries:		Departments responsible for contact to members related to: Making/verifying appointments; Medication
01.0002.		and care compliance initiatives; Arranging and managing transitions from one setting to another (such
01.0003.		as hospital discharge to home or to a rehabilitation center); Programs to support shared decision
01.0004.		making with patients and their families; Reminding insured of physician appointment, lab tests or
01.0005.		other appropriate contact with specific providers
01.0006. Outsourced Services:		Outsourced Services: Vendors providing coaching to encourage compliance with evidence based medicine;
01.0007.		Activities to identify and encourage evidence based medicine; Medication and care compliance
01.0008.		initiatives, e.g. checking that the insured is following a medically effective prescribed regimen for
01.0009.		dealing with the specific disease/condition and incorporating feedback from the insured to effectively
01.0010.		monitor compliance
01.0011. Other Expenses:		Other Expenses-Medication and care compliance initiatives, e.g. checking that the insured is following
01.0012.		a medically effective prescribed regimen for dealing with the specific disease/condition and
01.0013.		incorporating feedback from the insured to effectively monitor compliance; 24-hour nurse hotlines that
01.0014.		support these activities.
2. Activities to Prevent Hospital Readmissions		
02.0001. Salaries:		Departments responsible for contact to members related to: Personalized & comprehensive
02.0002.		discharge and post discharge counseling by an appropriate health care professional
02.0003. Other Expenses:		Other Expenses supporting quality activities
02.0004.		
02.0005.		
3. Improve Patient Safety and Reduce Medical Errors		
03.0001. Salaries:		Departments responsible for activities to identify and encourage evidence based medicine,
03.0002.		prospective prescription drug utilization review aimed to identify potential adverse drug
03.0003.		interactions. Quality care review and reporting to improve members safety and reduce medical errors.
03.0004.		24 hour nurse hotline to service members.
03.0005. Outsourced Services:		Vendors providing review of member records for appropriate level of care and
03.0006.		treatments. Review of prescriptions and intervention
03.0007. Other Expenses:		Other Expenses supporting quality activities
03.0008.		
4. Wellness & Health Promotion Activities		
04.0001. Salaries:		Departments which provide wellness/lifestyle coaching programs designed to achieve specific
04.0002. Salaries:		and measurable improvements provide wellness assessments. Coaching programs designed to educate members on clinically effective
04.0003.		methods for dealing with a specific chronic disease or condition. Coaching and/or education programs
04.0004.		designed to change member behavior such as smoking cessation, weight-loss, etc. Actual rewards/incentives
04.0005.		bonuses/reduction in copays etc that are not already reflected in premium or claims
04.0006. Outsourced Services:		Vendors providing member education programs designed to change member behavior
04.0007. Outsourced Services:		such as smoking cessation, weight-loss, etc.
04.0008. Other Expenses:		Other Expenses supporting quality activities
5. HIT Expenses for Health Care Quality Improvements:		
05.0001. Salaries:		IT departments supporting software programs data management for quality related activities
05.0002.		including reporting and analysis to monitor, measure and reporting clinical effectiveness of
05.0003.		activities.
05.0004. Outsourced Services:		Activities for data extraction, analysis and transmission in support of quality activities
05.0005. Other Expenses:		EDP Equipment & Software to track medical interventions or a bundle of related services for better
05.0006.		patient outcomes; identify appropriate decisions and treatment(s) for members and to support related
05.0007.		quality activities by departments.
05.0008.		

SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

For The Year Ended December 31, 2015
(To Be Filed by April 1)

Of The Humana Health Plans of Puerto Rico Inc.

ADDRESS (City, State and Zip Code) San Juan , PR 00918-2131

NAIC Group Code 0119 NAIC Company Code 95721 Federal Employer's Identification Number (FEIN) 66-0406896

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements.

Answer the following interrogatories by reporting the applicable U.S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement. $ 140,756,289

2. Ten largest exposures to a single issuer/borrower/investment.

	1 Issuer	2 Description of Exposure	3 Amount	4 Percentage of Total Admitted Assets
2.01	COMM MORTGAGE TRUST	BONDS	$ 8,105,486	5.8 %
2.02	JP MORGAN CHASE COMMERCIAL MOR	BONDS	$ 3,804,976	2.7 %
2.03	CITIBANK O/N SWEEP MMF	BONDS	$ 2,883,575	2.0 %
2.04	MORGAN STANLEY CAPITAL I TRUST	BONDS	$ 2,595,636	1.8 %
2.05	TRANS-ALLEGHENY INTERSTA	BONDS	$ 1,538,875	1.1 %
2.06	GOLDMAN SACHS GROUP INC	BONDS	$ 1,451,906	1.0 %
2.07	JPMORGAN CHASE & CO	BONDS	$ 1,450,394	1.0 %
2.08	MORGAN STANLEY BAML TRUST	BONDS	$ 1,339,497	1.0 %
2.09	GCCFC COMMERCIAL MORTGAGE TRUS	BONDS	$ 1,266,237	0.9 %
2.10	CREDIT SUISSE MORTGAGE TRUST	BONDS	$ 1,087,172	0.8 %

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC designation.

	Bonds	1	2		Preferred Stocks	3	4
3.01	NAIC-1	$ 93,348,891	66.3 %	3.07	P/RP-1	$ 0	0.0 %
3.02	NAIC-2	$ 9,076,255	6.4 %	3.08	P/RP-2	$ 0	0.0 %
3.03	NAIC-3	$ 1,106,735	0.8 %	3.09	P/RP-3	$ 0	0.0 %
3.04	NAIC-4	$ 0	0.0 %	3.10	P/RP-4	$ 0	0.0 %
3.05	NAIC-5	$ 0	0.0 %	3.11	P/RP-5	$ 0	0.0 %
3.06	NAIC-6	$ 0	0.0 %	3.12	P/RP-6	$ 0	0.0 %

4. Assets held in foreign investments:

4.01 Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 4.01 above is yes, responses are not required for interrogatories 5 - 10.

4.02	Total admitted assets held in foreign investments	$ 2,299,543	1.6 %
4.03	Foreign-currency-denominated investments	$ 0	0.0 %
4.04	Insurance liabilities denominated in that same foreign currency	$ 0	0.0 %

5. Aggregate foreign investment exposure categorized by NAIC sovereign designation:

		1	2
5.01	Countries designated NAIC-1	$ 0	0.0 %
5.02	Countries designated NAIC-2	$ 0	0.0 %
5.03	Countries designated NAIC-3 or below	$ 0	0.0 %

6. Largest foreign investment exposures by country, categorized by the country's NAIC sovereign designation:

		1	2
	Countries designated NAIC - 1:		
6.01	Country 1:	$ 0	0.0 %
6.02	Country 2:	$ 0	0.0 %
	Countries designated NAIC - 2:		
6.03	Country 1:	$ 0	0.0 %
6.04	Country 2:	$ 0	0.0 %
	Countries designated NAIC - 3 or below:		
6.05	Country 1:	$ 0	0.0 %
6.06	Country 2:	$ 0	0.0 %

		1	2
7.	Aggregate unhedged foreign currency exposure	$ 0	0.0 %

8. Aggregate unhedged foreign currency exposure categorized by NAIC sovereign designation:

		1	2
8.01	Countries designated NAIC-1	$ 0	0.0 %
8.02	Countries designated NAIC-2	$ 0	0.0 %
8.03	Countries designated NAIC-3 or below	$ 0	0.0 %

9. Largest unhedged foreign currency exposures by country, categorized by the country's NAIC sovereign designation:

		1	2
	Countries designated NAIC - 1:		
9.01	Country 1:	$ 0	0.0 %
9.02	Country 2:	$ 0	0.0 %
	Countries designated NAIC - 2:		
9.03	Country 1:	$ 0	0.0 %
9.04	Country 2:	$ 0	0.0 %
	Countries designated NAIC - 3 or below:		
9.05	Country 1:	$ 0	0.0 %
9.06	Country 2:	$ 0	0.0 %

10. Ten largest non-sovereign (i.e. non-governmental) foreign issues:

	1 Issuer	2 NAIC Designation	3	4
10.01			$ 0	0.0 %
10.02			$ 0	0.0 %
10.03			$ 0	0.0 %
10.04			$ 0	0.0 %
10.05			$ 0	0.0 %
10.06			$ 0	0.0 %
10.07			$ 0	0.0 %
10.08			$ 0	0.0 %
10.09			$ 0	0.0 %
10.10			$ 0	0.0 %

11. Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure:

11.01 Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 11.01 is yes, detail is not required for the remainder of interrogatory 11.

		1	2
11.02	Total admitted assets held in Canadian investments	$ 0	0.0 %
11.03	Canadian-currency-denominated investments	$ 0	0.0 %
11.04	Canadian-denominated insurance liabilities	$ 0	0.0 %
11.05	Unhedged Canadian currency exposure	$ 0	0.0 %

12. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions:

12.01 Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12.

	1	2	3
12.02	Aggregate statement value of investments with contractual sales restrictions	$ 0	0.0 %
	Largest three investments with contractual sales restrictions:		
12.03		$ 0	0.0 %
12.04		$ 0	0.0 %
12.05		$ 0	0.0 %

13. Amounts and percentages of admitted assets held in the ten largest equity interests:

13.01 Are assets held in equity interests less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 13.01 above is yes, responses are not required for the remainder of Interrogatory 13.

	1 Issuer	2	3
13.02		$ 0	0.0 %
13.03		$ 0	0.0 %
13.04		$ 0	0.0 %
13.05		$ 0	0.0 %
13.06		$ 0	0.0 %
13.07		$ 0	0.0 %
13.08		$ 0	0.0 %
13.09		$ 0	0.0 %
13.10		$ 0	0.0 %
13.11		$ 0	0.0 %

14. Amounts and percentages of the reporting entity's total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 14.01 above is yes, responses are not required for the remainder of Interrogatory 14.

	1	2	3
14.02	Aggregate statement value of investments held in nonaffiliated, privately placed equities	$ 0	0.0 %
	Largest three investments held in nonaffiliated, privately placed equities:		
14.03		$ 0	0.0 %
14.04		$ 0	0.0 %
14.05		$ 0	0.0 %

15. Amounts and percentages of the reporting entity's total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

	1	2	3
15.02	Aggregate statement value of investments held in general partnership interests	$ 0	0.0 %
	Largest three investments in general partnership interests:		
15.03		$ 0	0.0 %
15.04		$ 0	0.0 %
15.05		$ 0	0.0 %

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? ..... Yes [X] No [ ]

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

	1 Type (Residential, Commercial, Agricultural)	2	3
16.02		$ 0	0.0 %
16.03		$ 0	0.0 %
16.04		$ 0	0.0 %
16.05		$ 0	0.0 %
16.06		$ 0	0.0 %
16.07		$ 0	0.0 %
16.08		$ 0	0.0 %
16.09		$ 0	0.0 %
16.10		$ 0	0.0 %
16.11		$ 0	0.0 %

Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

		Loans	
16.12	Construction loans	$ 0	0.0 %
16.13	Mortgage loans over 90 days past due	$ 0	0.0 %
16.14	Mortgage loans in the process of foreclosure	$ 0	0.0 %
16.15	Mortgage loans foreclosed	$ 0	0.0 %
16.16	Restructured mortgage loans	$ 0	0.0 %

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

		Residential			Commercial			Agricultural	
	Loan to Value	1	2		3	4		5	6
17.01	above 95%	$ 0	0.0 %	$	0	0.0 %	$	0	0.0 %
17.02	91 to 95%	$ 0	0.0 %	$	0	0.0 %	$	0	0.0 %
17.03	81 to 90%	$ 0	0.0 %	$	0	0.0 %	$	0	0.0 %
17.04	71 to 80%	$ 0	0.0 %	$	0	0.0 %	$	0	0.0 %
17.05	below 70%	$ 0	0.0 %	$	0	0.0 %	$	0	0.0 %

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

	Description 1	2	3
18.02		$ 0	0.0 %
18.03		$ 0	0.0 %
18.04		$ 0	0.0 %
18.05		$ 0	0.0 %
18.06		$ 0	0.0 %

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments held in mezzanine real estate loans:

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's total admitted assets? Yes [X] No [ ]

If response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

	1	2	3
19.02	Aggregate statement value of investments held in mezzanine real estate loans:	$ 0	0.0 %
	Largest three investments held in mezzanine real estate loans:		
19.03		$ 0	0.0 %
19.04		$ 0	0.0 %
19.05		$ 0	0.0 %

20. Amounts and percentages of the reporting entity's total admitted assets subject to the following types of agreements:

		At Year End		At End of Each Quarter		
		1	2	1st Quarter 3	2nd Quarter 4	3rd Quarter 5
20.01	Securities lending agreements (do not include assets held as collateral for such transactions)	$ 0	0.0 %	$ 0	$ 0	$ 0
20.02	Repurchase agreements	$ 0	0.0 %	$ 0	$ 0	$ 0
20.03	Reverse repurchase agreements	$ 0	0.0 %	$ 0	$ 0	$ 0
20.04	Dollar repurchase agreements	$ 0	0.0 %	$ 0	$ 0	$ 0
20.05	Dollar reverse repurchase agreements	$ 0	0.0 %	$ 0	$ 0	$ 0

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not attached to other financial instruments, options, caps, and floors:

		Owned		Written	
		1	2	3	4
21.01	Hedging	$ 0	0.0 %	$ 0	0.0 %
21.02	Income generation	$ 0	0.0 %	$ 0	0.0 %
21.03	Other	$ 0	0.0 %	$ 0	0.0 %

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

		At Year End		At End of Each Quarter		
		1	2	1st Quarter 3	2nd Quarter 4	3rd Quarter 5
22.01	Hedging	$ 0	0.0 %	$ 0	$ 0	$ 0
22.02	Income generation	$ 0	0.0 %	$ 0	$ 0	$ 0
22.03	Replications	$ 0	0.0 %	$ 0	$ 0	$ 0
22.04	Other	$ 0	0.0 %	$ 0	$ 0	$ 0

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

		At Year End		At End of Each Quarter		
		1	2	1st Quarter 3	2nd Quarter 4	3rd Quarter 5
23.01	Hedging	$ 0	0.0 %	$ 0	$ 0	$ 0
23.02	Income generation	$ 0	0.0 %	$ 0	$ 0	$ 0
23.03	Replications	$ 0	0.0 %	$ 0	$ 0	$ 0
23.04	Other	$ 0	0.0 %	$ 0	$ 0	$ 0

Management's Discussion and Analysis of
Humana Health Plans of Puerto Rico, Inc.
As of December 31, 2015

General

Humana Inc. (Humana), headquartered in Louisville, KY., is a leading health and well-being company focused on making it easy for people to achieve their best health with clinical excellence through coordinated care. Humana's strategy integrates care delivery, the member experience, and clinical and consumer insights to encourage engagement, behavior change, proactive clinical outreach and wellness for the millions of people served across the country.

Humana's medical and specialty insurance products allow members to access health care services primarily through a network of health care providers with whom Humana has contracted. These products may vary in the degree to which members have coverage. Health maintenance organizations, or HMOs, generally require a referral from the member's primary care provider before seeing certain specialty physicians. Preferred provider organizations, or PPOs, provide members the freedom to choose a health care provider without requiring a referral. However PPOs generally require the member to pay a greater portion of the provider's fee in the event the member chooses not to use a provider participating in the PPO's network. Point of Service, or POS, plans combine the advantages of HMO plans with the flexibility of PPO plans. In general, POS plans allow members to choose, at the time medical services are needed, to seek care from a provider within the plan's network or outside the network. In addition, Humana offers services to health plan members as well as to third parties that promote health and wellness, including pharmacy solutions, provider, home based, and clinical programs, as well as services and capabilities to advance population health.

At the core of Humana's strategy is its integrated care delivery model, which unites quality care, high member engagement, and sophisticated data analytics. Three core elements of the model are to improve the consumer experience by simplifying the interaction with Humana, engaging members in clinical programs, and offering assistance to providers in transitioning from a fee-for-service to a value-based arrangement. Humana's approach to primary, physician-directed care for its members aims to provide quality care that is consistent, integrated, cost-effective, and member-focused. The model is designed to improve health outcomes and affordability for individuals and for the health system as a whole, while offering Humana's members a simple, seamless healthcare experience.

On July 2, 2015, Humana entered into an Agreement and Plan of Merger with Aetna Inc. and certain wholly owned subsidiaries of Aetna Inc., which are referred to collectively as Aetna, which sets forth the terms and conditions under which Humana will merge with, and become a wholly owned subsidiary of Aetna. The Merger is currently expected to close in the second half of 2016.

The discussion that follows describes the products offered by Humana Health Plans of Puerto Rico, Inc. (the Company).

Insurer's Business

The Company is a wholly owned subsidiary of Humana. The Company is a health maintenance organization (HMO) in Puerto Rico domiciled in the Commonwealth of Puerto Rico and is authorized to sell health plan products therein. The Company is a federally-qualified HMO under

Title XIII of the Public Health Service Act that is subject to the provisions of Chapter 19 of the Insurance Code of the Commonwealth of Puerto Rico (the Insurance Code) and to the regulations of the Office of the Insurance Commissioner of the Commonwealth of Puerto Rico (the "Office"). The Company is subject to regulation by the federal government and the Insurance Commissioner of Puerto Rico and the insurance departments of the states in which it is licensed.

The Company is under common management and ownership with Humana Insurance of Puerto Rico, Inc.. The Company is managed and administered under a management.

The Company has an agreement with the PRHIA to provide health insurance coverage to medically indigent qualifying individuals in the Medicare Platino Program (the Program). This agreement has been extended to December 31, 2015.

The Company offers coordinated health and pharmacy insurance coverage and related services through a variety of plans for government-sponsored programs and commercial employer groups. Under the Company's federal government contracts with the Centers for Medicare and Medicaid Services (CMS), the Company provides health and pharmacy insurance coverage to Medicare eligible members.

Medicare

Humana has participated in the Medicare program for private health plans for over 30 years and has established a national presence, offering at least one type of Medicare plan in all 50 states. Humana has a geographically diverse membership base that provides it with greater ability to expand their network of PPO and HMO providers. Humana employs strategies including health assessments and clinical guidance programs such as lifestyle and fitness programs for seniors to guide Medicare beneficiaries in making cost-effective decisions with respect to their health care. Humana believes these strategies result in cost savings that occur from making positive behavior changes.

Medicare is a federal program that provides persons age 65 and over and some disabled persons under the age of 65 certain hospital and medical insurance benefits. CMS, an agency of the United States Department of Health and Human Services, administers the Medicare program. Hospitalization benefits are provided under Part A, without the payment of any premium, for up to 90 days per incident of illness plus a lifetime reserve aggregating 60 days. Eligible beneficiaries are required to pay an annually adjusted premium to the federal government to be eligible for physician care and other services under Part B. Beneficiaries eligible for Part A and Part B coverage under traditional fee-for-service Medicare (Medicare FFS) are still required to pay out-of-pocket deductibles and coinsurance. As an alternative to Medicare FFS, in geographic areas where a managed care organization has contracted with CMS pursuant to the Medicare Advantage program, Medicare beneficiaries may choose to receive benefits from a Medicare Advantage organization under Medicare Part C. Pursuant to Medicare Part C, Medicare Advantage organizations contract with CMS to offer Medicare Advantage plans to provide benefits at least comparable to those offered under Medicare FFS. Humana's Medicare Advantage plans are discussed more fully below. Prescription drug benefits are provided under Part D.

Medicare Advantage Products

Humana contracts with CMS under the Medicare Advantage program to provide a comprehensive array of health insurance benefits, including wellness programs, chronic care management, and

care coordination, to Medicare eligible persons under HMO, PPO, and Private Fee-For-Service, or PFFS, plans in exchange for contractual payments received from CMS, usually a fixed payment per member per month. With each of these products, the beneficiary receives benefits in excess of Medicare FFS, typically including reduced cost sharing, enhanced prescription drug benefits, care coordination, data analysis techniques to help identify member needs, complex case management, tools to guide members in their health care decisions, care management programs, wellness and prevention programs and, in some instances, a reduced monthly Part B premium. Most Medicare Advantage plans offer the prescription drug benefit under Part D as part of the basic plan, subject to cost sharing and other limitations. Accordingly, all of the provisions of the Medicare Part D program described in connection with Humana's stand-alone prescription drug plans also are applicable to most of Humana's Medicare Advantage plans. Medicare Advantage plans may charge beneficiaries monthly premiums and other copayments for Medicare-covered services or for certain extra benefits. Generally, Medicare-eligible individuals enroll in one of Humana's plan choices between October 15 and December 7 for coverage that begins on January 1.

Humana's Medicare HMO and PPO plans, which cover Medicare-eligible individuals residing in certain counties, may eliminate or reduce coinsurance or the level of deductibles on many other medical services while seeking care from participating in-network providers or in emergency situations. Except in emergency situations, or as specified by the plan, most HMO plans provide no out-of-network benefits. PPO plans carry an out-of network benefit that is subject to higher member cost-sharing. In some cases, these beneficiaries are required to pay a monthly premium to the HMO or PPO plan in addition to the monthly Part B premium they are required to pay the Medicare program.

Most of Humana's Medicare PFFS plans are networked-based products with in and out of network benefits due to a requirement that Medicare Advantage organizations establish adequate provider networks, except in geographic areas that CMS determines have fewer than two network-based Medicare Advantage plans. In these areas, Humana offers Medicare PFFS plans that have no preferred network. Individuals in these plans pay Humana a monthly premium to receive typical Medicare Advantage benefits along with the freedom to choose any health care provider that accepts individuals at rates equivalent to Medicare FFS payment rates.

CMS uses monthly rates per person for each county to determine the fixed monthly payments per member to pay to health benefit plans. These rates are adjusted under CMS's risk-adjustment model which uses health status indicators, or risk scores, to improve the accuracy of payment. The risk-adjustment model, which CMS implemented pursuant to the Balanced Budget Act of 1997 (BBA) and the Benefits and Improvement Protection Act of 2000 (BIPA), generally pays more for members with predictably higher costs and uses principal hospital inpatient diagnoses as well as diagnosis data from ambulatory treatment settings (hospital outpatient department and physician visits). Under the risk-adjustment methodology, all health benefit organizations must collect from providers and submit the necessary diagnosis code information to CMS within prescribed deadlines.

Humana's HMO, PPO, and PFFS products covered under Medicare Advantage contracts with CMS are renewed generally for a calendar year term unless CMS notifies Humana of its decision not to renew by May 1 of the calendar year in which the contract would end, or Humana notifies CMS of their decision not to renew by the first Monday in June of the calendar year in which the contract would end. All material contracts between Humana and CMS relating to the Medicare Advantage products have been renewed for 2016, and all of Humana's product offerings filed with CMS for 2016 have been approved.

Medicaid

Medicaid is a federal program that is state-operated to facilitate the delivery of health care services primarily to low-income residents. Each electing state develops, through a state-specific regulatory agency, a Medicaid managed care initiative that must be approved by CMS. CMS requires that Medicaid managed care plans meet federal standards and cost no more than the amount that would have been spent on a comparable fee-for-service basis. States currently either use a formal proposal process in which they review many bidders before selecting one or award individual contracts to qualified bidders who apply for entry to the program. In either case, the contractual relationship with a state generally is for a one-year period. Under these contracts, Humana receives a fixed monthly payment from a government agency for which Humana is required to provide health insurance coverage to enrolled members. Due to the increased emphasis on state health care reform and budgetary constraints, more states are utilizing a managed care product in their Medicaid programs.

Puerto Rico Medicaid

The Puerto Rico Medicaid business consisted of contracts with the Puerto Rico Health Insurance Administration, or PRHIA, for the East, Southeast, and Southwest. On June 26, 2013, the Puerto Rico Health Insurance Administration notified Humana of its election not to renew these contracts which ended June 30, 2013. Contractual transition provisions required the continuation of insurance coverage for beneficiaries through September 30, 2013 and also require an additional period of time thereafter to process residual claims.

Employer Group Commercial

Humana's commercial products sold to employer groups include a broad spectrum of major medical benefits with multiple in-network coinsurance levels and annual deductible choices that employers of all sizes can offer to their employees on either a fully-insured, through HMO, PPO, or POS plans, or self-funded basis. Humana's plans integrate clinical programs, plan designs, communication tools, and spending accounts. The employer group offerings include HumanaVitality®, Humana's wellness and loyalty reward program.

Humana participates in the Federal Employee Health Benefits Program, or FEHBP, primarily with HMO offerings in certain markets. FEHBP is the government's health insurance program for Federal employees, retirees, former employees, family members, and spouses.

Employers can customize their offerings with optional benefits such as dental, vision, life, and a portfolio of voluntary benefit products.

Individual Commercial

Humana's individual health plans are marketed under the HumanaOne® brand. Humana offers products both on and off of the public exchange. Humana offers products on exchange where Humana can achieve an affordable cost of care, including HMO offerings and select networks in most markets. Humana's off-exchange products are primarily PPO and POS offerings, including plans issued prior to 2014 that were previously underwritten. Policies issued prior to the enactment of the Health Care Reform Law on March 23, 2010 are grandfathered policies. Grandfathered policies are exempt from most of the requirements of the Health Care Reform Law, including mandated benefits. However, Humana's grandfathered plans include provisions

that guarantee renewal of coverage for as long as the plan is continued and the individual chooses to renew. Policies issued between March 23, 2010 and December 31, 2013 are required to conform to the Health Care Reform Law, including mandated benefits, upon renewal at various transition dates between 2016 and 2017 depending on the state.

Rewards-based wellness programs are included with many individual products. Humana also offers optional benefits such as dental, vision, life, and a portfolio of financial protection products.

Benefits Expense Recognition

Benefits expense is recognized in the period in which services are provided and includes an estimate of the cost of services which have been incurred but not yet reported, or IBNR.

Humana's reserving practice is to consistently recognize the actuarial best point estimate within a level of confidence required by actuarial standards. Actuarial standards of practice generally require a level of confidence such that the liabilities established for IBNR have a greater probability of being adequate versus being insufficient, or such that the liabilities established for IBNR are sufficient to cover obligations under an assumption of moderately adverse conditions. Adverse conditions are situations in which the actual claims are expected to be higher than the otherwise estimated value of such claims at the time of the estimate. Therefore, in many situations, the claim amounts ultimately settled will be less than the estimate that satisfies the actuarial standards of practice.

Humana develops its estimate for IBNR using actuarial methodologies and assumptions, primarily based upon historical claim experience. Depending on the period for which incurred claims are estimated, Humana applies a different method in determining estimates. For periods prior to the most recent two months, the key assumption used in estimating the IBNR is that the completion factor pattern remains consistent over a rolling 12-month period after adjusting for known changes in claim inventory levels and known changes in claim payment processes. Completion factors result from the calculation of the percentage of claims incurred during a given period that have historically been adjudicated as of the reporting period. For the most recent two months, the incurred claims are estimated primarily from a trend analysis based upon per member per month claims trends developed from historical experience in the preceding months, adjusted for known changes in estimates of recent hospital and drug utilization data, provider contracting changes, changes in benefit levels, changes in member cost sharing, changes in medical management processes, product mix, and weekday seasonality.

The completion factor method is used for the months of incurred claims prior to the most recent two months because the historical percentage of claims processed for those months is at a level sufficient to produce a consistently reliable result. Conversely, for the most recent two months of incurred claims, the volume of claims processed historically is not at a level sufficient to produce a reliable result, which therefore requires Humana to examine historical trend patterns as the primary method of evaluation. Changes in claim processes, including recoveries of overpayments, receipt cycle times, claim inventory levels, outsourcing, system conversions, and processing disruptions due to weather or other events affect views regarding the reasonable choice of completion factors. Claim payments to providers for services rendered are often net of overpayment recoveries for claims paid previously, as contractually allowed. Claim overpayment recoveries can result from many different factors, including retroactive enrollment activity, audits of provider billings and/or payment errors. Changes in patterns of claim overpayment recoveries can be unpredictable and result in completion factor volatility, as they often impact older dates of

service. The receipt cycle time measures the average length of time between when a medical claim was initially incurred and when the claim form was received. Increases in electronic claim submissions from providers decrease the receipt cycle time. If claims are submitted or processed on a faster (slower) pace than prior periods, the actual claim may be more (less) complete than originally estimated using Humana's completion factors, which may result in reserves that are higher (lower) than required.

Medical cost trends potentially are more volatile than other segments of the economy. The drivers of medical cost trends include increases in the utilization of hospital facilities, physician services, new higher priced technologies and medical procedures, and new prescription drugs and therapies, as well as the inflationary effect on the cost per unit of each of these expense components. Other external factors such as government-mandated benefits or other regulatory changes, the tort liability system, increases in medical services capacity, direct to consumer advertising for prescription drugs and medical services, an aging population, lifestyle changes including diet and smoking, catastrophes, and epidemics also may impact medical cost trends. Internal factors such as system conversions, claims processing cycle times, changes in medical management practices and changes in provider contracts also may impact Humana's ability to accurately predict estimates of historical completion factors or medical cost trends. All of these factors are considered in estimating IBNR and in estimating the per member per month claims trend for purposes of determining the reserve for the most recent two months. Additionally, Humana continually prepares and reviews follow-up studies to assess the reasonableness of the estimates generated by Humana processes and methods over time. The results of these studies are also considered in determining the reserve for the most recent two months. Each of these factors requires significant judgment by management.

Health Care Reform

The Health Care Reform Law enacted significant reforms to various aspects of the U.S. health insurance industry. Implementation dates of the Health Care Reform Law began in September 2010 and will continue through 2018, and many aspects of the Health Care Reform Law are already effective and have been implemented by Humana. Certain significant provisions of the Health Care Reform Law include, among others, mandated coverage requirements, mandated benefits and guarantee issuance associated with commercial medical insurance, rebates to policyholders based on minimum benefit ratios, adjustments to Medicare Advantage premiums, the establishment of federally-facilitated or state-based exchanges coupled with programs designed to spread risk among insurers, and the introduction of plan designs based on set actuarial values. In addition, the Health Care Reform Law established insurance industry assessments, including an annual health insurance industry fee and a three-year $25 billion industry wide commercial reinsurance fee. The annual health insurance industry fee levied on the insurance industry was $8 billion in 2014 and $11.3 billion in each of 2015 and 2016, with increasing annual amounts thereafter, and is not deductible for income tax purposes, which significantly increased Humana's effective income tax rate. Humana's effective tax rate for 2015 was approximately 47.5%, including the favorable impact of the sale of Concentra on June 1, 2015. Humana's effective tax rate for 2016 is expected to be approximately 49% to 51%, excluding the impact of transaction costs associated with the Merger. In 2015, Humana paid the federal government $867 million for the annual health insurance industry fee, a 54.3% increase from $562 million in 2014, primarily reflecting an increase in the total industry fee. Humana expects its portion of the annual health insurance industry fee for 2016 to be higher than in 2015 given growth in its market share. The Consolidated Appropriations Act, 2016, enacted on December 18, 2015, included a one-time one year suspension in 2017 of the health insurer fee.

This will significantly reduce Humana's effective tax rate in 2017. The health insurance industry fee levied on the insurance industry was previously expected to be $14 billion in 2017

In addition, the Health Care Reform Law expands federal oversight of health plan premium rates and could adversely affect Humana's ability to appropriately adjust health plan premiums on a timely basis. Financing for these reforms comes, in part, from material additional fees and taxes on Humana (as discussed above) and other health plans and individuals which began in 2014, as well as reductions in certain levels of payments to Humana and other health plans under Medicare as described in this report.

As noted above, the Health Care Reform Law required the establishment of health insurance exchanges for individuals and small employers to purchase health insurance that became effective January 1, 2014, with an annual open enrollment period. Insurers participating on the health insurance exchanges must offer a minimum level of benefits and are subject to guidelines on setting premium rates and coverage limitations. Humana may be adversely selected by individuals who have a higher acuity level than the anticipated pool of participants in this market. In addition, the risk corridor, reinsurance, and risk adjustment provisions of the Health Care Reform Law, established to apportion risk for insurers, may not be effective in appropriately mitigating the financial risks related to Humana's products. In addition, regulatory changes to the implementation of the Health Care Reform Law that allowed individuals to remain in plans that are not compliant with the Health Care Reform Law or to enroll outside of the annual enrollment period may have an adverse effect on Humana's pool of participants in the health insurance exchange. In addition, states may impose restrictions on Humana's ability to increase rates. All of these factors may have a material adverse effect results of operations, financial position, or cash flows if premiums are not adequate or do not appropriately reflect the acuity of these individuals. Any variation from expectations regarding acuity, enrollment levels, adverse selection, or other assumptions used in setting premium rates could have a material adverse effect on results of operations, financial position, and cash flows and could impact Humana's decision to participate or continue in the program in certain states.

The Health Care Reform Law also establishes risk spreading premium stabilization programs effective January 1, 2014. The risk spreading programs are applicable to certain commercial medical insurance products. These programs, commonly referred to as the 3Rs, include a permanent risk adjustment program, a transitional reinsurance program, and a temporary risk corridors program designed to more evenly spread the financial risk borne by issuers and to mitigate the risk that issuers would have mispriced products. The transitional reinsurance and temporary risk corridors programs are for years 2014 through 2016, with potential for additional reinsurance recoveries through 2018 to the extent funds are available. Policies issued prior to March 23, 2010 are considered grandfathered policies and are exempt from the 3Rs. Certain states have allowed non-grandfathered policies issued prior to January 1, 2014 to extend the date of required transition to policies compliant with the Health Care Reform Law to as late as 2017. Accordingly, such policies are exempt from the 3Rs until they transition to policies compliant with the Health Care Reform Law.

The permanent risk adjustment program adjusts the premiums that commercial individual and small group health insurance issuers receive based on the demographic factors and health status of each member as derived from current year medical diagnosis as reported throughout the year. This program transfers funds from lower risk plans to higher risk plans within similar plans in the same state. The risk adjustment program is applicable to commercial individual and small group health plans (except certain exempt and grandfathered plans as discussed above) operating both

inside and outside of the health insurance exchanges established under the Health Care Reform Law. Under the risk adjustment program, a risk score is assigned to each covered member to determine an average risk score at the individual and small group level by in a particular market in a state. Additionally, an average risk score is determined for the entire subject population for each market in each state. Settlements are determined on a net basis by state. Each health insurance issuer's average risk score is compared to the state's average risk score. Plans with an average risk score below the state average will pay into a pool and health insurance issuers with an average risk score that is greater than the state average risk score will receive money from that pool. Humana generally relies on providers, including certain network providers who are Humana employees, to appropriately document all medical data, including the diagnosis codes submitted with claims, as the basis for risk scores under the program. Humana's estimate of amounts receivable and/or payable under the risk adjustment program is based on an estimate of both Humana's own and the state average risk scores. Assumptions used in these estimates include but are not limited to published third party studies and other publicly available data including regulatory plan filings, geographic considerations including Humana's historical experience in markets is has participated in over a long period of time, member demographics (including age and gender for Humana members and other health insurance issuers), Humana's pricing model, sales data for each metal tier (different metal tiers yield different risk scores), and the mix of previously underwritten membership as compared to new members in plans compliant with the Health Care Reform Law. Humana refines its estimates as new information becomes available, including additional data released by the Department of Health and Human Services, or HHS, regarding estimates of state average risk scores. Risk adjustment is subject to audit by HHS beginning with the 2015 coverage year, however, there will be no payments associated with these audits for 2015, the pilot year for the audits.

The temporary risk corridor program applies to individual and small group Qualified Health Plans (or substantially equivalent plans), or QHPs, as defined by HHS, operating both inside and outside of the exchanges. Accordingly, plans subject to risk adjustment that are not QHPs, including small group health plans, were not subject to the risk corridor program in 2014 or 2015. The risk corridor provisions limit issuer gains and losses by comparing allowable medical costs to a target amount, each defined/prescribed by HHS, and sharing the risk for allowable costs with the federal government. Allowable medical costs are adjusted for risk adjustment settlements, transitional reinsurance recoveries, and cost sharing reductions received from HHS. Variances from the target exceeding certain thresholds may result in HHS making additional payments to Humana or require Humana to refund HHS a portion of the premiums received.

The Company estimates and recognizes adjustments to premiums revenue for the risk adjustment and risk corridor provisions by projecting the ultimate premium for the calendar year separately for individual and group plans by state. Estimated calendar year settlement amounts are recognized ratably during the year and are revised each period to reflect current experience, including changes in risk scores derived from medical diagnoses submitted by providers.

The transitional reinsurance program requires Humana to make reinsurance contributions for calendar years 2014 through 2016 to a state or HHS established reinsurance entity based on a national contribution rate per covered member as determined by HHS. While all commercial medical plans, including self-funded plans, are required to fund the reinsurance entity, only fully-insured non-grandfathered plans compliant with the Health Care Reform Law in the individual commercial market will be eligible for recoveries if individual claims exceed a specified threshold.

Humana is required to remit payment for it's per member reinsurance contribution, exclusive of the portion payable to the U.S. Treasury, by January 15 of the year following the coverage year, or January 15, 2016 for the 2015 coverage year. The portion of the reinsurance contribution due to the U.S. Treasury must be paid by November 15 of the year following the coverage year, or November 15, 2016 for the 2015 coverage year. Risk adjustment calculations will be completed and HHS will notify Humana of recoveries due or payments owed to/from Humana under the risk adjustment and reinsurance programs by June 30 of the year following the coverage year. Following this notification, risk corridor calculations are then due by July 31 of the year following the coverage year. Payments due to HHS under the risk adjustment and risk corridor programs must be remitted within 30 days of notification for each program and will be collected prior to the distribution of recoveries by HHS under each program. Payment and recovery amounts associated with reinsurance and risk adjustment will generally be settled with HHS annually in the year following the coverage year.

Provider Arrangements

Humana provides its members with access to health care services through its networks of health care providers whom Humana employs or with whom Humana has contracted, including hospitals and other independent facilities such as outpatient surgery centers, primary care providers, specialist physicians, dentists, and providers of ancillary health care services and facilities. These ancillary services and facilities include laboratories, ambulance services, medical equipment services, home health agencies, mental health providers, rehabilitation facilities, nursing homes, optical services, and pharmacies. Humana's membership base and the ability to influence where members seek care generally enables Humana to obtain contractual discounts with providers.

Humana uses a variety of techniques to provide access to effective and efficient use of health care services for its members. These techniques include the coordination of care for members, product and benefit designs, hospital inpatient management systems, the use of sophisticated analytics, and enrolling members into various care management programs. The focal point for health care services in many of Humana's HMO networks is the primary care provider who, under contract with Humana, provides services to Humana's members, and may control utilization of appropriate services by directing or approving hospitalization and referrals to specialists and other providers. Some physicians may have arrangements under which they can earn bonuses when certain target goals relating to the provision of quality patient care are met. Humana has available care management programs related to complex chronic conditions such as congestive heart failure and coronary artery disease. Humana also has programs for prenatal and premature infant care, asthma related illness, end stage renal disease, diabetes, cancer, and certain other conditions.

Humana typically contracts with hospitals on either (1) a per diem rate, which is an all-inclusive rate per day, (2) a case rate or diagnosis-related groups (DRG), which is an all-inclusive rate per admission, or (3) a discounted charge for inpatient hospital services. Outpatient hospital services generally are contracted at a flat rate by type of service, ambulatory payment classifications, or APCs, or at a discounted charge. APCs are similar to flat rates except multiple services and procedures may be aggregated into one fixed payment. These contracts are often multi-year agreements, with rates that are adjusted for inflation annually based on the consumer price index, other nationally recognized inflation indexes, or specific negotiations with the provider. Outpatient surgery centers and other ancillary providers typically are contracted at flat rates per service provided or are reimbursed based upon a nationally recognized fee schedule such as the Medicare allowable fee schedule.

Humana's contracts with physicians typically are renewed automatically each year, unless either party gives written notice, generally ranging from 90 to 120 days, to the other party of its intent to terminate the arrangement. Most of the physicians in Humana's PPO networks and some of the physicians in its HMO networks are reimbursed based upon a fixed fee schedule, which typically provides for reimbursement based upon a percentage of the standard Medicare allowable fee schedule.

The terms of Humana's contracts with hospitals and physicians may also vary between Medicare and commercial business. A significant portion of Medicare network contracts, including those with both hospitals and physicians, are tied to Medicare reimbursement levels and methodologies.

Automatic reductions to the federal budget, known as sequestration, took effect on April 1, 2013, including aggregate reductions to Medicare payments to providers of up to 2% per fiscal year. Due to the uncertainty around the application of these reductions, there can be no assurances that Humana can completely offset any reductions to the Medicare healthcare programs.

Capitation

Humana offers providers a continuum of opportunities to increase the integration of care and offer assistance to providers in transitioning from a fee-for-service to a value-based arrangement. These include performance bonuses, shared savings and shared risk relationships. For some of its medical membership, Humana shares risk with providers under capitation contracts where physicians and hospitals accept varying levels of financial risk for a defined set of membership, primarily HMO membership. Under the typical capitation arrangement, Humana prepays these providers a monthly fixed-fee per member, known as a capitation (per capita) payment, to cover all or a defined portion of the benefits provided to the capitated member. Humana believes these risk-based models represent a key element of the integrated care delivery model at the core of Humana's strategy.

Physicians under capitation arrangements typically have stop loss coverage so that a physician's financial risk for any single member is limited to a maximum amount on an annual basis. Humana typically processes all claims and monitor the financial performance and solvency of its capitated providers. Humana remains financially responsible for health care services to its members in the event its providers fail to provide such services.

Accounting Treatment

The Company prepares its financial statements on the basis of accounting practices prescribed or permitted by the Commissioner. These accounting practices differ from generally accepted accounting principles (GAAP) as certain assets, including certain deferred income taxes, certain aged premium and healthcare receivables, prepaid expenses, and certain fixed assets are considered non-admitted assets for statutory purposes and are excluded from the statutory statements of admitted assets, liabilities and surplus. In addition, certain debt investments that would be shown at market value under GAAP are presented in the statutory statements of admitted assets, liabilities and surplus at amortized cost.

Statements of Admitted Assets, Liabilities and Surplus

The following is a summary of invested assets at December 31, 2015 and 2014:

	Amounts in $000's			
	2015	2014	$ Change	% Change
Bonds	$ 100,261	$ 126,100	$ (25,839)	(20)%
Short-term investments	3,271	646	2,625	407%
Cash & cash equivalents	4,486	(1,359)	5,845	(430)%
Total Invested Assets	$ 108,018	$ 125,387	$ (17,369)	(14)%

The total of cash and invested assets decreased $17.3 million in 2015 to a total of $108.0 million at December 31, 2015. This decrease is largely due to the $25.8 million net sale of bonds in 2015. The investment mix fluctuates due to the Company's preference to invest more in bonds when markets are performing well, to earn a higher yield. Short-term investments are recorded at amortized cost. Bonds with an NAIC's Securities Valuation Office (SVO) rating of 1 or 2 are carried at amortized cost, while all other bonds are recorded at the lower of amortized cost or fair value. The sale of bonds was partially offset by the overall increase in cash, noted in the Cash Flow and Liquidation section below, to arrive at the overall decline in invested assets.

The following is a summary of other assets at December 31, 2015 and 2014:

	Amounts in $000's			
	2015	2014	$ Change	% Change
Investment income due and accrued	$ 473	$ 780	$ (307)	(39)%
Premiums receivable	11,276	10,197	1,079	11%
Healthcare and other receivables	3,878	2,931	947	32%
Amounts receivable relating to uninsured plans	14,506	7,744	6,762	87%
Current federal and foreign income tax recoverable	2,606	3,074	(468)	(15)%
Total other assets	$ 32,739	$ 24,726	$ 8,013	32%

Total other assets increased from 2014 by approximately $8 million as a result of the increase to amounts receivable relating to uninsured plans. This increase is primarily due to the growth in Medicare membership in 2015 as compared to 2014 which resulted in additional receipt of claims eligible for subsidy under CMS's low income cost share and catastrophic reinsurance programs resulting in the increase to the receivable balances shown above. See Revenue Recognition section below for further considerations of the membership growth noted in 2015.

The following is a summary of liabilities at December 31, 2015 and 2014:

	Amounts in $000's			
	2015	2014	$ Change	% Change
Benefits & LAE payable	$ 43,700	$ 60,006	$ (16,306)	(27)%
Aggregate reserves	11,301	6,407	4,894	76%
Advance premiums	469	142	327	232%
Payable to Humana Inc.	958	1,694	(736)	(43)%
Accounts payable and accrued expenses	8,682	12,338	(3,656)	(30)%
Total liabilities	$ 65,110	$ 80,587	$ (15,477)	(19)%

The decrease in total liabilities in 2015 is the result of decreases to benefits and loss adjustment expenses payable and accounts payable and accrued expenses offset by an increase in aggregate reserves. The net decrease of $16.3M in benefits payable and loss adjustment expenses is primarily due to the drop in claims reserves based on the claim experience in 2015 being better than initial projectioned for the Medicare block of business. Based on the actual results of 2015 the actuarial claims reserves were reduced.

The decrease of $3.7 million in accounts payable and accrued expenses since prior year-end is the result of the outstanding admin accruals as of December 31, 2014 that were not outstanding as of December 31, 2015.

Aggregate reserves increased $4.9 million to a total of $11.3 million at December 31, 2015 primarily due to the increase in the Medicare Risk Adjustment balance associated with the membership growth discussed within the Revenue Recognition section below.

Total capital and surplus at December 31, 2015 was approximately $75.6 million. The following items effected the change in surplus:

	Amounts in $000's
	$ 2015
Total capital and surplus December 31, 2014	69,526
Net income (loss)	7,699
Change in net unrealized capital gains (losses)	(6)
Change in non-admitted assets	(1,979)
Paid in surplus adjustments	406
Total capital and surplus December 31, 2015	$ 75,646

The Company's reported capital and surplus of approximately $75.6 million and $69.5 million as of December 31, 2015 and 2014, respectively. The increase in surplus is the result of net income earned in 2015, see below discussion of income statement activity, offset by the increase in nonadmitted assets. This increase was the result of increased outstanding premiums over 90 days, increases in electronic data processing equipment and software as well as increases in prepaid balances all of which are not allowed under SSAP No. 4 *Assets and Nonadmitted Assets*. The Company is in compliance with required RBC levels as per the Commissioner of Insurance.

Revenue Recognition

The Company generally establishes one-year commercial membership contracts with employer groups, subject to cancellation by the employer group on 30-day written notice. The Company bills and collects premium from employer groups and members in other individual products monthly.

Changes in revenues for individual commercial medical products resulting from the periodic changes in risk-adjustment scores derived from medical diagnoses for membership and changes in risk corridor estimates are recognized when the amounts become determinable and the collectability is reasonably assured.

The Company's Medicare contracts with CMS renew annually. Humana's Medicare contracts also establish monthly rates per member. The Company bills and collects premium from members in its Medicare products monthly. Monthly premiums are received from the federal government and various states according to government specified payment rates and various contractual terms. Changes in revenues for Medicare products resulting from the periodic changes in risk-adjustment scores derived from medical diagnoses for membership are recognized when the amounts become determinable and the collectability is reasonably assured

Premiums revenue is estimated by multiplying the membership covered under the various contracts by the contractual rates. Premiums revenue is recognized as income in the period members are entitled to receive services, and is net of estimated uncollectible amounts, retroactive membership adjustments, and adjustments to recognize rebates under the minimum benefit ratios required under the Health Care Reform Law.

The Company estimates policyholder rebates by projecting calendar year minimum benefit ratios for the individual, small group, and large group markets, as defined by the Health Care Reform Law using a methodology prescribed by HSS, separately by state. Beginning in 2014, Medicare Advantage are also subject to minimum benefit ratio requirements under the Health Care Reform Law. Estimated calendar year rebates recognized ratably during the year are revised each period to reflect current experience.

Retroactive membership adjustments result from enrollment changes not yet processed, or not yet reported by an employer group or the government. The Company routinely monitors the collectability of specific accounts, the aging of receivables, historical retroactivity trends, estimated rebates, as well as prevailing and anticipated economic conditions, and reflects any required adjustments in the current period's revenue. Premiums received prior to the service period are recorded as advance premiums.

Results of Operations

The results of the Company's operations during 2015 and 2014 were:

	Amounts in $000's			
	2015	2014	$ Change	% Change
Earned premiums	$ 417,739	$ 391,464	$ 26,275	7%
Benefits incurred and loss adjustment expenses	(379,875)	(377,521)	(2,354)	1%
Selling, general and administrative expenses	(40,568)	(39,840)	(728)	2%
Change in aggregate reserves	(207)	3,853	(4,060)	(105)%
Net underwriting loss	(2,911)	(22,044)	19,133	(87)%
Net investment income	3,410	3,882	(472)	(12)%
Net other income	6,021	1	6,020	796,331%
Net realized capital gain (loss) on investments	1,656	(4)	1,660	(42,097)%
Income (loss) before federal income tax expense (benefit)	8,176	(18,165)	26,341	(145)%
Federal income tax expense (benefit)	(477)	-	477	100%
Net income (loss)	$ 7,699	$ (18,165)	$ 25,864	(142)%

During 2015 the Company saw an overall increase in operations that resulted in the flip from a net loss in 2014 of $18.2 million to net income in 2015 of $7.7 million. This flip was the result of management's focus to increase the Medicare business in 2015 which saw a 5% membership growth from 2015. The impact of this growth was the increase in premiums of $26.5 million as well as the increase in benefits incurred as well as administrative expenses which are largely impacted by membership. Net other income increased due to services being provided as a third party administrator contracted by the Puerto Rican government to serve the Medicaid population for various regions.

Cash Flow and Liquidity

The primary sources of cash may include receipts of premiums, administrative fees, capital contributions, and investment and other income, as well as proceeds from the sale or maturity of investment securities. The primary uses of cash may include disbursements for claims payments, operating costs, taxes, capital expenditures, dividends, and purchases of investment securities. Because premiums generally are collected in advance of claim payments by a period of up to several months, the Company's business normally should produce positive cash flows during periods of increasing premiums and enrollment. Conversely, cash flows would be negatively impacted during periods of decreasing premiums and enrollment. From period to period, cash flows may also be affected by the timing of working capital items including premiums receivable, benefits payable and other receivables and payables.

Cash flows can be impacted by the timing of payments to and receipts from CMS associated with Medicare Part D subsidies for which the Company does not assume risk. The use of operating cash flows may be limited by regulatory requirements of state departments of insurance (or comparable state regulators) which require, among other items, that regulated subsidiaries maintain minimum levels of capital and seek approval before paying dividends to the parent.

The Company's cash, investments and capital structure are managed to enable meeting the short and long-term obligations of the Company's business while maintaining financial flexibility and liquidity, and are forecasted, analyzed, and monitored to enable investment and financing within the overall constraints of the Company's financial strategy.

Given the Company predominately writes short tailed health business, the investment portfolio is conservatively managed with an emphasis on high quality, liquid holdings which provide a reasonable return.

Cash flows during 2015 and 2014 are summarized as follows:

	Amounts in $000's	
	2015	2014
Net cash used for operations	$ (13,152)	$ (14,623)
Net cash from investments	26,792	12,901
Net cash used for financing and miscellaneous activities	(5,170)	(5,329)
Net change in cash, cash equivalents and short-term investments	$ 8,470	$ (7,051)

The $8.5 million increase in net cash from 2014 is primarily the result of cash received from the sale of investments as noted in invested asset section above. This inflow of cash was offset by cash used for financing activities associated with miscellaneous activities during 2015 such as payment of intercompany balances with Humana. The Company also saw cash outflow from operations as a result of unfavorable premium collections vs. claims paid. While the Company concentrated efforts to increase the membership of the Medicare Segment in 2015, as noted above, there was also an increase in Claims PMPM as a result of higher utilization for this growth. The result of which was cash outflow from operations.

Cautionary Statements

This document includes both historical and forward-looking statements. The Company has based these forward-looking statements on current expectations and projections about future events, trends and uncertainties. These forward-looking statements are not guarantees of future performance and are subject to risks, uncertainties and assumptions, including, among other things, the information discussed below. In making these statements, the Company is not undertaking to address or update them in future filings or communications regarding business or results. The Company's business is highly complicated, regulated and competitive with many different factors affecting results.

Due to the nature of its business, the Company is or may become subject to pending or threatened litigation or other legal actions relating to the failure to provide or pay for health insurance coverage or other benefits, poor outcomes for care delivered or arranged under the Company's programs, nonacceptance or termination of providers, failure to return withheld amounts from provider compensation, and failure to disclose network discounts and various provider payment arrangements and claims relating to contract performance. Recent court decisions and legislative activity may increase the Company's exposure for any of these types of claims.

Management does not believe that any pending or threatened legal actions against the Company or audits by agencies will have a material adverse effect on the Company's statement of admitted assets, liabilities and surplus, statement of revenue and expenses, or cash flows. However, the

likelihood or outcome of current or future suits cannot be accurately predicted with certainty. In addition, the potential for increased liability for medical negligence arising from claims adjudication, along with increased litigation that has accompanied the negative publicity and public perception of the Company's industry, adds to this uncertainty. Therefore, such legal actions and government audits and investigations could have a material adverse affect on the Company's statement of admitted assets, liabilities and surplus, statement of revenue and expenses, or cash flows.