Supplement for the year 2010 of the **Blue Cross and Blue Shield of Florida, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Blue Cross and Blue Shield of Florida, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....98167

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	1,013,480,428	1,155,667,637	3,321,371,509	223,904,733	461,569,624	34,317,483	6,210,311,414	XXX	6,210,311,414
1.2 Federal high risk pools							0	XXX	0
1.3 State high risk pools							0	XXX	0
1.4 Premiums earned including state and federal high risk programs (Lines 1.1+1.2+1.3)	1,013,480,428	1,155,667,637	3,321,371,509	223,904,733	461,569,624	34,317,483	6,210,311,414	XXX	6,210,311,414
1.5 Federal taxes and federal assessments	3,856,691	84,679,077	89,139,729	13,749,108	15,093,953	(2,310,387)	184,008,171	(78,178,824)	105,829,347
1.6 State insurance, premium and other taxes (Similar local taxes of $.....0)	10,263,073	20,322,759	29,002,104	2,686,696	5,859,340	271,976	68,405,948	(12,877,260)	55,528,688
1.7 Regulatory authority licenses and fees	795,006	584,960	937,143	77,181	363,809	112,814	2,870,913		2,870,913
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	996,765,658	1,070,080,841	3,202,292,533	207,391,748	440,252,522	36,243,080	5,955,026,382	XXX	6,046,082,466
1.9 Net assumed less ceded reinsurance premiums earned	(3,959,249)	0	0	0	0	(13,561,293)	(17,520,542)	XXX	(17,520,542)
1.10 Other adjustments due to MLR calculations - premiums	0	0	(137,217,465)	0	0	0	(137,217,465)	XXX	(137,217,465)
1.11 Risk revenue							0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (lines 1.8+1.9+1.10+1.11)	994,806,409	1,070,080,841	3,065,075,068	207,391,748	440,252,522	22,681,787	5,800,288,375	XXX	5,891,344,459
2. Claims:									
2.1 Incurred claims excluding prescription drugs	713,560,626	690,023,204	2,236,771,653	154,348,229	291,003,860	34,368,347	4,120,075,919	XXX	4,120,075,919
2.2 Prescription drugs	75,475,193	149,401,774	636,793,538	20,429,931	80,868,933		962,969,369	XXX	962,969,369
2.3 Pharmaceutical rebates	3,020,419	6,665,022	9,596,927	1,919,941	8,760,536		29,962,845	XXX	29,962,845
2.4 State stop loss, market stabilization and claim/census based assessments							0	XXX	0
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	XXX	0
4. Deductible fraud and abuse detection/recovery expenses (for MLR use only)	163,083	109,125	213,920	16,759	58,893	31,183	592,963	359,871	952,834
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	786,015,400	832,759,956	2,863,968,264	172,858,219	363,112,257	34,368,347	5,053,082,443	XXX	5,053,082,443
5.1 Net assumed less ceded reinsurance claims incurred	(1,478,237)	0	0	0	0	(12,808,263)	(14,286,500)	XXX	(14,286,500)
5.2 Other adjustments due to MLR calculations - claims	0	0	(137,217,465)	0	0	0	(137,217,465)	XXX	(137,217,465)
5.3 Rebates paid							0	XXX	0
5.4 Estimated rebates unpaid prior year							0	XXX	0
5.5 Estimated rebates unpaid current year							0	XXX	0
5.6 Fee for service and co-pay revenue							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)	784,537,163	832,759,956	2,726,750,799	172,858,219	363,112,257	21,560,084	4,901,578,478	XXX	4,901,578,478
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	4,724,631	3,572,554	9,485,248	767,508	230,788	207,648	18,988,377	10,293,060	29,281,437
6.2 Type B. Health information technology expenses related to health improvement	16,442	13,154	28,840	2,121	1,197	3,442	65,196	1,545,993	1,611,189
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	4,741,073	3,585,708	9,514,088	769,629	231,985	211,090	19,053,573	11,839,053	30,892,626
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	0.792	0.782	0.897	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	13,261,782	9,967,221	23,723,756	2,298,782	1,267,392	209,849	50,748,782	120,059,793	170,808,575
8.2 All other claims adjustment expenses	32,099,780	16,453,505	55,776,342	4,031,887	15,991,760	754,455	125,107,729	167,930,151	293,037,880
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	45,361,562	26,420,726	79,500,098	6,330,669	17,279,152	964,304	175,856,511	287,989,944	463,846,455
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.045	0.025	0.025	0.031	0.039	0.027	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	6,703,534	9,222,230	11,094,262	1,876,366	928,238		29,824,630	9,917,736	39,742,366
10.2 Agents and brokers fees and commissions	39,930,304	68,413,254	64,232,838	5,741,468	478,984		178,796,848	2,731,868	181,528,716
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	35,284	624,108	860,136	132,669	145,646	(22,294)	1,775,549	(754,371)	1,021,178
10.4 Other general and administrative expenses	108,707,501	44,330,183	58,356,575	1,672,441	38,304,329	2,995,034	252,366,063	274,056,797	526,422,860
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	155,376,623	122,589,775	132,543,811	9,422,944	39,857,197	2,972,740	462,763,090	285,952,030	748,715,120
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	4,789,988	84,724,676	116,768,272	18,010,287	19,771,931	(3,026,431)	241,036,723	XXX	(253,688,220)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	392,316,622	392,316,622
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0
14. Federal income taxes (excluding taxes on Line 1.5 above)	274,836	4,861,264	6,699,721	1,033,380	1,134,458	(173,648)	13,830,011	(5,875,902)	7,954,109
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	227,206,712	XXX	130,674,293
16. ICD-10 Implementation Expenses (informational only, already included in general expenses)							0		0
OTHER INDICATORS:									
1. Number of certificates/policies	275,530	145,090	362,998	20,477	173,429	40,720	1,018,244	301,754	1,319,998
2. Number of covered lives	409,625	239,372	677,008	24,099	174,679	79,469	1,604,252	551,427	2,155,679
3. Number of groups	XXX	332,933	19,757	2	1	28	352,721	222	352,943
4. Member months	4,911,302	3,176,903	8,249,802	289,575	2,147,058	871,660	19,646,300	6,512,711	26,159,011

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Blue Cross and Blue Shield of Florida, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....98167

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health premiums earned:							
1.1 Direct premiums written	1,013,672,467	1,155,667,637	3,320,787,490	223,904,733	461,570,661	34,094,867	6,209,697,855
1.2 Unearned premium prior year	1,520,059		1,728,032		98,258	2,385,683	5,732,032
1.3 Unearned premium current year	1,712,096		1,144,013		99,295	2,163,067	5,118,473
1.4 Change in unearned premium (Lines 1.2-1.3)	(192,039)	0	584,019	0	(1,037)	222,616	613,559
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5-1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1+1.4+1.7 less $.....0 write offs)	1,013,480,428	1,155,667,637	3,321,371,509	223,904,733	461,569,624	34,317,483	6,210,311,414
1.9 Assumed premiums earned from non-affiliates						4,834,885	4,834,885
1.10 Net assumed less ceded premiums earned from affiliates	(3,959,249)						(3,959,249)
1.11 Ceded premiums earned to non-affiliates						18,396,178	18,396,178
1.12 Other adjustments due to MLR calculation - premiums			(137,217,465)				(137,217,465)
1.13 Net premiums earned (Lines 1.8+1.9+1.10-1.11+1.12)	1,009,521,179	1,155,667,637	3,184,154,044	223,904,733	461,569,624	20,756,190	6,055,573,407
2. Direct claims incurred:							
2.1 Paid claims during the year	746,368,385	844,068,173	2,746,604,530	175,276,973	357,126,423	23,304,539	4,892,747,023
2.2 Direct claim liability current year	12,890,644		99,206,333			296,819	112,393,796
2.3 Direct claim liability prior year	13,825,226		113,771,968			327,986	127,925,180
2.4 Direct claim reserves current year	69,874,798	56,201,286	196,644,968	12,713,806	34,908,426	8,216,627	378,559,911
2.5 Direct claim reserves prior year	62,655,510	75,449,974	245,466,313	16,781,875	38,329,876	5,922,791	444,606,339
2.6 Direct contract reserves current year	364,971,808		537,207,990		280,452,075	55,875,631	1,238,507,504
2.7 Direct contract reserves prior year	338,614,755		399,990,525		273,726,862	47,074,512	1,059,406,654
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a+2.8b-2.8c)	0	0	0	0	0	0	0
2.8a Paid medical incentive pools and bonuses current year							0
2.8b Accrued medical incentive pools and bonuses current year							0
2.8c Accrued medical incentive pools and bonuses prior year							0
2.9 Net healthcare receivables (Lines 2.9a-2.9b)	(7,005,256)	(7,942,471)	(43,533,269)	(1,649,317)	(2,682,069)	0	(62,812,382)
2.9a Healthcare receivables current year	7,518,830	8,524,528	44,632,041	1,770,185	2,878,624		65,324,008
2.9b Healthcare receivables prior year	14,523,886	16,466,999	88,165,310	3,419,502	5,560,693		128,136,390
2.10 Total incurred claims (Lines 2.1+2.2-2.3+2.4-2.5+2.6-2.7+2.8-2.9)	786,015,400	832,759,956	2,863,968,264	172,858,221	363,112,255	34,368,347	5,053,082,443
2.11 Assumed incurred claims from non-affiliates						846,349	846,349
2.12 Net assumed less ceded incurred claims from affiliates							0
2.13 Ceded incurred claims to non-affiliates	1,478,237					13,654,612	15,132,849
2.14 Other adjustments due to MLR calculation - claims			(137,217,465)				(137,217,465)
2.15 Net incurred claims (Lines 2.10+2.11+2.12-2.13+2.14)	784,537,163	832,759,956	2,726,750,799	172,858,221	363,112,255	21,580,084	4,901,578,478
3. Fraud and abuse recoveries that reduced PAID claims in Line 2.1 above (informational only)	163,083	109,125	213,920	16,759	90,076		592,963

Supplement for the year 2010 of the **Blue Cross and Blue Shield of Florida, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Blue Cross and Blue Shield of Florida, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....98167

3A All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses			
	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 (Cols. 1 thru 5)	7 Cost Containment Expenses	8 Other Claim Adjustment Expenses	9 General Administrative Expenses	10 Total Expenses (Cols 6 thru 9)
1. Individual comprehensive coverage expenses:										
1.1 Salaries (including $.....0 for affiliated services)	1,202,408	42,112	3,294	519,567	7,234	1,774,635	8,124,325	14,494,092	56,390,527	80,783,579
1.2 Outsourced services	2,167,394	6,829		8,297	3,865	2,186,385	1,879,541	1,210,812	14,162,636	19,439,374
1.3 EDP equipment and software (including $.....0 for affiliated services)	41,086	1,423	67	25,101	339	68,016	379,002	2,266,164	14,545,059	17,258,241
1.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)	4,240	28		3,548	9	7,825	12,892	47,104	206,717	276,538
1.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
1.6 Other expenses (including $.....0 for affiliated services)	522,722	12,380	793	163,322	4,994	704,211	2,866,022	14,061,608	81,127,765	98,779,606
1.7 Subtotal before reimbursements and taxes (Lines 1.1 to 1.6)	3,937,850	62,772	4,154	719,855	16,441	4,741,072	13,261,782	32,099,780	166,434,704	216,537,338
1.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
1.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1.10 Total (Lines 1.7 to 1.9)	3,937,850	62,772	4,154	719,855	16,441	4,741,072	13,261,782	32,099,780	166,434,704	216,537,338
1.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	224,804			224,804
2. Small group comprehensive coverage expenses:										
2.1 Salaries (including $.....0 for affiliated services)	867,891	31,991	2,436	374,909	5,804	1,283,031	6,205,426	7,694,079	59,735,555	74,918,091
2.2 Outsourced services	1,698,476	5,162		7,806	3,083	1,714,529	1,443,611	336,590	9,827,154	13,321,884
2.3 EDP equipment and software (including $.....0 for affiliated services)	29,473	993	53	18,631	271	49,421	301,848	1,273,384	12,034,147	13,658,800
2.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)	2,775	55	15	2,926	11	5,782	10,330	20,615	186,228	222,955
2.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
2.6 Other expenses (including $.....0 for affiliated services)	379,010	9,264	637	140,048	3,986	532,945	2,006,006	7,128,837	125,808,525	135,476,313
2.7 Subtotal before reimbursements and taxes (Lines 2.1 to 2.6)	2,977,625	47,465	3,141	544,322	13,155	3,585,708	9,967,221	16,453,505	207,591,609	237,598,043
2.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
2.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2.10 Total (Lines 2.7 to 2.9)	2,977,625	47,465	3,141	544,322	13,155	3,585,708	9,967,221	16,453,505	207,591,609	237,598,043
2.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	150,425			150,425
3. Large group comprehensive coverage expenses:										
3.1 Salaries (including $.....0 for affiliated services)	2,059,733	100,477	6,588	1,047,175	16,963	3,230,936	14,396,489	29,364,195	62,390,849	109,382,469
3.2 Outsourced services	5,016,668	6,122		8,696	4,573	5,036,059	4,262,196	2,530,788	10,473,229	22,302,272
3.3 EDP equipment and software (including $.....0 for affiliated services)	65,947	3,095	121	49,820	641	119,624	783,365	2,358,834	15,771,528	19,033,351
3.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)	4,560	176		3,425	34	8,195	23,338	56,915	194,467	282,915
3.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
3.6 Other expenses (including $.....0 for affiliated services)	758,785	16,152	1,630	336,077	6,630	1,119,274	4,258,368	21,465,610	73,652,985	100,496,237
3.7 Subtotal before reimbursements and taxes (Lines 3.1 to 3.6)	7,905,693	126,022	8,339	1,445,193	28,841	9,514,088	23,723,756	55,776,342	162,483,058	251,497,244
3.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
3.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3.10 Total (Lines 3.7 to 3.9)	7,905,693	126,022	8,339	1,445,193	28,841	9,514,088	23,723,756	55,776,342	162,483,058	251,497,244
3.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	294,881			294,881

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (Cols. 1 thru 4)
1. Individual comprehensive coverage expenses:					
1.1 HIT expenses	14,668	259	1,515		16,442
1.2 Other than HIT expenses	3,937,850	62,772	4,154	719,855	4,724,631
2. Small group comprehensive coverage expenses:					
2.1 HIT expenses	11,735	207	1,212		13,154
2.2 Other than HIT expenses	2,977,625	47,466	3,141	544,322	3,572,554
3. Large group comprehensive coverage expenses:					
3.1 HIT expenses	25,729	454	2,657		28,840
3.2 Other than HI expenses	7,905,693	126,023	8,339	1,445,193	9,485,248
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1+2.1+3.1)	52,132	920	5,384	0	58,436
4.2 Subtotal other than HIT expenses (Lines 1.2+2.2+3.2)	14,821,168	236,261	15,634	2,709,370	17,782,433
4.3 Total (Lines 4.1+4.2)	14,873,300	237,181	21,018	2,709,370	17,840,869

SUPPLEMENT FOR THE YEAR 2010 OF THE CONNECTICUT GENERAL LIFE INSURANCE COMPANY

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

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

REPORT FOR: 1. CORPORATION Connecticut General Life Insurance Company 2. 900 Cottage Grove Road Bloomfield, CT 06002 (LOCATION)

NAIC Group Code 0901 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 62308

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by statute)	Other Health	Subtotal (Cols. 1 through 6)	Uninsured Plans	Total 7 + 8
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	80,523,583	24,343,385	496,280,076	11,162,059	40,034,488	73,683,701	726,027,292	XXX	726,027,292
1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	(35,784)	(10,818)	(220,541)	0	(17,791)	(32,744)	(317,678)	XXX	(317,678)
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	80,487,799	24,332,567	496,059,535	11,162,059	40,016,697	73,650,957	725,709,614	XXX	725,709,614
1.5 Federal taxes and federal assessments	1,681,902	(4,222,739)	1,776,195	(727,541)	1,789,127	7,109,611	7,406,555	23,720,569	31,127,124
1.6 State insurance, premium and other taxes (Similar local taxes of $ 0)	1,618,929	(251,139)	8,739,290	(116,928)	965,193	2,387,116	13,342,462	3,356,371	16,698,833
1.7 Regulatory authority licenses and fees	782	117	2,905	0	684	125	4,614	0	4,614
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	77,186,187	28,806,328	485,541,144	12,006,527	37,261,693	64,154,105	704,955,984	XXX	677,879,044
1.9 Net Assumed less Ceded reinsurance premiums earned	0	0	0	0	0	0	0	XXX	0
1.10 Other Adjustments due to MLR calculations - Premiums	129,238	10,515	0	0	0	1,876,988	2,016,741	XXX	2,016,741
1.11 Risk Revenue	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)	77,315,425	28,816,843	485,541,144	12,006,527	37,261,693	66,031,093	706,972,725	XXX	679,895,785
2. Claims:									
2.1 Incurred claims excluding prescription drugs	42,602,563	28,564,351	362,075,302	1,902,733	32,338,878	47,913,613	515,397,441	XXX	515,397,441
2.2 Prescription drugs	6,583,433	4,271,496	69,827,438	12,034,278	0	1,093,666	93,810,310	XXX	93,810,310
2.3 Pharmaceutical rebates	607,351	313,617	6,637,223	2,640,339	0	1,793	10,200,323	XXX	10,200,323
2.4 State stop loss, market stabilization and claim/census based assessments	(22,839)	(14,660)	(311,010)	0	0	0	(348,509)	XXX	(348,509)
3. Incurred medical incentive pools and bonuses	36	0	5,574	0	0	0	5,610	XXX	5,610
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	0	0	0	0	0	0	0	0	0
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 - 2.4 + 3) (From Part 2, Line 2.10)	48,601,520	32,536,891	425,582,101	11,296,671	32,338,878	49,005,486	599,361,547	XXX	599,361,547
5.1 Net Assumed less Ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other Adjustments due to MLR calculations - Claims	3,006,266	0	(1,774,279)	0	0	65,121	1,297,107	XXX	1,297,107
5.3 Rebates paid	0	0	0	0	0	0	0	XXX	0
5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
5.6 Fee for service and co-pay revenue	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)	51,607,786	32,536,891	423,807,821	11,296,671	32,338,878	49,070,607	600,658,654	XXX	600,658,654
6. Improving Health Care Quality Expenses Incurred:									
6.1 Type A. Expenses for health improvements other than Health Information Technology	965,444	144,827	3,588,232	5,648	(5,850)	17	4,698,318	7,261,363	11,959,681
6.2 Type B. Health Information Technology expenses related to health improvement	117,338	17,602	436,105	0	3,064	260	574,369	1,070,934	1,645,303
6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	1,082,782	162,428	4,024,337	5,648	(2,785)	277	5,272,687	8,332,297	13,604,983
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.3)/Line 1.8	0.644	1.135	0.885	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims Adjustment Expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	1,790,771	268,634	6,655,693	4,139	136,754	223,515	9,079,506	16,070,425	25,149,931
8.2 All other claims adjustment expenses	83,065	12,461	308,726	145,004	7,953	(83,429)	473,780	(18,032)	455,748
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	1,873,836	281,095	6,964,420	149,143	144,707	140,086	9,553,286	16,052,392	25,605,679
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)	0.024	0.010	0.014	0.012	0.004	0.002	XXX	XXX	XXX
10. General and Administrative (G&A) Expenses:									
10.1 Direct sales salaries and benefits	721,533	108,237	2,681,697	0	127,540	105,941	3,744,950	3,726,199	7,471,148
10.2 Agents and brokers fees and commissions	10,758,323	625,899	12,759,982	286,991	1,029,337	1,894,500	27,355,031	0	27,355,031
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	415	62	1,541	300	316	14	2,648	1,831	4,479
10.4 Other general and administrative expenses	9,249,744	1,387,557	34,378,187	1,356,632	1,126,166	4,536,212	52,034,498	70,376,366	122,410,864
10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)	20,730,015	2,121,755	49,821,407	1,643,923	2,283,360	6,536,668	83,137,127	74,104,396	157,241,523
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.3 - 8.3 - 10.5)	2,021,006	(6,285,326)	923,159	(1,088,858)	2,497,534	10,283,456	8,350,971	XXX	(117,215,054)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	156,821,358	156,821,358
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	19,145,097	XXX	19,145,097
14. Federal income taxes (excluding taxes on Line 1.5 above)	484,413	146,445	2,985,516	67,149	240,839	443,266	4,367,626	755,658	5,123,284
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	23,128,441	XXX	53,828,116
16. ICD-10 Implementation Expenses (informational only; already included in general expenses)	2,107	316	7,832	490	278	11,603	22,625	48,037	70,663
OTHER INDICATORS:									
1. Number of certificates/policies	29,683	4,002	70,606	7,975	273	104,798	217,337	408,361	625,698
2. Number of Covered Lives	51,531	6,356	133,508	7,994	601	193,861	393,851	797,663	1,191,514
3. Number of Groups	XXX	9	366	1	0	589	965	401	1,366
4. Member Months	418,958	62,848	1,557,126	97,390	55,284	2,306,869	4,496,475	9,551,041	14,049,516

SUPPLEMENT FOR THE YEAR 2010 OF THE CONNECTICUT GENERAL LIFE INSURANCE COMPANY

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

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

REPORT FOR: 1. CORPORATION Connecticut General Life Insurance Company 2. 900 Cottage Grove Road Bloomfield, CT 06002 (LOCATION)

NAIC Group Code 0901 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 62308

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by statute)	Other Health	Total
1. Health Premiums Earned:							
1.1 Direct premiums written	82,237,271	24,819,314	497,979,271	11,170,442	40,004,209	74,129,891	730,340,397
1.2 Unearned premium prior year	1,205,971	350,673	1,142,424	194,544	15,064	68,958	2,977,634
1.3 Unearned premium current year	2,904,902	826,602	2,413,266	193,905	2,059	91,041	6,431,775
1.4 Change in unearned premium (Lines 1.2 - 1.3)	(1,698,931)	(475,929)	(1,270,843)	639	13,005	(22,083)	(3,454,140)
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5 - 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1 + 1.4) less $ 858,965 write offs)	80,523,583	24,343,385	496,280,076	11,162,059	40,034,488	73,683,701	726,027,292
1.9 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
1.10 Net Assumed less Ceded premiums earned from affiliates	0	0	0	0	0	0	0
1.11 Ceded premiums earned to non-affiliates	0	0	0	0	0	0	0
1.12 Other Adjustments due to MLR calculation - Premiums	129,238	10,515	0	0	0	1,876,988	2,016,741
1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 - 1.11 + 1.12)	80,652,821	24,353,900	496,280,076	11,162,059	40,034,488	75,560,689	728,044,033
2. Direct Claims Incurred:							
2.1 Paid claims during the year	39,456,230	31,475,824	413,501,948	10,656,859	30,681,444	51,479,342	577,251,647
2.2 Direct claim liability current year	8,868,070	4,381,836	74,974,695	1,277,474	3,267,613	3,953,935	96,723,623
2.3 Direct claim liability prior year	2,495,568	3,345,910	57,054,809	297,551	1,610,178	4,426,132	69,230,149
2.4 Direct claim reserves current year	0	86,679	10,367,610	0	0	14,463,993	24,918,283
2.5 Direct claim reserves prior year	0	57,751	15,817,425	0	0	16,319,919	32,195,095
2.6 Direct contract reserves current year	2,930,107	149,907	2,002,570	0	0	0	5,082,583
2.7 Direct contract reserves prior year	73,365	110,326	1,473,814	0	0	0	1,657,505
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b - 2.8c)	36	0	5,574	0	0	0	5,610
2.8a Paid medical incentive pools and bonuses current year	36	0	5,574	0	0	0	5,610
2.8b Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0
2.8c Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0
2.9 Net healthcare receivables (Lines 2.9a - 2.9b)	83,990	43,369	924,248	340,110	0	145,733	1,537,450
2.9a Healthcare receivables current year	300,892	155,371	3,288,749	1,218,444	0	256,774	5,220,230
2.9b Healthcare receivables prior year	216,903	112,001	2,364,502	878,333	0	111,041	3,682,780
2.10 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 - 2.9)	48,601,520	32,536,891	425,582,101	11,296,671	32,338,878	49,005,486	599,361,547
2.11 Assumed Incurred Claims from non-affiliates	0	0	0	0	0	0	0
2.12 Net Assumed less Ceded Incurred Claims from affiliates	0	0	0	0	0	0	0
2.13 Ceded Incurred Claims to non-affiliates	0	0	0	0	0	0	0
2.14 Other Adjustments due to MLR calculation - Claims	3,006,266	0	(1,774,279)	0	0	65,121	1,297,107
2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 - 2.13 + 2.14)	51,607,786	32,536,891	423,807,821	11,296,671	32,338,878	49,070,607	600,658,654
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

SUPPLEMENT FOR THE YEAR 2010 OF THE CONNECTICUT GENERAL LIFE INSURANCE COMPANY

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

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

REPORT FOR: 1. CORPORATION Connecticut General Life Insurance Company 2. 900 Cottage Grove Road Bloomfield, CT 06002 (LOCATION)

NAIC Group Code 0901 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 62308

3A	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 $ 397,005 for affiliated services)	27,503	5,716	4,856	7,793	106,609	152,477	478,325	0	4,888,304	5,519,106
	1.2 Outsourced Services	0	0	0	0	2	2	92,987	83,065	299,136	475,191
	1.3 EDP Equipment and Software (incl $ 38,452 for affiliated services)	3	1	1	2	4,936	4,944	66	0	529,537	534,547
	1.4 Other Equipment (excl. EDP) (incl $ 41,432 for affiliated services)	81	13	7	9	241	351	4,763	0	567,061	572,176
	1.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	3,808	0	0	3,808
	1.6 Other Expenses (incl $ 62,904 for affiliated services)	475,809	60,478	30,765	31,373	5,552	603,977	718,754	0	(448,255)	874,475
	1.7 Subtotal before Reimbursements and Taxes (Lines 1.1 to 1.6)	503,396	66,208	35,629	39,177	117,340	761,751	1,298,703	83,065	5,835,784	7,979,303
	1.8 Reimbursements by uninsured plans and fiscal intermediaries	134,251	81,718	29,185	75,880	(2)	321,031	492,068	0	4,135,493	4,948,593
	1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,965,103
	1.10 Total (1.7 to 1.9)	637,647	147,926	64,814	115,057	117,338	1,082,782	1,790,771	83,065	9,971,277	14,892,998
	1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	(18,691)	(18,691)
2.	Small Group Comprehensive Coverage Expenses:										
	2.1 Salaries (including $ 34,720 for affiliated services)	4,126	858	728	1,169	15,992	22,873	71,754	0	733,296	827,923
	2.2 Outsourced Services	0	0	0	0	0	0	13,949	12,461	44,874	71,284
	2.3 EDP Equipment and Software (incl $ 3,363 for affiliated services)	0	0	0	0	741	742	10	0	79,436	80,188
	2.4 Other Equipment (excl. EDP) (incl $ 3,623 for affiliated services)	12	2	1	1	36	53	715	0	85,065	85,832
	2.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	571	0	0	571
	2.6 Other Expenses (incl $ 39,268 for affiliated services)	71,376	9,072	4,615	4,706	833	90,603	107,820	0	737,953	936,376
	2.7 Subtotal before Reimbursements and Taxes (Lines 2.1 to 2.6)	75,515	9,932	5,345	5,877	17,602	114,270	194,819	12,461	1,680,623	2,002,173
	2.8 Reimbursements by uninsured plans and fiscal intermediaries	20,139	12,259	4,378	11,383	0	48,158	73,815	0	(184,829)	(62,856)
	2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(193,759)
	2.10 Total (2.7 to 2.9)	95,654	22,190	9,723	17,260	17,602	162,428	268,634	12,461	1,495,794	1,745,558
	2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	(2,804)	(2,804)
3.	Large Group Comprehensive Coverage Expenses:										
	3.1 Salaries (including $ 817,978 for affiliated services)	102,220	21,246	18,047	28,964	396,228	566,705	1,777,774	0	18,168,182	20,512,661
	3.2 Outsourced Services	0	0	0	0	8	8	345,601	308,726	1,111,789	1,766,125
	3.3 EDP Equipment and Software (incl $ 79,224 for affiliated services)	11	4	5	8	18,347	18,374	246	0	1,968,112	1,986,733
	3.4 Other Equipment (excl. EDP) (incl $ 85,366 for affiliated services)	302	49	27	33	894	1,305	17,703	0	2,107,576	2,126,584
	3.5 Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	14,152	0	0	14,152
	3.6 Other Expenses (incl $ 1,023,660 for affiliated services)	1,768,422	224,775	114,344	116,602	20,636	2,244,779	2,671,366	0	20,770,795	25,686,939
	3.7 Subtotal before Reimbursements and Taxes (Lines 3.1 to 3.6)	1,870,954	246,073	132,423	145,608	436,114	2,831,172	4,526,843	308,726	44,126,455	52,093,195
	3.8 Reimbursements by uninsured plans and fiscal intermediaries	498,965	303,719	108,469	282,021	(8)	1,193,165	1,828,851	0	(7,066,571)	(4,044,555)
	3.9 Taxes, Licenses and Fees (in total, for typing purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,113,445
	3.10 Total (3.7 to 3.9)	2,369,919	549,792	240,892	427,628	436,105	4,024,337	6,655,693	308,726	37,059,884	58,162,085
	3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	(69,470)	(69,470)

3B	Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
1.	Individual Comprehensive Coverage Expenses:					
	1.1 HIT Expenses	83,958	7,829	13,786	11,765	117,338
	1.2 Other than HIT expenses	637,647	147,926	64,814	115,057	965,444
2.	Small Group Comprehensive Coverage Expenses:					
	2.1 HIT Expenses	12,595	1,174	2,068	1,765	17,602
	2.2 Other than HIT expenses	95,654	22,190	9,723	17,260	144,827
3.	Large Group Comprehensive Coverage Expenses:					
	3.1 HIT Expenses	312,044	29,096	51,237	43,727	436,105
	3.2 Other than HIT expenses	2,369,919	549,792	240,892	427,628	3,588,232
4.	Subtotals/Totals:					
	4.1 Subtotal HIT expenses (Lines 1.1 + 2.1 + 3.1)	408,596	38,101	67,091	57,257	571,045
	4.2 Subtotal Other than HIT expenses (Lines 1.2 + 2.2 + 3.2)	3,103,220	719,909	315,429	559,945	4,698,502
	4.3 Total (Lines 4.1 + 4.2)	3,511,816	758,010	382,519	617,202	5,269,548

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SUPPLEMENT FOR THE YEAR 2010 OF THE Coventry Health and Life Insurance Company

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

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

REPORT FOR: 1. CORPORATION Coventry Health and Life Insurance Company 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 81973

		Comprehensive Health Coverage			4	5	6	7	8	9
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (7 + 8)
1.	Premium:									
	1.1 Health premiums earned (From Part 2, Line 1.8)	3,913,760	10,622,564	22,264,632	0	0	0	36,800,956	XXX	36,800,956
	1.2 Federal high risk pools							0	XXX	
	1.3 State high risk pools							0	XXX	
	1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	3,913,760	10,622,564	22,264,632	0	0	0	36,800,956	XXX	36,800,956
	1.5 Federal taxes and federal assessments	(219,473)	1,331,398	327,256	363,917			1,803,088		1,803,088
	1.6 State insurance, premium and other taxes (Similar local taxes of $)	84,217	228,579	479,096				791,892		791,892
	1.7 Regulatory authority licenses and fees							0		
	1.8 Adjusted Premiums Earned (Lines 1.4 – 1.5 – 1.6 – 1.7)	4,049,016	9,062,587	21,458,280	(363,917)	0	0	34,205,976	XXX	34,205,976
	1.9 Net Assumed less Ceded reinsurance premiums earned	1,088,312	1,980,093	4,777,813	2,215,122			10,061,340	XXX	10,061,340
	1.10 Other Adjustments due to MLR calculations – Premiums							0	XXX	
	1.11 Risk Revenue							0	XXX	
	1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	5,137,328	11,042,680	26,236,093	1,851,205	0	0	44,267,316	XXX	44,267,316
2.	Claims:									
	2.1 Incurred claims excluding prescription drugs	2,745,235	5,152,646	16,316,707				24,214,588	XXX	24,214,588
	2.2 Prescription drugs	277,284	1,408,492	4,460,226				6,146,002	XXX	6,146,002
	2.3 Pharmaceutical rebates							0	XXX	
	2.4 State stop loss, market stabilization and claim/census based assessments							0	XXX	
3.	Incurred medical incentive pools and bonuses							0	XXX	
4.	Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	490	491	1,255				2,236		2,236
5.	5.0 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 – 2.4 + 3) (From Part 2, Line 2.10)	3,022,519	6,561,138	20,776,933	0	0	0	30,360,590	XXX	30,360,590
	5.1 Net Assumed less Ceded reinsurance claims incurred	1,211,431	702,364	1,678,049	1,157,681			4,749,525	XXX	4,749,525
	5.2 Other Adjustments due to MLR calculations – Claims							0	XXX	
	5.3 Rebates Paid							0	XXX	
	5.4 Estimated rebates unpaid prior year							0	XXX	
	5.5 Estimated rebates unpaid current year							0	XXX	
	5.6 Fee for service and co-pay revenue							0	XXX	
	5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	4,233,950	7,263,502	22,454,982	1,157,681	0	0	35,110,115	XXX	35,110,115
6.	Improving Health Care Quality Expenses Incurred:									
	6.1 Type A Expenses for health improvements other than Health Information Technology	15,859	11,892	31,108				58,859		58,859
	6.2 Type B Health Information Technology expenses related to health improvement	11,785	10,755	27,452				49,992		49,992
	6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	27,644	22,647	58,560	0	0	0	108,851	0	108,851
7.	Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 18	0.753	0.727	0.971	XXX	XXX	XXX	XXX	XXX	XXX
8.	Claims Adjustment Expenses:									
	8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	48,409	48,484	122,395				219,288		219,288
	8.2 All other claims adjustment expenses	116,823	109,795	279,133				505,751		505,751
	8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	165,232	158,279	401,528	0	0	0	725,039	0	725,039
9.	Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.041	0.017	0.019	0.000	0.000	0.000	XXX	XXX	XXX
10.	General and Administrative (G&A) Expenses:									
	10.1 Direct sales salaries and benefits							0		
	10.2 Agents and brokers fees and commissions	1,125,747	388,266	950,606				2,464,619		2,464,619
	10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)							0		
	10.4 Other general and administrative expenses	3,010	672,745	1,746,761				2,422,515		2,422,515
	10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	1,128,757	1,061,011	2,697,366	0	0	0	4,887,134	0	4,887,134
11.	Underwriting Gain/(Loss) (Lines 1.12 – 5.7 – 6.3 – 8.3 – 10.5)	(418,254)	2,537,250	623,657	693,524	0	0	3,436,177	XXX	3,436,177
12.	Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13.	Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	(19,002)	XXX	(19,002)
14.	Federal income taxes (excluding taxes on Line 15 above)	(707)	(1,920)	(4,024)				(6,651)		(6,651)
15.	Net gain or (loss) (Lines 11 + 12 + 13 – 14)	XXX	XXX	XXX	XXX	XXX	XXX	3,423,825	XXX	3,423,825
16.	ICD-10 Implementation Expenses (informational only; already included in general expenses)							0		
	OTHER INDICATORS:									
1.	Number of Certificates/Policies	3,613	1,589	4,369				9,571		9,571
2.	Number of Covered Lives	3,613	2,541	6,221				12,375		12,375
3.	Number of Groups	XXX	1,589	4,369				5,958		5,958
4.	Member Months	26,929	26,226	64,210				117,365		117,365

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SUPPLEMENT FOR THE YEAR 2010 OF THE Coventry Health and Life Insurance Company

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

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

REPORT FOR: 1. CORPORATION Coventry Health and Life Insurance Company 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 81973

		Comprehensive Health Coverage			4	5	6	7
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by statute)	Other Health	Total
1.	Health Premiums Earned:							
	1.1 Direct premiums written	3,913,760	10,622,564	22,264,632				36,800,956
	1.2 Unearned premium prior year							
	1.3 Unearned premium current year							
	1.4 Change in unearned premium (Lines 1.2 – 1.3)	0	0	0	0	0	0	0
	1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.7 Change in reserve for rate credits (Lines 1.5 – 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $ write offs)	3,913,760	10,622,564	22,264,632				36,800,956
	1.9 Assumed premiums earned from non-affiliates							0
	1.10 Net Assumed less Ceded premiums earned from affiliates	1,088,312	1,980,093	4,777,813	2,215,122			10,061,340
	1.11 Ceded premiums earned to non-affiliates							
	1.12 Net Other Adjustments due to MLR calculation – Premiums							
	1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 – 1.11 – 1.12)	5,002,072	12,602,657	27,042,445	2,215,122	0	0	46,862,296
2.	Direct Claims Incurred:							
	2.1 Paid claims during the year	2,453,544	6,642,071	21,033,227				30,128,842
	2.2 Direct claim liability current year	852,757	1,214,077	3,844,571				5,911,405
	2.3 Direct claim liability prior year	283,782	1,295,010	4,100,865				5,679,657
	2.4 Direct claim reserves current year							
	2.5 Direct claim reserves prior year							
	2.6 Direct contract reserves current year							
	2.7 Direct contract reserves prior year							
	2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b – 2.8c)	0	0	0	0	0	0	0
	2.8a Paid medical incentive pools and bonuses current year							
	2.8b Accrued medical incentive pools and bonuses current year							
	2.8c Accrued medical incentive pools and bonuses prior year							
	2.9 Net healthcare receivables (Lines 2.9a – 2.9b)	0	0	0	0	0	0	0
	2.9a Healthcare receivables current year							
	2.9b Healthcare receivables prior year							
	2.10 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 + 2.4 – 2.5 + 2.6 – 2.7 + 2.8 – 2.9)	3,022,519	6,561,138	20,776,933	0	0	0	30,360,590
	2.11 Assumed Incurred Claims from non-affiliates							
	2.12 Net Assumed less Ceded Incurred Claims from affiliates	1,211,431	702,364	1,678,049	1,157,681			4,749,525
	2.13 Ceded Incurred Claims to non-affiliates							
	2.14 Other Adjustments due to MLR calculation – Claims							
	2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 – 2.13 – 2.14)	4,233,950	7,263,502	22,454,982	1,157,681	0	0	35,110,115
3.	Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)							

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SUPPLEMENT FOR THE YEAR 2010 OF THE Coventry Health and Life Insurance Company

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

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

REPORT FOR: 1. CORPORATION Coventry Health and Life Insurance Company 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 81973

3A All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses			
	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	9 General Administrative Expenses	10 Total Expenses (6 to 9)
1. Individual Comprehensive Coverage Expenses:										
1.1 Salaries (including $ for affiliated services)	12,816	1,931	484	629	11,585	27,445	17,216	75,580	440,789	561,030
1.2 Outsourced Services						0	13,990		30,432	44,422
1.3 EDP Equipment and Software (incl $ for affiliated services)						0	5,719	14,014	80,744	100,477
1.4 Other Equipment (excl. EDP) (incl $ for affiliated services)					200	200	75	184	1,240	1,699
1.5 Accreditation and Certification (incl $ for affiliated services)		XXX	XXX	XXX	XXX	0				0
1.6 Other Expenses (incl $ for affiliated services)						0	11,410	27,044	575,552	614,006
1.7 Subtotal before Reimbursements and Taxes (1.1 to 1.6)	12,816	1,931	484	629	11,785	27,645	48,410	116,822	1,128,757	1,321,634
1.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	179,722
1.10 Total (1.7 to 1.9)	12,816	1,931	484	629	11,785	27,645	48,410	116,822	1,128,757	1,501,356
1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	387	59	18	27		491				491
2. Small Group Comprehensive Coverage Expenses:										
2.1 Salaries (including $ for affiliated services)	9,892	1,444	343	213	10,574	22,466	19,172	71,040	414,522	527,200
2.2 Outsourced Services						0	13,146		28,597	41,743
2.3 EDP Equipment and Software (incl $ for affiliated services)						0	5,374	13,169	75,874	94,417
2.4 Other Equipment (excl. EDP) (incl $ for affiliated services)					181	181	71	173	1,172	1,597
2.5 Accreditation and Certification (incl $ for affiliated services)		XXX	XXX	XXX	XXX	0				0
2.6 Other Expenses (incl $ for affiliated services)						0	10,722	25,413	540,846	576,981
2.7 Subtotal before Reimbursements and Taxes (2.1 to 2.6)	9,892	1,444	343	213	10,755	22,647	48,485	109,795	1,061,011	1,241,938
2.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168,885
2.10 Total (2.7 to 2.9)	9,892	1,444	343	213	10,755	22,647	48,485	109,795	1,061,011	1,410,823
2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	368	59	17	27		491				491
3. Large Group Comprehensive Coverage Expenses:										
3.1 Salaries (including $ for affiliated services)	25,601	3,849	1,005	654	26,989	58,098	47,872	180,602	1,053,759	1,340,331
3.2 Outsourced Services						0	33,422		72,703	106,125
3.3 EDP Equipment and Software (incl $ for affiliated services)						0	13,862	33,480	192,901	240,043
3.4 Other Equipment (excl. EDP) (incl $ for affiliated services)					462	462	180	441	2,978	4,061
3.5 Accreditation and Certification (incl $ for affiliated services)		XXX	XXX	XXX	XXX	0				0
3.6 Other Expenses (incl $ for affiliated services)						0	27,258	64,610	1,375,025	1,466,894
3.7 Subtotal before Reimbursements and Taxes (3.1 to 3.6)	25,601	3,849	1,005	654	27,451	58,560	122,395	279,133	2,697,366	3,157,454
3.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
3.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	429,367
3.10 Total (3.7 to 3.9)	25,601	3,849	1,005	654	27,451	58,560	122,395	279,133	2,697,366	3,586,821
3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	991	150	45	69		1,255				1,255

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
1. Individual Comprehensive Coverage Expenses:					
1.1 HIT expenses	9,309	1,409	422	645	11,785
1.2 Other than HIT expenses	12,816	1,931	484	629	15,860
2. Small Group Comprehensive Coverage Expenses:					
2.1 HIT expenses	8,495	1,286	385	588	10,754
2.2 Other than HIT expenses	9,892	1,444	343	213	11,892
3. Large Group Comprehensive Coverage Expenses:					
3.1 HIT Expenses	21,684	3,283	983	1,502	27,452
3.2 Other than HIT expenses	25,601	3,849	1,005	654	31,109
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1 + 2.1 + 3.1)	39,488	5,978	1,790	2,735	49,991
4.2 Subtotal Other than HIT expenses (Lines 1.2 + 2.2 + 3.2)	48,309	7,224	1,832	1,496	58,861
4.3 Total (Lines 4.1 + 4.2)	87,797	13,202	3,622	4,231	108,852

Supplement for the year 2010 of the **Aetna Health Inc. (a Florida corporation)**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95088

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389	XXX	1,641,389,389
1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	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)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389	XXX	1,641,389,389
1.5 Federal taxes and federal assessments	4,210,895	13,438,662	4,109,503	(364,615)	0	0	21,394,445	0	21,394,445
1.6 State insurance, premium and other taxes (Similar local taxes of $.....598,656)	1,474,421	4,565,325	811,892	(148,934)	0	0	6,702,704	0	6,702,704
1.7 Regulatory authority licenses and fees	5,489	25,620	57,017	0	0	0	88,126	0	88,126
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	113,105,651	533,458,053	932,699,502	33,940,908	0	0	1,613,204,114	XXX	1,613,204,114
1.9 Net assumed less ceded reinsurance premiums earned	0	0	0	0	0	0	0	XXX	0
1.10 Other adjustments due to MLR calculations - premiums	0	0	0	0	0	0	0	XXX	0
1.11 Risk revenue	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)	113,105,651	533,458,053	932,699,502	33,940,908	0	0	1,613,204,114	XXX	1,613,204,114
2. Claims:									
2.1 Incurred claims excluding prescription drugs	72,468,601	344,882,701	676,400,807	30,196,853	0	0	1,123,948,762	XXX	1,123,948,762
2.2 Prescription drugs	18,465,665	88,159,677	145,346,835	3,543,440	0	0	255,515,617	XXX	255,515,617
2.3 Pharmaceutical rebates	1,764,098	9,908,091	16,122,217	801,627	0	0	28,596,033	XXX	28,596,033
2.4 State stop loss, market stabilization and claim/census based assessments	(112,909)	(79,606)	(84,601)	0	0	0	(277,116)	XXX	(277,116)
3. Incurred medical incentive pools and bonuses	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
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	89,283,077	423,213,893	805,709,826	32,938,666	0	0	1,351,145,462	XXX	1,351,145,462
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - claims	(3,709,599)	0	0	0	0	0	(3,709,599)	XXX	(3,709,599)
5.3 Rebates paid	0	0	0	0	0	0	0	XXX	0
5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
5.6 Fee for service and co-pay revenue	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)	85,573,478	423,213,893	805,709,826	32,938,666	0	0	1,347,435,863	XXX	1,347,435,863
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	1,051,193	5,105,793	8,860,051	176,670	0	0	15,193,707	0	15,193,707
6.2 Type B. Health information technology expenses related to health improvement	49,756	241,675	419,378	8,362	0	0	719,171	0	719,171
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	1,100,949	5,347,468	9,279,429	185,032	0	0	15,912,878	0	15,912,878
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	0.799	0.803	0.874	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	661,199	3,211,536	5,572,963	111,125	0	0	9,556,823	0	9,556,823
8.2 All other claims adjustment expenses	772,052	3,749,969	6,507,296	129,756	0	0	11,159,073	0	11,159,073
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	1,433,251	6,961,505	12,080,259	240,881	0	0	20,715,896	0	20,715,896
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.013	0.013	0.013	0.007	0.000	0.000	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	49,954	242,635	421,042	8,269	0	0	721,900	0	721,900
10.2 Agents and brokers fees and commissions	3,557,756	16,559,574	28,087,721	992,575	0	0	49,197,626	0	49,197,626
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	0	0	0	0	0	0	0	0	0
10.4 Other general and administrative expenses	8,244,820	40,767,224	71,391,135	954,480	0	0	121,357,659	0	121,357,659
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	11,852,530	57,569,433	99,899,898	1,955,324	0	0	171,277,185	0	171,277,185
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	13,145,443	40,365,754	5,730,090	(1,378,995)	0	0	57,862,292	XXX	57,862,292
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	20,273,019	XXX	20,273,019
14. Federal income taxes (excluding taxes on Line 1.5 above)	0	0	0	0	2,317,031	0	2,317,031	0	2,317,031
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	75,818,280	XXX	75,818,280
16. ICD-10 Implementation Expenses (informational only, already included in general expenses)	28,168	131,108	222,380	7,859	0	0	389,515	0	389,515
OTHER INDICATORS:									
1. Number of certificates/policies	32,616	74,759	120,082	3,412	0	0	230,869	0	230,869
2. Number of covered lives	45,480	117,090	198,300	3,412	0	0	364,282	0	364,282
3. Number of groups	XXX	14,551	1,143	29	0	0	15,723	0	15,723
4. Member months	522,655	1,460,899	2,598,612	41,603	0	0	4,623,769	0	4,623,769

Supplement for the year 2010 of the **Aetna Health Inc. (a Florida corporation)**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95088

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389	XXX	1,641,389,389
1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	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)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389	XXX	1,641,389,389
1.5 Federal taxes and federal assessments	4,210,895	13,438,662	4,109,503	(364,615)	0	0	21,394,445	0	21,394,445
1.6 State insurance, premium and other taxes (Similar local taxes of $.....598,656)	1,474,421	4,565,325	811,892	(148,934)	0	0	6,702,704	0	6,702,704
1.7 Regulatory authority licenses and fees	5,489	25,620	57,017	0	0	0	88,126	0	88,126
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	113,105,651	533,458,053	932,699,502	33,940,908	0	0	1,613,204,114	XXX	1,613,204,114
1.9 Net assumed less ceded reinsurance premiums earned	0	0	0	0	0	0	0	XXX	0
1.10 Other adjustments due to MLR calculations - premiums	0	0	0	0	0	0	0	XXX	0
1.11 Risk revenue	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)	113,105,651	533,458,053	932,699,502	33,940,908	0	0	1,613,204,114	XXX	1,613,204,114
2. Claims:									
2.1 Incurred claims excluding prescription drugs	72,468,601	344,882,701	676,400,607	30,196,853	0	0	1,123,948,762	XXX	1,123,948,762
2.2 Prescription drugs	18,465,665	88,159,677	145,346,835	3,543,440	0	0	255,515,617	XXX	255,515,617
2.3 Pharmaceutical rebates	1,764,098	9,908,091	16,122,217	801,627	0	0	28,596,033	XXX	28,596,033
2.4 State stop loss, market stabilization and claim/census based assessments	(112,909)	(79,606)	(84,601)	0	0	0	(277,116)	XXX	(277,116)
3. Incurred medical incentive pools and bonuses	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
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	89,283,077	423,213,893	805,709,826	32,938,666	0	0	1,351,145,462	XXX	1,351,145,462
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - claims	(3,709,599)	0	0	0	0	0	(3,709,599)	XXX	(3,709,599)
5.3 Rebates paid	0	0	0	0	0	0	0	XXX	0
5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
5.6 Fee for service and co-pay revenue	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)	85,573,478	423,213,893	805,709,826	32,938,666	0	0	1,347,435,863	XXX	1,347,435,863
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	1,051,193	5,105,793	8,860,051	176,670	0	0	15,193,707	0	15,193,707
6.2 Type B. Health information technology expenses related to health improvement	49,756	241,675	419,378	8,362	0	0	719,171	0	719,171
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	1,100,949	5,347,468	9,279,429	185,032	0	0	15,912,878	0	15,912,878
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	0.799	0.803	0.874	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	661,199	3,211,536	5,572,963	111,125	0	0	9,556,823	0	9,556,823
8.2 All other claims adjustment expenses	772,052	3,749,969	6,507,296	129,756	0	0	11,159,073	0	11,159,073
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	1,433,251	6,961,505	12,080,259	240,881	0	0	20,715,896	0	20,715,896
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.013	0.013	0.013	0.007	0.000	0.000	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	49,954	242,635	421,042	8,269	0	0	721,900	0	721,900
10.2 Agents and brokers fees and commissions	3,557,756	16,559,574	28,087,721	992,575	0	0	49,197,626	0	49,197,626
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	0	0	0	0	0	0	0	0	0
10.4 Other general and administrative expenses	8,244,820	40,767,224	71,391,135	954,480	0	0	121,357,659	0	121,357,659
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	11,852,530	57,569,433	99,899,898	1,955,324	0	0	171,277,185	0	171,277,185
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	13,145,443	40,365,754	5,730,090	(1,378,995)	0	0	57,862,292	XXX	57,862,292
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	20,273,019	XXX	20,273,019
14. Federal income taxes (excluding taxes on Line 1.5 above)	0	0	0	0	2,317,031	0	2,317,031	0	2,317,031
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	75,818,280	XXX	75,818,280
16. ICD-10 Implementation Expenses (informational only, already included in general expenses)	28,168	131,108	222,380	7,859	0	0	389,515	0	389,515
OTHER INDICATORS:									
1. Number of certificates/policies	32,616	74,759	120,082	3,412	0	0	230,869	0	230,869
2. Number of covered lives	45,480	117,090	198,300	3,412	0	0	364,282	0	364,282
3. Number of groups	XXX	14,551	1,143	29	0	0	15,723	0	15,723
4. Member months	522,655	1,460,899	2,598,612	41,603	0	0	4,623,769	0	4,623,769

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Supplement for the year 2010 of the **Aetna Health Inc. (a Florida corporation)**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95088

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health premiums earned:							
1.1 Direct premiums written	118,832,495	553,105,805	937,772,376	33,444,766	0	0	1,643,155,442
1.2 Unearned premium prior year	1,305,983	1,881,044	439,659	0	0	0	3,626,686
1.3 Unearned premium current year	1,330,890	1,764,853	70,420	0	0	0	3,166,163
1.4 Change in unearned premium (Lines 1.2-1.3)	(24,907)	116,191	369,239	0	0	0	460,523
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5-1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1+1.4+1.7 less $.....2,226,576 write offs)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389
1.9 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
1.10 Net assumed less ceded premiums earned from affiliates	0	0	0	0	0	0	0
1.11 Ceded premiums earned to non-affiliates	0	0	0	0	0	0	0
1.12 Other adjustments due to MLR calculation - premiums	0	0	0	0	0	0	0
1.13 Net premiums earned (Lines 1.8+1.9+1.10-1.11+1.12)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389
2. Direct claims incurred:							
2.1 Paid claims during the year	90,272,670	429,872,583	845,382,084	32,937,599	0	0	1,398,464,936
2.2 Direct claim liability current year	8,918,990	40,420,738	78,363,749	2,765,655	0	0	130,469,132
2.3 Direct claim liability prior year	9,940,425	47,239,140	118,475,076	2,777,597	0	0	178,432,238
2.4 Direct claim reserves current year	121,679	524,294	1,027,149	0	0	0	1,673,122
2.5 Direct claim reserves prior year	138,352	597,462	1,538,232	0	0	0	2,274,046
2.6 Direct contract reserves current year	0	0	0	0	0	0	0
2.7 Direct contract reserves prior year	0	0	0	0	0	0	0
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a+2.8b-2.8c)	0	0	0	0	0	0	0
2.8a Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0
2.8b Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0
2.8c Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0
2.9 Net healthcare receivables (Lines 2.9a-2.9b)	(48,515)	(232,880)	(950,152)	(13,009)	0	0	(1,244,556)
2.9a Healthcare receivables current year	165,322	820,495	1,356,634	57,449	0	0	2,399,900
2.9b Healthcare receivables prior year	213,837	1,053,375	2,306,786	70,458	0	0	3,644,456
2.10 Total incurred claims (Lines 2.1+2.2-2.3+2.4-2.5+2.6-2.7+2.8-2.9)	89,283,077	423,213,893	805,709,826	32,938,666	0	0	1,351,145,462
2.11 Assumed incurred claims from non-affiliates	0	0	0	0	0	0	0
2.12 Net assumed less ceded incurred claims from affiliates	0	0	0	0	0	0	0
2.13 Ceded incurred claims to non-affiliates	0	0	0	0	0	0	0
2.14 Other adjustments due to MLR calculation - claims	(3,709,599)	0	0	0	0	0	(3,709,599)
2.15 Net incurred claims (Lines 2.10+2.11+2.12-2.13+2.14)	85,573,478	423,213,893	805,709,826	32,938,666	0	0	1,347,435,863
3. Fraud and abuse recoveries that reduced PAID claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95088

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health premiums earned:							
1.1 Direct premiums written	118,832,495	553,105,805	937,772,376	33,444,766	0	0	1,643,155,442
1.2 Unearned premium prior year	1,305,983	1,881,044	439,659	0	0	0	3,626,686
1.3 Unearned premium current year	1,330,890	1,764,853	70,420	0	0	0	3,166,163
1.4 Change in unearned premium (Lines 1.2-1.3)	(24,907)	116,191	369,239	0	0	0	460,523
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5-1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1+1.4+1.7 less $.....2,226,576 write offs)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389
1.9 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
1.10 Net assumed less ceded premiums earned from affiliates	0	0	0	0	0	0	0
1.11 Ceded premiums earned to non-affiliates	0	0	0	0	0	0	0
1.12 Other adjustments due to MLR calculation - premiums	0	0	0	0	0	0	0
1.13 Net premiums earned (Lines 1.8+1.9+1.10-1.11+1.12)	118,796,456	551,487,660	937,677,914	33,427,359	0	0	1,641,389,389
2. Direct claims incurred:							
2.1 Paid claims during the year	90,272,670	429,872,583	845,382,084	32,937,599	0	0	1,398,464,936
2.2 Direct claim liability current year	8,918,990	40,420,738	78,363,749	2,765,655	0	0	130,469,132
2.3 Direct claim liability prior year	9,940,425	47,239,140	118,475,076	2,777,597	0	0	178,432,238
2.4 Direct claim reserves current year	121,679	524,294	1,027,149	0	0	0	1,673,122
2.5 Direct claim reserves prior year	138,352	597,462	1,538,232	0	0	0	2,274,046
2.6 Direct contract reserves current year	0	0	0	0	0	0	0
2.7 Direct contract reserves prior year	0	0	0	0	0	0	0
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a+2.8b-2.8c)	0	0	0	0	0	0	0
2.8a Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0
2.8b Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0
2.8c Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0
2.9 Net healthcare receivables (Lines 2.9a-2.9b)	(48,515)	(232,880)	(950,152)	(13,009)	0	0	(1,244,556)
2.9a Healthcare receivables current year	165,322	820,495	1,356,634	57,449	0	0	2,399,900
2.9b Healthcare receivables prior year	213,837	1,053,375	2,306,786	70,458	0	0	3,644,456
2.10 Total incurred claims (Lines 2.1+2.2-2.3+2.4-2.5+2.6-2.7+2.8-2.9)	89,283,077	423,213,893	805,709,826	32,938,666	0	0	1,351,145,462
2.11 Assumed incurred claims from non-affiliates	0	0	0	0	0	0	0
2.12 Net assumed less ceded incurred claims from affiliates	0	0	0	0	0	0	0
2.13 Ceded incurred claims to non-affiliates	0	0	0	0	0	0	0
2.14 Other adjustments due to MLR calculation - claims	(3,709,599)	0	0	0	0	0	(3,709,599)
2.15 Net incurred claims (Lines 2.10+2.11+2.12-2.13+2.14)	85,573,478	423,213,893	805,709,826	32,938,666	0	0	1,347,435,863
3. Fraud and abuse recoveries that reduced PAID claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

Supplement for the year 2010 of the **Aetna Health Inc. (a Florida corporation)**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95088

3A All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses			
	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 (Cols. 1 thru 5)	7 Cost Containment Expenses	8 Other Claim Adjustment Expenses	9 General Administrative Expenses	10 Total Expenses (Cols 6 thru 9)
1. Individual comprehensive coverage expenses:										
1.1 Salaries (including $.....5,599,828 for affiliated services)	651,146	58,450	29,661	67,008	38,163	844,428	507,139	41,359	4,206,902	5,599,828
1.2 Outsourced services	130,739	11,736	5,955	13,454	7,663	169,547	101,825	11,037	860,545	1,142,954
1.3 EDP equipment and software (including $.....789,525 for affiliated services)	0	0	0	0	0	0	0	191,820	597,705	789,525
1.4 Other equipment (excl. EDP) (including $.....262,589 for affiliated services)	0	0	0	0	0	0	0	64,804	197,785	262,589
1.5 Accreditation and certification (including $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
1.6 Other expenses (including $.....6,591,834 for affiliated services)	67,067	6,020	3,056	6,901	3,930	86,974	52,235	463,032	5,989,593	6,591,834
1.7 Subtotal before reimbursements and taxes (Lines 1.1 to 1.6)	848,952	76,206	38,672	87,363	49,756	1,100,949	661,199	772,052	11,852,530	14,386,730
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	XXX	0
1.10 Total (Lines 1.7 to 1.9)	848,952	76,206	38,672	87,363	49,756	1,100,949	661,199	772,052	11,852,530	14,386,730
1.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	16,785	0	0	16,785
2. Small group comprehensive coverage expenses:										
2.1 Salaries (including $.....27,199,165 for affiliated services)	3,162,710	283,899	144,068	325,466	185,365	4,101,508	2,463,249	200,885	20,433,523	27,199,165
2.2 Outsourced services	635,016	57,002	28,926	65,348	37,218	823,510	494,577	53,606	4,179,788	5,551,481
2.3 EDP equipment and software (including $.....3,834,831 for affiliated services)	0	0	0	0	0	0	0	931,695	2,903,136	3,834,831
2.4 Other equipment (excl. EDP) (including $.....1,275,433 for affiliated services)	0	0	0	0	0	0	0	314,762	960,671	1,275,433
2.5 Accreditation and certification (including $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
2.6 Other expenses (including $.....32,017,496 for affiliated services)	325,754	29,241	14,840	33,523	19,092	422,450	253,710	2,249,021	29,092,315	32,017,496
2.7 Subtotal before reimbursements and taxes (Lines 2.1 to 2.6)	4,123,480	370,142	187,834	424,337	241,675	5,347,468	3,211,536	3,749,969	57,569,433	69,878,406
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	XXX	0
2.10 Total (Lines 2.7 to 2.9)	4,123,480	370,142	187,834	424,337	241,675	5,347,468	3,211,536	3,749,969	57,569,433	69,878,406
2.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	78,124	0	0	78,124
3. Large group comprehensive coverage expenses:										
3.1 Salaries (including $.....47,198,551 for affiliated services)	5,488,231	492,648	250,001	564,780	321,663	7,117,323	4,274,461	348,595	35,458,172	47,198,551
3.2 Outsourced services	1,101,939	98,915	50,196	113,398	64,584	1,429,032	858,236	93,022	7,253,161	9,633,451
3.3 EDP equipment and software (including $.....6,654,560 for affiliated services)	0	0	0	0	0	0	0	1,616,765	5,037,795	6,654,560
3.4 Other equipment (excl. EDP) (including $.....2,213,250 for affiliated services)	0	0	0	0	0	0	0	546,204	1,667,046	2,213,250
3.5 Accreditation and certification (including $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
3.6 Other expenses (including $.....55,559,774 for affiliated services)	565,281	50,742	25,749	58,171	33,131	733,074	440,266	3,902,710	50,483,724	55,559,774
3.7 Subtotal before reimbursements and taxes (Lines 3.1 to 3.6)	7,155,451	642,305	325,946	736,349	419,378	9,279,429	5,572,963	6,507,296	99,899,898	121,259,586
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	XXX	0
3.10 Total (Lines 3.7 to 3.9)	7,155,451	642,305	325,946	736,349	419,378	9,279,429	5,572,963	6,507,296	99,899,898	121,259,586
3.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	132,511	0	0	132,511

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (Cols. 1 thru 4)
1. Individual comprehensive coverage expenses:					
1.1 HIT expenses	40,184	3,607	1,830	4,135	49,756
1.2 Other than HIT expenses	848,952	76,206	38,672	87,363	1,051,193
2. Small group comprehensive coverage expenses:					
2.1 HIT expenses	195,179	17,520	8,891	20,085	241,675
2.2 Other than HIT expenses	4,123,480	370,142	187,834	424,337	5,105,793
3. Large group comprehensive coverage expenses:					
3.1 HIT expenses	338,693	30,403	15,428	34,854	419,378
3.2 Other than HI expenses	7,155,451	642,305	325,946	736,349	8,860,051
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1+2.1+3.1)	574,056	51,530	26,149	59,074	710,809
4.2 Subtotal other than HIT expenses (Lines 1.2+2.2+3.2)	12,127,883	1,088,653	552,452	1,248,049	15,017,037
4.3 Total (Lines 4.1+4.2)	12,701,939	1,140,183	578,601	1,307,123	15,727,846

Supplement for the year 2010 of the **Aetna Health Inc. (a Florida corporation)**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Aetna Health Inc. (a Florida corporation) 2. LOCATION: Tampa FL

NAIC Group Code.....0001 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95088

3A 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 (Cols. 1 thru 5)	7 Cost Containment Expenses	8 Other Claim Adjustment Expenses	General Administrative Expenses	Total Expenses (Cols 6 thru 9)
1. Individual comprehensive coverage expenses:										
1.1 Salaries (including $....5,599,828 for affiliated services)	651,146	58,450	29,661	67,008	38,163	844,428	507,139	41,359	4,206,902	5,599,828
1.2 Outsourced services	130,739	11,736	5,955	13,454	7,663	169,547	101,825	11,037	860,545	1,142,954
1.3 EDP equipment and software (including $....789,525 for affiliated services)	0	0	0	0	0	0	0	191,820	597,705	789,525
1.4 Other equipment (excl. EDP) (including $....262,589 for affiliated services)	0	0	0	0	0	0	0	64,804	197,785	262,589
1.5 Accreditation and certification (including $....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
1.6 Other expenses (including $....6,591,834 for affiliated services)	67,067	6,020	3,056	6,901	3,930	86,974	52,235	463,032	5,989,593	6,591,834
1.7 Subtotal before reimbursements and taxes (Lines 1.1 to 1.6)	848,952	76,206	38,672	87,363	49,756	1,100,949	661,199	772,052	11,852,530	14,386,730
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	XXX	0
1.10 Total (Lines 1.7 to 1.9)	848,952	76,206	38,672	87,363	49,756	1,100,949	661,199	772,052	11,852,530	14,386,730
1.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	16,785	0	0	16,785
2. Small group comprehensive coverage expenses:										
2.1 Salaries (including $....27,199,165 for affiliated services)	3,162,710	283,899	144,068	325,466	185,365	4,101,508	2,463,249	200,885	20,433,523	27,199,165
2.2 Outsourced services	635,016	57,002	28,926	65,348	37,218	823,510	494,577	53,606	4,179,788	5,551,481
2.3 EDP equipment and software (including $....3,834,831 for affiliated services)	0	0	0	0	0	0	0	931,695	2,903,136	3,834,831
2.4 Other equipment (excl. EDP) (including $....1,275,433 for affiliated services)	0	0	0	0	0	0	0	314,762	960,671	1,275,433
2.5 Accreditation and certification (including $....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
2.6 Other expenses (including $....32,017,496 for affiliated services)	325,754	29,241	14,840	33,523	19,092	422,450	253,710	2,249,021	29,092,315	32,017,496
2.7 Subtotal before reimbursements and taxes (Lines 2.1 to 2.6)	4,123,480	370,142	187,834	424,337	241,675	5,347,468	3,211,536	3,749,969	57,589,433	69,878,406
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	XXX	0
2.10 Total (Lines 2.7 to 2.9)	4,123,480	370,142	187,834	424,337	241,675	5,347,468	3,211,536	3,749,969	57,589,433	69,878,406
2.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	78,124	0	0	78,124
3. Large group comprehensive coverage expenses:										
3.1 Salaries (including $....47,198,551 for affiliated services)	5,488,231	492,648	250,001	564,780	321,663	7,117,323	4,274,461	348,595	35,458,172	47,198,551
3.2 Outsourced services	1,101,939	98,915	50,196	113,398	64,584	1,429,032	858,236	93,022	7,253,161	9,633,451
3.3 EDP equipment and software (including $....6,654,560 for affiliated services)	0	0	0	0	0	0	0	1,616,765	5,037,795	6,654,560
3.4 Other equipment (excl. EDP) (including $....2,213,250 for affiliated services)	0	0	0	0	0	0	0	546,204	1,667,046	2,213,250
3.5 Accreditation and certification (including $....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
3.6 Other expenses (including $....55,559,774 for affiliated services)	565,281	50,742	25,749	58,171	33,131	733,074	440,266	3,902,710	50,483,724	55,559,774
3.7 Subtotal before reimbursements and taxes (Lines 3.1 to 3.6)	7,155,451	642,305	325,946	736,349	419,378	9,279,429	5,572,963	6,507,296	99,899,898	121,259,586
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	XXX	0
3.10 Total (Lines 3.7 to 3.9)	7,155,451	642,305	325,946	736,349	419,378	9,279,429	5,572,963	6,507,296	99,899,898	121,259,586
3.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)	0	0	0	0	0	0	132,511	0	0	132,511

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (Cols. 1 thru 4)
1. Individual comprehensive coverage expenses:					
1.1 HIT expenses	40,184	3,607	1,830	4,135	49,756
1.2 Other than HIT expenses	848,952	76,206	38,672	87,363	1,051,193
2. Small group comprehensive coverage expenses:					
2.1 HIT expenses	195,179	17,520	8,891	20,085	241,675
2.2 Other than HIT expenses	4,123,480	370,142	187,834	424,337	5,105,793
3. Large group comprehensive coverage expenses:					
3.1 HIT expenses	338,693	30,403	15,428	34,854	419,378
3.2 Other than HI expenses	7,155,451	642,305	325,946	736,349	8,860,051
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1+2.1+3.1)	574,056	51,530	26,149	59,074	710,809
4.2 Subtotal other than HIT expenses (Lines 1.2+2.2+3.2)	12,127,883	1,088,653	552,452	1,248,049	15,017,037
4.3 Total (Lines 4.1+4.2)	12,701,939	1,140,183	578,601	1,307,123	15,727,846

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1)

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010

NAIC Group Code

NAIC Company Code 95263

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total 7 + 8
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101	XXX	1,247,526,101
1.2 Federal high risk pools								XXX	
1.3 State high risk pools								XXX	
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101	XXX	1,247,526,101
1.5 Federal taxes and federal assessments									
1.6 State and local premium taxes (Similar local taxes of $.....0)		(3,437)	(3,437)				(6,874)	(114)	(6,988)
1.7 Regulatory authority licenses and fees									
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	8,534,490	196,932,653	709,180,185	332,885,647			1,247,532,975	XXX	1,247,533,089
1.9 Net assumed less ceded reinsurance premiums earned	(45,838)	(902,237)	(2,501,055)	(228,894)			(3,678,024)	XXX	(3,678,024)
1.10 Other adjustments due to MLR calculations - Premiums								XXX	
1.11 Risk Revenue								XXX	
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	8,488,652	196,030,416	706,679,130	332,656,753			1,243,854,951	XXX	1,243,855,065
2. Claims:									
2.1 Incurred claims excluding prescription drugs	7,056,566	148,086,145	528,606,375	266,884,938			950,634,024	XXX	950,634,024
2.2 Prescription drugs	2,115,677	29,792,992	84,124,662	38,292,955			154,326,286	XXX	154,326,286
2.3 Pharmaceutical rebates	90,579	1,892,154	4,706,110	3,692,310			10,381,153	XXX	10,381,153
2.4 State stop-loss, market stabilization and claim/census based assessments								XXX	
3. Incurred medical incentive pools and bonuses								XXX	
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	1,592	146,516	332,648	219,768			700,524	250,177	950,701
5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 - 2.4 + 3) (From Part 2, Line 2.10)	9,081,664	175,986,983	608,024,927	301,485,583			1,094,579,157	XXX	1,094,579,157
5.1 Net assumed less ceded reinsurance claims incurred			647,424	37,455			684,879	XXX	684,879
5.2 Other adjustments due to MLR calculations - Claims								XXX	
5.3 Rebates Paid								XXX	
5.4 Estimated rebates unpaid prior year								XXX	
5.5 Estimated rebates unpaid current year								XXX	
5.6 Fee-for-service and co-pay revenue								XXX	
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	9,081,664	175,986,983	608,672,351	301,523,038			1,095,264,036	XXX	1,095,264,036
6. Improving Health Care Quality Expenses Incurred:									
6.1 Type A. Expenses for health improvements other than Health Information Technology	165,696	3,730,611	8,569,196	8,427,729			20,893,232	4,191,083	25,084,315
6.2 Type B. Health Information Technology expenses related to health improvement	74,445	1,749,730	3,978,087	2,064,599			7,866,861	1,922,205	9,789,066
6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	240,141	5,480,341	12,547,283	10,492,328			28,760,093	6,113,288	34,873,381
7. Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 1.8	1.092	0.922	0.876	XXX	XXX	XXX	XXX	XXX	XXX
8. Claim Adjustment Expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	59,473	1,266,335	3,419,515	985,059			5,730,382	1,388,278	7,118,660
8.2 All other claims adjustment expenses	331,685	3,946,421	9,238,396	3,013,996			16,530,498	3,873,924	20,404,422
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	391,158	5,212,756	12,657,911	3,999,055			22,260,880	5,262,202	27,523,082
9. Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.046	0.026	0.018	0.012			XXX	XXX	XXX
10. General and Administrative (G&A) Expenses:									
10.1 Direct sales salaries and benefits	232,141	171,204	171,204	1,425,721			2,000,270	30,062	2,030,332
10.2 Agents and brokers fees and commissions	1,185,759	17,989,562	10,322,355	581,498			30,079,174		30,079,174
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	129,608	906,251	1,911,191	887,566			3,834,616	654,486	4,489,102
10.4 Other general and administrative expenses	3,265,082	16,039,486	33,216,298	16,024,404			68,545,270	9,131,293	77,676,563
10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	4,812,590	35,106,503	45,621,048	18,919,189			104,459,330	9,815,841	114,275,171
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.3 - 8.3 - 10.5)	(6,036,901)	(25,756,167)	27,180,537	(2,276,857)			(6,889,388)	XXX	(28,080,605)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,264,182	20,264,182
13. Net investment and other gain(loss)	XXX	XXX	XXX	XXX	XXX	XXX		XXX	
14. Federal income taxes (excluding taxes on Line 1.5 above)									
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	(6,889,388)	XXX	(7,816,423)
16. ICD-10 Implementation Expenses (informational only; already included in general expenses)	2,288	62,565	142,053	64,690			271,596	66,330	337,926
O. OTHER INDICATORS:									
O1. Number of certificates / policies	3,767	42,983	75,167	23,598			145,515	36,776	182,291
O2. Number of Covered Lives	5,181	66,264	150,310	23,598			245,353	68,100	313,453
O3. Number of Groups	XXX	5,535	293	1			5,829	5	5,834
O4. Member Months	34,096	675,338	1,872,082	280,596			2,862,112	830,260	3,692,372

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed By April 1 - Not for Rebate Purpose)

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

NAIC Group Code | BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 | NAIC Company Code 95263

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health Premiums Earned							
1.1 Direct premiums written	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101
1.2 Unearned premium prior year							
1.3 Unearned premium current year							
1.4 Change in unearned premium (Lines 1.2 - 1.3)							
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5 - 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $.....0 write offs)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101
1.9 Assumed premiums earned from non-affiliates							
1.10 Net assumed less ceded premiums earned from affiliates							
1.11 Ceded premiums earned to non-affiliates	45,838	902,237	2,501,055	228,894			3,678,024
1.12 Other adjustments due to MLR calculation - Premiums							
1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 - 1.11 + 1.12)	8,488,652	196,026,979	706,675,693	332,656,753			1,243,848,077
2. Direct Claims Incurred:							
2.1 Paid claims during the year	8,355,393	168,189,439	617,428,346	307,666,350			1,101,639,528
2.2 Direct claim liability current year	1,429,882	22,744,066	61,006,712	31,237,671			116,418,331
2.3 Direct claim liability prior year	694,695	14,614,351	70,668,861	36,775,812			122,753,719
2.4 Direct claim reserves current year							
2.5 Direct claim reserves prior year							
2.6 Direct contract reserves current year							
2.7 Direct contract reserves prior year							
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b - 2.8c)							
A. Paid medical incentive pools and bonuses current year							
B. Accrued medical incentive pools and bonuses current year							
C. Accrued medical incentive pools and bonuses prior year							
2.9 Net healthcare receivables (Lines 2.9a - 2.9b)	8,916	332,171	(258,730)	71,921			154,278
A. Healthcare receivables current year	48,584	920,186	2,201,547	1,738,456			4,908,773
B. Healthcare receivables prior year	39,668	588,015	2,460,277	1,666,535			4,754,495
2.10 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 - 2.9)	9,081,664	175,986,983	608,024,927	302,056,288			1,095,149,862
2.11 Assumed Incurred Claims from non-affiliates							
2.12 Net Assumed less Ceded Incurred Claims from affiliates							
2.13 Ceded Incurred Claims to non-affiliates			(647,424)	(37,455)			(684,879)
2.14 Other Adjustments due to MLR calculation - Claims							
2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 - 2.13 + 2.14)	9,081,664	175,986,983	608,672,351	302,093,743			1,095,834,741
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	38,881	241,138	1,623,220	1,117,547			3,020,786

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

NAIC Group Code

BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010

NAIC Company Code 95263

3A	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Active 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)
A01.	Individual Comprehensive Coverage Expenses:										
A01.01	Salaries (including $.....58,020 for affiliated services)	81,615	399	22,931	5,883	37,953	148,781	44,519	221,590	1,783,288	2,198,178
A01.02	Outsourced Services	19,023	1,213	5,938	2,619	14,296	43,089	7,201	23,555	346,299	420,144
A01.03	EDP Equipment and Software (incl $.....0 for affiliated services)	7,642	81	729	434	12,093	20,979		35,864	221,351	278,194
A01.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	1,166	13	111	67	270	1,627		2,805	4,469	8,901
A01.05	Accreditation and Certification (incl $.....0 for affiliated services)	660	XXX	XXX	XXX	XXX	660	126			786
A01.06	Other Expenses (incl $.....0 for affiliated services)	12,636	119	1,482	935	9,830	25,002	7,626	47,870	2,327,565	2,408,063
A01.07	Subtotal before Reimbursements and Taxes (1.1 to 1.6)	122,742	1,825	31,191	9,938	74,442	240,138	59,472	331,684	4,682,972	5,314,266
A01.08	Reimbursements by uninsured plans and fiscal intermediaries										
A01.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129,608
A01.10	Total (1.7 to 1.9)	122,742	1,825	31,191	9,938	74,442	240,138	59,472	331,684	4,682,972	5,443,874
A01.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							1,592			1,592
A02.	Small Group Comprehensive Coverage Expenses:										
A02.01	Salaries (including $.....511,328 for affiliated services)	1,307,716	11,513	210,772	58,411	617,193	2,205,605	1,079,167	2,622,520	9,277,540	15,184,832
A02.02	Outsourced Services	1,433,723	110,081	236,651	143,362	714,780	2,638,597	121,826	349,573	2,902,588	6,012,584
A02.03	EDP Equipment and Software (incl $.....0 for affiliated services)	67,348	715	6,430	3,827	248,328	326,648		557,409	888,699	1,772,756
A02.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	10,274	109	981	584	2,384	14,332		24,722	39,391	78,445
A02.05	Accreditation and Certification (incl $.....0 for affiliated services)	15,003	XXX	XXX	XXX	XXX	15,003	2,858			17,861
A02.06	Other Expenses (incl $.....0 for affiliated services)	91,979	822	11,432	8,878	167,044	280,155	62,484	392,197	21,092,036	21,826,872
A02.07	Subtotal before Reimbursements and Taxes (2.1 to 2.6)	2,926,043	123,240	466,266	215,062	1,749,729	5,480,340	1,266,335	3,946,421	34,200,254	44,893,350
A02.08	Reimbursements by uninsured plans and fiscal intermediaries										
A02.09	Taxes, Licenses and Fees (in total, for lying purposes	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	902,814
A02.10	Total (2.7 to 2.9)	2,926,043	123,240	466,266	215,062	1,749,729	5,480,340	1,266,335	3,946,421	34,200,254	45,796,164
A02.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							146,516			146,516
A03.	Large Group Comprehensive Coverage Expenses:										
A03.01	Salaries (including $.....1,160,480 for affiliated services)	3,031,209	26,175	482,503	131,812	1,401,433	5,073,132	2,956,573	6,142,845	17,889,173	32,061,723
A03.02	Outsourced Services	3,258,103	249,779	537,523	325,525	1,622,878	5,993,808	282,018	822,337	6,015,219	13,113,382
A03.03	EDP Equipment and Software (incl $.....0 for affiliated services)	152,849	1,623	14,593	8,685	563,615	741,365		1,265,101	2,017,000	4,023,466
A03.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	23,318	248	2,227	1,324	5,409	32,526		56,108	89,398	178,032
A03.05	Accreditation and Certification (incl $.....0 for affiliated services)	34,051	XXX	XXX	XXX	XXX	34,051	6,486			40,537
A03.06	Other Expenses (incl $.....0 for affiliated services)	235,592	2,123	28,431	21,503	384,751	672,400	174,440	952,004	17,699,076	19,497,920
A03.07	Subtotal before Reimbursements and Taxes (3.1 to 3.6)	6,735,122	279,948	1,065,277	488,849	3,978,086	12,547,282	3,419,517	9,238,395	43,709,866	68,915,060
A03.08	Reimbursements by uninsured plans and fiscal intermediaries										
A03.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,907,754
A03.10	Total (3.7 to 3.9)	6,735,122	279,948	1,065,277	488,849	3,978,086	12,547,282	3,419,517	9,238,395	43,709,866	70,822,814
A03.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							332,648			332,648

3B	Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Active to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
B01.	Individual Comprehensive Coverage Expenses:					
B01.01	HIT expenses	52,157	3,158	11,084	8,046	74,445
B01.02	Other than HIT expenses	122,742	1,825	31,191	9,938	165,696
B02.	Small Group Comprehensive Coverage Expenses:					
B02.01	HIT expenses	1,383,274	48,188	193,311	124,957	1,749,730
B02.02	Other than HIT expenses	2,926,043	123,240	466,266	215,062	3,730,611
B03.	Large Group Comprehensive Coverage Expenses:					
B03.01	HIT expenses	3,142,842	109,989	440,379	284,877	3,978,087
B03.02	Other than HIT expenses	6,735,122	279,948	1,065,277	488,849	8,569,196
B04.	Subtotals/Totals:					
B04.01	Subtotals HIT expenses (Line 1.1 + 2.1 + 3.1)	4,578,273	161,335	644,774	417,880	5,802,262
B04.02	Subtotals Other than HIT expenses (Line 1.2 + 2.2 + 3.2)	9,783,907	405,013	1,562,734	713,849	12,465,503
B04.03	Total (Lines 4.1 + 4.2)	14,362,180	566,348	2,207,508	1,131,729	18,267,765

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1)

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

NAIC Group Code

BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010

NAIC Company Code 95263

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total 7 + 8
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101	XXX	1,247,526,101
1.2 Federal high risk pools								XXX	
1.3 State high risk pools								XXX	
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101	XXX	1,247,526,101
1.5 Federal taxes and federal assessments									
1.6 State and local premium taxes (Similar local taxes of $.....0)		(3,437)	(3,437)				(6,874)	(114)	(6,988)
1.7 Regulatory authority licenses and fees									
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	8,534,490	196,932,653	709,180,185	332,885,647			1,247,532,975	XXX	1,247,533,089
1.9 Net assumed less ceded reinsurance premiums earned	(45,838)	(902,237)	(2,501,055)	(228,894)			(3,678,024)	XXX	(3,678,024)
1.10 Other adjustments due to MLR calculations - Premiums								XXX	
1.11 Risk Revenue								XXX	
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	8,488,652	196,030,416	706,679,130	332,656,753			1,243,854,951	XXX	1,243,855,065
2. Claims:									
2.1 Incurred claims excluding prescription drugs	7,056,566	148,086,145	528,606,375	266,884,938			950,634,024	XXX	950,634,024
2.2 Prescription drugs	2,115,677	29,792,992	84,124,662	38,292,955			154,326,286	XXX	154,326,286
2.3 Pharmaceutical rebates	90,579	1,892,154	4,706,110	3,692,310			10,381,153	XXX	10,381,153
2.4 State stop-loss, market stabilization and claim/census based assessments								XXX	
3. Incurred medical incentive pools and bonuses								XXX	
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	1,592	146,516	332,648	219,768			700,524	250,177	950,701
5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 - 2.4 + 3) (From Part 2, Line 2.10)	9,081,664	175,986,983	608,024,927	301,485,583			1,094,579,157	XXX	1,094,579,157
5.1 Net assumed less ceded reinsurance claims incurred			647,424	37,455			684,879	XXX	684,879
5.2 Other adjustments due to MLR calculations - Claims								XXX	
5.3 Rebates Paid								XXX	
5.4 Estimated rebates unpaid prior year								XXX	
5.5 Estimated rebates unpaid current year								XXX	
5.6 Fee-for-service and co-pay revenue								XXX	
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	9,081,664	175,986,983	608,672,351	301,523,038			1,095,264,036	XXX	1,095,264,036
6. Improving Health Care Quality Expenses Incurred:									
6.1 Type A. Expenses for health improvements other than Health Information Technology	165,696	3,730,611	8,569,196	8,427,729			20,893,232	4,191,083	25,084,315
6.2 Type B. Health Information Technology expenses related to health improvement	74,445	1,749,730	3,978,087	2,064,599			7,866,861	1,922,205	9,789,066
6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	240,141	5,480,341	12,547,283	10,492,328			28,760,093	6,113,288	34,873,381
7. Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 1.8	1.092	0.922	0.876	XXX	XXX	XXX	XXX	XXX	XXX
8. Claim Adjustment Expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	59,473	1,266,335	3,419,515	985,059			5,730,382	1,388,278	7,118,660
8.2 All other claims adjustment expenses	331,685	3,946,421	9,238,396	3,013,996			16,530,498	3,873,924	20,404,422
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	391,158	5,212,756	12,657,911	3,999,055			22,260,880	5,262,202	27,523,082
9. Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.046	0.026	0.018	0.012			XXX	XXX	XXX
10. General and Administrative (G&A) Expenses:									
10.1 Direct sales salaries and benefits	232,141	171,204	171,204	1,425,721			2,000,270	30,062	2,030,332
10.2 Agents and brokers fees and commissions	1,185,759	17,989,562	10,322,355	581,498			30,079,174		30,079,174
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	129,608	906,251	1,911,191	887,566			3,834,616	654,486	4,489,102
10.4 Other general and administrative expenses	3,265,082	16,039,486	33,216,298	16,024,404			68,545,270	9,131,293	77,676,563
10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	4,812,590	35,106,503	45,621,048	18,919,189			104,459,330	9,815,841	114,275,171
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.3 - 8.3 - 10.5)	(6,036,901)	(25,756,167)	27,180,537	(2,276,857)			(6,889,388)	XXX	(28,080,605)
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,264,182	20,264,182
13. Net investment and other gain(loss)	XXX	XXX	XXX	XXX	XXX	XXX		XXX	
14. Federal income taxes (excluding taxes on Line 1.5 above)									
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	(6,889,388)	XXX	(7,816,423)
16. ICD-10 Implementation Expenses (informational only; already included in general expenses)	2,288	62,565	142,053	64,690			271,596	66,330	337,926
O. OTHER INDICATORS:									
O1. Number of certificates / policies	3,767	42,983	75,167	23,598			145,515	36,776	182,291
O2. Number of Covered Lives	5,181	66,264	150,310	23,598			245,353	68,100	313,453
O3. Number of Groups	XXX	5,535	293	1			5,829	5	5,834
O4. Member Months	34,096	675,338	1,872,082	280,596			2,862,112	830,260	3,692,372

Supp79 Grand Total

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed By April 1 - Not for Rebate Purpose)

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

NAIC Group Code — BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010 — NAIC Company Code 95263

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health Premiums Earned							
1.1 Direct premiums written	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101
1.2 Unearned premium prior year							
1.3 Unearned premium current year							
1.4 Change in unearned premium (Lines 1.2 - 1.3)							
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5 - 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $.....0 write offs)	8,534,490	196,929,216	709,176,748	332,885,647			1,247,526,101
1.9 Assumed premiums earned from non-affiliates							
1.10 Net assumed less ceded premiums earned from affiliates							
1.11 Ceded premiums earned to non-affiliates	45,838	902,237	2,501,055	228,894			3,678,024
1.12 Other adjustments due to MLR calculation - Premiums							
1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 - 1.11 + 1.12)	8,488,652	196,026,979	706,675,693	332,656,753			1,243,848,077
2. Direct Claims Incurred:							
2.1 Paid claims during the year	8,355,393	168,189,439	617,428,346	307,666,350			1,101,639,528
2.2 Direct claim liability current year	1,429,882	22,744,066	61,006,712	31,237,671			116,418,331
2.3 Direct claim liability prior year	694,695	14,614,351	70,668,861	36,775,812			122,753,719
2.4 Direct claim reserves current year							
2.5 Direct claim reserves prior year							
2.6 Direct contract reserves current year							
2.7 Direct contract reserves prior year							
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b - 2.8c)							
A. Paid medical incentive pools and bonuses current year							
B. Accrued medical incentive pools and bonuses current year							
C. Accrued medical incentive pools and bonuses prior year							
2.9 Net healthcare receivables (Lines 2.9a - 2.9b)	8,916	332,171	(258,730)	71,921			154,278
A. Healthcare receivables current year	48,584	920,186	2,201,547	1,738,456			4,908,773
B. Healthcare receivables prior year	39,668	588,015	2,460,277	1,666,535			4,754,495
2.10 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 - 2.9)	9,081,664	175,986,983	608,024,927	302,056,288			1,095,149,862
2.11 Assumed Incurred Claims from non-affiliates							
2.12 Net Assumed less Ceded Incurred Claims from affiliates							
2.13 Ceded Incurred Claims to non-affiliates			(647,424)	(37,455)			(684,879)
2.14 Other Adjustments due to MLR calculation - Claims							
2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 - 2.13 + 2.14)	9,081,664	175,986,983	608,672,351	302,093,743			1,095,834,741
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	38,881	241,138	1,623,220	1,117,547			3,020,786

Supp80 Grand Total

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

REPORT FOR: 1. CORPORATION: AvMed, Inc. 2. LOCATION: Miami, FL 33156

NAIC Group Code

BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010

NAIC Company Code 95263

3A	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Active 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)
A01.	Individual Comprehensive Coverage Expenses:										
A01.01	Salaries (including $.....58,020 for affiliated services)	81,615	399	22,931	5,883	37,953	148,781	44,519	221,590	1,783,288	2,198,178
A01.02	Outsourced Services	19,023	1,213	5,938	2,619	14,296	43,089	7,201	23,555	346,299	420,144
A01.03	EDP Equipment and Software (incl $.....0 for affiliated services)	7,642	81	729	434	12,093	20,979		35,864	221,351	278,194
A01.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	1,166	13	111	67	270	1,627		2,805	4,469	8,901
A01.05	Accreditation and Certification (incl $.....0 for affiliated services)	660	XXX	XXX	XXX	XXX	660	126			786
A01.06	Other Expenses (incl $.....0 for affiliated services)	12,636	119	1,482	935	9,830	25,002	7,626	47,870	2,327,565	2,408,063
A01.07	Subtotal before Reimbursements and Taxes (1.1 to 1.6)	122,742	1,825	31,191	9,938	74,442	240,138	59,472	331,684	4,682,972	5,314,266
A01.08	Reimbursements by uninsured plans and fiscal intermediaries										
A01.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129,608
A01.10	Total (1.7 to 1.9)	122,742	1,825	31,191	9,938	74,442	240,138	59,472	331,684	4,682,972	5,443,874
A01.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							1,592			1,592
A02.	Small Group Comprehensive Coverage Expenses:										
A02.01	Salaries (including $.....511,328 for affiliated services)	1,307,716	11,513	210,772	58,411	617,193	2,205,605	1,079,167	2,622,520	9,277,540	15,184,832
A02.02	Outsourced Services	1,433,723	110,081	236,651	143,362	714,780	2,638,597	121,826	349,573	2,902,588	6,012,584
A02.03	EDP Equipment and Software (incl $.....0 for affiliated services)	67,348	715	6,430	3,827	248,328	326,648		557,409	888,699	1,772,756
A02.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	10,274	109	981	584	2,384	14,332		24,722	39,391	78,445
A02.05	Accreditation and Certification (incl $.....0 for affiliated services)	15,003	XXX	XXX	XXX	XXX	15,003	2,858			17,861
A02.06	Other Expenses (incl $.....0 for affiliated services)	91,979	822	11,432	8,878	167,044	280,155	62,484	392,197	21,092,036	21,826,872
A02.07	Subtotal before Reimbursements and Taxes (2.1 to 2.6)	2,926,043	123,240	466,266	215,062	1,749,729	5,480,340	1,266,335	3,946,421	34,200,254	44,893,350
A02.08	Reimbursements by uninsured plans and fiscal intermediaries										
A02.09	Taxes, Licenses and Fees (in total, for lying purposes	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	902,814
A02.10	Total (2.7 to 2.9)	2,926,043	123,240	466,266	215,062	1,749,729	5,480,340	1,266,335	3,946,421	34,200,254	45,796,164
A02.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							146,516			146,516
A03.	Large Group Comprehensive Coverage Expenses:										
A03.01	Salaries (including $.....1,160,480 for affiliated services)	3,031,209	26,175	482,503	131,812	1,401,433	5,073,132	2,956,573	6,142,845	17,889,173	32,061,723
A03.02	Outsourced Services	3,258,103	249,779	537,523	325,525	1,622,878	5,993,808	282,018	822,337	6,015,219	13,113,382
A03.03	EDP Equipment and Software (incl $.....0 for affiliated services)	152,849	1,623	14,593	8,685	563,615	741,365		1,265,101	2,017,000	4,023,466
A03.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	23,318	248	2,227	1,324	5,409	32,526		56,108	89,398	178,032
A03.05	Accreditation and Certification (incl $.....0 for affiliated services)	34,051	XXX	XXX	XXX	XXX	34,051	6,486			40,537
A03.06	Other Expenses (incl $.....0 for affiliated services)	235,592	2,123	28,431	21,503	384,751	672,400	174,440	952,004	17,699,076	19,497,920
A03.07	Subtotal before Reimbursements and Taxes (3.1 to 3.6)	6,735,122	279,948	1,065,277	488,849	3,978,086	12,547,282	3,419,517	9,238,395	43,709,866	68,915,060
A03.08	Reimbursements by uninsured plans and fiscal intermediaries										
A03.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,907,754
A03.10	Total (3.7 to 3.9)	6,735,122	279,948	1,065,277	488,849	3,978,086	12,547,282	3,419,517	9,238,395	43,709,866	70,822,814
A03.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)							332,648			332,648

3B	Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Active to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
B01.	Individual Comprehensive Coverage Expenses:					
B01.01	HIT expenses	52,157	3,158	11,084	8,046	74,445
B01.02	Other than HIT expenses	122,742	1,825	31,191	9,938	165,696
B02.	Small Group Comprehensive Coverage Expenses:					
B02.01	HIT expenses	1,383,274	48,188	193,311	124,957	1,749,730
B02.02	Other than HIT expenses	2,926,043	123,240	466,266	215,062	3,730,611
B03.	Large Group Comprehensive Coverage Expenses:					
B03.01	HIT expenses	3,142,842	109,989	440,379	284,877	3,978,087
B03.02	Other than HIT expenses	6,735,122	279,948	1,065,277	488,849	8,569,196
B04.	Subtotals/Totals:					
B04.01	Subtotals HIT expenses (Line 1.1 + 2.1 + 3.1)	4,578,273	161,335	644,774	417,880	5,802,262
B04.02	Subtotals Other than HIT expenses (Line 1.2 + 2.2 + 3.2)	9,783,907	405,013	1,562,734	713,849	12,465,503
B04.03	Total (Lines 4.1 + 4.2)	14,362,180	566,348	2,207,508	1,131,729	18,267,765

Supp81 Grand Total

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 95266

		Comprehensive Health Coverage			4	5	6	7	8	9
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (7 + 8)
1.	Premium:									
	1.1 Health premiums earned (From Part 2, Line 1.8)	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902	XXX	280,514,902
	1.2 Federal high risk pools							0	XXX	
	1.3 State high risk pools							0	XXX	
	1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902	XXX	280,514,902
	1.5 Federal taxes and federal assessments	2,621,558	(12,993)	(295,317)	1,791,407			4,114,655		4,114,655
	1.6 State insurance, premium and other taxes (Similar local taxes of $)	1,058,108	(2,090)	(52,892)	1,076,580			2,079,706		2,079,706
	1.7 Regulatory authority licenses and fees							0		
	1.8 Adjusted Premiums Earned (Lines 1.4 – 1.5 – 1.6 – 1.7)	81,680,437	414,385	10,446,955	181,778,764	0	0	274,320,541	XXX	274,320,541
	1.9 Net Assumed less Ceded reinsurance premiums earned	(1,088,312)	(4,984)	(126,186)	(381,020)			(1,600,502)	XXX	(1,600,502)
	1.10 Other Adjustments due to MLR calculations – Premiums							0	XXX	
	1.11 Risk Revenue							0	XXX	
	1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)	80,592,125	409,401	10,320,769	181,397,744	0	0	272,720,039	XXX	272,720,039
2.	Claims:									
	2.1 Incurred claims excluding prescription drugs	53,176,380	395,407	8,391,410	124,197,514			186,160,711	XXX	186,160,711
	2.2 Prescription drugs	8,958,428	21,327	1,917,493	21,001,440			31,908,688	XXX	31,908,688
	2.3 Pharmaceutical rebates							0	XXX	
	2.4 State stop loss, market stabilization and claim/census based assessments							0	XXX	
3.	Incurred medical incentive pools and bonuses				13,873,000			13,873,000	XXX	13,873,000
4.	Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	6,277	1	699				6,977		6,977
5.	5.0 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 – 2.4 + 3) (From Part 2, Line 2.10)	62,144,808	416,734	10,308,903	159,071,954	0	0	231,942,399	XXX	231,942,399
	5.1 Net Assumed less Ceded reinsurance claims incurred	(1,211,430)	6,131	130,119	(597,692)			(1,672,872)	XXX	(1,672,872)
	5.2 Other Adjustments due to MLR calculations – Claims							0	XXX	
	5.3 Rebates Paid							0	XXX	
	5.4 Estimated rebates unpaid prior year							0	XXX	
	5.5 Estimated rebates unpaid current year							0	XXX	
	5.6 Fee for service and co-pay revenue							0	XXX	
	5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)	60,933,378	422,865	10,439,022	158,474,262	0	0	230,269,527	XXX	230,269,527
6.	Improving Health Care Quality Expenses Incurred:									
	6.1 Type A Expenses for health improvements other than Health Information Technology	194,762	32	21,683				216,477		216,477
	6.2 Type B Health Information Technology expenses related to health improvement	109,578	18	12,199				121,795		121,795
	6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	304,340	50	33,882	0	0	0	338,272	0	338,273
7.	Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 18	0.765	1.006	0.990	XXX	XXX	XXX	XXX	XXX	XXX
8.	Claims Adjustment Expenses:									
	8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	885,039	4,142	104,840	1,935,600			2,929,621		2,929,621
	8.2 All other claims adjustment expenses	813,455	3,807	96,361	1,779,045			2,692,668		2,692,668
	8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	1,698,494	7,949	201,201	3,714,645	0	0	5,622,289	0	5,622,289
9.	Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.021	0.019	0.019	0.020	0.000	0.000	XXX	XXX	XXX
10.	General and Administrative (G&A) Expenses:									
	10.1 Direct sales salaries and benefits	4,816,826	22,539	570,595	10,534,514			15,944,474		15,944,474
	10.2 Agents and brokers fees and commissions	6,791,064	469	682,824				7,474,357		7,474,357
	10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	1,265,433	(1,143)	(28,930)	1,520,008			2,755,368		2,755,368
	10.4 Other general and administrative expenses	1,081,781	13,398	306,553	4,226,599			5,628,331		5,628,331
	10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	13,955,104	34,794	848,687	16,963,945	0	0	31,802,530	0	31,802,530
11.	Underwriting Gain/(Loss) (Lines 1.12 – 5.7 – 6.3 – 8.3 – 10.5)	3,700,809	(56,257)	(1,202,023)	2,244,892	0	0	4,687,421	XXX	4,687,420
12.	Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13.	Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	2,124,248	XXX	2,124,248
14.	Federal income taxes (excluding taxes on Line 15 above)							0		509,217
15.	Net gain or (loss) (Lines 11 + 12 + 13 – 14)	XXX	XXX	XXX	XXX	XXX	XXX	6,811,669	XXX	6,302,452
16.	ICD-10 Implementation Expenses (informational only; already included in general expenses)							0		
	OTHER INDICATORS:									
1.	Number of Certificates/Policies	25,916	46	1,274	28,054			55,290		55,290
2.	Number of Covered Lives	25,916	46	2,876	28,054			56,892		56,892
3.	Number of Groups	XXX	2	1	28,054			28,057		28,057
4.	Member Months	323,112	540	35,485	348,859			707,996		707,996

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 95266

		Comprehensive Health Coverage			4	5	6	7
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by statute)	Other Health	Total
1.	Health Premiums Earned:							
	1.1 Direct premiums written	85,360,103	399,302	10,108,746	184,646,751			280,514,902
	1.2 Unearned premium prior year							
	1.3 Unearned premium current year							
	1.4 Change in unearned premium (Lines 1.2 – 1.3)	0	0	0	0	0	0	0
	1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.7 Change in reserve for rate credits (Lines 1.5 – 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $ write offs)	85,360,103	399,302	10,108,746	184,646,751			280,514,902
	1.9 Assumed premiums earned from non-affiliates							
	1.10 Net Assumed less Ceded premiums earned from affiliates	(1,088,312)	(4,984)	(126,186)	(381,020)			(1,600,502)
	1.11 Ceded premiums earned to non-affiliates							
	1.12 Net Other Adjustments due to MLR calculation – Premiums							
	1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 – 1.11 – 1.12)	84,271,791	394,318	9,982,560	184,265,731	0	0	278,914,400
2.	Direct Claims Incurred:							
	2.1 Paid claims during the year	60,674,975	472,205	10,570,408	148,787,755			220,505,343
	2.2 Direct claim liability current year	8,709,477	625,207	2,947,403	13,037,851			25,319,938
	2.3 Direct claim liability prior year	6,592,241	680,678	3,208,908	16,611,327			27,093,154
	2.4 Direct claim reserves current year							
	2.5 Direct claim reserves prior year							
	2.6 Direct contract reserves current year							
	2.7 Direct contract reserves prior year							
	2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b – 2.8c)	0	0	0	13,873,000	0	0	13,873,000
	2.8a Paid medical incentive pools and bonuses current year				14,283,119			14,283,119
	2.8b Accrued medical incentive pools and bonuses current year				4,146,036			4,146,036
	2.8c Accrued medical incentive pools and bonuses prior year				4,556,155			4,556,155
	2.9 Net healthcare receivables (Lines 2.9a – 2.9b)	647,403	0	0	15,325	0	0	662,728
	2.9a Healthcare receivables current year	668,653			15,325			683,978
	2.9b Healthcare receivables prior year	21,250						21,250
	2.10 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 + 2.4 – 2.5 + 2.6 – 2.7 + 2.8 – 2.9)	62,144,808	416,734	10,308,903	159,071,954	0	0	231,942,399
	2.11 Assumed Incurred Claims from non-affiliates							
	2.12 Net Assumed less Ceded Incurred Claims from affiliates	(1,211,430)	6,131	130,119	(597,692)			(1,672,872)
	2.13 Ceded Incurred Claims to non-affiliates							
	2.14 Other Adjustments due to MLR calculation – Claims							
	2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 – 2.13 – 2.14)	60,933,378	422,865	10,439,022	158,474,262	0	0	230,269,527
3.	Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)							

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 95266

3A All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses			
	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	9 General Administrative Expenses	10 Total Expenses (6 to 9)
1. Individual Comprehensive Coverage Expenses:										
1.1 Salaries (including $ ____ for affiliated services)	145,889	6,909	6,833	14,124	107,265	281,020	696,284	788,550	7,169,402	8,935,256
1.2 Outsourced Services	195			20,811		21,006	(19,851)	1,062	9,730	11,947
1.3 EDP Equipment and Software (incl $ ____ for affiliated services)						0	159,192	146,316	1,340,346	1,645,854
1.4 Other Equipment (excl. EDP) (incl $ ____ for affiliated services)					2,313	2,313	2,095	1,925	15,323	21,656
1.5 Accreditation and Certification (incl $ ____ for affiliated services)		XXX	XXX	XXX	XXX	0				0
1.6 Other Expenses (incl $ ____ for affiliated services)						0	310,319	285,220	6,023,894	6,619,433
1.7 Subtotal before Reimbursements and Taxes (1.1 to 1.6)	146,084	6,909	6,833	34,935	109,578	304,339	1,148,039	1,223,073	14,558,695	17,234,146
1.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
1.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	949,127
1.10 Total (1.7 to 1.9)	146,084	6,909	6,833	34,935	109,578	304,339	1,148,039	1,223,073	14,558,695	18,183,273
1.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	4,958	751	225	343		6,277				6,277
2. Small Group Comprehensive Coverage Expenses:										
2.1 Salaries (including $ ____ for affiliated services)	24	1	1	3	18	47	113	128	1,166	1,454
2.2 Outsourced Services				3		3	(3)		2	2
2.3 EDP Equipment and Software (incl $ ____ for affiliated services)						0	26	24	218	268
2.4 Other Equipment (excl. EDP) (incl $ ____ for affiliated services)						0			2	2
2.5 Accreditation and Certification (incl $ ____ for affiliated services)		XXX	XXX	XXX	XXX	0				0
2.6 Other Expenses (incl $ ____ for affiliated services)						0	50	46	980	1,076
2.7 Subtotal before Reimbursements and Taxes (2.1 to 2.6)	24	1	1	6	18	50	186	198	2,368	2,802
2.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
2.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154
2.10 Total (2.7 to 2.9)	24	1	1	6	18	50	186	198	2,368	2,956
2.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	1					1				1
3. Large Group Comprehensive Coverage Expenses:										
3.1 Salaries (including $ ____ for affiliated services)	16,242	769	761	1,572	11,941	31,285	77,518	87,790	798,178	994,771
3.2 Outsourced Services	22			2,317		2,339	(2,210)	118	1,083	1,330
3.3 EDP Equipment and Software (incl $ ____ for affiliated services)						0	17,723	16,290	149,222	183,235
3.4 Other Equipment (excl. EDP) (incl $ ____ for affiliated services)					258	258	233	214	1,706	2,411
3.5 Accreditation and Certification (incl $ ____ for affiliated services)		XXX	XXX	XXX	XXX	0				0
3.6 Other Expenses (incl $ ____ for affiliated services)						0	34,548	31,754	670,647	736,949
3.7 Subtotal before Reimbursements and Taxes (3.1 to 3.6)	16,264	769	761	3,889	12,199	33,882	127,812	136,166	1,620,836	1,918,696
3.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
3.9 Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105,667
3.10 Total (3.7 to 3.9)	16,264	769	761	3,889	12,199	33,882	127,812	136,166	1,620,836	2,024,363
3.11 Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	552	84	25	38		699				699

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
1. Individual Comprehensive Coverage Expenses:					
1.1 HIT expenses	86,554	13,105	3,925	5,994	109,578
1.2 Other than HIT expenses	146,084	6,909	6,833	34,935	194,761
2. Small Group Comprehensive Coverage Expenses:					
2.1 HIT expenses					0
2.2 Other than HIT expenses					0
3. Large Group Comprehensive Coverage Expenses:					
3.1 HIT Expenses	9,636	1,459	437	667	12,199
3.2 Other than HIT expenses	16,264	769	761	3,889	21,683
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1 + 2.1 + 3.1)	96,190	14,564	4,362	6,661	121,777
4.2 Subtotal Other than HIT expenses (Lines 1.2 + 2.2 + 3.2)	162,348	7,678	7,594	38,824	216,444
4.3 Total (Lines 4.1 + 4.2)	258,538	22,242	11,956	45,485	338,221

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Consolidated DURING THE YEAR 2010 NAIC Company Code 95266

		Comprehensive Health Coverage			4	5	6	7	8	9
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (7 + 8)
1.	Premium:									
	1.1 Health premiums earned (From Part 2, Line 1.8)	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902	XXX	280,514,902
	1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
	1.3 State high risk pools	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)	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902	XXX	280,514,902
	1.5 Federal taxes and federal assessments	2,621,558	(12,993)	(285,317)	1,791,407	0	0	4,114,655	0	4,114,655
	1.6 State insurance, premium and other taxes (Similar local taxes of $ 0)	1,058,108	(2,090)	(52,892)	1,076,580	0	0	2,079,706	0	2,079,706
	1.7 Regulatory authority licenses and fees	0	0	0	0	0	0	0	0	0
	1.8 Adjusted Premiums Earned (Lines 1.4 – 1.5 – 1.6 – 1.7)	81,680,437	414,385	10,446,955	181,778,764	0	0	274,320,541	XXX	274,320,541
	1.9 Net Assumed less Ceded reinsurance premiums earned	(1,088,312)	(4,984)	(126,186)	(381,020)	0	0	(1,600,502)	XXX	(1,600,502)
	1.10 Other Adjustments due to MLR calculations – Premiums	0	0	0	0	0	0	0	XXX	0
	1.11 Risk Revenue	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)	80,592,125	409,401	10,320,769	181,397,744	0	0	272,720,039	XXX	272,720,039
2.	Claims:									
	2.1 Incurred claims excluding prescription drugs	53,176,380	395,407	8,391,410	124,197,514	0	0	186,160,711	XXX	186,160,711
	2.2 Prescription drugs	8,968,428	21,327	1,917,493	21,001,440	0	0	31,908,688	XXX	31,908,688
	2.3 Pharmaceutical rebates	0	0	0	0	0	0	0	XXX	0
	2.4 State stop loss, market stabilization and claim/census based assessments	0	0	0	0	0	0	0	XXX	0
3.	Incurred medical incentive pools and bonuses	0	0	0	13,873,000	0	0	13,873,000	XXX	13,873,000
4.	Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)	6,277	1	699	0	0	0	6,977	0	6,977
5.	5.0 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 – 2.4 + 3) (From Part 2, Line 2.10)	62,144,808	416,734	10,308,903	159,071,954	0	0	231,942,399	XXX	231,942,399
	5.1 Net Assumed less Ceded reinsurance claims incurred	(1,211,430)	6,131	130,119	(597,692)	0	0	(1,672,872)	XXX	(1,672,872)
	5.2 Other Adjustments due to MLR calculations – Claims	0	0	0	0	0	0	0	XXX	0
	5.3 Rebates Paid	0	0	0	0	0	0	0	XXX	0
	5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
	5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
	5.6 Fee for service and co-pay revenue	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)	60,933,378	422,865	10,439,022	158,474,262	0	0	230,269,527	XXX	230,269,527
6.	Improving Health Care Quality Expenses Incurred:									
	6.1 Type A Expenses for health improvements other than Health Information Technology	194,762	32	21,683	0	0	0	216,477	0	216,477
	6.2 Type B Health Information Technology expenses related to health improvement	109,578	18	12,199	0	0	0	121,795	0	121,795
	6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	304,340	50	33,882	0	0	0	338,272	0	338,273
7.	Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 18	0.765	1.006	0.990	XXX	XXX	XXX	XXX	XXX	XXX
8.	Claims Adjustment Expenses:									
	8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	885,039	4,142	104,840	1,935,600	0	0	2,929,621	0	2,929,621
	8.2 All other claims adjustment expenses	813,455	3,807	96,361	1,779,045	0	0	2,692,668	0	2,692,668
	8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	1,698,494	7,949	201,201	3,714,645	0	0	5,622,289	0	5,622,289
9.	Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.021	0.019	0.019	0.020	0.000	0.000	XXX	XXX	XXX
10.	General and Administrative (G&A) Expenses:									
	10.1 Direct sales salaries and benefits	4,816,826	22,539	570,595	10,534,514	0	0	15,944,474	0	15,944,474
	10.2 Agents and brokers fees and commissions	6,791,064	0	469	682,824	0	0	7,474,357	0	7,474,357
	10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	1,265,433	(1,143)	(28,930)	1,520,008	0	0	2,755,368	0	2,755,368
	10.4 Other general and administrative expenses	1,081,781	13,398	306,553	4,226,599	0	0	5,628,331	0	5,628,331
	10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	13,955,104	34,794	848,687	16,963,945	0	0	31,802,530	0	31,802,530
11.	Underwriting Gain/(Loss) (Lines 1.12 – 5.7 – 6.3 – 8.3 – 10.5)	3,700,809	(56,257)	(1,202,023)	2,244,892	0	0	4,687,421	XXX	4,687,420
12.	Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13.	Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	2,124,248	XXX	2,124,248
14.	Federal income taxes (excluding taxes on Line 15 above)	0	0	0	0	0	0	0	0	509,217
15.	Net gain or (loss) (Lines 11 + 12 + 13 – 14)	XXX	XXX	XXX	XXX	XXX	XXX	6,811,669	XXX	6,302,452
16.	ICD-10 Implementation Expenses (informational only; already included in general expenses)	0	0	0	0	0	0	0	0	0
	OTHER INDICATORS:									
1.	Number of Certificates/Policies	25,916	46	1,274	28,054	0	0	55,290	0	55,290
2.	Number of Covered Lives	25,916	46	2,876	28,054	0	0	56,892	0	56,892
3.	Number of Groups	XXX	2	1	28,054	0	0	28,057	0	28,057
4.	Member Months	323,112	540	35,485	348,859	0	0	707,996	0	707,996

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Consolidated DURING THE YEAR 2010 NAIC Company Code 95266

		Comprehensive Health Coverage			4	5	6	7
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (excluded by statute)	Other Business (excluded by statute)	Other Health	Total
1.	Health Premiums Earned:							
	1.1 Direct premiums written	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902
	1.2 Unearned premium prior year	0	0	0	0	0	0	0
	1.3 Unearned premium current year	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
	1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.7 Change in reserve for rate credits (Lines 1.5 – 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $ 0 write offs)	85,360,103	399,302	10,108,746	184,646,751	0	0	280,514,902
	1.9 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
	1.10 Net Assumed less Ceded premiums earned from affiliates	(1,088,312)	(4,984)	(126,186)	(381,020)	0	0	(1,600,502)
	1.11 Ceded premiums earned to non-affiliates	0	0	0	0	0	0	0
	1.12 Net Other Adjustments due to MLR calculation – Premiums	0	0	0	0	0	0	0
	1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 – 1.11 – 1.12)	84,271,791	394,318	9,982,560	184,265,731	0	0	278,914,400
2.	Direct Claims Incurred:							
	2.1 Paid claims during the year	60,674,975	472,205	10,570,408	148,787,755	0	0	220,505,343
	2.2 Direct claim liability current year	8,709,477	625,207	2,947,403	13,037,851	0	0	25,319,938
	2.3 Direct claim liability prior year	6,592,241	680,678	3,206,906	16,611,327	0	0	27,093,154
	2.4 Direct claim reserves current year	0	0	0	0	0	0	0
	2.5 Direct claim reserves prior year	0	0	0	0	0	0	0
	2.6 Direct contract reserves current year	0	0	0	0	0	0	0
	2.7 Direct contract reserves prior year	0	0	0	0	0	0	0
	2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b – 2.8c)	0	0	0	13,873,000	0	0	13,873,000
	2.8a Paid medical incentive pools and bonuses current year	0	0	0	14,283,119	0	0	14,283,119
	2.8b Accrued medical incentive pools and bonuses current year	0	0	0	4,146,036	0	0	4,146,036
	2.8c Accrued medical incentive pools and bonuses prior year	0	0	0	4,556,155	0	0	4,556,155
	2.9 Net healthcare receivables (Lines 2.9a – 2.9b)	647,403	0	0	15,325	0	0	662,728
	2.9a Healthcare receivables current year	668,653	0	0	15,325	0	0	683,978
	2.9b Healthcare receivables prior year	21,250	0	0	0	0	0	21,250
	2.10 Total Incurred Claims (Lines 2.1 + 2.2 – 2.3 + 2.4 – 2.5 + 2.6 – 2.7 + 2.8 – 2.9)	62,144,808	416,734	10,308,903	159,071,954	0	0	231,942,399
	2.11 Assumed Incurred Claims from non-affiliates	0	0	0	0	0	0	0
	2.12 Net Assumed less Ceded Incurred Claims from affiliates	(1,211,430)	6,131	130,119	(597,692)	0	0	(1,672,872)
	2.13 Ceded Incurred Claims to non-affiliates	0	0	0	0	0	0	0
	2.14 Other Adjustments due to MLR calculation – Claims	0	0	0	0	0	0	0
	2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 – 2.13 – 2.14)	60,933,378	422,865	10,439,022	158,474,262	0	0	230,269,527
3.	Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

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SUPPLEMENT FOR THE YEAR 2010 OF THE COVENTRY HEALTH PLAN OF FLORIDA, Inc.

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

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

REPORT FOR: 1. CORPORATION COVENTRY HEALTH PLAN OF FLORIDA, Inc. 2. LOCATION

NAIC Group Code 1137 BUSINESS IN THE STATE OF Consolidated DURING THE YEAR 2010 NAIC Company Code 95266

3A All Expenses

		Improving Health Care Quality Expenses						Claims Adjustment Expenses			
		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	9 General Administrative Expenses	10 Total Expenses (6 to 9)
1.	Individual Comprehensive Coverage Expenses:										
1.1	Salaries (including $ 0 for affiliated services)	145,889	6,909	6,833	14,124	107,265	281,020	696,284	788,550	7,169,402	8,935,256
1.2	Outsourced Services	195	0	0	20,811	0	21,006	(19,851)	1,062	9,730	11,947
1.3	EDP Equipment and Software (incl $ for affiliated services)	0	0	0	0	0	0	159,192	146,316	1,340,346	1,645,854
1.4	Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	2,313	2,313	2,095	1,925	15,323	21,656
1.5	Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
1.6	Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	310,319	285,220	6,023,894	6,619,433
1.7	Subtotal before Reimbursements and Taxes (1.1 to 1.6)	146,084	6,909	6,833	34,935	109,578	304,339	1,148,039	1,223,073	14,558,695	17,234,146
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	XXX	949,127
1.10	Total (1.7 to 1.9)	146,084	6,909	6,833	34,935	109,578	304,339	1,148,039	1,223,073	14,558,695	18,183,273
1.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	4,958	751	225	343	0	6,277	0	0	0	6,277
2.	Small Group Comprehensive Coverage Expenses:										
2.1	Salaries (including $ 0 for affiliated services)	24	1	1	3	18	47	113	128	1,166	1,454
2.2	Outsourced Services	0	0	0	3	0	3	(3)	0	2	2
2.3	EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	26	24	218	268
2.4	Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	0	0	0	0	2	2
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	50	46	980	1,076
2.7	Subtotal before Reimbursements and Taxes (2.1 to 2.6)	24	1	1	6	18	50	186	198	2,368	2,802
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	XXX	154
2.10	Total (2.7 to 2.9)	24	1	1	6	18	50	186	198	2,368	2,956
2.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	1	0	0	0	0	1	0	0	0	1
3.	Large Group Comprehensive Coverage Expenses:										
3.1	Salaries (including $ 0 for affiliated services)	16,242	769	761	1,572	11,941	31,285	77,518	87,790	798,178	994,771
3.2	Outsourced Services	22	0	0	2,317	0	2,339	(2,210)	118	1,083	1,330
3.3	EDP Equipment and Software (incl $ 0 for affiliated services)	0	0	0	0	0	0	17,725	16,290	149,222	183,235
3.4	Other Equipment (excl. EDP) (incl $ 0 for affiliated services)	0	0	0	0	258	258	233	214	1,706	2,411
3.5	Accreditation and Certification (incl $ 0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
3.6	Other Expenses (incl $ 0 for affiliated services)	0	0	0	0	0	0	34,548	31,754	670,647	736,949
3.7	Subtotal before Reimbursements and Taxes (3.1 to 3.6)	16,264	769	761	3,889	12,199	33,882	127,812	136,166	1,620,836	1,918,696
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	XXX	105,667
3.10	Total (3.7 to 3.9)	16,264	769	761	3,889	12,199	33,882	127,812	136,166	1,620,836	2,024,363
3.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	552	84	25	38	0	699	0	0	0	699

3B Quality Improvement Expenses Only

		Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
1.	Individual Comprehensive Coverage Expenses:					
1.1	HIT expenses	86,554	13,105	3,925	5,994	109,578
1.2	Other than HIT expenses	146,084	6,909	6,833	34,935	194,761
2.	Small Group Comprehensive Coverage Expenses:					
2.1	HIT expenses	0	0	0	0	0
2.2	Other than HIT expenses	0	0	0	0	0
3.	Large Group Comprehensive Coverage Expenses:					
3.1	HIT Expenses	9,636	1,459	437	667	12,199
3.2	Other than HIT expenses	16,264	769	761	3,889	21,683
4.	Subtotals/Totals:					
4.1	Subtotal HIT expenses (Lines 1.1 + 2.1 + 3.1)	96,190	14,564	4,362	6,661	121,777
4.2	Subtotal Other than HIT expenses (Lines 1.2 + 2.2 + 3.2)	162,348	7,678	7,594	38,824	216,444
4.3	Total (Lines 4.1 + 4.2)	258,538	22,242	11,956	45,485	338,221

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Supplement for the year 2010 of the **Health Options, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95089

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841	XXX	486,812,841
1.2 Federal high risk pools							0	XXX	0
1.3 State high risk pools							0	XXX	0
1.4 Premiums earned including state and federal high risk programs (Lines 1.1+1.2+1.3)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841	XXX	486,812,841
1.5 Federal taxes and federal assessments	(1,360,182)	1,299,319	5,027,872	11,785,608			16,752,617	(167,330)	16,585,287
1.6 State insurance, premium and other taxes (Similar local taxes of $.....0)	(163,509)	296,531	1,677,611	2,426,669			4,237,302	(27,679)	4,209,623
1.7 Regulatory authority licenses and fees	34,029	42,028	387,694	127,871			591,622		591,622
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	23,182,389	32,201,635	231,124,196	178,723,080	0	0	465,231,300	XXX	465,426,309
1.9 Net assumed less ceded reinsurance premiums earned	0	0	0	0	0	0	0	XXX	0
1.10 Other adjustments due to MLR calculations - premiums	0	0	(596,610)	0	0	0	(596,610)	XXX	(596,610)
1.11 Risk revenue							0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (lines 1.8+1.9+1.10+1.11)	23,182,389	32,201,635	230,527,586	178,723,080	0	0	464,634,690	XXX	464,829,699
2. Claims:									
2.1 Incurred claims excluding prescription drugs	16,716,876	21,202,930	162,134,683	124,874,449			324,928,938	XXX	324,928,938
2.2 Prescription drugs	6,814,004	4,510,974	37,103,852	12,059,869			60,488,699	XXX	60,488,699
2.3 Pharmaceutical rebates	251,982	267,746	2,202,277	1,758,221			4,480,226	XXX	4,480,226
2.4 State stop loss, market stabilization and claim/census based assessments							0	XXX	0
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	XXX	0
4. Deductible fraud and abuse detection/recovery expenses (for MLR use only)	2,373	2,750	20,814	18,002			43,939	18,621	62,560
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	23,278,898	25,446,158	197,036,258	135,176,097	0	0	380,937,411	XXX	380,937,411
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - claims	0	0	(596,610)	0	0	0	(596,610)	XXX	(596,610)
5.3 Rebates paid							0	XXX	0
5.4 Estimated rebates unpaid prior year							0	XXX	0
5.5 Estimated rebates unpaid current year							0	XXX	0
5.6 Fee for service and co-pay revenue							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)	23,278,898	25,446,158	196,439,648	135,176,097	0	0	380,340,801	XXX	380,340,801
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	48,519	75,400	838,835	879,497			1,842,251	636,269	2,478,520
6.2 Type B. Health information technology expenses related to health improvement	444	487	4,899	4,133			9,963	76,196	86,159
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	48,963	75,887	843,734	883,630	0	0	1,852,214	712,465	2,564,679
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	1.006	0.793	0.856	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	262,198	294,194	2,879,106	3,361,739			6,797,239	2,888,437	9,685,676
8.2 All other claims adjustment expenses	462,369	437,784	3,347,573	3,612,934			7,860,660	3,066,076	10,926,736
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	724,567	731,978	6,226,681	6,974,673	0	0	14,657,899	5,954,513	20,612,412
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.031	0.023	0.027	0.039	0.000	0.000	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	52,944	156,410	991,139	216,458			1,416,951	845,451	2,262,402
10.2 Agents and brokers fees and commissions	167,064	1,167,284	4,860,515	306,105			6,500,968	79,146	6,580,114
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	(57,906)	55,315	214,048	501,739			713,196	(7,124)	706,072
10.4 Other general and administrative expenses	1,928,816	1,740,165	10,006,736	9,008,506			22,684,223	11,451,450	34,135,673
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	2,090,918	3,119,174	16,072,438	10,032,808	0	0	31,315,338	12,368,923	43,684,261
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	(2,960,957)	2,828,438	10,945,085	25,655,872	0	0	36,468,438	XXX	17,627,546
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,476,633	18,476,633
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0
14. Federal income taxes (excluding taxes on Line 1.5 above)	(249,725)	238,551	923,103	2,163,803			3,075,732	(30,721)	3,045,011
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	33,392,706	XXX	33,059,168
16. ICD-10 Implementation Expenses (Informational only, already included in general expenses)							0		0
OTHER INDICATORS:									
1. Number of certificates/policies	1,919	1,930	24,115	18,674			46,638	35,709	82,347
2. Number of covered lives	2,333	3,093	57,251	18,674			81,351	56,104	137,455
3. Number of groups	XXX	32,920	311,381	2			344,303	48	344,351
4. Member months	34,974	52,213	692,444	237,473			1,017,104	638,406	1,655,510

Supplement for the year 2010 of the **Health Options, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95089

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841	XXX	486,812,841
1.2 Federal high risk pools							0	XXX	0
1.3 State high risk pools							0	XXX	0
1.4 Premiums earned including state and federal high risk programs (Lines 1.1+1.2+1.3)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841	XXX	486,812,841
1.5 Federal taxes and federal assessments	(1,360,182)	1,299,319	5,027,872	11,785,608			16,752,617	(167,330)	16,585,287
1.6 State insurance, premium and other taxes (Similar local taxes of $.....0)	(163,509)	296,531	1,677,811	2,426,669			4,237,302	(27,679)	4,209,623
1.7 Regulatory authority licenses and fees	34,029	42,028	387,694	127,871			591,622		591,622
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	23,182,389	32,201,635	231,124,196	178,723,080	0	0	465,231,300	XXX	465,426,309
1.9 Net assumed less ceded reinsurance premiums earned	0	0	0	0	0	0	0	XXX	0
1.10 Other adjustments due to MLR calculations - premiums	0	0	(596,610)	0	0	0	(596,610)	XXX	(596,610)
1.11 Risk revenue							0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (lines 1.8+1.9+1.10+1.11)	23,182,389	32,201,635	230,527,586	178,723,080	0	0	464,634,690	XXX	464,829,699
2. Claims:									
2.1 Incurred claims excluding prescription drugs	16,716,876	21,202,930	162,134,683	124,874,449			324,928,938	XXX	324,928,938
2.2 Prescription drugs	6,814,004	4,510,974	37,103,852	12,059,869			60,488,699	XXX	60,488,699
2.3 Pharmaceutical rebates	251,982	267,746	2,202,277	1,758,221			4,480,226	XXX	4,480,226
2.4 State stop loss, market stabilization and claim/census based assessments							0	XXX	0
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	XXX	0
4. Deductible fraud and abuse detection/recovery expenses (for MLR use only)	2,373	2,750	20,814	18,002			43,939	18,621	62,560
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	23,278,898	25,446,158	197,036,258	135,176,097	0	0	380,937,411	XXX	380,937,411
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - claims	0	0	(596,610)	0	0	0	(596,610)	XXX	(596,610)
5.3 Rebates paid							0	XXX	0
5.4 Estimated rebates unpaid prior year							0	XXX	0
5.5 Estimated rebates unpaid current year							0	XXX	0
5.6 Fee for service and co-pay revenue							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)	23,278,898	25,446,158	196,439,648	135,176,097	0	0	380,340,801	XXX	380,340,801
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	48,519	75,400	838,835	879,497			1,842,251	636,269	2,478,520
6.2 Type B. Health information technology expenses related to health improvement	444	487	4,899	4,133			9,963	76,196	86,159
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	48,963	75,887	843,734	883,630	0	0	1,852,214	712,465	2,564,679
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	1.006	0.793	0.856	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	262,198	294,194	2,879,108	3,361,739			6,797,239	2,888,437	9,685,676
8.2 All other claims adjustment expenses	462,369	437,784	3,347,573	3,612,934			7,860,660	3,066,076	10,926,736
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	724,567	731,978	6,226,681	6,974,673	0	0	14,657,899	5,954,513	20,612,412
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.031	0.023	0.027	0.039	0.000	0.000	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	52,944	156,410	991,139	216,458			1,416,951	845,451	2,262,402
10.2 Agents and brokers fees and commissions	167,064	1,167,284	4,860,515	306,105			6,500,968	79,146	6,580,114
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	(57,906)	55,315	214,048	501,739			713,196	(7,124)	706,072
10.4 Other general and administrative expenses	1,928,816	1,740,165	10,006,736	9,008,506			22,684,223	11,451,450	34,135,673
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	2,090,918	3,119,174	16,072,438	10,032,808	0	0	31,315,338	12,368,923	43,684,261
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	(2,960,957)	2,828,438	10,945,085	25,655,872	0	0	36,468,438	XXX	17,627,546
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,476,633	18,476,633
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX		XXX	0
14. Federal income taxes (excluding taxes on Line 1.5 above)	(249,725)	238,551	923,103	2,163,803			3,075,732	(30,721)	3,045,011
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	33,392,706	XXX	33,059,168
16. ICD-10 Implementation Expenses (Informational only, already included in general expenses)							0		0
OTHER INDICATORS:									
1. Number of certificates/policies	1,919	1,930	24,115	18,674			46,638	35,709	82,347
2. Number of covered lives	2,333	3,093	57,251	18,674			81,351	56,104	137,455
3. Number of groups	XXX	32,920	311,381	2			344,303	48	344,351
4. Member months	34,974	52,213	692,444	237,473			1,017,104	638,406	1,655,510

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95089

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health premiums earned:							
1.1 Direct premiums written	21,683,203	33,839,513	238,155,752	193,063,228			486,741,696
1.2 Unearned premium prior year	33,235		85,927				119,162
1.3 Unearned premium current year	23,711		24,306				48,017
1.4 Change in unearned premium (Lines 1.2-1.3)	9,524	0	61,621	0	0	0	71,145
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5-1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1+1.4+1.7 less $.....0 write offs)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841
1.9 Assumed premiums earned from non-affiliates							0
1.10 Net assumed less ceded premiums earned from affiliates							0
1.11 Ceded premiums earned to non-affiliates							0
1.12 Other adjustments due to MLR calculation - premiums			(596,610)				(596,610)
1.13 Net premiums earned (Lines 1.8+1.9+1.10-1.11+1.12)	21,692,727	33,839,513	237,620,763	193,063,228	0	0	486,216,231
2. Direct claims incurred:							
2.1 Paid claims during the year	23,762,558	25,976,429	189,968,685	140,316,699			380,024,371
2.2 Direct claim liability current year			15,630,751	2,860,389			18,491,140
2.3 Direct claim liability prior year			13,828,449	1,443,173			15,271,622
2.4 Direct claim reserves current year	1,216,838	867,504	15,200,346	9,203,512			26,488,200
2.5 Direct claim reserves prior year	1,974,982	1,868,790	15,714,655	18,159,820			37,718,247
2.6 Direct contract reserves current year	261,624		1,454,531				1,716,155
2.7 Direct contract reserves prior year	405,191		857,921				1,263,112
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a+2.8b-2.8c)	0	0	0	0	0	0	0
2.8a Paid medical incentive pools and bonuses current year							0
2.8b Accrued medical incentive pools and bonuses current year							0
2.8c Accrued medical incentive pools and bonuses prior year							0
2.9 Net healthcare receivables (Lines 2.9a-2.9b)	(418,051)	(471,015)	(5,182,970)	(2,398,490)	0	0	(8,470,526)
2.9a Healthcare receivables current year	593,503	668,694	5,150,064	3,405,105			9,817,366
2.9b Healthcare receivables prior year	1,011,554	1,139,709	10,333,034	5,803,595			18,287,892
2.10 Total incurred claims (Lines 2.1+2.2-2.3+2.4-2.5+2.6-2.7+2.8-2.9)	23,278,898	25,446,158	197,036,258	135,176,097	0	0	380,937,411
2.11 Assumed incurred claims from non-affiliates							0
2.12 Net assumed less ceded incurred claims from affiliates							0
2.13 Ceded incurred claims to non-affiliates							0
2.14 Other adjustments due to MLR calculation - claims			(596,610)				(596,610)
2.15 Net incurred claims (Lines 2.10+2.11+2.12-2.13+2.14)	23,278,898	25,446,158	196,439,648	135,176,097	0	0	380,340,801
3. Fraud and abuse recoveries that reduced PAID claims in Line 2.1 above (informational only)	2,373	2,750	20,814	18,002			43,939

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95089

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health premiums earned:							
1.1 Direct premiums written	21,683,203	33,839,513	238,155,752	193,063,228			486,741,696
1.2 Unearned premium prior year	33,235		85,927				119,162
1.3 Unearned premium current year	23,711		24,306				48,017
1.4 Change in unearned premium (Lines 1.2-1.3)	9,524	0	61,621	0	0	0	71,145
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5-1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1+1.4+1.7 less $.....0 write offs)	21,692,727	33,839,513	238,217,373	193,063,228	0	0	486,812,841
1.9 Assumed premiums earned from non-affiliates							0
1.10 Net assumed less ceded premiums earned from affiliates							0
1.11 Ceded premiums earned to non-affiliates							0
1.12 Other adjustments due to MLR calculation - premiums			(596,610)				(596,610)
1.13 Net premiums earned (Lines 1.8+1.9+1.10-1.11+1.12)	21,692,727	33,839,513	237,620,763	193,063,228	0	0	486,216,231
2. Direct claims incurred:							
2.1 Paid claims during the year	23,762,558	25,976,429	189,968,685	140,316,699			380,024,371
2.2 Direct claim liability current year			15,630,751	2,860,389			18,491,140
2.3 Direct claim liability prior year			13,828,449	1,443,173			15,271,622
2.4 Direct claim reserves current year	1,216,838	867,504	15,200,346	9,203,512			26,488,200
2.5 Direct claim reserves prior year	1,974,982	1,868,790	15,714,655	18,159,820			37,718,247
2.6 Direct contract reserves current year	261,624		1,454,531				1,716,155
2.7 Direct contract reserves prior year	405,191		857,921				1,263,112
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a+2.8b-2.8c)	0	0	0	0	0	0	0
2.8a Paid medical incentive pools and bonuses current year							0
2.8b Accrued medical incentive pools and bonuses current year							0
2.8c Accrued medical incentive pools and bonuses prior year							0
2.9 Net healthcare receivables (Lines 2.9a-2.9b)	(418,051)	(471,015)	(5,182,970)	(2,398,490)	0	0	(8,470,526)
2.9a Healthcare receivables current year	593,503	668,694	5,150,064	3,405,105			9,817,366
2.9b Healthcare receivables prior year	1,011,554	1,139,709	10,333,034	5,803,595			18,287,892
2.10 Total incurred claims (Lines 2.1+2.2-2.3+2.4-2.5+2.6-2.7+2.8-2.9)	23,278,898	25,446,158	197,036,258	135,176,097	0	0	380,937,411
2.11 Assumed incurred claims from non-affiliates							0
2.12 Net assumed less ceded incurred claims from affiliates							0
2.13 Ceded incurred claims to non-affiliates							0
2.14 Other adjustments due to MLR calculation - claims			(596,610)				(596,610)
2.15 Net incurred claims (Lines 2.10+2.11+2.12-2.13+2.14)	23,278,898	25,446,158	196,439,648	135,176,097	0	0	380,340,801
3. Fraud and abuse recoveries that reduced PAID claims in Line 2.1 above (informational only)	2,373	2,750	20,814	18,002			43,939

Supplement for the year 2010 of the **Health Options, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....95089

3A 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 (Cols. 1 thru 5)	7 Cost Containment Expenses	8 Other Claim Adjustment Expenses	General Administrative Expenses	Total Expenses (Cols 6 thru 9)
1. Individual comprehensive coverage expenses:										
1.1 Salaries (including $.....0 for affiliated services)	13,101	494	43	5,835	213	19,686	191,450	233,264	852,833	1,297,233
1.2 Outsourced services	19,208	69		46	98	19,421	12,216	7,664	180,798	220,099
1.3 EDP equipment and software (including $.....0 for affiliated services)	356			224	8	588	8,010	31,263	206,685	246,546
1.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)						0	150	369	2,110	2,629
1.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
1.6 Other expenses (including $.....0 for affiliated services)	7,774	82		1,287	125	9,268	50,371	189,809	719,012	968,460
1.7 Subtotal before reimbursements and taxes (Lines 1.1 to 1.6)	40,439	645	43	7,392	444	48,963	262,197	462,369	1,961,438	2,734,967
1.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
1.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1.10 Total (Lines 1.7 to 1.9)	40,439	645	43	7,392	444	48,963	262,197	462,369	1,961,438	2,734,967
1.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	3,271			3,271
2. Small group comprehensive coverage expenses:										
2.1 Salaries (including $.....0 for affiliated services)	18,924	752	66	8,054	227	28,023	206,654	225,732	1,216,859	1,677,268
2.2 Outsourced services	33,654	100		212	110	34,076	20,527	8,125	183,953	246,681
2.3 EDP equipment and software (including $.....0 for affiliated services)	493			212	10	715	8,800	31,666	435,362	476,543
2.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)						0	196	194	2,965	3,355
2.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
2.6 Other expenses (including $.....0 for affiliated services)	9,773	150		3,010	140	13,073	57,992	172,068	1,618,593	1,861,726
2.7 Subtotal before reimbursements and taxes (Lines 2.1 to 2.6)	62,844	1,002	66	11,488	487	75,887	294,169	437,785	3,457,732	4,265,573
2.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
2.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2.10 Total (Lines 2.7 to 2.9)	62,844	1,002	66	11,488	487	75,887	294,169	437,785	3,457,732	4,265,573
2.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	3,791			3,791
3. Large group comprehensive coverage expenses:										
3.1 Salaries (including $.....0 for affiliated services)	217,469	7,948	617	92,742	2,495	321,271	1,966,660	1,801,925	6,484,646	10,574,502
3.2 Outsourced services	363,537	1,135		523	938	366,133	267,079	64,565	1,241,357	1,939,134
3.3 EDP equipment and software (including $.....0 for affiliated services)	7,222	201		4,453	102	11,978	81,237	239,309	2,260,369	2,592,893
3.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)	430			251	1	682	2,272	3,740	24,162	30,856
3.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
3.6 Other expenses (including $.....0 for affiliated services)	110,489	1,860	120	29,838	1,363	143,670	561,860	1,238,034	8,127,209	10,070,773
3.7 Subtotal before reimbursements and taxes (Lines 3.1 to 3.6)	699,147	11,144	737	127,807	4,899	843,734	2,879,108	3,347,573	18,137,743	25,208,158
3.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
3.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3.10 Total (Lines 3.7 to 3.9)	699,147	11,144	737	127,807	4,899	843,734	2,879,108	3,347,573	18,137,743	25,208,158
3.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	28,692			28,692

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (Cols. 1 thru 4)
1. Individual comprehensive coverage expenses:					
1.1 HIT expenses	396	7	41		444
1.2 Other than HIT expenses	40,439	645	43	7,392	48,519
2. Small group comprehensive coverage expenses:					
2.1 HIT expenses	434	8	45		487
2.2 Other than HIT expenses	62,844	1,002	66	11,488	75,400
3. Large group comprehensive coverage expenses:					
3.1 HIT expenses	4,371	77	451		4,899
3.2 Other than HI expenses	699,147	11,144	737	127,807	838,835
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1+2.1+3.1)	5,201	92	537	0	5,830
4.2 Subtotal other than HIT expenses (Lines 1.2+2.2+3.2)	802,430	12,791	846	146,687	962,754
4.3 Total (Lines 4.1+4.2)	807,631	12,883	1,383	146,687	968,584

Supplement for the year 2010 of the **Health Options, Inc.**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: Health Options, Inc. 2. LOCATION: Jacksonville FL

NAIC Group Code.....536 BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2010 NAIC Company Code.....95089

3A 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 (Cols. 1 thru 5)	7 Cost Containment Expenses	8 Other Claim Adjustment Expenses	General Administrative Expenses	Total Expenses (Cols 6 thru 9)
1. Individual comprehensive coverage expenses:										
1.1 Salaries (including $.....0 for affiliated services)	13,101	494	43	5,835	213	19,686	191,450	233,264	852,833	1,297,233
1.2 Outsourced services	19,208	69		46	98	19,421	12,216	7,864	180,798	220,099
1.3 EDP equipment and software (including $.....0 for affiliated services)	356			224	8	588	8,010	31,263	206,685	246,546
1.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)						0	150	369	2,110	2,629
1.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
1.6 Other expenses (including $.....0 for affiliated services)	7,774	82		1,267	125	9,268	50,371	189,809	719,012	968,460
1.7 Subtotal before reimbursements and taxes (Lines 1.1 to 1.6)	40,439	645	43	7,392	444	48,963	262,197	462,369	1,961,438	2,734,967
1.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
1.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1.10 Total (Lines 1.7 to 1.9)	40,439	645	43	7,392	444	48,963	262,197	462,369	1,961,438	2,734,967
1.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	3,271			3,271
2. Small group comprehensive coverage expenses:										
2.1 Salaries (including $.....0 for affiliated services)	18,924	752	66	8,054	227	28,023	206,654	225,732	1,216,859	1,677,268
2.2 Outsourced services	33,654	100		212	110	34,076	20,527	8,125	183,953	246,681
2.3 EDP equipment and software (including $.....0 for affiliated services)	493			212	10	715	8,800	31,666	435,362	476,543
2.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)						0	196	194	2,965	3,355
2.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
2.6 Other expenses (including $.....0 for affiliated services)	9,773	150		3,010	140	13,073	57,992	172,068	1,618,593	1,861,726
2.7 Subtotal before reimbursements and taxes (Lines 2.1 to 2.6)	62,844	1,002	66	11,488	487	75,887	294,169	437,785	3,457,732	4,265,573
2.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
2.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2.10 Total (Lines 2.7 to 2.9)	62,844	1,002	66	11,488	487	75,887	294,169	437,785	3,457,732	4,265,573
2.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	3,791			3,791
3. Large group comprehensive coverage expenses:										
3.1 Salaries (including $.....0 for affiliated services)	217,469	7,948	617	92,742	2,495	321,271	1,966,660	1,801,925	6,484,646	10,574,502
3.2 Outsourced services	363,537	1,135		523	938	366,133	267,079	64,565	1,241,357	1,939,134
3.3 EDP equipment and software (including $.....0 for affiliated services)	7,222	201		4,453	102	11,978	81,237	239,309	2,260,369	2,592,893
3.4 Other equipment (excl. EDP) (including $.....0 for affiliated services)	430			251	1	682	2,272	3,740	24,162	30,856
3.5 Accreditation and certification (including $.....0 for affiliated services)		XXX	XXX	XXX	XXX	0				0
3.6 Other expenses (including $.....0 for affiliated services)	110,489	1,860	120	29,838	1,363	143,670	561,860	1,238,034	8,127,209	10,070,773
3.7 Subtotal before reimbursements and taxes (Lines 3.1 to 3.6)	699,147	11,144	737	127,807	4,899	843,734	2,879,108	3,347,573	18,137,743	25,208,158
3.8 Reimbursements by uninsured plans and fiscal intermediaries						0				0
3.9 Taxes, licenses and fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3.10 Total (Lines 3.7 to 3.9)	699,147	11,144	737	127,807	4,899	843,734	2,879,108	3,347,573	18,137,743	25,208,158
3.11 Total fraud and abuse detection/recovery expenses incl. in col. 7 (informational only)						0	28,692			28,692

3B Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
	1 Improve Health Outcomes	2 Activities to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (Cols. 1 thru 4)
1. Individual comprehensive coverage expenses:					
1.1 HIT expenses	396	7	41		444
1.2 Other than HIT expenses	40,439	645	43	7,392	48,519
2. Small group comprehensive coverage expenses:					
2.1 HIT expenses	434	8	45		487
2.2 Other than HIT expenses	62,844	1,002	66	11,488	75,400
3. Large group comprehensive coverage expenses:					
3.1 HIT expenses	4,371	77	451		4,899
3.2 Other than HI expenses	699,147	11,144	737	127,807	838,835
4. Subtotals/Totals:					
4.1 Subtotal HIT expenses (Lines 1.1+2.1+3.1)	5,201	92	537	0	5,830
4.2 Subtotal other than HIT expenses (Lines 1.2+2.2+3.2)	802,430	12,791	846	146,687	962,754
4.3 Total (Lines 4.1+4.2)	807,631	12,883	1,383	146,687	968,584

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1)

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

95271201021610100 2010 Document Code: 216

NAIC Group Code 0000 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 95271

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total 7 + 8
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	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)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.5 Federal taxes and federal assessments	0	0	0	0	0	0	0	0	0
1.6 State and local premium taxes (Similar local taxes of $.....0)	0	0	0	0	0	0	0	0	0
1.7 Regulatory authority licenses and fees	0	0	0	0	0	0	0	0	0
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.9 Net assumed less ceded reinsurance premiums earned	(79,369)	0	(3,324)	(16,853)	0	0	(99,546)	XXX	(99,546)
1.10 Other adjustments due to MLR calculations - Premiums	0	0	0	0	0	0	0	XXX	0
1.11 Risk Revenue	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)	59,986,585	0	2,584,528	50,423,261	737,973	0	113,732,347	XXX	113,732,347
2. Claims:									
2.1 Incurred claims excluding prescription drugs	40,813,298	0	1,594,437	34,758,855	335,334	0	77,501,924	XXX	77,501,924
2.2 Prescription drugs	1,943,213	0	68,964	5,084,576	30,713	0	7,127,466	XXX	7,127,466
2.3 Pharmaceutical rebates	0	0	0	0	0	0	0	XXX	0
2.4 State stop-loss, market stabilization and claim/census based assessments	0	0	0	0	0	0	0	XXX	0
3. Incurred medical incentive pools and bonuses	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
5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 - 2.4 + 3) (From Part 2, Line 2.10)	42,756,511	0	1,663,401	39,843,431	366,047	0	84,629,390	XXX	84,629,390
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - Claims	1,154,931	0	0	0	0	0	1,154,931	XXX	1,154,931
5.3 Rebates Paid	0	0	0	0	0	0	0	XXX	0
5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
5.6 Fee-for-service and co-pay revenue	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)	43,911,442	0	1,663,401	39,843,431	366,047	0	85,784,321	XXX	85,784,321
6. Improving Health Care Quality Expenses Incurred:									
6.1 Type A. Expenses for health improvements other than Health Information Technology	106,587	0	4,441	0	0	0	111,028	0	111,028
6.2 Type B. Health Information Technology expenses related to health improvement	51,371	0	2,141	0	0	0	53,512	0	53,512
6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	157,958	0	6,582	0	0	0	164,540	0	164,540
7. Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 1.8	0.714	0.000	0.645	XXX	XXX	XXX	XXX	XXX	XXX
8. Claim Adjustment Expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	0	0	0	0	0	0	0	0	0
8.2 All other claims adjustment expenses	1,188,244	0	31,146	640,133	12,742	0	1,872,265	0	1,872,265
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	1,188,244	0	31,146	640,133	12,742	0	1,872,265	0	1,872,265
9. Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.020	0.000	0.012	0.013	0.017	0.000	XXX	XXX	XXX
10. General and Administrative (G&A) Expenses:									
10.1 Direct sales salaries and benefits	0	0	0	0	0	0	0	0	0
10.2 Agents and brokers fees and commissions	4,133,490	0	0	0	86,917	0	4,220,407	0	4,220,407
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	1,292	0	54	1,345	7	0	2,698	0	2,698
10.4 Other general and administrative expenses	5,489,016	0	252,207	5,183,210	16,272	0	10,940,705	0	10,940,705
10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	9,623,798	0	252,261	5,184,555	103,196	0	15,163,810	0	15,163,810
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.3 - 8.3 - 10.5)	5,105,143	0	631,138	4,755,142	255,988	0	10,747,411	XXX	10,747,411
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain(loss)	XXX	XXX	XXX	XXX	XXX	XXX	7,215	XXX	7,215
14. Federal income taxes (excluding taxes on Line 1.5 above)	0	0	0	0	0	0	0	0	0
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	10,754,626	XXX	10,754,626
16. ICD-10 Implementation Expenses (informational only; already included in general expenses)	0	0	0	0	0	0	0	0	0
O. OTHER INDICATORS:									
O1. Number of certificates / policies	20,506	0	654	14,951	1,033	0	37,144	0	37,144
O2. Number of Covered Lives	24,940	0	1,103	14,951	1,154	0	42,148	0	42,148
O3. Number of Groups	XXX	0	6	0	0	0	6	0	6
O4. Member Months	314,609	0	13,184	182,763	13,172	0	523,728	0	523,728

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed By April 1 - Not for Rebate Purpose)

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

NAIC Group Code 0000 BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 NAIC Company Code 95271

	Comprehensive Health Coverage			4	5	6	7
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1. Health Premiums Earned							
1.1 Direct premiums written	59,984,176	0	2,587,852	50,440,114	737,973	0	113,750,115
1.2 Unearned premium prior year	167,482	0	0	0	0	0	167,482
1.3 Unearned premium current year	85,704	0	0	0	0	0	85,704
1.4 Change in unearned premium (Lines 1.2 - 1.3)	81,778	0	0	0	0	0	81,778
1.5 Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6 Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7 Change in reserve for rate credits (Lines 1.5 - 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8 Total direct premiums earned (Lines 1.1 + 1.4 less $.....0 write offs)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893
1.9 Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
1.10 Net assumed less ceded premiums earned from affiliates	0	0	0	0	0	0	0
1.11 Ceded premiums earned to non-affiliates	79,369	0	3,324	16,853	0	0	99,546
1.12 Other adjustments due to MLR calculation - Premiums	0	0	0	0	0	0	0
1.13 Net premiums earned (Lines 1.8 + 1.9 + 1.10 - 1.11 + 1.12)	59,986,585	0	2,584,528	50,423,261	737,973	0	113,732,347
2. Direct Claims Incurred:							
2.1 Paid claims during the year	45,382,106	0	1,672,642	41,220,283	363,824	0	88,638,855
2.2 Direct claim liability current year	818,174	0	20,860	826,417	2,223	0	1,667,674
2.3 Direct claim liability prior year	790,081	0	19,528	1,204,689	0	0	2,014,298
2.4 Direct claim reserves current year	0	0	0	0	0	0	0
2.5 Direct claim reserves prior year	0	0	0	0	0	0	0
2.6 Direct contract reserves current year	7,953,352	0	339,291	5,285,302	0	0	13,577,945
2.7 Direct contract reserves prior year	10,607,040	0	349,864	6,283,882	0	0	17,240,786
2.8 Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b - 2.8c)	0	0	0	0	0	0	0
A. Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0
B. Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0
C. Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0
2.9 Net healthcare receivables (Lines 2.9a - 2.9b)	0	0	0	0	0	0	0
A. Healthcare receivables current year	0	0	0	0	0	0	0
B. Healthcare receivables prior year	0	0	0	0	0	0	0
2.10 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 - 2.9)	42,756,511	0	1,663,401	39,843,431	366,047	0	84,629,390
2.11 Assumed Incurred Claims from non-affiliates	0	0	0	0	0	0	0
2.12 Net Assumed less Ceded Incurred Claims from affiliates	0	0	0	0	0	0	0
2.13 Ceded Incurred Claims to non-affiliates	0	0	0	0	0	0	0
2.14 Other Adjustments due to MLR calculation - Claims	1,154,931	0	0	0	0	0	1,154,931
2.15 Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 - 2.13 + 2.14)	43,911,442	0	1,663,401	39,843,431	366,047	0	85,784,321
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

NAIC Group Code 0000 — BUSINESS IN THE STATE OF Florida DURING THE YEAR 2010 — NAIC Company Code 95271

3A	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Active 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)
A01.	Individual Comprehensive Coverage Expenses:										
A01.01	Salaries (including $.....0 for affiliated services)	106,587	0	0	0	35,051	141,638	0	711,888	2,165,869	3,019,395
A01.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A01.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A01.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	7,648	30,591	38,239
A01.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A01.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	16,320	16,320	0	468,708	7,269,380	7,754,408
A01.07	Subtotal before Reimbursements and Taxes (1.1 to 1.6)	106,587	0	0	0	51,371	157,958	0	1,188,244	9,465,840	10,812,042
A01.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A01.09	Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A01.10	Total (1.7 to 1.9)	106,587	0	0	0	51,371	157,958	0	1,188,244	9,465,840	10,812,042
A01.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
A02.	Small Group Comprehensive Coverage Expenses:										
A02.01	Salaries (including $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A02.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A02.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.07	Subtotal before Reimbursements and Taxes (2.1 to 2.6)	0	0	0	0	0	0	0	0	0	0
A02.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A02.09	Taxes, Licenses and Fees (in total, for tying purposes	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A02.10	Total (2.7 to 2.9)	0	0	0	0	0	0	0	0	0	0
A02.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
A03.	Large Group Comprehensive Coverage Expenses:										
A03.01	Salaries (including $.....0 for affiliated services)	4,441	0	0	0	1,461	5,902	0	29,662	90,244	125,808
A03.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A03.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A03.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	319	1,275	1,594
A03.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A03.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	1,461	1,461	0	1,165	153,379	156,005
A03.07	Subtotal before Reimbursements and Taxes (3.1 to 3.6)	4,441	0	0	0	2,922	7,363	0	31,146	244,898	283,407
A03.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A03.09	Taxes, Licenses and Fees (in total, for tying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A03.10	Total (3.7 to 3.9)	4,441	0	0	0	2,922	7,363	0	31,146	244,898	283,407
A03.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

3B	Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Active to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
B01.	Individual Comprehensive Coverage Expenses:					
B01.01	HIT expenses	51,371	0	0	0	51,371
B01.02	Other than HIT expenses	106,587	0	0	0	106,587
B02.	Small Group Comprehensive Coverage Expenses:					
B02.01	HIT expenses	0	0	0	0	0
B02.02	Other than HIT expenses	0	0	0	0	0
B03.	Large Group Comprehensive Coverage Expenses:					
B03.01	HIT expenses	2,141	0	0	0	2,141
B03.02	Other than HIT expenses	4,441	0	0	0	4,441
B04.	Subtotals/Totals:					
B04.01	Subtotals HIT expenses (Line 1.1 + 2.1 + 3.1)	53,512	0	0	0	53,512
B04.02	Subtotals Other than HIT expenses (Line 1.2 + 2.2 + 3.2)	111,028	0	0	0	111,028
B04.03	Total (Lines 4.1 + 4.2)	164,540	0	0	0	164,540

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1)

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

NAIC Group Code 0000 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010 NAIC Company Code 95271

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total 7 + 8
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.2 Federal high risk pools	0	0	0	0	0	0	0	XXX	0
1.3 State high risk pools	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)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.5 Federal taxes and federal assessments	0	0	0	0	0	0	0	0	0
1.6 State and local premium taxes (Similar local taxes of $.....0)	0	0	0	0	0	0	0	0	0
1.7 Regulatory authority licenses and fees	0	0	0	0	0	0	0	0	0
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893	XXX	113,831,893
1.9 Net assumed less ceded reinsurance premiums earned	(79,369)	0	(3,324)	(16,853)	0	0	(99,546)	XXX	(99,546)
1.10 Other adjustments due to MLR calculations - Premiums	0	0	0	0	0	0	0	XXX	0
1.11 Risk Revenue	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)	59,986,585	0	2,584,528	50,423,261	737,973	0	113,732,347	XXX	113,732,347
2. Claims:									
2.1 Incurred claims excluding prescription drugs	40,813,298	0	1,594,437	34,758,855	335,334	0	77,501,924	XXX	77,501,924
2.2 Prescription drugs	1,943,213	0	68,964	5,084,576	30,713	0	7,127,466	XXX	7,127,466
2.3 Pharmaceutical rebates	0	0	0	0	0	0	0	XXX	0
2.4 Stale stop-loss, market stabilization and claim/census based assessments	0	0	0	0	0	0	0	XXX	0
3. Incurred medical incentive pools and bonuses	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
5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 - 2.4 + 3) (From Part 2, Line 2.10)	42,756,511	0	1,663,401	39,843,431	366,047	0	84,629,390	XXX	84,629,390
5.1 Net assumed less ceded reinsurance claims incurred	0	0	0	0	0	0	0	XXX	0
5.2 Other adjustments due to MLR calculations - Claims	1,154,931	0	0	0	0	0	1,154,931	XXX	1,154,931
5.3 Rebates Paid	0	0	0	0	0	0	0	XXX	0
5.4 Estimated rebates unpaid prior year	0	0	0	0	0	0	0	XXX	0
5.5 Estimated rebates unpaid current year	0	0	0	0	0	0	0	XXX	0
5.6 Fee-for-service and co-pay revenue	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)	43,911,442	0	1,663,401	39,843,431	366,047	0	85,784,321	XXX	85,784,321
6. Improving Health Care Quality Expenses Incurred:									
6.1 Type A. Expenses for health improvements other than Health Information Technology	106,587	0	4,441	0	0	0	111,028	0	111,028
6.2 Type B. Health Information Technology expenses related to health improvement	51,371	0	2,141	0	0	0	53,512	0	53,512
6.3 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1 + 6.2)	157,958	0	6,582	0	0	0	164,540	0	164,540
7. Preliminary Medical Loss Ratio: MLR (Lines 4 + 5.0 + 6.3) / Line 1.8	0.714	0.000	0.645	XXX	XXX	XXX	XXX	XXX	XXX
8. Claim Adjustment Expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	0	0	0	0	0	0	0	0	0
8.2 All other claims adjustment expenses	1,188,244	0	31,146	640,133	12,742	0	1,872,265	0	1,872,265
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)	1,188,244	0	31,146	640,133	12,742	0	1,872,265	0	1,872,265
9. Claims Adjustment Expense Ratio (Line 8.3 / Line 1.8)	0.020	0.000	0.012	0.013	0.017	0.000	XXX	XXX	XXX
10. General and Administrative (G&A) Expenses:									
10.1 Direct sales salaries and benefits	0	0	0	0	0	0	0	0	0
10.2 Agents and brokers fees and commissions	4,133,490	0	0	0	86,917	0	4,220,407	0	4,220,407
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	1,292	0	54	1,345	7	0	2,698	0	2,698
10.4 Other general and administrative expenses	5,489,016	0	252,207	5,183,210	16,272	0	10,940,705	0	10,940,705
10.5 Total general and administrative (Lines 10.1 + 10.2 + 10.3 + 10.4)	9,623,798	0	252,261	5,184,555	103,196	0	15,163,810	0	15,163,810
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.3 - 8.3 - 10.5)	5,105,143	0	631,138	4,755,142	255,988	0	10,747,411	XXX	10,747,411
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain(loss)	XXX	XXX	XXX	XXX	XXX	XXX	7,215	XXX	7,215
14. Federal income taxes (excluding taxes on Line 1.5 above)	0	0	0	0	0	0	0	0	0
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	10,754,626	XXX	10,754,626
16. ICD-10 Implementation Expenses (informational only; already included in general expenses)	0	0	0	0	0	0	0	0	0
O. OTHER INDICATORS:									
O1. Number of certificates / policies	20,506	0	654	14,951	1,033	0	37,144	0	37,144
O2. Number of Covered Lives	24,940	0	1,103	14,951	1,154	0	42,148	0	42,148
O3. Number of Groups	XXX	0	6	0	0	0	6	0	6
O4. Member Months	314,609	0	13,184	182,763	13,172	0	523,728	0	523,728

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed By April 1 - Not for Rebate Purpose)

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

NAIC Group Code 0000 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010 NAIC Company Code 95271

		Comprehensive Health Coverage			4	5	6	7
		1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Total
1.	Health Premiums Earned							
1.1	Direct premiums written	59,984,176	0	2,587,852	50,440,114	737,973	0	113,750,115
1.2	Unearned premium prior year	167,482	0	0	0	0	0	167,482
1.3	Unearned premium current year	85,704	0	0	0	0	0	85,704
1.4	Change in unearned premium (Lines 1.2 - 1.3)	81,778	0	0	0	0	0	81,778
1.5	Reserve for rate credits prior year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.6	Reserve for rate credits current year	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.7	Change in reserve for rate credits (Lines 1.5 - 1.6)	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1.8	Total direct premiums earned (Lines 1.1 + 1.4 less $.....0 write offs)	60,065,954	0	2,587,852	50,440,114	737,973	0	113,831,893
1.9	Assumed premiums earned from non-affiliates	0	0	0	0	0	0	0
1.10	Net assumed less ceded premiums earned from affiliates	0	0	0	0	0	0	0
1.11	Ceded premiums earned to non-affiliates	79,369	0	3,324	16,853	0	0	99,546
1.12	Other adjustments due to MLR calculation - Premiums	0	0	0	0	0	0	0
1.13	Net premiums earned (Lines 1.8 + 1.9 + 1.10 - 1.11 + 1.12)	59,986,585	0	2,584,528	50,423,261	737,973	0	113,732,347
2.	Direct Claims Incurred:							
2.1	Paid claims during the year	45,382,106	0	1,672,642	41,220,283	363,824	0	88,638,855
2.2	Direct claim liability current year	818,174	0	20,860	826,417	2,223	0	1,667,674
2.3	Direct claim liability prior year	790,081	0	19,528	1,204,689	0	0	2,014,298
2.4	Direct claim reserves current year	0	0	0	0	0	0	0
2.5	Direct claim reserves prior year	0	0	0	0	0	0	0
2.6	Direct contract reserves current year	7,953,352	0	339,291	5,285,302	0	0	13,577,945
2.7	Direct contract reserves prior year	10,607,040	0	349,864	6,283,882	0	0	17,240,786
2.8	Incurred medical incentive pools and bonuses (Lines 2.8a + 2.8b - 2.8c)	0	0	0	0	0	0	0
	A. Paid medical incentive pools and bonuses current year	0	0	0	0	0	0	0
	B. Accrued medical incentive pools and bonuses current year	0	0	0	0	0	0	0
	C. Accrued medical incentive pools and bonuses prior year	0	0	0	0	0	0	0
2.9	Net healthcare receivables (Lines 2.9a - 2.9b)	0	0	0	0	0	0	0
	A. Healthcare receivables current year	0	0	0	0	0	0	0
	B. Healthcare receivables prior year	0	0	0	0	0	0	0
2.10	Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 - 2.9)	42,756,511	0	1,663,401	39,843,431	366,047	0	84,629,390
2.11	Assumed Incurred Claims from non-affiliates	0	0	0	0	0	0	0
2.12	Net Assumed less Ceded Incurred Claims from affiliates	0	0	0	0	0	0	0
2.13	Ceded Incurred Claims to non-affiliates	0	0	0	0	0	0	0
2.14	Other Adjustments due to MLR calculation - Claims	1,154,931	0	0	0	0	0	1,154,931
2.15	Net Incurred Claims (Lines 2.10 + 2.11 + 2.12 - 2.13 + 2.14)	43,911,442	0	1,663,401	39,843,431	366,047	0	85,784,321
3.	Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)	0	0	0	0	0	0	0

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 3

REPORT FOR: 1. CORPORATION: Preferred Medical Plan, Inc. 2. LOCATION: Coral Gables, FL 33134

NAIC Group Code 0000 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2010 NAIC Company Code 95271

3A	All Expenses	Improving Health Care Quality Expenses						Claims Adjustment Expenses		9	10
		1 Improve Health Outcomes	2 Active 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)
A01.	Individual Comprehensive Coverage Expenses:										
A01.01	Salaries (including $.....0 for affiliated services)	106,587	0	0	0	35,051	141,638	0	711,888	2,165,869	3,019,395
A01.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A01.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A01.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	7,648	30,591	38,239
A01.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A01.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	16,320	16,320	0	468,708	7,269,380	7,754,408
A01.07	Subtotal before Reimbursements and Taxes (1.1 to 1.6)	106,587	0	0	0	51,371	157,958	0	1,188,244	9,465,840	10,812,042
A01.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A01.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A01.10	Total (1.7 to 1.9)	106,587	0	0	0	51,371	157,958	0	1,188,244	9,465,840	10,812,042
A01.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
A02.	Small Group Comprehensive Coverage Expenses:										
A02.01	Salaries (including $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A02.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A02.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A02.07	Subtotal before Reimbursements and Taxes (2.1 to 2.6)	0	0	0	0	0	0	0	0	0	0
A02.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A02.09	Taxes, Licenses and Fees (in total, for lying purposes	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A02.10	Total (2.7 to 2.9)	0	0	0	0	0	0	0	0	0	0
A02.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0
A03.	Large Group Comprehensive Coverage Expenses:										
A03.01	Salaries (including $.....0 for affiliated services)	4,441	0	0	0	1,461	5,902	0	29,662	90,244	125,808
A03.02	Outsourced Services	0	0	0	0	0	0	0	0	0	0
A03.03	EDP Equipment and Software (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	0	0	0
A03.04	Other Equipment (excluding EDP) (incl $.....0 for affiliated services)	0	0	0	0	0	0	0	319	1,275	1,594
A03.05	Accreditation and Certification (incl $.....0 for affiliated services)	0	XXX	XXX	XXX	XXX	0	0	0	0	0
A03.06	Other Expenses (incl $.....0 for affiliated services)	0	0	0	0	1,461	1,461	0	1,165	153,379	156,005
A03.07	Subtotal before Reimbursements and Taxes (3.1 to 3.6)	4,441	0	0	0	2,922	7,363	0	31,146	244,898	283,407
A03.08	Reimbursements by uninsured plans and fiscal intermediaries	0	0	0	0	0	0	0	0	0	0
A03.09	Taxes, Licenses and Fees (in total, for lying purposes)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
A03.10	Total (3.7 to 3.9)	4,441	0	0	0	2,922	7,363	0	31,146	244,898	283,407
A03.11	Total Fraud and Abuse Detection/Recovery Expenses included in Column 7 (informational only)	0	0	0	0	0	0	0	0	0	0

3B	Quality Improvement Expenses Only	Improving Health Care Quality Expenses				
		1 Improve Health Outcomes	2 Active to Prevent Hospital Readmissions	3 Improve Patient Safety and Reduce Medical Errors	4 Wellness & Health Promotion Activities	5 Total (1 to 4)
B01.	Individual Comprehensive Coverage Expenses:					
B01.01	HIT expenses	51,371	0	0	0	51,371
B01.02	Other than HIT expenses	106,587	0	0	0	106,587
B02.	Small Group Comprehensive Coverage Expenses:					
B02.01	HIT expenses	0	0	0	0	0
B02.02	Other than HIT expenses	0	0	0	0	0
B03.	Large Group Comprehensive Coverage Expenses:					
B03.01	HIT expenses	2,141	0	0	0	2,141
B03.02	Other than HIT expenses	4,441	0	0	0	4,441
B04.	Subtotals/Totals:					
B04.01	Subtotals HIT expenses (Line 1.1 + 2.1 + 3.1)	53,512	0	0	0	53,512
B04.02	Subtotals Other than HIT expenses (Line 1.2 + 2.2 + 3.2)	111,028	0	0	0	111,028
B04.03	Total (Lines 4.1 + 4.2)	164,540	0	0	0	164,540

Supplement for the year 2010 of the **AETNA LIFE INSURANCE COMPANY**

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes) REPORT: 1. CORPORATION: AETNA LIFE INSURANCE COMPANY 2. LOCATION: Hartford CT

NAIC Group Code.....0001 BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR 2010 NAIC Company Code.....60054

	Comprehensive Health Coverage			4	5	6	7	8	9
	1 Individual	2 Small Group Employer	3 Large Group Employer	Government Business (Excluded by Statute)	Other Business (Excluded by Statute)	Other Health	Subtotal (Cols 1 thru 6)	Uninsured Plans	Total (Cols 7 + 8)
1. Premium:									
1.1 Health premiums earned (From Part 2, Line 1.8)	20,043,124	23,583,856	490,183,342	188,864,714	30,296,267	191,587,882	944,559,185	XXX	944,559,185
1.2 Federal high risk pools							0	XXX	0
1.3 State high risk pools	(53,765)	(13,112)	(1,372,062)		(131,101)	(70,053)	(1,640,093)	XXX	(1,640,093)
1.4 Premiums earned including state and federal high risk programs (Lines 1.1+1.2+1.3)	19,989,359	23,570,743	488,811,281	188,864,714	30,165,166	191,517,829	942,919,092	XXX	942,919,092
1.5 Federal taxes and federal assessments	1,257,279	651,418	(3,111,141)	4,526,065	(128,270)	16,058,301	19,253,652		19,253,652
1.6 State insurance, premium and other taxes (Similar local taxes of $.....861,627)	340,904	606,571	9,348,396	181,393	741,882	1,363,795	12,582,941		12,582,941
1.7 Regulatory authority licenses and fees	35,859	70,555	779,759	70,435	154,246	241,396	1,352,250		1,352,250
1.8 Adjusted premiums earned (Lines 1.4-1.5-1.6-1.7)	18,355,316	22,242,199	481,794,267	184,086,821	29,397,309	173,854,337	909,730,249	XXX	909,730,249
1.9 Net assumed less ceded reinsurance premiums earned	(4,167,540)	(4,220,126)	(90,205,741)	0	(1,713,012)	(1,671,273)	(101,977,691)	XXX	(101,977,691)
1.10 Other adjustments due to MLR calculations - premiums	0	0	0	0	0	0	0	XXX	0
1.11 Risk revenue							0	XXX	0
1.12 Net adjusted premiums earned after reinsurance (lines 1.8+1.9+1.10+1.11)	14,187,776	18,022,073	391,588,526	184,086,821	27,684,297	172,183,064	807,752,557	XXX	807,752,557
2. Claims:									
2.1 Incurred claims excluding prescription drugs	13,705,277	16,629,077	370,539,900	135,587,262	27,202,909	131,453,682	695,118,107	XXX	695,118,107
2.2 Prescription drugs	1,447,588	4,470,522	75,020,189	32,354,052	609,256	1,398,329	115,299,916	XXX	115,299,916
2.3 Pharmaceutical rebates	177,955	472,638	9,152,902	5,952,542	44,783	159,940	15,960,761	XXX	15,960,761
2.4 State stop loss, market stabilization and claim/census based assessments	(421)	(24,521)	(1,422,684)		(93)	(94,235)	(1,541,954)	XXX	(1,541,954)
3. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	XXX	0
4. Deductible fraud and abuse detection/recovery expenses (for MLR use only)	0	1,587	32,643				34,230		34,230
5. 5.0 Total incurred claims (Lines 2.1+2.2-2.3-2.4+3) (From Part 2, Line 2.10)	14,975,331	20,651,482	437,829,850	161,988,773	27,767,474	132,786,307	795,999,216	XXX	795,999,216
5.1 Net assumed less ceded reinsurance claims incurred	(3,898,939)	(4,263,832)	(86,334,268)	0	(2,241,026)	(987,702)	(97,703,786)	XXX	(97,703,786)
5.2 Other adjustments due to MLR calculations - claims	0	0	0	0	0	0	0	XXX	0
5.3 Rebates paid							0	XXX	0
5.4 Estimated rebates unpaid prior year							0	XXX	0
5.5 Estimated rebates unpaid current year							0	XXX	0
5.6 Fee for service and co-pay revenue							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)	11,076,392	16,387,649	351,495,563	161,988,773	25,526,449	131,818,605	698,295,431	XXX	698,295,431
6. Improving health care quality expenses incurred:									
6.1 Type A. Expenses for health improvements other than health information technology	63,558	203,090	4,123,272	1,506,316	18,607	31,260	5,946,102		5,946,102
6.2 Type B. Health information technology expenses related to health improvement	4,170	8,576	226,317	57,085	528	2,889	299,565		299,565
6.3 Total of defined expenses incurred for improving health care quality (Lines 6.1+6.2)	67,728	211,666	4,349,589	1,563,400	19,135	34,149	6,245,667	0	6,245,667
7. Preliminary medical loss ratio: MLR (Lines 4+5.0+6.3) / Line 1.8	0.820	0.938	0.918	XXX	XXX	XXX	XXX	XXX	XXX
8. Claims adjustment expenses:									
8.1 Cost containment expenses not included in quality of care expenses in Line 6.3	184,573	78,845	1,639,920	744,369	376,460	2,303,755	5,327,922		5,327,922
8.2 All other claims adjustment expenses	265,094	305,241	6,293,207	2,424,785	415,653	2,456,447	12,160,428		12,160,428
8.3 Total claims adjustment expenses (Lines 8.1+8.2)	449,667	384,086	7,933,126	3,169,154	792,114	4,760,203	17,488,350	0	17,488,350
9. Claims adjustment expense ratio (Line 8.3 / Line 1.8)	0.024	0.017	0.016	0.017	0.027	0.027	XXX	XXX	XXX
10. General and administrative (G&A) expenses:									
10.1 Direct sales salaries and benefits	56,039	64,525	1,330,330	512,579	87,866	519,272	2,570,610		2,570,610
10.2 Agents and brokers fees and commissions	414,137	476,856	9,831,415	3,788,064	649,345	3,837,527	18,997,343		18,997,343
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below)	579	666	13,741	5,294	908	5,364	26,552		26,552
10.4 Other general and administrative expenses	1,074,761	1,237,527	25,514,295	9,830,709	1,685,167	9,959,076	49,301,535		49,301,535
10.5 Total general and administrative (Lines 10.1+10.2+10.3+10.4)	1,545,515	1,779,575	36,689,780	14,136,646	2,423,285	14,321,238	70,896,040	0	70,896,040
11. Underwriting gain/(loss) (Lines 1.12-5.7-6.3-8.3-10.5)	1,046,474	(740,904)	(8,879,533)	3,228,848	(1,076,685)	21,248,870	14,827,070	XXX	14,827,070
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	12,329,485	XXX	12,329,485
14. Federal income taxes (excluding taxes on Line 1.5 above)					2,471,627		2,471,627		2,471,627
15. Net gain or (loss) (Lines 11+12+13-14)	XXX	XXX	XXX	XXX	XXX	XXX	24,684,928	XXX	24,684,928
16. ICD-10 Implementation Expenses (informational only, already included in general expenses)	53,337	61,414	1,266,191	487,866	83,629	494,236	2,446,674		2,446,674
OTHER INDICATORS:									
1. Number of certificates/policies	4,196	1,811	74,066	25,270	62,893	429,228	597,463		597,463
2. Number of covered lives	5,789	3,330	121,468	25,774	123,714	518,964	799,039		799,039
3. Number of groups	XXX	823	151	341	1,037	3,611	5,963		5,963
4. Member months	63,682	41,923	1,579,231	312,977	1,467,864	6,537,934	10,003,811		10,003,611