



LIFE AND ACCIDENT AND HEALTH COMPANIES—ASSOCIATION EDITION

**ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2011
OF THE CONDITION AND AFFAIRS OF THE**

SEECHANGE HEALTH INSURANCE COMPANY, INC.

NAIC Group Code	0000 (Current Period)	0759 (Prior Period)	NAIC Company Code	63541	Employer's ID Number		35-0982487
Organized under the Laws of	Ohio		State of Domicile or Port of Entry		Ohio		
Country of Domicile	United States						
Incorporated/Organized	05/14/1956		Commenced Business		11/16/1956		
Statutory Home Office	545 Metro Place South, Suite 100 (Street and Number)		Columbus, OH 43017 (City or Town, State and Zip Code)		Columbus, OH 43017 (Area Code) (Telephone Number)		
Main Administrative Office	545 Metro Place South, Suite 100 (Street and Number)		Columbus, OH 43017 (City or Town, State and Zip Code)		763-746-8475 (Area Code) (Telephone Number)		
Mail Address	10159 Wayzata Blvd., Suite 200 (Street and Number or P.O. Box)		Minneapolis, MN 55305 (City or Town, State and Zip Code)		763-582-1266 (Area Code) (Telephone Number)		
Primary Location of Books and Records	545 Metro Place South, Suite 100 (Street and Number)		Columbus, OH 43017 (City or Town, State and Zip Code)		763-582-1266 (Area Code) (Telephone Number)		
Internet Web Site Address	www.seechangehealth.com						
Statutory Statement Contact	Donald Alan Powers (Name)		763-582-1266		(Area Code) (Telephone Number) (Extension)		
	dpowers@seechangehealth.com (E-Mail Address)				866-631-6661 (FAX Number)		

OFFICERS

Name	Title	Name	Title
Martin Watson	President	Daniel John Boivin	Secretary
Donald Alan Powers	Treasurer		

OTHER OFFICERS

DIRECTORS OR TRUSTEES

Matthew Wayne Etheridge #	Eric John Kim #	Stephen Michael Krupa	Michael Aubrey Stocker
Martin Watson	Albert Sidney Waxman		

State of Minnesota

County of Hennepin ss

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

Martin Watson
President

Daniel John Boivin
Secretary

Donald Alan Powers
Treasurer

a. Is this an original filing? Yes [X] No []

b. If no,
1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

Subscribed and sworn to before me this
day of _____,

,



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year										
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year										

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	2,811,853	2,588,811		1,248,159	2,052,345
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,811,853	2,588,811	0	1,248,159	2,052,345

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					.0
2. Annuity considerations .....					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations .....					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					.0
6.2 Applied to pay renewal premiums .....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					.0
6.4 Other .....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit .....					.0
7.2 Applied to provide paid-up annuities .....					.0
7.3 Other .....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					.0
10. Matured endowments .....					.0
11. Annuity benefits .....					.0
12. Surrender values and withdrawals for life contracts .....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health .....					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2011

NAIC Group Code 0000

LIFE INSURANCE

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year										
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year										

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

NAIC Group Code 0000		NAIC Company Code 00041				
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						.0
2. Annuity considerations .....						.0
3. Deposit-type contract funds			XXX		XXX	.0
4. Other considerations .....						.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						.0
6.2 Applied to pay renewal premiums .....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						.0
6.4 Other .....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						.0
7.2 Applied to provide paid-up annuities .....						.0
7.3 Other .....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						.0
10. Matured endowments .....						.0
11. Annuity benefits .....						.0
12. Surrender values and withdrawals for life contracts .....						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health .....						.0
15. Totals	0	0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1By payment in full										
18.2By payment on compromised claims										
18.3.Totals paid										
18.4Reduction by compromise										
18.5Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)	No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2011

NAIC Group Code 0000

LIFE INSURANCE

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					.0
2. Annuity considerations .....					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations .....					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					.0
6.2 Applied to pay renewal premiums .....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					.0
6.4 Other .....					.0
6.5 Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit .....					.0
7.2 Applied to provide paid-up annuities .....					.0
7.3 Other .....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					.0
10. Matured endowments .....					.0
11. Annuity benefits .....					.0
12. Surrender values and withdrawals for life contracts .....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health .....					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1By payment in full										
18.2By payment on compromised claims										
18.3.Totals paid										
18.4Reduction by compromise										
18.5Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)	No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2011

NAIC Group Code 0000

LIFE INSURANCE

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

NAIC Group Code 0000		NAIC Company Code 00041				
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						.0
2. Annuity considerations .....						.0
3. Deposit-type contract funds			XXX		XXX	.0
4. Other considerations .....						.0
5. Totals (Sum of Lines 1 to 4)	0	0		0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						.0
6.2 Applied to pay renewal premiums .....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						.0
6.4 Other .....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0		0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						.0
7.2 Applied to provide paid-up annuities .....						.0
7.3 Other .....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0		0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0		0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						.0
10. Matured endowments .....						.0
11. Annuity benefits .....						.0
12. Surrender values and withdrawals for life contracts .....						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0		0	0	0
14. All other benefits, except accident and health .....						.0
15. Totals	0	0		0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0		0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0		0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1By payment in full										
18.2By payment on compromised claims										
18.3.Totals paid										
18.4Reduction by compromise										
18.5Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)	No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1.By payment in full										
18.2.By payment on compromised claims										
18.3.Totals paid										
18.4.Reduction by compromise										
18.5.Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year										
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year										

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2011

NAIC Group Code 0000

NAIC Company Code 63541

LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance						0
2. Annuity considerations						0
3. Deposit-type contract funds			XXX		XXX	0
4. Other considerations						0
5. Totals (Sum of Lines 1 to 4)		0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit						0
6.2.Applied to pay renewal premiums						0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period						0
6.4.Other						0
6.5.Totals (Sum of Lines 6.1 to 6.4)		0	0	0	0	0
Annuities:						
7.1.Paid in cash or left on deposit						0
7.2.Applied to provide paid-up annuities						0
7.3.Other						0
7.4.Totals (Sum of Lines 7.1 to 7.3)		0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)		0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits						0
10. Matured endowments						0
11. Annuity benefits						0
12. Surrender values and withdrawals for life contracts						0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid		0	0	0	0	0
14. All other benefits, except accident and health						0
15. Totals		0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page		0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)		0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total		
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year											
17. Incurred during current year											
Settled during current year:											
18.1.By payment in full											
18.2.By payment on compromised claims											
18.3.Totals paid											
18.4.Reduction by compromise											
18.5.Amount rejected											
18.6.Total settlements											
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)											
POLICY EXHIBIT					No. of Policies						
20. In force December 31, prior year											
21. Issued during year											
22. Other changes to in force (Net)											
23. In force December 31 of current year											

(a) Includes Individual Credit Life Insurance: prior year \$ _____ current year \$ _____
 Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ _____ current year \$ _____
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ _____ current year \$ _____

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products _____ and number of persons insured under indemnity only products _____



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

NAIC Group Code 0000		NAIC Company Code 00041				
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						.0
2. Annuity considerations .....						.0
3. Deposit-type contract funds			XXX		XXX	.0
4. Other considerations .....						.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						.0
6.2 Applied to pay renewal premiums .....						.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						.0
6.4 Other .....						.0
6.5 Totals (Sum of Lines 6.1 to 6.4)	0	0	0	0	0	0
Annuities:						
7.1 Paid in cash or left on deposit .....						.0
7.2 Applied to provide paid-up annuities .....						.0
7.3 Other .....						.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4)	0	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						.0
10. Matured endowments .....						.0
11. Annuity benefits .....						.0
12. Surrender values and withdrawals for life contracts .....						.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0	0
14. All other benefits, except accident and health .....						.0
15. Totals	0	0	0	0	0	0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guarantee renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2011

LIFE INSURANCE

NAIC Group Code 0000

NAIC Company Code 63541

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1By payment in full										
18.2By payment on compromised claims										
18.3.Totals paid										
18.4Reduction by compromise										
18.5Amount rejected										
18.6.Total settlements										
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)										
POLICY EXHIBIT										
20. In force December 31, prior year				(a)	No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year				(a)						

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$

Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancellable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (sum of Lines 25.1 to 25.5).....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2011

NAIC Group Code 0000

LIFE INSURANCE

NAIC Company Code 63541

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	.....0	.....0	.....0	.....0	.....0	.....0
2. Annuity considerations	.....0	.....0	.....0	.....0	.....0	.....0
3. Deposit-type contract funds	.....0	XXX	.....0	XXX	.....0	.....0
4. Other considerations	.....0	.....0	.....0	.....0	.....0	.....0
5. Totals (Sum of Lines 1 to 4)	.....0	.....0	.....0	.....0	.....0	.....0
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1.Paid in cash or left on deposit	.....0	.....0	.....0	.....0	.....0	.....0
6.2.Applied to pay renewal premiums	.....0	.....0	.....0	.....0	.....0	.....0
6.3.Applied to provide paid-up additions or shorten the endowment or premium-paying period	.....0	.....0	.....0	.....0	.....0	.....0
6.4.Other	.....0	.....0	.....0	.....0	.....0	.....0
6.5.Totals (Sum of Lines 6.1 to 6.4)	.....0	.....0	.....0	.....0	.....0	.....0
Annuities:						
7.1.Paid in cash or left on deposit	.....0	.....0	.....0	.....0	.....0	.....0
7.2.Applied to provide paid-up annuities	.....0	.....0	.....0	.....0	.....0	.....0
7.3.Other	.....0	.....0	.....0	.....0	.....0	.....0
7.4.Totals (Sum of Lines 7.1 to 7.3)	.....0	.....0	.....0	.....0	.....0	.....0
8. Grand Totals (Lines 6.5 + 7.4)	.....0	.....0	.....0	.....0	.....0	.....0
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits	.....0	.....0	.....0	.....0	.....0	.....0
10. Matured endowments	.....0	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits	.....0	.....0	.....0	.....0	.....0	.....0
12. Surrender values and withdrawals for life contracts	.....0	.....0	.....0	.....0	.....0	.....0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.....0	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health	.....0	.....0	.....0	.....0	.....0	.....0
15. Totals	.....0	.....0	.....0	.....0	.....0	.....0
DETAILS OF WRITE-INS						
1301.						
1302.						
1303.						
1398. Summary of remaining write-ins for Line 13 from overflow page	.....0	.....0	.....0	.....0	.....0	.....0
1399. Total (Lines 1301 through 1303 + 1398) (Line 13 above)	.....0	.....0	.....0	.....0	.....0	.....0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17. Incurred during current year	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
Settled during current year:										
18.1.By payment in full	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.2.By payment on compromised claims	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3.Totals paid	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.4.Reduction by compromise	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5.Amount rejected	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6.Total settlements	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
19. Unpaid Dec. 31, current year (16 + 17 - 18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	.....0	.....0	.....0	.....0		.....0	.....0	.....0	.....0	.....0
21. Issued during year	.....0	.....0	.....0	.....0		.....0	.....0	.....0	.....0	.....0
22. Other changes to in force (Net)	.....0	.....0	.....0	.....0		.....0	.....0	.....0	.....0	.....0
23. In force December 31 of current year	0	0	0	0		0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$0 current year \$0
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$0 current year \$0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$0 current year \$0

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b)	2,811,853	2,588,811	0	1,248,159	2,052,345
24.1 Federal Employees Health Benefits Program premium (b)	.....0	.....0	.....0	.....0	.....0
24.2 Credit (Group and Individual)	.....0	.....0	.....0	.....0	.....0
24.3 Collectively renewable policies (b)	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:	.....0	.....0	.....0	.....0	.....0
25.1 Non-cancelable (b)	.....0	.....0	.....0	.....0	.....0
25.2 Guaranteed renewable (b)	.....0	.....0	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b)	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only	.....0	.....0	.....0	.....0	.....0
25.5 All other (b)	.....0	.....0	.....0	.....0	.....0
25.6 Totals (sum of Lines 25.1 to 25.5)	.....0	.....0	.....0	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,811,853	2,588,811	0	1,248,159	2,052,345

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

		1 Amount
1.	Reserve as of December 31, prior year	(4,404)
2.	Current year's realized pre-tax capital gains/(losses) of \$	Transferred into the Reserve Net of Taxes of 0
3.	Adjustment for current year's liability gains/(losses) released from the reserve	0
4.	Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)	(4,404)
5.	Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)	4,331
6.	Reserve as of December 31, current year (Line 4 minus Line 5)	(8,735)

AMORTIZATION

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
1. 2011	4,331	.0	0	4,331
2. 2012	4,160	.0	0	4,160
3. 2013	3,634	.0	0	3,634
4. 2014	2,392	.0	0	2,392
5. 2015	1,893	.0	0	1,893
6. 2016	1,438	.0	0	1,438
7. 2017	.810	.0	0	.810
8. 2018	.360	.0	0	.360
9. 2019	(1,031)	.0	0	(1,031)
10. 2020	(3,361)	.0	0	(3,361)
11. 2021	(4,189)	.0	0	(4,189)
12. 2022	(5,250)	.0	0	(5,250)
13. 2023	(4,059)	.0	0	(4,059)
14. 2024	(3,014)	.0	0	(3,014)
15. 2025	(1,861)	.0	0	(1,861)
16. 2026	(657)	.0	0	(657)
17. 2027	0	.0	0	0
18. 2028	0	.0	0	0
19. 2029	0	.0	0	0
20. 2030	0	.0	0	0
21. 2031	0	.0	0	0
22. 2032	0	.0	0	0
23. 2033	0	.0	0	0
24. 2034	0	.0	0	0
25. 2035	0	.0	0	0
26. 2036	0	.0	0	0
27. 2037	0	.0	0	0
28. 2038	0	.0	0	0
29. 2039	0	.0	0	0
30. 2040	0	.0	0	0
31. 2041 and Later	0	0	0	0
32. Total (Lines 1 to 31)	(4,404)	0	0	(4,404)

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

ASSET VALUATION RESERVE

	Default Component			Equity Component		7 Total Amount (Cols. 3+6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1+2)	4 Common Stock	5 Real Estate and Other Invested Assets	
1. Reserve as of December 31, prior year	951	0	951	0	0	951
2. Realized capital gains/(losses) net of taxes - General Account	0	0	0	0	0	0
3. Realized capital gains/(losses) net of taxes - Separate Accounts	0	0	0	0	0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account	0	0	0	0	0	0
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves	0	0	0	0	0	0
7. Basic contribution	484	0	484	0	0	484
8. Accumulated balances (Lines 1 through 5 - 6 + 7)	1,435	0	1,435	0	0	1,435
9. Maximum reserve	3,632	0	3,632	0	0	3,632
10. Reserve objective	2,784	0	2,784	0	0	2,784
11. 20% of (Line 10 - Line 8)	270	0	270	0	0	270
12. Balance before transfers (Lines 8 + 11)	1,705	0	1,705	0	0	1,705
13. Transfers	0	0	0	0	XXX	0
14. Voluntary contribution	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero	0	0	0	0	0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	1,705	0	1,705	0	0	1,705

**ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFault COMPONENT**

Line Number	NAIC Designation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	Basic Contribution			Maximum Reserve (Cols. 4x9)
							4	5	6	
LONG-TERM BONDS										
1	1	Exempt Obligations	1,001,936	XXX	XXX	0	0.0000	0	0.0000	0
2	2	Highest Quality		XXX	XXX	0	0.0023	2,304	0.0030	3,006
3	3	High Quality		XXX	XXX	0	0.0058	0	0.0090	0
4	4	Medium Quality		XXX	XXX	0	0.0230	0	0.0340	0
5	5	Low Quality		XXX	XXX	0	0.0530	0	0.0750	0
6	6	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0
7		In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0
8		Total Unrated Multi-Class Securities Acquired by Conversion	1,001,936	XXX	XXX	1,001,936	XXX	XXX	XXX	0
9		Total Bonds (Sum of Lines 1 through 8)	1,001,936	XXX	XXX	1,001,936	XXX	XXX	XXX	3,006
PREFERRED STOCK										
10	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0
11	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0
12	3	Medium Quality		XXX	XXX	0	0.0083	0	0.0230	0
13	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0
14	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0
15	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0
16		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0
17		Total Preferred Stocks (Sum of Lines 10 through 16)	0	XXX	XXX	0	XXX	0	XXX	0
SHORT-TERM BONDS										
18	1	Exempt Obligations	4,712,311	XXX	XXX	4,712,311	0.0000	0	0.0000	0
19	2	Highest Quality	208,607	XXX	XXX	208,607	0.0004	480	0.0030	626
20	3	High Quality		XXX	XXX	0	0.0019	0	0.0090	0
21	4	Medium Quality		XXX	XXX	0	0.0083	0	0.0340	0
22	5	Low Quality		XXX	XXX	0	0.0213	0	0.0750	0
23	6	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0
24		In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0
25		Total Short-term Bonds (Sum of lines 18 through 24)	4,920,919	XXX	XXX	4,920,919	83	XXX	480	626

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFault COMPONENT

Line Number	NAIC Designation	Description	Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for A/R Reserve Calculations (Cols. 1+2+3)	Basic Contribution		Reserve Objective 8	Factor	Amount (Cols. 4x7)	Maximum Reserve 10	
							5	6					
DERIVATIVE INSTRUMENTS													
26	1	Exchange Traded	XXX	XXX		0	0.0004	0	0.0023	0	0.0030	0	
27	1	Highest Quality	XXX	XXX		0	0.0004	0	0.0023	0	0.0030	0	
28	2	High Quality	XXX	XXX		0	0.0119	0	0.0058	0	0.0090	0	
29	3	Medium Quality	XXX	XXX		0	0.0093	0	0.0230	0	0.0340	0	
30	4	Low Quality	XXX	XXX		0	0.0213	0	0.0530	0	0.0750	0	
31	5	Lower Quality	XXX	XXX		0	0.0432	0	0.1100	0	0.1700	0	
32	6	In or Near Default	XXX	XXX		0	0.0000	0	0.2000	0	0.2000	0	
33		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0	
34		TOTAL (Lines 9 + 17 + 25 + 33)	5,922,854	XXX	XXX	5,922,854	XXX	484	XXX	2,784	XXX	3,632	
MORTGAGE LOANS													
In Good Standing:													
35		Farm Mortgages	XXX		0	0.0063	(a)	0	0.0120	(a)	0	0.0190	(a)
36		Residential Mortgages - Insured or Guaranteed	XXX		0	0.0003	0	0.0006	0	0.0010	0	0.0010	0
37		Residential Mortgages - All Other	XXX		0	0.0013	0	0.0030	0	0.0040	0	0.0040	0
38		Commercial Mortgages - Insured or Guaranteed	XXX		0	0.0003	0	0.0006	0	0.0010	0	0.0010	0
39		Commercial Mortgages - All Other	XXX		0	0.0063	(a)	0	0.0120	(a)	0	0.0190	(a)
40		In Good Standing With Restructured Terms	XXX		0	0.2800	(b)	0	0.6200	(b)	0	1.0000	(b)
Overdue, Not in Process:													
41		Farm Mortgages	XXX		0	0.0420	0	0.0760	0	0.1200	0	0.1200	0
42		Residential Mortgages - Insured or Guaranteed	XXX		0	0.0005	0	0.0020	0	0.0090	0	0.0090	0
43		Residential Mortgages - All Other	XXX		0	0.0025	0	0.0058	0	0.0112	0	0.0200	0
44		Commercial Mortgages - Insured or Guaranteed	XXX		0	0.0005	0	0.0012	0	0.0020	0	0.0020	0
45		Commercial Mortgages - All Other	XXX		0	0.0420	0	0.0760	0	0.1200	0	0.1200	0
In Process of Foreclosure:													
46		Farm Mortgages	XXX		0	0.0000	0	0.0000	0	0.0040	0	0.0040	0
47		Residential Mortgages - Insured or Guaranteed	XXX		0	0.0000	0	0.0000	0	0.0130	0	0.0130	0
48		Residential Mortgages - All Other	XXX		0	0.0000	0	0.0000	0	0.0040	0	0.0040	0
49		Commercial Mortgages - Insured or Guaranteed	XXX		0	0.0000	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial Mortgages - All Other	XXX		0	0.0000	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B Mortgages (Sum of Lines 35 through 50)	0	0	XXX	0	XXX	0	XXX	0	XXX	0	
52		Schedule DA Mortgages	0	0	XXX	0	XXX	0	XXX	0	XXX	0	
53		Total Mortgage Loans on Real Estate (Lines 51 + 52)	0	0	XXX	0	XXX	0	XXX	0	XXX	0	

(a) Times the Company's Experience Adjustment Factor (EAF).
 (b) Column 9 is the greater of 6.4% without any EAF adjustments or a Company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
 (c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

AVR - Equity Component
NONE

Asset Valuation Reserve RSA
NONE

Schedule F - Claims
NONE

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

(a) Includes \$ reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	3	4	PART 2 - RESERVES AND LIABILITIES		
					Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable Non-Cancellable
A. Premium Reserves:							
1. Unearned premiums	0	274,805	274,805				
2. Advance premiums	0						
3. Reserve for rate credits	0						
4. Total premium reserves, current year	274,805	274,805	0	0	0	0	0
5. Total premium reserves, prior year	1,623	1,623	0	0	0	0	0
6. Increase in total premium reserves	273,183	273,183	0	0	0	0	0
B. Contract Reserves:							
1. Additional reserves (a)	0						
2. Reserve for future contingent benefits	0						
3. Total contract reserves, current year	0	0	0	0	0	0	0
4. Total contract reserves, prior year	0	0	0	0	0	0	0
5. Increase in contract reserves	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:							
1. Total current year	813,008	813,008	0	0	0	0	0
2. Total prior year	804,186	804,186	0	0	0	0	0
3. Increase							

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES							
1. Claims paid during the year:							
1.1 On claims incurred prior to current year	3,029	3,029					
1.2 On claims incurred during current year	1,245,130	1,245,130					
2. Claim reserves and liabilities, December 31, current year:							
2.1 On claims incurred prior to current year	0						
2.2 On claims incurred during current year	813,008	813,008					
3. Test:							
3.1 Lines 1.1 and 2.1	3,029	3,029	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31 prior year	8,822	8,822	0	0	0	0	0
3.3 Line 3.1 minus Line 3.2	(5,793)	(5,793)	0	0	0	0	0

PART 4 - REINSURANCE							
A. Reinsurance Assumed:							
1. Premiums written	0						
2. Premiums earned	0						
3. Incurred claims	0						
4. Commissions	0						
B. Reinsurance Ceded:							
1. Premiums written	276,596	276,596					
2. Premiums earned	276,596	276,596					
3. Incurred claims	0	0					
4. Commissions	0						
(a) Includes \$ premium deficiency reserve							

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims.....	2,052,345			2,052,345
2. Beginning Claim Reserves and Liabilities.....	8,822	0	0	8,822
3. Ending Claim Reserves and Liabilities.....	813,008			813,008
4. Claims Paid	1,248,159	0	0	1,248,159
B. Assumed Reinsurance:				
5. Incurred Claims.....				0
6. Beginning Claim Reserves and Liabilities.....	0	0	0	0
7. Ending Claim Reserves and Liabilities.....				0
8. Claims Paid	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....				0
10. Beginning Claim Reserves and Liabilities.....	0	0	0	0
11. Ending Claim Reserves and Liabilities.....				0
12. Claims Paid	0	0	0	0
D. Net:				
13. Incurred Claims.....	2,052,345	0	0	2,052,345
14. Beginning Claim Reserves and Liabilities.....	8,822	0	0	8,822
15. Ending Claim Reserves and Liabilities.....	813,008	0	0	813,008
16. Claims Paid.....	1,248,159	0	0	1,248,159
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred Claims and Cost Containment Expenses.....	2,052,345			2,052,345
18. Beginning Reserves and Liabilities.....	8,822	0	0	8,822
19. Ending Reserves and Liabilities.....	813,008			813,008
20. Paid Claims and Cost Containment Expenses	1,248,159	0	0	1,248,159

Schedule S - Part 1 - Section 1

NONE

Schedule S - Part 1 - Section 2

NONE

Schedule S - Part 2

NONE

Schedule S - Part 3 - Section 1

NONE

SCHEDULE S - PART 3 - SECTION 2

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

Code	American Bankers Association (ABA) Routing Number	Bank Name
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SCHEDULE S - PART 5

Five - Year Exhibit of Reinsurance Ceded Business (000 OMITTED)

	1 2011	2 2010	3 2009	4 2008	5 2007
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	277	1	.0	468	.665
2. Commissions and reinsurance expense allowances .....	.0	0	.0	105	109
3. Contract claims .....	.0	0	.0	392	.561
4. Surrender benefits and withdrawals for life contracts		0	.0	.0	0
5. Dividends to policyholders		0	.0	.0	0
6. Reserve adjustments on reinsurance ceded .....	.0	0	.0	.0	0
7. Increase in aggregate reserve for life and accident and health contracts		0	.0	.0	0
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	.0	0	.0	.0	0
9. Aggregate reserves for life and accident and health contracts .....	.0	0	.0	.0	0
10. Liability for deposit-type contracts		0	.0	.0	0
11. Contract claims unpaid	0	0	.0	.0	105
12. Amounts recoverable on reinsurance .....	.0	0	.0	.0	1
13. Experience rating refunds due or unpaid		0	.0	.0	0
14. Policyholders' dividends (not included in Line 10)		0	.0	.0	0
15. Commissions and reinsurance expense allowances unpaid		0	.0	.0	0
16. Unauthorized reinsurance offset .....	.0	0	.0	.0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Funds deposited by and withheld from (F) .....	.0	0	.0	.0	0
18. Letters of credit (L) .....	.0	0	.0	.0	0
19. Trust agreements (T) .....	.0	0	.0	.0	0
20. Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	7,323,878		7,323,878
2. Reinsurance (Line 16)	75,896	(75,896)	0
3. Premiums and considerations (Line 15)	50,728	0	50,728
4. Net credit for ceded reinsurance	XXX	75,896	75,896
5. All other admitted assets (balance)	66,621		66,621
6. Total assets excluding Separate Accounts (Line 26)	7,517,123	0	7,517,123
7. Separate Account assets (Line 27)	0		0
8. Total assets (Line 28)	7,517,123	0	7,517,123
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2)	0	0	0
10. Liability for deposit-type contracts (Line 3)	0		0
11. Claim reserves (Line 4)	813,008	0	813,008
12. Policyholder dividends/reserves (Lines 5 through 7)	0		0
13. Premium & annuity considerations received in advance (Line 8)	274,805		274,805
14. Other contract liabilities (Line 9)	0		0
15. Reinsurance in unauthorized companies (Line 24.2)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.3)	0	0	0
17. All other liabilities (balance)	429,310		429,310
18. Total liabilities excluding Separate Accounts (Line 26)	1,517,123	0	1,517,123
19. Separate Account liabilities (Line 27)	0		0
20. Total liabilities (Line 28)	1,517,123	0	1,517,123
21. Capital & surplus (Line 38)	6,000,001	XXX	6,000,001
22. Total liabilities, capital & surplus (Line 39)	7,517,123	0	7,517,123
NET CREDIT FOR CEDED REINSURANCE			
23. Contract reserves	0		
24. Claim reserves	0		
25. Policyholder dividends/reserves	0		
26. Premium & annuity considerations received in advance	0		
27. Liability for deposit-type contracts	0		
28. Other contract liabilities	0		
29. Reinsurance ceded assets	75,896		
30. Other ceded reinsurance recoverables	0		
31. Total ceded reinsurance recoverables	75,896		
32. Premiums and considerations	0		
33. Reinsurance in unauthorized companies	0		
34. Funds held under reinsurance treaties with unauthorized reinsurers	0		
35. Other ceded reinsurance payables/offsets	0		
36. Total ceded reinsurance payable/offsets	0		
37. Total net credit for ceded reinsurance	75,896		

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

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

Allocated By States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	0	.0		.0	.0
2. Alaska	AK	0	.0		.0	.0
3. Arizona	AZ	0	.0		.0	.0
4. Arkansas	AR	0	.0		.0	.0
5. California	CA	0	.0		.0	.0
6. Colorado	CO	0	.0		.0	.0
7. Connecticut	CT	0	.0		.0	.0
8. Delaware	DE	0	.0		.0	.0
9. District of Columbia	DC	0	.0		.0	.0
10. Florida	FL	0	.0		.0	.0
11. Georgia	GA	0	.0		.0	.0
12. Hawaii	HI	0	.0		.0	.0
13. Idaho	ID	0	.0		.0	.0
14. Illinois	IL	0	.0		.0	.0
15. Indiana	IN	0	.0		.0	.0
16. Iowa	IA	0	.0		.0	.0
17. Kansas	KS	0	.0		.0	.0
18. Kentucky	KY	0	.0		.0	.0
19. Louisiana	LA	0	.0		.0	.0
20. Maine	ME	0	.0		.0	.0
21. Maryland	MD	0	.0		.0	.0
22. Massachusetts	MA	0	.0		.0	.0
23. Michigan	MI	0	.0		.0	.0
24. Minnesota	MN	0	.0		.0	.0
25. Mississippi	MS	0	.0		.0	.0
26. Missouri	MO	0	.0		.0	.0
27. Montana	MT	0	.0		.0	.0
28. Nebraska	NE	0	.0		.0	.0
29. Nevada	NV	0	.0		.0	.0
30. New Hampshire	NH	0	.0		.0	.0
31. New Jersey	NJ	0	.0		.0	.0
32. New Mexico	NM	0	.0		.0	.0
33. New York	NY	0	.0		.0	.0
34. North Carolina	NC	0	.0		.0	.0
35. North Dakota	ND	0	.0		.0	.0
36. Ohio	OH	0	.0		.0	.0
37. Oklahoma	OK	0	.0		.0	.0
38. Oregon	OR	0	.0		.0	.0
39. Pennsylvania	PA	0	.0		.0	.0
40. Rhode Island	RI	0	.0		.0	.0
41. South Carolina	SC	0	.0		.0	.0
42. South Dakota	SD	0	.0		.0	.0
43. Tennessee	TN	0	.0		.0	.0
44. Texas	TX	0	.0		.0	.0
45. Utah	UT	0	.0		.0	.0
46. Vermont	VT	0	.0		.0	.0
47. Virginia	VA	0	.0		.0	.0
48. Washington	WA	0	.0		.0	.0
49. West Virginia	WV	0	.0		.0	.0
50. Wisconsin	WI	0	.0		.0	.0
51. Wyoming	WY	0	.0		.0	.0
52. American Samoa	AS	0	.0		.0	.0
53. Guam	GU	0	.0		.0	.0
54. Puerto Rico	PR	0	.0		.0	.0
55. US Virgin Islands	VI	0	.0		.0	.0
56. Northern Mariana Islands	MP	0	.0		.0	.0
57. Canada	CN	0	.0		.0	.0
58. Aggregate Other Alien	OT	0	.0		.0	.0
59. Totals		0	0	0	0	0

SCHEDULE Y PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING

	Responses
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....
4. Will an actuarial opinion be filed by March 1?	.....YES.....

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	.....YES.....
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?	.....YES.....

JUNE FILING

9. Will an audited financial report be filed by June 1?	.....YES.....
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	.....YES.....

AUGUST FILING

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?YES.....
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The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....NO.....
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	.....NO.....
34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	.....NO.....
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	.....YES.....

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?NO.....

37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?NO.....

38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?NO.....

39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?NO.....

APRIL FILING

40. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?NO.....

41. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?NO.....

42. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?NO.....

43. Will the Accident and Health Policy Experience Exhibit be filed by April 1?YES.....

44. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?NO.....

45. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?NO.....

46. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?YES.....

47. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?YES.....

AUGUST FILING

48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?YES.....

EXPLANATIONS:

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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ANNUAL STATEMENT FOR THE YEAR 2011 OF THE SEECHANGE HEALTH INSURANCE COMPANY, INC.

MEDICARE PART D COVERAGE SUPPLEMENT NET OF REINSURANCE

For The Year Ended December 31, 2011

(To Be Filed by March 1)

NAIC Company Code63541

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage		XXX		XXX	0
1.12 Without Reinsurance Coverage		XXX		XXX	0
1.13 Risk-Corridor Payment Adjustments		XXX		XXX	0
1.2 Supplemental Benefits		XXX		XXX	0
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage		XXX		XXX	XXX
2.12 Without Reinsurance Coverage		XXX		XXX	XXX
2.2 Supplemental Benefits		XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage		XXX		XXX	XXX
3.12 Without Reinsurance Coverage		XXX		XXX	XXX
3.2 Supplemental Benefits		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable		XXX		XXX	XXX
4.2 Payable		XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage		XXX		XXX	XXX
5.12 Without Reinsurance Coverage		XXX		XXX	XXX
5.13 Risk-Corridor Payment Adjustments		XXX		XXX	XXX
5.2 Supplemental Benefits		XXX		XXX	XXX
6. Total Premiums	0	XXX	0	XXX	0
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage		XXX		XXX	0
7.12 Without Reinsurance Coverage		XXX		XXX	0
7.2 Supplemental Benefits		XXX		XXX	0
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage		XXX		XXX	XXX
8.12 Without Reinsurance Coverage		XXX		XXX	XXX
8.2 Supplemental Benefits		XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage		XXX		XXX	XXX
9.12 Without Reinsurance Coverage		XXX		XXX	XXX
9.2 Supplemental Benefits		XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage	0	XXX	0	XXX	XXX
10.12 Without Reinsurance Coverage	0	XXX	0	XXX	XXX
10.2 Supplemental Benefits	0	XXX	0	XXX	XXX
11. Total Claims	0	XXX	0	XXX	0
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid – Net To Reimbursements Applied	XXX		XXX		0
12.2 Reimbursements Received but Not Applied-change	XXX		XXX		0
12.3 Reimbursements Receivable-change	XXX		XXX		XXX
12.4 Health Care Receivables-change	XXX		XXX		XXX
13. Aggregate Policy Reserves-change					
14. Expenses Paid		XXX		XXX	0
15. Expenses Incurred		XXX		XXX	XXX
16. Underwriting Gain/Loss	0	XXX	0	XXX	XXX
17. Cash Flow Result	XXX	XXX	XXX	XXX	0

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O – PART 2

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 200 200	2 200 200	3 200 200 200 200 200 200	4 200 200 200 200 200 200	5 201 201 201 201 201 201
1. Prior	0	0	0	0	0
2. 2007	0	0	0	0	0
3. 2008	XXX	XXX	0	0	0
4. 2009	XXX	XXX	0	0	0
5. 2010	XXX	XXX	XXX	0	0
6. 2011	XXX	XXX	XXX	XXX	XXX

Section B - Other Accident and Health

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

Section C - Credit Accident and Health

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

Section D-

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

Section E-

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

Section F-

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

Section G-

1. Prior	0	0	0	0
2. 2007	0	0	0	0
3. 2008	XXX	0	0	0
4. 2009	XXX	XXX	0	0
5. 2010	XXX	XXX	XXX	0
6. 2011	XXX	XXX	XXX	XXX

NONE**NONE****NONE****NONE****NONE****NONE****NONE**

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O – PART 3

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	102	.3
5. 2011	XXX	XXX	XXX	XXX	1,245

Section B - Other Accident and Health

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

Section D-

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

NONE

Section E-

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

NONE

Section F-

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

NONE

Section G-

1. 2007	0	0	.0	XXX	XXX
2. 2008	XXX	0	.0	0	XXX
3. 2009	XXX	XXX	.0	0	0
4. 2010	XXX	XXX	XXX	0	0
5. 2011	XXX	XXX	XXX	XXX	

NONE

SCHEDULE O SUPPLEMENT

SUPPLEMENTAL SCHEDULE O – PART 4

Development of Incurred Losses

(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at the End of Year				
	1 2007	2 2008	3 2009	4 2010	5 2011
1. 2007.....	0	0	0	0	0
2. 2008.....	XXX	0	0	0	0
3. 2009.....	XXX	XXX	0	0	0
4. 2010.....	XXX	XXX	XXX	102	3
5. 2011.....	XXX	XXX	XXX	XXX	1,245

Section B – Other Accident and Health

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

Section C - Credit Accident and Health

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

Section D-

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

NONE

Section E-

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

NONE

Section F-

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

NONE

Section G-

1. 2007.....	0	0	0	0
2. 2008.....	XXX	0	0	0
3. 2009.....	XXX	XXX	0	0
4. 2010.....	XXX	XXX	XXX	0
5. 2011.....	XXX	XXX	XXX	XXX

NONE

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		
2. Ordinary life.....		
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....		
7. Group annuities.....		
8. Group accident and health.....		
9. Credit accident and health.....		
10. Other accident and health.....		
11. Total.....		813
	Development.....	

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Analysis of Increase in Reserves During The Year	7
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 – Part 1 – Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 – Part 2 – Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 – General Expenses	11
Exhibit 3 – Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 – Dividends or Refunds	11
Exhibit 5 – Aggregate Reserve for Life Contracts	12
Exhibit 5 – Interrogatories	13
Exhibit 5A – Changes in Bases of Valuation During The Year	13
Exhibit 6 – Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 – Deposit-Type Contracts	15
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 1	16
Exhibit 8 – Claims for Life and Accident and Health Contracts – Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes to Financial Statements	19
Overflow Page for Write-ins	54
Schedule A – Part 1	E01
Schedule A – Part 2	E02

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17
Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D	E22
Schedule DB – Verification	SI14
Schedule DL - Part 1	E23
Schedule DL - Part 2	E24
Schedule E – Part 1 – Cash	E25
Schedule E – Part 2 – Cash Equivalents	E26
Schedule E – Part 3 – Special Deposits	E27

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule E – Verification Between Years	SI15
Schedule F	36
Schedule H – Accident and Health Exhibit – Part 1	37
Schedule H – Part 2, Part 3, and Part 4	38
Schedule H – Part 5 – Health Claims	39
Schedule S – Part 1 – Section 1	40
Schedule S – Part 1 – Section 2	41
Schedule S – Part 2	42
Schedule S – Part 3 – Section 1	43
Schedule S – Part 3 – Section 2	44
Schedule S – Part 4	45
Schedule S – Part 5	46
Schedule S – Part 6	47
Schedule T – Part 2 Interstate Compact	49
Schedule T – Premiums and Annuity Considerations	48
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	50
Schedule Y – Part 1A - Detail of Insurance Holding Company System	51
Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	52
Summary Investment Schedule	SI01
Summary of Operations	4
Supplemental Exhibits and Schedules Interrogatories	53

