

Amended Explanation Page

On 7/21/16 an amended 2015 Annual Statement was filed for AultCare Health Insuring Corporation. The cash flow (page 6) was amended.



15461201520100105

2015

Document Code: 201

ANNUAL STATEMENT
For the Year Ending DECEMBER 31, 2015
OF THE CONDITION AND AFFAIRS OF THE
AultCare Health Insuring Corporation

NAIC Group Code	4805 (Current Period)	4805 (Prior Period)	NAIC Company Code	15461	Employer's ID Number	46-3305099
Organized under the Laws of	Ohio		State of Domicile or Port of Entry		Ohio	
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[<input type="checkbox"/>] Dental Service Corporation[<input type="checkbox"/>] Other[<input type="checkbox"/>]	Property/Casualty[<input type="checkbox"/>] Vision Service Corporation[<input type="checkbox"/>] Is HMO Federally Qualified? Yes[<input type="checkbox"/>] No[X] N/A[<input type="checkbox"/>]	Hospital, Medical & Dental Service or Indemnity[<input type="checkbox"/>] Health Maintenance Organization[X]			
Incorporated/Organized	07/11/2013		Commenced Business	01/01/2015		
Statutory Home Office	2600 Sixth Street SW (Street and Number)		Canton, OH, 44710 (City or Town, State, Country and Zip Code)			
Main Administrative Office	2600 Sixth Street SW (Street and Number)		Canton, OH, 44710 (Area Code) (Telephone Number)			
Primary Location of Books and Records	2600 Sixth Street SW (Street and Number)		Canton, OH, 44710 (Area Code) (Telephone Number)			
Internet Website Address	www.aultcare.com					
Statutory Statement Contact	Jeffrey Alan Scheatzle (Name) jscheatzle@aultman.com (E-Mail Address)		(330)363-4057 (Area Code)(Telephone Number)(Extension) (330)363-5012 (Fax Number)			

OFFICERS

Name	Title
Rick L. Haines	President
Joseph J. Feltes	Secretary
Mark D. Wright	Treasurer
Edward J. Roth III	Executive Vice President

OTHERS

DIRECTORS OR TRUSTEES

William Wallace M.D.	Gregory A. Haban M.D.
Christopher E. Remark	Edward J. Roth III
Rick L. Haines	Michael A. Rich M.D.
Mark D. Wright	John B. Humphrey Jr., M.D.
Darryl J. Dillenback	Allen Rovner M.D.
Joseph J. Feltes Esq.	Mark N. Rose M.D.

State of Ohio
 County of Stark ss

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of the 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.

(Signature)
 Rick L. Haines
 (Printed Name)
 1.
 President
 (Title)

(Signature)
 Joseph J. Feltes
 (Printed Name)
 2.
 Secretary
 (Title)

(Signature)
 Mark D. Wright
 (Printed Name)
 3.
 Treasurer
 (Title)

Subscribed and sworn to before me this

day of , 2016

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

Yes[] No[X]

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07/21/2016

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(Notary Public Signature)

DIRECTORS OR TRUSTEES (continued)

ANNUAL STATEMENT FOR THE YEAR 2015 OF THE **AultCare Health Insuring Corporation**
CASH FLOW

		1 Current Year	2 Prior Year
Cash from Operations			
1.	Premiums collected net of reinsurance	225,040,803	.....
2.	Net investment income	500,615	4,624
3.	Miscellaneous income .....	.....	.....
4.	TOTAL (Lines 1 through 3)	225,541,418	4,624
5.	Benefit and loss related payments	201,686,471	.....
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	.....	.....
7.	Commissions, expenses paid and aggregate write-ins for deductions	25,532,717	753
8.	Dividends paid to policyholders .....	.....	.....
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)	4,606	.....
10.	TOTAL (Lines 5 through 9)	227,223,795	753
11.	Net cash from operations (Line 4 minus Line 10)	(1,682,376)	3,871
Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:		
12.1	Bonds	5,490,847	473,200
12.2	Stocks	3,239,511	.....
12.3	Mortgage loans .....	.....	.....
12.4	Real estate .....	.....	.....
12.5	Other invested assets .....	.....	.....
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments	50	.....
12.7	Miscellaneous proceeds	1,811,425	.....
12.8	TOTAL Investment proceeds (Lines 12.1 to 12.7)	10,541,833	473,200
13.	Cost of investments acquired (long-term only):		
13.1	Bonds	5,939,463	1,992,495
13.2	Stocks	3,353,872	66,369,349
13.3	Mortgage loans .....	.....	.....
13.4	Real estate .....	.....	.....
13.5	Other invested assets .....	.....	.....
13.6	Miscellaneous applications .....	.....	.....
13.7	TOTAL Investments acquired (Lines 13.1 to 13.6)	9,293,335	68,361,843
14.	Net increase (decrease) in contract loans and premium notes .....	.....	.....
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	1,248,498	(67,888,643)
Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):		
16.1	Surplus notes, capital notes .....	.....	.....
16.2	Capital and paid in surplus, less treasury stock .....	.....	68,069,349
16.3	Borrowed funds .....	.....	.....
16.4	Net deposits on deposit-type contracts and other insurance liabilities .....	.....	.....
16.5	Dividends to stockholders .....	.....	.....
16.6	Other cash provided (applied)	1,153,054	.....
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	1,153,054	68,069,349
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	719,176	184,577
19.	Cash, cash equivalents and short-term investments:		
19.1	Beginning of year	184,577	.....
19.2	End of year (Line 18 plus Line 19.1)	903,753	184,577

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001	Cumulative effect of changes in accounting principles
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