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2016

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QUARTERLY STATEMENT
AS OF MARCH 31, 2016
OF THE CONDITION AND AFFAIRS OF THE
COORDINATED HEALTH MUTUAL, INC.

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	15314	Employer's ID Number	45-4748792	
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"/>]	Property/Casualty[<input checked="" type="checkbox"/>]	Hospital, Medical & Dental Service or Indemnity[<input type="checkbox"/>]				
	Dental Service Corporation[<input type="checkbox"/>]	Vision Service Corporation[<input type="checkbox"/>]	Health Maintenance Organization[<input type="checkbox"/>]				
	Other[<input type="checkbox"/>]	Is HMO Federally Qualified? Yes[<input type="checkbox"/>] No[<input type="checkbox"/>] N/A[<input checked="" type="checkbox"/>]					
Incorporated/Organized	03/22/2012		Commenced Business		09/27/2013		
Statutory Home Office	501 West Schrock Road, Suite 310 (Street and Number)				Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)		
Main Administrative Office	501 West Schrock Road, Suite 310 (Street and Number)				Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)		
	Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)				(614)212-6004 (Area Code) (Telephone Number)		
Mail Address	501 West Schrock Road, Suite 310 (Street and Number or P.O. Box)				Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	501 West Schrock Road, Suite 310 (Street and Number)				Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)		
	Westerville, OH, US 43081 (City or Town, State, Country and Zip Code)				(614)212-6004 (Area Code) (Telephone Number)		
Internet Web Site Address	inhealthohio.org						
Statutory Statement Contact	Christopher William Larkin (Name) clarkin@inhealthohio.org (E-Mail Address)				(614)212-6004 (Area Code)(Telephone Number)(Extension) (800)538-0372 (Fax Number)		

OFFICERS

Name	Title
Christopher William Larkin	CEO #, CFO and Treasurer
Barbara Lynn Freeman M.D.	Chief Medical Officer
Lawrence Joseph Stelzer Jr.	Secretary

OTHERS

DIRECTORS OR TRUSTEES

Nicholas Zaferakes Alexander
Orin Lamont Hall #
Elizabeth Ann Kowalczyk #
Michelle Moskowitz-Brown
Jerry Randall Stephens

Thresa Renee Alexander #
Caryn Blythe Hederman #
Stephen Michael Lundregan
Patrick Andrew O'Donnell
Michael Peter Stinziano

Barbara Lynn Freeman M.D.
Owen Elwood Johnson
Dianne Denise Mosko #
Mark Wilbert Poepelman
Nancy Lee Wilson #

State of Ohio
County of Franklin 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) 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)
Christopher William Larkin
(Printed Name)
1.
CEO #, CFO and Treasurer
(Title)

(Signature)
Lawrence Joseph Stelzer, Jr.
(Printed Name)
2.
Secretary
(Title)

(Signature)
Barbara Lynn Freeman, M.D.
(Printed Name)
3.
Chief Medical Officer
(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[]

(Notary Public Signature)

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	61,395,738		61,395,738	73,502,331
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	7,879,542		7,879,542	7,793,397
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens				
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances)				
4.2 Properties held for the production of income (less \$.....0 encumbrances)				
4.3 Properties held for sale (less \$.....0 encumbrances)				
5. Cash (\$.....7,174,301), cash equivalents (\$.....2,204,655) and short-term investments (\$.....350,547)	9,729,503		9,729,503	12,808,715
6. Contract loans (including \$.....0 premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				0
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	79,004,783		79,004,783	94,104,444
13. Title plants less \$.....0 charged off (for Title insurers only)				
14. Investment income due and accrued	184,795		184,795	176,590
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	899,185	653,527	245,658	951,981
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$.....47,094,391) and contracts subject to redetermination (\$.....0)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	14,407,959		14,407,959	12,941,017
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	124,380	91,484	32,896	38,477
21. Furniture and equipment, including health care delivery assets (\$.....0)	7,742	7,742		
22. Net adjustments in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$.....0) and other amounts receivable	218,086	218,086	0	0
25. Aggregate write-ins for other-than-invested assets	1,415,439	363,311	1,052,128	801,702
26. TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	96,262,368	1,334,150	94,928,218	109,014,211
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. TOTAL (Lines 26 and 27)	96,262,368	1,334,150	94,928,218	109,014,211
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501. Risk adjustment receivable	1,002,128		1,002,128	801,702
2502. Prepaid assets	363,311	363,311		
2503. Other receivables	50,000		50,000	
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	1,415,439	363,311	1,052,128	801,702

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....2,221,341 reinsurance ceded)	43,748,017		43,748,017	29,647,746
2. Accrued medical incentive pool and bonus amounts				
3. Unpaid claims adjustment expenses	1,773,733		1,773,733	1,230,665
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act	2,690,747		2,690,747	31,628,076
5. Aggregate life policy reserves				
6. Property/casualty unearned premium reserve				
7. Aggregate health claim reserves				
8. Premiums received in advance	2,865,722		2,865,722	3,418,658
9. General expenses due or accrued	3,673,792		3,673,792	3,740,127
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))				
10.2 Net deferred tax liability				
11. Ceded reinsurance premiums payable	272,816		272,816	679,630
12. Amounts withheld or retained for the account of others				
13. Remittances and items not allocated				
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)				
15. Amounts due to parent, subsidiaries and affiliates				
16. Derivatives				
17. Payable for securities				
18. Payable for securities lending				
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers)				
20. Reinsurance in unauthorized and certified (\$.....0) companies				
21. Net adjustments in assets and liabilities due to foreign exchange rates				
22. Liability for amounts held under uninsured plans				
23. Aggregate write-ins for other liabilities (including \$.....0 current)	8,786,158		8,786,158	7,009,599
24. Total liabilities (Lines 1 to 23)	63,810,984		63,810,984	77,354,501
25. Aggregate write-ins for special surplus funds	XXX	XXX		611,143
26. Common capital stock	XXX	XXX		
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX		
29. Surplus notes	XXX	XXX	126,408,917	126,408,917
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX		
31. Unassigned funds (surplus)	XXX	XXX	(95,291,683)	(95,360,351)
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$.....0)	XXX	XXX		
32.2 .....0 shares preferred (value included in Line 27 \$.....0)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	31,117,234	31,659,709
34. Total Liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	94,928,218	109,014,211
DETAILS OF WRITE-INS				
2301. Unclaimed funds	509		509	80
2302. Duplicate payment of reinsurance	23,750		23,750	
2303. Risk adjustment payable	8,761,899		8,761,899	7,009,519
2398. Summary of remaining write-ins for Line 23 from overflow page				
2399. TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)	8,786,158		8,786,158	7,009,599
2501. HIP Fees	XXX	XXX		611,143
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX		
2599. TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		611,143
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099. TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total		4 Total
			3 Total	
1. Member Months	XXX	66,882	52,628	255,695
2. Net premium income (including \$.....0 non-health premium income)	XXX	28,604,879	23,108,000	99,208,318
3. Change in unearned premium reserves and reserves for rate credits	XXX			
4. Fee-for-service (net of \$.....0 medical expenses)	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX			
7. Aggregate write-ins for other non-health revenues	XXX			341,371
8. Total revenues (Lines 2 to 7)	XXX	28,604,879	23,108,000	99,549,689
Hospital and Medical:				
9. Hospital/medical benefits		53,267,881	19,607,444	124,437,975
10. Other professional services				
11. Outside referrals				
12. Emergency room and out-of-area				
13. Prescription drugs		4,537,515	2,378,851	16,196,136
14. Aggregate write-ins for other hospital and medical				
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)		57,805,396	21,986,295	140,634,110
Less:				
17. Net reinsurance recoveries		8,047,885	703,540	18,235,140
18. Total hospital and medical (Lines 16 minus 17)		49,757,510	21,282,755	122,398,970
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$.....0 cost containment expenses		1,435,146	1,068,366	8,358,031
21. General administrative expenses		6,586,590	4,789,280	17,624,978
22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only)		(28,937,329)	(392,000)	31,236,076
23. Total underwriting deductions (Lines 18 through 22)		28,841,917	26,748,401	179,618,055
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(237,038)	(3,640,401)	(80,068,366)
25. Net investment income earned		203,727	115,907	592,915
26. Net realized capital gains (losses) less capital gains tax of \$.....0		35,091	1,198	380,244
27. Net investment gains or (losses) (Lines 25 plus 26)		238,818	117,105	973,160
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]		(1,781)	(10,590)	(29,922)
29. Aggregate write-ins for other income or expenses				
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	0	(3,533,886)	(79,125,128)
31. Federal and foreign income taxes incurred	XXX			
32. Net income (loss) (Lines 30 minus 31)	XXX	0	(3,533,886)	(79,125,128)
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX			
0699. TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX			
0701. Refund of Third Party Costs	XXX			341,371
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX			
0799. TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX			341,371
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page				
1499. TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page				
2999. TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year	31,659,709	49,189,633	49,189,633
34. Net income or (loss) from Line 32	0	(3,533,886)	(79,125,128)
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0	86,145	133,987	(453,548)
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax			
39. Change in nonadmitted assets	(628,620)	(128,753)	(477,861)
40. Change in unauthorized and certified reinsurance			
41. Change in treasury stock			
42. Change in surplus notes			62,526,613
43. Cumulative effect of changes in accounting principles			
44. Capital Changes:			
44.1 Paid in			
44.2 Transferred from surplus (Stock Dividend)			
44.3 Transferred to surplus			
45. Surplus adjustments:			
45.1 Paid in			
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			0
47. Aggregate write-ins for gains or (losses) in surplus		116,531	0
48. Net change in capital and surplus (Lines 34 to 47)	(542,475)	(3,412,121)	(17,529,923)
49. Capital and surplus end of reporting period (Line 33 plus 48)	31,117,234	45,777,512	31,659,709
DETAILS OF WRITE-INS			
4701. Restricted surplus - HIP fees		116,531	0
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page			
4799. TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above)		116,531	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations				
1.	Premiums collected net of reinsurance	(1,061,818)	21,376,375	131,767,037
2.	Net investment income	195,210	149,917	715,022
3.	Miscellaneous income			341,371
4.	TOTAL (Lines 1 to 3)	(866,608)	21,526,292	132,823,430
5.	Benefit and loss related payments	8,186,851	9,818,890	140,469,761
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	7,519,017	4,048,037	22,517,612
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses)			
10.	TOTAL (Lines 5 through 9)	15,705,868	13,866,927	162,987,373
11.	Net cash from operations (Line 4 minus Line 10)	(16,572,475)	7,659,365	(30,163,943)
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds	15,634,217	2,002,920	13,978,801
12.2	Stocks			1,119,871
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	7,429		(1,271)
12.7	Miscellaneous proceeds			
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	15,641,646	2,002,920	15,097,401
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	3,499,648	4,253,233	42,432,016
13.2	Stocks			3,900,000
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets			
13.6	Miscellaneous applications		77,357	0
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	3,499,648	4,330,590	46,332,016
14.	Net increase (or decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	12,141,998	(2,327,670)	(31,234,615)
Cash from Financing and Miscellaneous Sources				
16.	Cash provided (applied):			
16.1	Surplus notes, capital notes	0	0	62,526,613
16.2	Capital and paid in surplus, less treasury stock			
16.3	Borrowed funds		5,000	(15,972,304)
16.4	Net deposits on deposit-type contracts and other insurance liabilities			
16.5	Dividends to stockholders			0
16.6	Other cash provided (applied)	1,351,266	829,608	4,044,056
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	1,351,265	834,608	50,598,366
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)	(3,079,212)	6,166,303	(10,800,192)
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	12,808,715	23,608,907	23,608,907
19.2	End of period (Line 18 plus Line 19.1)	9,729,503	29,775,210	12,808,715

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

20.0001				
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	23,968	17,775	6,193							
2. First Quarter	21,821	16,437	5,384							
3. Second Quarter										
4. Third Quarter										
5. Current Year										
6. Current Year Member Months	66,882	48,854	18,028							
Total Member Ambulatory Encounters for Period:										
7. Physician	21,278	16,632	4,646							
8. Non-Physician	17,083	13,107	3,976							
9. Total	38,361	29,739	8,622							
10. Hospital Patient Days Incurred	1,408	1,194	214							
11. Number of Inpatient Admissions	315	257	58							
12. Health Premiums Written (a)	30,660,944	20,837,200	9,823,744							
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	29,813,881	20,491,197	9,322,684							
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services	43,583,659	33,568,845	10,014,814							
18. Amount Incurred for Provision of Health Care Services	57,805,396	45,372,060	12,433,336							

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$.....0.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**Aging Analysis of Unpaid Claims**

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 days	6 Over 120 Days	7 Total
0199999 Individually Listed Claims Unpaid
0299999 Aggregate Accounts Not Individually Listed - Uncovered
0399999 Aggregate Accounts Not Individually Listed - Covered
0499999 Subtotals
0599999 Unreported claims and other claim reserves	45,969,358
0699999 Total Amounts Withheld
0799999 Total Claims Unpaid	45,969,358
0899999 Accrued Medical Incentive Pool And Bonus Amounts

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1+3)	6 Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital & medical)	19,966,670	15,690,445	11,887,874	31,860,143	31,854,544	29,647,746
2. Medicare Supplement						
3. Dental only						
4. Vision only						
5. Federal Employees Health Benefits Plan						
6. Title XVIII - Medicare						
7. Title XIX - Medicaid						
8. Other health						
9. Health subtotal (Lines 1 to 8)	19,966,670	15,690,445	11,887,874	31,860,143	31,854,544	29,647,746
10. Healthcare receivables (a)						
11. Other non-health						
12. Medical incentive pools and bonus amounts						
13. Totals (Lines 9 - 10 + 11 + 12)	19,966,670	15,690,445	11,887,874	31,860,143	31,854,544	29,647,746

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

Notes to Financial Statement

1. Summary of Significant Accounting Policies

A. Accounting Practices

The accompanying financial statements of Coordinated Health Mutual, Inc. (Company) have been prepared on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The state of Ohio requires insurance companies domiciled in the state of Ohio to prepare their statutory financial statements in accordance with the National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* subject to any deviations prescribed or permitted by the Ohio Insurance Department. The Company does not have any permitted practices inconsistent with the NAIC practices.

Reconciliations of net income and policyholders' surplus between the amounts reported in the accompanying financial statements (OH basis) and NAIC SAP follow:

	State of Domicile	2016	2015
NET INCOME			
(1) State basis (Page 4, Line 32, Columns 2 & 3)	OH	-0-	(79,125,128)
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:			
(3) State Permitted Practices that increase/(decrease) NAIC SAP:			
(4) NAIC SAP (1-2-3=4)	OH	-0-	(79,125,128)
SURPLUS			
(5) State basis (Page 3, Line 33, Columns 3 & 4)	OH	31,117,234	31,659,709
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:			
(7) State Permitted Practices that increase/(decrease) NAIC SAP:			
(8) NAIC SAP (5-6-7=8)	OH	31,117,234	31,659,709

B. Use of Estimates

The preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in these financial statements and notes. Actual results could differ from these estimates.

C. Accounting Policies

Expenses incurred in connection with acquiring new insurance business, including acquisitions costs such as sales commissions, are charged to operations as incurred. Costs representing management fees, consultant fees and other direct expenses of the Company are also expensed as incurred.

Net investment income consists primarily of interest income less related investment expenses and is recognized on an accrual basis.

Short-term investments and investment grade bonds are stated at amortized cost.

Investments in equity-based diversified mutual funds are stated at market value.

Loan-backed securities are stated at either amortized cost or the lower of amortized cost or fair value. The retrospective adjustment method is used to value all securities, except for interest only securities or securities where the yield had become negative, that are valued using the prospective method.

The Company used investment income as a factor in the premium deficiency reserve calculation.

2. Accounting Changes and Corrections of Errors – Not applicable

3. Business Combinations and Goodwill – Not applicable

4. Discontinued Operations – Not applicable

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans – Not applicable
- B. Debt Restructuring – Not applicable
- C. Reverse Mortgages – Not applicable

Notes to Financial Statement

- D. Loan-Backed Securities – Prepayment assumptions for mortgage-backed/loan-backed securities were obtained from Interactive Data Corporation (IDC). There were no other-than-temporary impairments for the loan-backed securities.
- E. Repurchase Agreements and/or Securities Lending Transactions – Not applicable
- F. Real Estate – Not applicable
- G. Investments in Low Income Housing Credits – Not applicable
- H. Restricted Assets – Not applicable
- I. Working Capital Finance Investments – Not applicable
- J. Offsetting and Netting of Assets and Liabilities – Not applicable
- K. Structured Notes – Not applicable

6. Joint Ventures, Partnerships and Limited Liability Companies – Not applicable

7. Investment Income

- A. There was no due and accrued investment income excluded from surplus.
- B. The total amount excluded is zero.

8. Derivative Instruments – Not applicable

9. Income Taxes

The Company is currently organized as a not-for-profit mutual company in the State of Ohio. Section 501(c)(29), added to the Code by Section 1322(h)(1) of the Affordable Care Act, provides for the exemption of qualified nonprofit health insurance issuers (QNHII) that have received a loan or grant under the CMS Co-Op program for periods that they meet both the requirements of §1322 of the Affordable Care Act and of any loan agreement with The Centers for Medicare & Medicaid Services (CMS).

Management believes that the Company remains in compliance with the general requirements of the IRS as stated above. The Company received an IRS determination letter confirming tax exempt status as a Section 501(c)(29) entity dated August 14, 2013.

The Company is tax exempt and therefore, Sections A – G are not applicable.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties – Not applicable

11. Debt

- A. During the period ended December 31, 2012, the Company was awarded a \$15,977,304 CO-OP Start-up Loan (Series A) as evidenced by a Loan Agreement with the U. S. Department of Health and Human Services, Centers for Medicare and Medicaid Services (CMS). In addition, the Loan Agreement with CMS provides for a Co-Op Solvency Loan (Series B) in the amount of \$113,248,300. Under terms of the Loan Agreement, CMS has disbursed \$15,977,304 as of March 31, 2016 for start-up costs under the loan provisions for Series A.

Initial disbursements for the Series B in the amount of \$110,431,613 have been received by the Company as of March 31, 2016 to satisfy the unencumbered equity requirement for the Ohio Department of Insurance. Additional disbursements for the remaining Series B funds in the amount of \$2,816,687 could be expected as the Company continues operations and risk based capital measures dictate under the terms of the Loan Agreement.

The Series A loan and the Series B loan comprise the “Loans”. The Loans are intended to permit the Company to offer health insurance plans primarily in the individual and small group markets as described in 45 CFR Part 156. The Company agrees to perform all functions necessary to design, implement, and operate a CO-OP Qualified Health Plan (QHP) as set forth in the CO-OP Funding Opportunity Announcement (FOA) and consistent with the Company’s FOA proposal and approved Business Plan.

The Company has agreed that each of the Loans and all obligations arising under the Loan Agreement pertaining to the Loans, whether now, existing, or arising in the future, shall be and are hereby expressly cross-defaulted and cross-collateralized with each other, such that the occurrence of any event of default under any of the obligations shall be a default under all obligations and under all documents and instruments evidencing and/or securing the obligations.

Notes to Financial Statement

The Company shall make principal and interest payments as stated in the Loan Agreement. The Start-up loan (Series A) is interest free, and is due no later than 5 years from the date of each disbursement received. The Solvency (Series B) bears interest at 0.34%, is classified for statutory insurance accounting as a Surplus Note, and is due not later than 15 years from the date of each disbursement date subject to the Company continuing to satisfy certain financial requirements. These financial requirements include Ohio insurance company capital and surplus requirements, capital and surplus at a level of 500% of Risk Based Capital, as defined by the National Association of Insurance Commissioners (NAIC) and prior written approval from the Ohio Department of Insurance to issue payment on the Surplus Note. Under terms of the Surplus Note, no payments are due for any disbursements made through 2018 until 2019. Beginning in 2019, interest only is due annually for a period of 7 years. In year 8, the earliest of which would be the year 2026, a series of 8 equal annual payments that include interest and principal are due each year based on the full amortization of the remaining unpaid principal over the remaining term.

At March 31, 2016, there was no interest due or accrued on the Solvency Loan (Series B) consistent with the surplus note provisions of the Loan Agreement and consistent with the surplus note provisions of the statutory accounting guidance of the NAIC.

In September 2015, the Company requested CMS to amend the Series A start-up loan terms to recharacterize these funds as surplus notes similar to the Solvency Series B loan funds. All other terms of the Series A funds remain unchanged. CMS executed this amendment in December in the amount of \$15,977,304.

Funds received to date under the Loan Agreement are summarized in the table below:

Date	Series A		Series B	
	<u>Disbursement</u>	<u>Cumulative</u>	<u>Disbursement</u>	<u>Cumulative</u>
October 2012	\$ 1,537,739	\$ 1,537,739		
January 2013	\$ 392,382	\$ 1,930,121		
February 2013	\$ 362,261	\$ 2,292,382		
March 2013	\$ 398,183	\$ 2,690,565		
May 2013			\$ 7,404,425	\$ 7,404,425
August 2013	\$ 6,005,044	\$ 8,695,609		
September 2013			\$ 56,477,879	\$ 63,882,304
December 2013	\$ 4,546,695	\$13,242,304		
March 2014	\$ 2,485,000	\$15,727,304		
June 2014	\$ 210,000	\$15,937,304		
September 2014	\$ 25,000	\$15,962,304		
December 2014	\$ 10,000	\$15,972,304		
March 2015	\$ 5,000	\$15,977,304		
November 2015			\$ 46,549,309	\$110,431,613
December 2015	(\$15,977,304)	-0-	\$ 15,977,304	\$126,408,917

B. FHLB (Federal Home Loan Bank) Agreements – Not applicable

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

Effective January 1, 2014, the Company sponsored a defined contribution (IRS Section 401K) plan for all eligible employees. Under the terms of the Plan, employees are eligible to contribute on either a pretax or post tax basis 1-90% of their compensation to the Plan subject to annual maximum contribution limitations established by the IRS. The contributions accumulate for their eventual retirement in a wide variety of diversified investment options to be selected by each employee. The Company will match 100% of the employee's contribution up to a maximum of 4% of compensation. All contributions are vested immediately to the employee. The Company pays for all Plan administration. All of the Company's obligations for matching contributions, or administrative costs through March 31, 2016 have been subsequently funded by the Company.

The Company provides full time employees with paid time off (PTO) during the calendar year subject to company guidelines. At December 31, employees are permitted to carryover accumulated but unused paid time off (PTO) to be utilized in the following year subject to limitations and guidelines established by the Company. At March 31, 2016, the Company has accrued \$91,000 for PTO earned but not utilized to date.

The Company has no defined benefit plans and therefore, Sections A – I are not applicable.

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

- (1) Number of shares is zero.
- (2) No dividends are paid.
- (3) There are no dividend restrictions.
- (4) No dividends have been paid.
- (5) No ordinary dividends are payable to stockholders.

Notes to Financial Statement

- (6) The Company is a nonprofit mutual company and has no stock outstanding. The Company began earning premium revenue in January 1, 2014, which is the first effective date of health insurance products provided to individuals and small groups. In preparation for the 2014 insurance products being offered and as a result of ongoing operations, the Company has received Series A and B loan disbursements in total of \$126,408,917 beginning in 2013 that remain outstanding as of March 31, 2016. The Series B and Series A loan as amended in December 2015, are considered surplus notes and are structured so that they meet the definition of capital and surplus within the risk based capital provisions of the state insurance law.
- (7) The total amount of advances to surplus not repaid is zero.
- (8) No stock is held by the reporting entity.
- (9) Changes in balances of special surplus funds from the prior year are due to the recognition of Health Insurance Plan fees payable for the current year.
- (10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is an \$86,145 gain at March 31, 2016.
- (11) Surplus Notes – See Note 11 above.
- (12) There was no quasi-reorganization.
- (13) Since there was no quasi-reorganization, there is no effective date to report.

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments – Not applicable
- B. Assessments – Not applicable
- C. Gain Contingencies – Not applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits – Not applicable
- E. Joint and Several Liabilities – Not applicable
- F. All Other Contingencies – Not applicable

15. Leases

- A. Lessee Operating Lease

The Company currently occupies leased office space pursuant to an agreement that was executed on December 1, 2012 and was effective through December 1, 2015. In November, 2015 this lease term was extended until December 1, 2016. A deposit of \$7,057 was made by the Company upon entering the lease agreement. As of March 31, 2016, noncancelable lease commitments are shown in the table below:

	2016	TOTAL
Total Lease Commitment	\$57,713	\$57,713

- B. Lessor Leases – Not applicable

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk – Not applicable

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities – Not applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans Not applicable

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators – The total premium written/produced by managing general agents through March 31, 2016, is zero.

20. Fair Value Measurements

Items Measured at Fair Value by Levels 1, 2 and 3.

The Company has categorized its assets and liabilities that are reported on the balance sheet at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level fair value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows.

Level 1 – Quoted Prices in Active Markets for Identical Assets and Liabilities: This category, for items measured at fair value on a recurring basis, includes exchange-traded common stocks, mutual funds, and most U.S. Government securities. The estimated fair value of the securities within this category are based on quoted prices in active markets and are therefore classified as Level 1.

Notes to Financial Statement

Level 2 – Significant Other Observable Inputs: This category, for items measured at fair value on a recurring basis, includes bonds which are not exchange traded and common stock of a subsidiary which is valued using an adjusted market method. The primary inputs to the estimated fair value of the securities within this category include quoted prices for identical or similar assets in markets that are not active, contractual cash flows, benchmark yields and credit spreads.

Level 3 – Significant Unobservable Inputs: This category is for items whose values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement. These inputs reflect management's own assumptions about the assumptions a market participant would use in pricing the asset or liability. The Company has no Level 3 assets.

A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Bonds				
U.S. Governments	35,213,701	791,752		36,005,453
Industrial and Misc		25,762,656		25,762,656
Total Bonds	35,213,701	26,554,408		61,768,109
Common Stock				
Industrial and Misc	7,879,542			7,879,542
Parent, Subsidiaries and Affiliates				
Total Common Stocks	7,879,542			7,879,542
Short Term				
U.S. Governments				
Industrial and Misc	350,547			350,547
Total Short Term	350,547			350,547
Cash Equivalents	2,204,655			2,204,655
Total assets at fair value	45,648,445	26,554,408		72,202,853
b. Liabilities at fair value				
Derivative liabilities				
Total liabilities at fair value				

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

Description	Beginning Balance at 01/01/2014	Transfers into Level 3	Transfers out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2014
a. Assets										
Loan-Backed and Structured Securities (NAIC 3-6)										
Residential mortgaged-backed Securities										
Commercial Mortgaged-Backed Securities										
Derivative										
Credit Contracts										
Other Fund Investments										
Hedge Fund High-Yield Debt Securities					NONE					
Private Equity										
Total Assets										
b. Liabilities										
Total Liabilities										

B. Not Required

C.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Long Term Bonds	61,768,109	61,395,738	35,213,701	26,554,408		
Common Stock	7,879,542	7,879,542	7,879,542			
Cash Equivalents and Short Term	2,555,202	2,555,202	2,555,202			
Total	72,202,853	71,830,482	45,648,445	26,554,408		

Notes to Financial Statement

D. Not Practicable to Estimate Fair Value

21. Other Items – Not applicable

22. Events Subsequent – Not applicable

23. Reinsurance

- A. The Company has contracted with Partner Re America Insurance Company (Partner Re) to provide reinsurance coverage on all Group and Individual insurance contracts issued by the Company in 2014, 2015 and 2016. The more significant terms under the 2014 contract include, a deposit funded by the Company of \$50,000, a ceding commission of 15.7% and a related allowance to fund the Company's marketing efforts of \$500,000 funded by Partner Re, and a specific excess of loss agreement where Partner Re reimburses the Company for 90% of all covered benefit expenses in excess of \$215,000 for Group insurance contracts and \$250,000 for Individual insurance contracts. A contract was put in place for 2015 so that Partner Re reimburses the Company 90% of all covered benefit expenses in excess of \$250,000 for group and individual insurance contracts with incident dates in 2015. A new contract was put in place for 2016 consistent with the 2015 contract except Partner Re reimburses the Company 90% of all covered benefit expenses in excess of \$300,000 for group and individual insurance contracts with incident dates in 2016.
- B. Uncollectible Reinsurance – Not applicable
- C. Commutation of Ceded Reinsurance – Not applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation – Not applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Accrued retrospective premium adjustments associated with the Risk Adjustment provisions of the ACA are estimated by consulting actuaries utilizing the most current data and information available for the Company and the statewide averages for premiums, claims and risk scores.
- B. Accrued retrospective premiums associated with the Risk Adjustment provisions of the ACA are recorded as an adjustment to earned premium.
- C. The Company reported \$32,212,898 direct premiums written virtually all of which are subject to retrospective premiums associated with the Risk Adjustment provisions of the ACA.
- D. The Company reported no medical loss ratio rebates required pursuant to the Public Health Service Act for 2015 and 2014.
- E. Risk Sharing Provisions of the Affordable Care Act
 - (1) Did the reporting entity write accident and health insurance premium which is subject to

The Company had zero balances for the risk corridors program due to a lack of sufficient data to estimate the

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Group Year

Description	Amount
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	1,002,127
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	25,806
3. Premium adjustments payable due to ACA Risk Adjustment	8,761,899
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	1,551,955
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	5,351

Notes to Financial Statement

b. Transitional ACA Reinsurance Program										
Assets										
1. Amounts recoverable for claims paid due to ACA Reinsurance										11,671,345
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)										1,806,160
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance										-0-
Liabilities										
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium										103,450
5. Ceded reinsurance premiums payable due to ACA Reinsurance										272,816
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance										-0-
Operations (Revenue & Expense)										
7. Ceded reinsurance premiums due to ACA Reinsurance										109,922
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments										3,975,702
9. ACA Reinsurance contributions – not reported as ceded premium										40,563
c. Temporary ACA Risk Corridors Program										
Assets										
1. Accrued retrospective premium due to ACA Risk Corridors										-0-
Liabilities										
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors										-0-
Operations (Revenue & Expense)										
3. Effect of ACA Risk Corridors on net premium income (paid/received)										-0-
4. Effect of ACA Risk Corridors on change in reserves for rate credits										-0-

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year	Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
		1 Receivable	2 (Payable)	3 Receivable	4 (Payable)	5 Receivable	6 (Payable)	7 Receivable	8 (Payable)	Cumulative Balance from Prior Years (Col 1 - 3 + 7)
										Cumulative Balance from Prior Years (Col 2 - 4 + 8)
a. Permanent ACA Risk Adjustment Program										
1. Premium adjustments receivable	801,702					801,702			A	801,702
2. Premium adjustments (payable)		7,029,975					7,029,975		B	7,029,975
3. Subtotal ACA Permanent Risk Adjustment Program	801,702	7,029,975			801,702	7,029,975				801,702
b. Transitional ACA Reinsurance Program										
1. Amounts recoverable for claims paid	10,734,279		2,980,286		7,753,993		808,545		C	8,562,538
2. Amounts recoverable for claims unpaid (contra liability)		1,747,810			1,747,810		58,350		D	1,806,160
3. Amounts receivable relating to uninsured plans									E	
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium		223,498		167,623		55,875			F	55,875
5. Ceded reinsurance premiums payable		679,630		509,723		169,907			G	169,907
6. Liability for amounts held under uninsured plans									H	
7. Subtotal ACA Transitional Reinsurance Program	12,482,089	903,128	2,980,286	677,346	9,501,803	225,782	866,895			10,368,698
c. Temporary ACA Risk Corridors Program										225,782
1. Accrued retrospective premium									I	-0-
2. Reserve for rate credits or policy experience rating refunds									J	-0-
3. Subtotal ACA Risk Corridors Program	-0-	-0-	-0-	-0-	-0-	-0-	-0-			-0-
d. Total for ACA Risk Sharing Provisions	13,283,791	7,933,103	2,980,286	677,346	10,303,505	7,255,757	866,895			11,170,400
										7,255,757

Explanation of Adjustments

A.

B.

C. Additional 2015 recoverable due on paid claims.

D. Additional 2015 recoverable due on unpaid claims.

E.

F.

G.

H.

I.

J.

Notes to Financial Statement

F. Risk Sharing Provisions of the Affordable Care Act

(4) Roll forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year	Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date	
				Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 +7)	Cumulative Balance from Prior Years (Col 2 - 4 +8)
		1 Receivable	2 (Payable)	3 Receivable	4 (Payable)	5 Receivable	6 (Payable)	7 Receivable	8 (Payable)
a. 2014									
1. Accrued retrospective premium	-0-				-0-		-0-	A	-0-
2. Reserve for rate credits of policy experience rating refunds		-0-				-0-		B	-0-
b. 2015									
1. Accrued retrospective premium	-0-		-0-		-0-		-0-	C	-0-
2. Reserve for rate credits of policy experience rating refunds		-0-		-0-		-0-		D	-0-
c. 2016									
1. Accrued retrospective premium	-0-		-0-			-0-		I	-0-
2. Reserve for rate credits of policy experience rating refunds		-0-		-0-			-0-	J	-0-
d. Total for Risk Corridors	-0-	-0-	-0-	-0-	-0-	-0-	-0-		-0-

Explanation of Adjustments

A.
B.
C.
D.
E.
F.
G.
H.
I.

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4-5)
a. 2014	-0-	-0-	-0-	-0-	-0-	-0-
b. 2015	-0-	32,284,511	-0-	-0-	-0-	-0-
c. 2016	-0-	14,809,880	-0-	-0-	-0-	-0-
d. Total (a+b+c)	-0-	47,094,391	-0-	-0-	-0-	-0-

25. Change in Incurred Claims and Claim Adjustment Expenses

Incurred Claims:

Net reserves as of December 31, 2015 were \$29,647,746. As of March 31, 2016, \$19,966,670 has been paid net of \$6,459,603 reinsurance recoveries for incurred claims attributable to insured events of prior years. Net reserves remaining for prior years (net of health care receivables and reinsurance recoverable amounts) are now a net liability of \$11,887,874 as a result of the re-estimation of unpaid claims expenses principally on the individual and small group lines of business. Therefore, there has been a \$2,206,798 unfavorable prior-year development (net of reinsurance and health care receivables) since December 31, 2015 through March 31, 2016. The increase is generally the result of ongoing analysis of recent loss development trends and the subsequent payments of a few large claims. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

Claims Adjustment Expenses:

Claim adjustment reserves as of December 31, 2015 were \$1,230,665. As of March 31, 2016, \$798,667 has been paid for claims adjustment expenses attributable to insured events of prior years. Claims adjustment reserves remaining for prior years are now \$475,515 as a result of the re-estimation of unpaid claims adjustment expenses principally on the individual and small group lines of business. Therefore, there has been an \$88,272 unfavorable prior-year development on claims adjustment expenses since December 31, 2015 through March 31, 2016. The increase is generally the result of ongoing analysis of recent loss development trends and the recent payments of a few large claims. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements – Not applicable

27. Structured Settlements – Not applicable

Notes to Financial Statement

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
3/31/2016	-0-				
12/31/2015	-0-				
9/30/2015	115,278				
6/30/2015	9,452	66,735			
3/31/2015	4,893	34,397			
12/31/2014	12,085	10,151			120
09/30/2014		12,085			11,345
06/30/2014		5,691			1,030
03/31/2014		3,355			2,841

B. Risk Sharing Receivables – Not Applicable

29. Participating Policies – Not applicable

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$ 2,690,747
2. Date of the most recent evaluation of this liability	12/31/2015
3. Was anticipated investment income utilized in the calculation? (Yes / No)	Yes

31. Anticipated Salvage and Subrogation – Not applicable

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**
GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes[] No[X]
Yes[] No[] N/A[X]

1.2 If yes, has the report been filed with the domiciliary state?

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

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes[] No[X]

 If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes[] No[X]

3.3 If the response to 3.2 is yes, provide a brief description of those changes:

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

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

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes[] No[] N/A[X]

 If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 04/22/2016

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/01/2016

6.4 By what department or departments?

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

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

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

7.2 If yes, give full information

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

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

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

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

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
.....	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]	Yes[] No[X]

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

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

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

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

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

 (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

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

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

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

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

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

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes[] No[X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$..... 0

13. Amount of real estate and mortgages held in short-term investments: \$..... 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes[] No[X]

GENERAL INTERROGATORIES (Continued)

INVESTMENT

14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	0	.....
14.22 Preferred Stock .....	.....	.....
14.23 Common Stock .....	.....	.....
14.24 Short-Term Investments .....	.....	.....
14.25 Mortgages Loans on Real Estate .....	.....	.....
14.26 All Other .....	.....	.....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	0	.....
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	0	.....

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes No

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

If no, attach a description with this statement.

Yes No N/A

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:

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

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes No

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

1 Name of Custodian(s)	2 Custodian Address
Huntington National Bank	41 South High St., Columbus, OH 43215

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

Yes No

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

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

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

1 Central Registration Depository	2 Name(s)	3 Address
16986	Huntington National Bank	41 South High St., Columbus, OH 43215

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?

Yes No

18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent	.....	77.803%
1.2 A&H cost containment percent	.....	5.010%
1.3 A&H expense percent excluding cost containment expenses	.....	23.026%

2.1 Do you act as a custodian for health savings accounts?

Yes[] No[X]

\$..... 0

2.2 If yes, please provide the amount of custodial funds held as of the reporting date.

Yes[] No[X]

2.3 Do you act as an administrator for health savings accounts?

\$..... 0

2.4 If yes, please provide the balance of the funds administered as of the reporting date.

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
				N O N E				

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**Current Year to Date - Allocated by States and Territories**

State, Etc.	1 Active Status	Direct Business Only							
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums and Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 Through 7	9 Deposit-Type Contracts
1. Alabama (AL)	N								
2. Alaska (AK)	N								
3. Arizona (AZ)	N								
4. Arkansas (AR)	N								
5. California (CA)	N								
6. Colorado (CO)	N								
7. Connecticut (CT)	N								
8. Delaware (DE)	N								
9. District of Columbia (DC)	N								
10. Florida (FL)	N								
11. Georgia (GA)	N								
12. Hawaii (HI)	N								
13. Idaho (ID)	N								
14. Illinois (IL)	N								
15. Indiana (IN)	N								
16. Iowa (IA)	N								
17. Kansas (KS)	N								
18. Kentucky (KY)	N								
19. Louisiana (LA)	N								
20. Maine (ME)	N								
21. Maryland (MD)	N								
22. Massachusetts (MA)	N								
23. Michigan (MI)	N								
24. Minnesota (MN)	N								
25. Mississippi (MS)	N								
26. Missouri (MO)	N								
27. Montana (MT)	N								
28. Nebraska (NE)	N								
29. Nevada (NV)	N								
30. New Hampshire (NH)	N								
31. New Jersey (NJ)	N								
32. New Mexico (NM)	N								
33. New York (NY)	N								
34. North Carolina (NC)	N								
35. North Dakota (ND)	N								
36. Ohio (OH)	L	31,213,881							.31,213,881
37. Oklahoma (OK)	N								
38. Oregon (OR)	N								
39. Pennsylvania (PA)	N								
40. Rhode Island (RI)	N								
41. South Carolina (SC)	N								
42. South Dakota (SD)	N								
43. Tennessee (TN)	N								
44. Texas (TX)	N								
45. Utah (UT)	N								
46. Vermont (VT)	N								
47. Virginia (VA)	N								
48. Washington (WA)	N								
49. West Virginia (WV)	N								
50. Wisconsin (WI)	N								
51. Wyoming (WY)	N								
52. American Samoa (AS)	N								
53. Guam (GU)	N								
54. Puerto Rico (PR)	N								
55. U.S. Virgin Islands (VI)	N								
56. Northern Mariana Islands (MP)	N								
57. Canada (CAN)	N								
58. Aggregate other alien (OT)	XXX								
59. Subtotal	XXX	31,213,881							.31,213,881
60. Reporting entity contributions for Employee Benefit Plans	XXX								
61. Total (Direct Business)	(a) 1	31,213,881							.31,213,881

DETAILS OF WRITE-INS

58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX								
58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX								

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

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

15 Schedule Y - Part 1 **NONE**

16 Schedule Y Part 1A - Detail of Insurance Holding Company System **NONE**

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your 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.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

No

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement



1531420163650001

2016

Document Code: 365

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
2304. ....	.....	.....	.....	.....
2397. Summary of remaining write-ins for Line 23 (Lines 2304 through 2396) .....	.....	.....	.....	.....
2597. Summary of remaining write-ins for Line 25 (Lines 2504 through 2596)	XXX	XXX	XXX	XXX
3097. Summary of remaining write-ins for Line 30 (Lines 3004 through 3096)	XXX	XXX	XXX	XXX

STATEMENT AS OF **March 31, 2016** OF THE **COORDINATED HEALTH MUTUAL, INC.**
SCHEDULE A - VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year
2. Cost of acquired:
2.1 Actual cost at time of acquisition
2.2 Additional investment made after acquisition
3. Current year change in encumbrances
4. Total gain (loss) on disposals
5. Deduct amounts received on disposals
6. Total foreign exchange change in book/adjusted carrying value
7. Deduct current year's other-than-temporary impairment recognized
8. Deduct current year's depreciation
9. Book/adjusted carrying value at the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)
10. Deduct total nonadmitted amounts
11. Statement value at end of current period (Line 9 minus Line 10)

N O N E

SCHEDULE B - VERIFICATION
Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year
2. Cost of acquired:
2.1 Actual cost at time of acquisition
2.2 Additional investment made after acquisition
3. Capitalized deferred interest and other
4. Accrual of discount
5. Unrealized valuation increase (decrease)
6. Total gain (loss) on disposals
7. Deduct amounts received on disposals
8. Deduct amortization of premium and mortgage interest points
9. Total foreign exchange change in book value/recorded investment
10. Deduct current year's other than temporary impairment recognized
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)
12. Total valuation allowance
13. Subtotal (Line 11 plus Line 12)
14. Deduct total nonadmitted amounts
15. Statement value at end of current period (Line 13 minus Line 14)

SCHEDULE BA - VERIFICATION
Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION
Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	81,295,728	50,240,349
2. Cost of bonds and stocks acquired	3,499,648	46,332,016
3. Accrual of discount	15,086	43,699
4. Unrealized valuation increase (decrease)	86,145	(453,548)
5. Total gain (loss) on disposals	27,662	381,515
6. Deduct consideration for bonds and stocks disposed of	15,634,216	15,098,672
7. Deduct amortization of premium	14,773	149,631
8. Total foreign exchange change in book/adjusted carrying value .....	.....	.....
9. Deduct current year's other than temporary impairment recognized .....	.....	.....
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	69,275,280	81,295,728
11. Deduct total nonadmitted amounts .....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11)	69,275,280	81,295,728

SCHEDULE D - PART 1B
Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	76,503,113	24,325,140	41,098,804	2,159	59,731,609			76,503,113
2. NAIC 2 (a)	3,013,841		1,000,318	(1,847)	2,011,677			3,013,841
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	79,516,955	24,325,140	42,099,122	312	61,743,286			79,516,955
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	79,516,955	24,325,140	42,099,122	312	61,743,286			79,516,955

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1**Short - Term Investments**

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals	350,547	XXX	350,547	337	

SCHEDULE DA - Verification**Short-Term Investments**

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	6,014,623	20,662,739
2. Cost of short-term investments acquired	20,825,491	99,379,408
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	7,429	(1,271)
6. Deduct consideration received on disposals	26,496,996	113,988,514
7. Deduct amortization of premium		37,739
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	350,547	6,014,623
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	350,547	6,014,623

SI04 Schedule DB - Part A Verification **NONE**

SI04 Schedule DB - Part B Verification **NONE**

SI05 Schedule DB Part C Section 1 **NONE**

SI06 Schedule DB Part C Section 2 **NONE**

SI07 Schedule DB - Verification **NONE**

SCHEDULE E - Verification
(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	4,403,402	370,585
2. Cost of cash equivalents acquired	18,001,283	49,393,609
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals	20,200,030	45,338,162
7. Deduct amortization of premium		22,630
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9)	2,204,655	4,403,402
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	2,204,655	4,403,402

E01 Schedule A Part 2 **NONE**

E01 Schedule A Part 3 **NONE**

E02 Schedule B Part 2 **NONE**

E02 Schedule B Part 3 **NONE**

E03 Schedule BA Part 2 **NONE**

E03 Schedule BA Part 3 **NONE**

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments									
912828P20 ..	UNITED STATES TREAS NTS		02/09/2016 ..	FTN FINANCIAL SECURITIES CORP	XXX	1,001,406	1,000,000	206	1
912828UR9 ..	UNITED STATES TREAS NTS		02/29/2016 ..	RBC Capital Markets	XXX	2,498,242	2,500,000	51	1
0599999 Subtotal - Bonds - U.S. Governments					XXX	3,499,648	3,500,000	257	XXX
8399997 Subtotal - Bonds - Part 3					XXX	3,499,648	3,500,000	257	XXX
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX
8399999 Subtotal - Bonds					XXX	3,499,648	3,500,000	257	XXX
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX
9899999 Subtotal - Preferred and Common Stocks					XXX		XXX		XXX
9999999 Total - Bonds, Preferred and Common Stocks					XXX	3,499,648	XXX	257	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

SCHEDULE D - PART 4**Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter**

1 CUSIP Identification	2 Description	3 F o r e i g n Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/ Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/ Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/ Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)		
									11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B/A.C.V. (11 + 12 - 13)	15 Total Foreign Exchange Change in B/A.C.V.									
Bonds - U.S. Governments																						
38377NSMT	GNMA REMIC TRUST 2010-167	03/20/2016	PRINCIPAL RECEIPT	XXX	10,979	10,979	11,841	11,684	(705)	618	521	(705)	618	10,979	2,000,000	2,000,000	82	09/20/2023	1			
91282BB82	UNITED STATES TREAS NTS	02/29/2016	MATURITY	XXX	2,000,000	2,000,000	1,992,656	1,993,382										2,500	02/29/2016	1		
91282BC40	UNITED STATES TREAS NTS	03/31/2016	MATURITY	XXX	2,000,000	2,000,000	1,995,746	1,999,479										3,484	03/31/2016	1		
91282SC5	UNITED STATES TREAS NTS	01/25/2016	BANCAMERICA SEC INC (BK/AMER N)	XXX	2,504,883	2,500,000	2,503,223	2,503,033			(182)		(182)		2,502,850		2,032	2,032	10,640	01/31/2017	1	
0599999 Subtotal - Bonds - U.S. Governments				XXX	6,515,862	6,510,979	6,503,466	6,513,578			252		252		6,513,829		2,032	2,032	16,706	XXX	XXX	
Bonds - U.S. Special Revenue, Special Assessment																						
3134G3N63	FEDERAL HOME LN MTG CORP	01/25/2016	STIFEL NICOLAUS CO.	XXX	2,500,725	2,500,000	2,501,725	2,500,000							2,500,000	725	725	6,875	01/17/2018	1		
3130A0C65	FEDERAL HOME LOAN BANKS	01/13/2016	PIPER JAFFRAY	XXX	998,100	1,000,000	994,210	997,905			70		70		997,975	125	125	278	12/28/2016	1		
3135G0G72	FEDERAL NATL MTG ASSN	02/17/2016	BNY/SUNTRUST CAPITAL	XXX	2,004,880	2,000,000	1,988,640	1,989,015			466		466		1,989,481	15,399	15,399	4,000	12/14/2018	1		
3135G0WJ8	FEDERAL NATL MTG ASSN	03/17/2016	PERSHING LLC	XXX	998,850	1,000,000	993,940	994,256			501		501		994,757	4,093	4,093	2,844	05/21/2018	1		
3137BADW9	FHLMC REMIC SERIES 4323	03/15/2016	PRINCIPAL RECEIPT	XXX	12,824	12,824	13,209	13,206			(382)		(382)		12,824	62	62	62	06/15/2040	1		
3199999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment				XXX	6,515,379	6,512,824	6,491,724	6,494,382			655		655		6,495,037		20,342	20,342	14,059	XXX	XXX	
Bonds - Industrial and Miscellaneous (Unaffiliated)																						
26138EAM1	DR PEPPER SNAPPLE GROUP INC	01/15/2016	MATURITY	XXX	500,000	500,000	518,675	500,411			(411)		(411)		500,000	507,370	5,005	5,005	7,250	01/15/2016	2FE	
36962G7G3	GENERALELEC CAP CORP MTN BE	03/15/2016	PERSHING LLC	XXX	512,375	500,000	511,300	507,890			(520)		(520)		500,000				7,794	01/14/2019	1FE	
445658C99	HUNT J B TRANS SVCS INC	02/17/2016	CANTOR FITZGERALD AND CO	XXX	500,600	500,000	500,495	500,330			(13)		(13)		500,318	282	282	5,233	03/15/2019	2FE		
674599BZ7	OCCIDENTAL PETE CORP DEL	02/01/2016	MATURITY	XXX	590,000	590,000	610,815	590,973			(973)		(973)		590,000				7,375	02/01/2016	1FE	
74005PBE3	PRAXAIR INC	02/21/2016	MATURITY	XXX	500,000	500,000	502,215	500,164			(164)		(164)		500,000				1,875	02/21/2016	1FE	
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)				XXX	2,602,975	2,590,000	2,643,500	2,599,768			(2,081)		(2,081)		2,597,688		5,287	5,287	29,527	XXX	XXX	
8399997 Subtotal - Bonds - Part 4				XXX	15,634,216	15,613,804	15,638,690	15,607,728			(1,174)		(1,174)		15,606,554		27,661	27,661	60,292	XXX	XXX	
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX							XXX	XXX	XXX	XXX	XXX	XXX	XXX	
8399999 Subtotal - Bonds				XXX	15,634,216	15,613,804	15,638,690	15,607,728			(1,174)		(1,174)		15,606,554		27,661	27,661	60,292	XXX	XXX	
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX							XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)				XXX	XXX	XXX	XXX	XXX							XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9899999 Subtotal - Preferred and Common Stocks				XXX	XXX	XXX	XXX	XXX							XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9999999 Total - Bonds, Preferred and Common Stocks				XXX	15,634,216	XXX	15,638,690	15,607,728			(1,174)		(1,174)		15,606,554		27,661	27,661	60,292	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0.

E06 Schedule DB Part A Section 1 **NONE**

E07 Schedule DB Part B Section 1 **NONE**

E08 Schedule DB Part D Section 1 **NONE**

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity **NONE**

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity **NONE**

E10 Schedule DL - Part 1 - Securities Lending Collateral Assets **NONE**

E11 Schedule DL - Part 2 - Securities Lending Collateral Assets **NONE**

SCHEDULE E - PART 1 - CASH**Month End Depository Balances**

1 Depository			2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
							6 First Month	7 Second Month	8 Third Month	
open depositories										
Huntington National Bank - Operatons	Columbus, Ohio						1,656,639	2,998,445	5,821,267	XXX
Huntington National Bank - Premiums	Columbus, Ohio						722,489	2,329,455	1,271,209	XXX
Huntington National Bank - Marketing	Columbus, Ohio						81,904	81,865	81,825	XXX
0199998 Deposits in	0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories	XXX	XXX ..							XXX
0199999 Totals - Open Depositories		XXX	XXX ..				2,461,033	5,409,766	7,174,301	XXX
0299998 Deposits in	0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories	XXX	XXX ..							XXX
0299999 Totals - Suspended Depositories		XXX	XXX ..							XXX
0399999 Total Cash On Deposit		XXX	XXX ..				2,461,033	5,409,766	7,174,301	XXX
0499999 Cash in Company's Office		XXX	XXX ..	XXX ..	XXX ..					XXX
0599999 Total Cash		XXX	XXX ..				2,461,033	5,409,766	7,174,301	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
7799999 Subtotals - Bonds - Total Bonds - Issuer Obligations							
7899999 Subtotals - Bonds - Total Bonds - Residential Mortgage-Backed Securities							
7999999 Subtotals - Bonds - Total Bonds - Commercial Mortgage-Backed Securities							
8099999 Subtotals - Bonds - Total Bonds - Other Loan-Backed and Structured Securities							
8399999 Subtotals - Bonds - Total Bonds							
Sweep Accounts							
Commercial Premier Money Market Account		07/26/2013	0.002		2,204,655		1,283
8499999 Sweep Accounts					2,204,655		1,283
8599999 Other Cash Equivalents							
8699999 Total - Cash Equivalents					2,204,655		1,283

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