Amendment due to change in prior year balances.

1 5 4 8 4 2 0 1 6 2 0 1 0 0 1 0 6

QUARTERLY STATEMENT

AS OF MARCH 31, 2016

OF THE CONDITION AND AFFAIRS OF THE

Premier Health Plan, Inc.

NAIC Group Code 04816 (Current Period), 04816 (Prior Period) NAIC Company Code 15484 Employer's ID Number 46-3024049

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States

Licensed as business type: Life, Accident & Health [X] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ]
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ ]
Other [ ] Is HMO Federally Qualified? Yes [ ] No [X]

Incorporated/Organized 09/16/2013 Commenced Business 03/13/2014

Statutory Home Office 110 N MAIN ST STE 1200 (Street and Number), Dayton, OH, US 45402 (City or Town, State, Country and Zip Code)

Main Administrative Office 110 N MAIN ST STE 1200 (Street and Number) Dayton, OH, US 45402 (City or Town, State, Country and Zip Code) 937-499-9588 (Area Code) (Telephone Number)

Mail Address 110 N MAIN ST STE 1200 (Street and Number or P.O. Box), Dayton, OH, US 45402 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 110 N MAIN ST STE 1200 (Street and Number) Dayton, OH, US 45402 (City or Town, State, Country and Zip Code) 937-499-9546 (Area Code) (Telephone Number)

Internet Web Site Address www.premierhealthplan.org

Statutory Statement Contact Juan Fraiz (Name) 937-499-9546 (Area Code) (Telephone Number) (Extension)

jmfraiz@premierhealth.com (E-Mail Address) 937-341-8792 (FAX Number)

OFFICERS

Name	Title	Name	Title
Thomas Mark Duncan #	Chief Executive Officer	Josh Andrew Martin	President
Juan Manuel Fraiz #	Treasurer	Geoffrey Paul Walker	Secretary

OTHER OFFICERS

Renee Perkins George	Vice President of Operations	Dianne Patrice Weiskittle	Assistant Secretary

DIRECTORS OR TRUSTEES

George Thomas Broderick	Kathleen Ann Carlson	Jerry Alan Clark	Christopher John Danis
Thomas Mark Duncan	Teresa Fox Marrinan	Joshua Andrew Martin	

State of Ohio
ss
County of Montgomery

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.

Thomas Mark Duncan Chief Executive Officer	Josh Andrew Martin President	Juan Manuel Fraiz Treasurer

Subscribed and sworn to before me this
23 day of June, 2016

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

b. If no:
1. State the amendment number 1
2. Date filed 06/23/2016
3. Number of pages attached 12

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds	404,209		404,209	404,651
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate:				
4.1 Properties occupied by the company (less $ encumbrances)			0	0
4.2 Properties held for the production of income (less $ encumbrances)			0	0
4.3 Properties held for sale (less $ encumbrances)			0	0
5. Cash ($ 10,217,436), cash equivalents ($ 35,994) and short-term investments ($ 0)	10,253,430		10,253,430	10,233,551
6. Contract loans (including $ premium notes)			0	0
7. Derivatives	0		0	0
8. Other invested assets	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	10,657,640	0	10,657,640	10,638,201
13. Title plants less $ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	5,488		5,488	2,271
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	45,306		45,306	20,867
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums ($) and contracts subject to redetermination ($)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	586,018		586,018	625,544
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets ($)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care ($ 203,202) and other amounts receivable	203,202	10,269	192,933	86,853
25. Aggregate write-ins for other-than-invested assets	250,396	0	250,396	356,171
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	11,748,050	10,269	11,737,781	11,729,907
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	11,748,050	10,269	11,737,781	11,729,907
DETAILS OF WRITE-INS				
1101.			0	0
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Deposit in Transit	250,396		250,396	204,971
2502.			0	0
2503. Receivables from service provider fees			0	151,200
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	250,396	0	250,396	356,171

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less $ ..... reinsurance ceded)	3,130,204		3,130,204	1,942,647
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	62,604		62,604	38,853
4. Aggregate health policy reserves including the liability of $ ..... for medical loss ratio rebate per the Public Health Service Act			0	0
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	807,328		807,328	786,128
9. General expenses due or accrued	494,075		494,075	398,432
10.1 Current federal and foreign income tax payable and interest thereon (including $ ..... on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others			0	0
13. Remittances and items not allocated			0	0
14. Borrowed money (including $ ..... current) and interest thereon $ ..... (including $ ..... current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	489,239		489,239	958,989
16. Derivatives		0	0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with $ ..... authorized reinsurers, $ ..... unauthorized reinsurers and $ ..... certified reinsurers)			0	0
20. Reinsurance in unauthorized and certified ($ .....) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including $ ..... current)	2,409,424	0	2,409,424	1,822,972
24. Total liabilities (Lines 1 to 23)	7,392,875	0	7,392,875	5,948,021
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	2,000,000	2,000,000
27. Preferred capital stock	XXX	XXX		0
28. Gross paid in and contributed surplus	XXX	XXX	17,023,234	17,023,234
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	(14,678,327)	(13,241,347)
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 $ .....)	XXX	XXX		0
32.2 ..... shares preferred (value included in Line 27 $ .....)	XXX	XXX		0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	4,344,907	5,781,887
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	11,737,781	11,729,908
DETAILS OF WRITE-INS				
2301. Risk score	1,575,000		1,575,000	1,575,000
2302. Subsidy Retro-activity due to CMS	0		0	33,726
2303. Accrual for amounts owed to service provider	711,778		711,778	100,348
2398. Summary of remaining write-ins for Line 23 from overflow page	122,647	0	122,647	113,898
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	2,409,424	0	2,409,424	1,822,972
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	18,060	5,408	28,701
2. Net premium income (including $ non-health premium income)	XXX	5,868,932	2,018,565	8,176,903
3. Change in unearned premium reserves and reserve for rate credits	XXX		0	0
4. Fee-for-service (net of $ medical expenses)	XXX	0	0	0
5. Risk revenue	XXX		0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	57,855	0	0
8. Total revenues (Lines 2 to 7)	XXX	5,926,787	2,018,565	8,176,903
Hospital and Medical:				
9. Hospital/medical benefits		2,094,862	1,879,285	3,088,930
10. Other professional services		3,050,991	0	6,006,253
11. Outside referrals			0	0
12. Emergency room and out-of-area			0	0
13. Prescription drugs		493,096	0	1,480,369
14. Aggregate write-ins for other hospital and medical	0	152,467	0	149,900
15. Incentive pool, withhold adjustments and bonus amounts			0	0
16. Subtotal (Lines 9 to 15)	0	5,791,416	1,879,285	10,725,451
Less:				
17. Net reinsurance recoveries		143,627	0	625,544
18. Total hospital and medical (Lines 16 minus 17)	0	5,647,789	1,879,285	10,099,907
19. Non-health claims (net)			0	0
20. Claims adjustment expenses, including $ 295,424 cost containment expenses		319,176	129,147	422,540
21. General administrative expenses		1,399,967	731,383	2,998,689
22. Increase in reserves for life and accident and health contracts (including $ increase in reserves for life only)			0	0
23. Total underwriting deductions (Lines 18 through 22)	0	7,366,932	2,739,815	13,521,137
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(1,440,144)	(721,251)	(5,344,234)
25. Net investment income earned		3,032	3,472	14,100
26. Net realized capital gains (losses) less capital gains tax of $			0	0
27. Net investment gains (losses) (Lines 25 plus 26)	0	3,032	3,472	14,100
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $) (amount charged off $)]			0	0
29. Aggregate write-ins for other income or expenses	0	0	0	0
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	(1,437,113)	(717,779)	(5,330,135)
31. Federal and foreign income taxes incurred	XXX		0	0
32. Net income (loss) (Lines 30 minus 31)	XXX	(1,437,113)	(717,779)	(5,330,135)
DETAILS OF WRITE-INS				
0601.	XXX		0	0
0602.	XXX		0	0
0603.	XXX		0	0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701. ASO Revenue	XXX	57,855	0	0
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	57,855	0	0
1401. Other Medical expenses		152,467	0	149,900
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	152,467	0	149,900
2901.			0	0
2902.			0	0
2903.			0	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

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	5,781,886	22,483,163	22,483,163
34.	Net income or (loss) from Line 32	(1,437,113)	(717,779)	(5,330,135)
35.	Change in valuation basis of aggregate policy and claim reserves		0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of $		0	(27,406)
37.	Change in net unrealized foreign exchange capital gain or (loss)		0	0
38.	Change in net deferred income tax		0	0
39.	Change in nonadmitted assets	132	0	656,264
40.	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock		0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles		0	0
44.	Capital Changes:			
	44.1 Paid in		0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in		0	(12,000,000)
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		0	0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital and surplus (Lines 34 to 47)	(1,436,980)	(717,779)	(16,701,277)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	4,344,905	21,765,384	5,781,886
	DETAILS OF WRITE-INS			
4701.			0	0
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	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	5,865,692	1,369,464	8,848,828
2. Net investment income	(186)	(1,528)	28,435
3. Miscellaneous income	57,855	0	0
4. Total (Lines 1 to 3)	5,923,362	1,367,936	8,877,263
5. Benefit and loss related payments	4,526,653	724,258	8,880,059
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	1,599,748	664,979	2,619,313
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of $ tax on capital gains (losses)	0	0	0
10. Total (Lines 5 through 9)	6,126,401	1,389,237	11,499,372
11. Net cash from operations (Line 4 minus Line 10)	(203,039)	(21,301)	(2,622,109)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	0	0	8,601,806
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	2	0
12.7 Miscellaneous proceeds	0	0	666,666
12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	2	9,268,472
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	0	9,046,946
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	2	753
13.7 Total investments acquired (Lines 13.1 to 13.6)	0	2	9,047,699
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	0	0	220,773
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	(12,000,000)
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities		0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	222,919	(239,623)	2,312,301
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	222,919	(239,623)	(9,687,699)
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)	19,879	(260,924)	(12,089,035)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	10,233,550	22,322,585	22,322,585
19.2 End of period (Line 18 plus Line 19.1)	10,253,429	22,061,661	10,233,550

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	2,726	1,986	740	0	0	0	0	0	0	0
2. First Quarter	6,549	5,840	709	0	0	0	0	0	0	0
3. Second Quarter	0	0	0	0	0	0	0	0	0	0
4. Third Quarter	0									
5. Current Year	6,549	5,840	709							
6. Current Year Member Months	18,060	15,903	2,157							
Total Member Ambulatory Encounters for Period:										
7. Physician	3,471	2,722	749							
8. Non-Physician	732	545	187							
9. Total	4,203	3,267	936	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	352	292	60							
11. Number of Inpatient Admissions	67	53	14							
12. Health Premiums Written (a)	6,278,047	5,266,743	1,011,304							
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	6,278,047	5,266,743	1,011,304							
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	4,460,232	3,511,822	948,410							
18. Amount Incurred for Provision of Health Care Services	5,791,416	4,165,592	1,625,824							

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

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	6
	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	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
1. Comprehensive (hospital and medical)	1,355,945	3,104,287	395,278	2,734,926	1,751,223	1,942,647
2. Medicare Supplement					0	0
3. Dental only					0	0
4. Vision only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare					0	0
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	1,355,945	3,104,287	395,278	2,734,926	1,751,223	1,942,647
10. Health care receivables (a)					0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	0
13. Totals (Lines 9-10+11+12)	1,355,945	3,104,287	395,278	2,734,926	1,751,223	1,942,647

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

NOTES TO FINANCIAL STATEMENTS

These items are based on illustrations taken from the NAIC Annual Statement Instructions

1. Summary of Significant Accounting Policies and Going Concern

A. Organization and Accounting Practices

Premier Health Plan, Inc. (the Company) is a "for profit" organization incorporated on September 5, 2013 under the provisions of chapter 3907 of the Ohio Revised Code. Its insurance license was granted by ODI on March 13, 2014. During 2014, the Company established it's financial, technology and operational infrastructure and began marketing commercial health benefit plans to qualified individuals and employer groups in Montgomery County, Ohio and its contiguous eight counties (Company's "service area").

The Company began providing health benefits under individual and employer group commercial policies issued effective January 1, 2015. As of the filing date of these footnotes, the Company provides health care benefits to approximately 6,540 members under On & Off Exchange and Large Group commercial benefit plans.

The Company is wholly-owned subsidiary of Premier Health Insurance Corporation (PHIC). PHIC is a wholly owned subsidiary of Premier Health Partners (Parent), a not-for-profit corporation, which was established to operate and jointly manage four health systems, Premier Health Group LLC (PHG), PHIC, and other affiliated healthcare related companies. PHG is a healthcare provider network organization established as a provider credentialing, network contracting, utilization management and risk bearing entity with affiliated and other unaffiliated health plan organizations. PHG provides network contracting, physician incentive programs and other health plan operations services to the Company and PHIC).

The statutory financial statements of the Company are presented in accordance with accounting practices prescribed or permitted by the National Association of Insurance Commissioners (NAIC) and the Ohio Department of Insurance (ODI). ODI recognizes statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The Accounting Practices and Procedures Manual (NAIC SAP) was adopted as a component of prescribed or permitted practices by the state of Ohio.

Effective January 1, 2014, The Company became subject to an annual fee under section 9010 of the Federal Affordable Care Act ("ACA). This annual fee will be allocated to individual health insurers based on their net premiums written from the preceding calendar year compared to such health insurance premiums for any U.S. health risk written during the same preceding calendar year. Under the terms of Section 9010, the first $15 million of net premiums written are exempt. Accordingly, for the quarter ending March 31, 2016, the Company did not incur annual fees expense under this sect of ACA.

At March 31, 2016, the reconciliation of the reported net income and total surplus determined under NAIC Statutory Accounting Principles and total surplus determined in accordance with practices permitted by Ohio insurance law is as follows:

	State of Domicile	2016	2015
NET INCOME			
(1) Company state basis (Page 4, Line 32, Columns 2 & 4)	OH	$ (1,437,113)	$ (5,330,135)
(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	$ (1,437,113)	$ (5,330,135)
SURPLUS			
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	OH	$ 4,344,907	$ 5,781,887
(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	$ 4,344,907	$ 5,781,887

B. Use of Estimates

The preparation of statutory financial statements requires management to make estimates and assumptions that affect the reported amount of admitted assets and liabilities as well as the reported amounts of revenues and expenses for the reporting period of the Annual Statement. Accordingly, actual results reported in the accompanying statutory financial statements may differ materially from those estimates.

C. Accounting Policies

Short term investments and cash equivalents are stated at amortized cost. The Company considers all highly liquid debt instruments purchased with a maturity of three months or less to be cash & cash equivalents. The Company considers all highly liquid debt instruments with a maturity of one year or less but greater than three months to be short term investments.

Investment grade bonds, including those held by Ohio Department of Insurance as Guaranty funds, are stated at amortized value using the interest method. U.S. government agency loan-backed and structured securities are valued at amortized cost.

At March 31, 2016:

i. The Company has no unaffiliated common stocks.

ii. The Company has no preferred stocks.

iii. The Company has no first-lien mortgage loans on real estate.

iv. The Company has no loan-backed securities.

v. The Company has no wholly owned subsidiaries.

vi. The Company has no investments in joint ventures or limited partnerships.

vii. The Company holds no derivatives.

viii. The Company has no investments in furniture & equipment.

ix. The Company has no premium deficiency reserve. The Company has not incorporated investment income as a factor in the premium deficiency calculation.

x. Premiums for health policies are earned over their respective policy terms. Unearned premium reserves are established for that portion of the premium received beyond the current accounting period.

Unpaid Claims and Claims Loss Adjustment Liability – Unpaid policy claims liabilities are based on reported claims and on estimates for unreported claims. Such liabilities are based on assumptions and actuarial estimates. While management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided based on computations described in this paragraph. The methods for making such estimates and for establishing the resulting liability will be continually reviewed and any adjustments are reflected in the period determined. The Company will compute its claims loss adjustments expense liability based on a historical estimated cost as percent of the amount of unpaid claims.

Non-admitted Assets - Assets included in the statutory balance sheet are at admitted asset value in accordance with NAIC Accounting Practices and Procedures Manual. Such assets not defined as admitted assets are considered "non-admitted assets" such as principally deferred tax assets in excess of certain amounts, receivable or agents' balances over 90-days past due, computer software, other equipment, investments in unaudited subsidiaries, intangibles assets and investments in excess of 10% of admitted assets are excluded through a charge against capital and surplus.

Federal Medical Loss Ratio Rebate – The Company is subject to the provisions of the Public Health Service Act, which requires the payment of rebates to commercial individual, small and large group policyholders when the amounts paid for healthcare benefits and quality improvement initiatives are below certain percent of premiums paid by such respective policyholders.

Premiums – Premium earned from policyholders is recorded, net of amounts assumed & ceded under reinsurance treaties, pro rata over the policy period for which coverage is provided. Premiums collected prior to the coverage period are reported as "premiums received in advance".

The Company estimates pharmaceutical rebates utilizing past experience and accumulated statistical data. These estimates are continuously reviewed and any adjustments are reflected in current operations.

D. Going concern

After evaluating the entity's ability to continue as a going concern, management was not aware of any conditions or events which raised substantial doubts concerning the entity's ability to continue as a going concern as of the date of the filing of this statement.

2. Accounting Changes and Corrections of Errors

None

3. Business Combinations and Goodwill

None

4. Discontinued Operations

Not applicable

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not applicable

B. Debt Restructuring

Not applicable

C. Reverse Mortgages

Not applicable

D. Loan-Backed Securities

The Company has no loan-backed securities.

E. Repurchase Agreements and/or Securities Lending Transactions

Not applicable

F. Real Estate

Not applicable

G. Low Income Housing Tax Credit

Not applicable

H. Restricted Assets

(1) Restricted Assets (Including Pledged)

The Company is required to maintain certain deposits with ODI in connection with state insurance requirement laws. At March 31, 2016, the carrying amount of such deposits was $440,203 and such amount was 3.8% of Total Admitted Assets.

	1	2	3	4	5	6
Restricted Asset Category	Total Gross Restricted from Current Year	Total Gross Restricted From Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Admitted Restricted	Percentage Gross Restricted to Total Assets	Percentage Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	$	$ 0	$ 0	$	0.0 %	0.0 %
b. Collateral held under security lending agreements		0	0		0.0	0.0
c. Subject to repurchase agreements		0	0		0.0	0.0
d. Subject to reverse repurchase agreements		0	0		0.0	0.0
e. Subject to dollar repurchase agreements		0	0		0.0	0.0
f. Subject to dollar reverse repurchase agreements		0	0		0.0	0.0
g. Placed under option contracts		0	0		0.0	0.0
h. Letter stock or securities restricted as to sale – excluding FHLB capital stock		0	0		0.0	0.0
i. FHLB capital stock		0	0		0.0	0.0
j. On deposit with states	440,203	440,626	(422)	440,203	3.7	3.8
k. On deposit with other regulatory bodies		0	0		0.0	0.0
l. Pledged as collateral to FHLB (including assets backing funding agreements)		0	0		0.0	0.0
m. Pledged as collateral not captured in other categories		0	0		0.0	0.0
n. Other restricted assets		0	0		0.0	0.0
o. Total Restricted Assets	$ 440,203	$ 440,626	$ (422)	$ 440,203	3.7 %	3.8 %

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

None

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

None

I. Working Capital Finance Investments

None

J. Offsetting and Netting of Assets and Liabilities

None

K. Structured Notes

None

6. Joint Ventures, Partnerships and Limited Liability Companies

A. Detail for those greater than 10% of admitted assets

The Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. Writedowns for impairment of joint ventures, partnerships and LLCs

Not applicable

7. Investment Income

A. Accrued investment income

Investment income that is earned is accrued and recorded as an asset, with the exception of any accrued investment income that is determined to be uncollectible, regardless of its age. Investment income determined to be uncollectible is written off in the period that such determination is made.

B. Amounts non-admitted

None

8. Derivative Instruments

None

9. Income Taxes

Not applicable

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. See Note 1 for information about the Parent, PHG and the Company. To date, PHIC has contributed to the Company gross capital and surplus totaling $ 17,023,234 inclusive of $ 12 million dividend paid by PHPlan to PHIC in 2015. As a condition of the Company receiving licensure approval from ODI and in accordance with section 3901.32 of the Ohio Revised Code, Parent has agreed to guarantee to maintain the amount of the Company's capital and surplus at the greater of i.) minimum capital requirements as defined in section 1751.28 of the Ohio Revised Code, ii.) the amount of the Company's Action Level RBC as defined in section 1753.31 of the Ohio Revised Code or iii.) an amount as reasonably determined by the Superintendent of Insurance, State of Ohio in relation to the level of the Company's enrollees and its outstanding liabilities.

B. Detail of Transactions Greater than ½% of Admitted Assets

See A above and F below.

C. Change in Terms of Intercompany Agreements

None

D. Amounts Due to or from Related Parties

At quarter ending March 31, 2016, the Company owed to related parties $ 449,130 of claims and general expenses and was due $0.

E. Guarantees or Contingencies for Related Parties

Not applicable

F. Management, Service Contracts, Cost Sharing Agreements

The Company entered into a Cost Allocation Services Agreement, effective October 1, 2013, with the Parent and PHG for the purpose of providing services to the Company and PHIC. The Parent provides operational and administrative services, such an employee leasing, HR administrative, legal, accounting, information technology & telecommunications, and building services. PHG provides healthcare network provider contracting & network management, care coordination, quality assurance, and clinical care management and physician incentive plan management services.

During the Quarter ending March 31, 2016, the Parent and PHG related expenses were $0 and $222,947, respectively.

At March 31, 2016, amounts owed to the Parent and its affiliates and PHG for such related expenses were $489,239 and $0, respectively.

G. Nature of Relationships that Could Affect Operations

Not applicable

H. Amount Deducted for Investment in Upstream Company

None

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

None

J. Write-downs for Impairment of Investments in Affiliates

None

K. Investments in Foreign Insurance Subsidiary

None

L. Investment in downstream non-insurance holding company

None

11. Debt

Not applicable

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

A. Defined Benefit Plan

Not applicable.

As discussed in Note 10. F., personnel resources and their benefits, including retirement's plans and compensated absences, are provided by the Parent and/or its affiliates. The Parent does not individually allocate the amounts of the items A-F, as listed below, related to the personnel assigned to the operations of the Company.

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

1) Outstanding Shares

The Company has 2,000 shares of $1,000 par value common stock authorized and outstanding. All such shares are owned by PHIC.

2) Dividend Rate of Preferred Stock

None

3) 4), 5), and 6) Dividends Restrictions, Dividends Paid

Holders of stock in the Company are entitled to receive dividends out of any assets legally available, payable, if declared by the Company's Board of Directors. The Company is subject to dividends restrictions and obtaining permission from ODI for the payment of any dividends.

7) Mutual Surplus Advances

Not applicable

8) Company Stock Held for Special Purposes

Not applicable

9) Changes in Special Surplus Funds

Not applicable

10) Changes in Unassigned Funds

Not applicable

11) Surplus Notes

Not applicable

12) and 13) Quasi Reorganizations

Not applicable

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

1. Effective September 13, 2013, the Parent entered into an multi-year agreement contract with a third party firm to provide various type of health plan support operations (billings and revenue management, claims, call center, pharmacy benefits administration and other operational services). The initial term of the agreement is through December 31, 2021. The services fees are based on volume of membership or a percentage of premium revenues realized by the Company. Effective January 1, 2015, the minimum payments due is approximately $4,000,000 per year. Certain fee components that are based on membership volumes have annual escalations of three percent (3%) per year.

2. Detail of other contingent commitments

Not applicable

3. Summary of detail in 14A2

Not applicable

B. Guaranty fund and other 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. Other contingencies

Not applicable

15. Leases

A. Lessee Operating Lease

None

B. Lessor Leases

None

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

None

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

Non applicable

20. Fair Value Measurements

A.

None

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total

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

None

B. Other fair value disclosures

Not applicable

C. Fair Value for all financial instruments by Level 1, 2 and 3

The table below reflects the fair value and admitted values of all admitted assets and liabilities that are financial instruments excluding those accounted for under the equity method (subsidiaries).

Type of financial instrument	Fair value	Admitted value	Level 1	Level 2	level 3	Not Practicable (carrying value)
Financial Instrument - assets						
Bonds	408,951	404,209	-	408,951	-	-
Cash equivalents and short-term investments	35,994	35,994	35,994	-	-	-
Total financial instruments - assets	444,945	440,203	444,945	-	-	-
Financial instruments - liabilities	-	-	-	-	-	-
Total Financial instruments - liabilities	-	-	-	-	-	-

D. Not Practicable to Estimate Fair Value

Not applicable

21. Other Items

A. Extraordinary Items

None

B. Troubled Debt Restructuring: Debtors

Not applicable

C. Other Disclosures and Unusual Items

None

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable & Non-transferable Tax Credits

None

F. Subprime Mortgages – Related Risk Exposure

None

G. Retained Assets

Not Applicable

22. Events Subsequent

	Current Year	Prior Year
A. Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	.....Yes.....	

B.	ACA fee assessment payable for the upcoming year	$ 0	$ 0
C.	ACA fee assessment paid	$ 0	$ 0
D.	Premium written subject to ACA 9010 assessment	$ 6,278,047	$ 8,176,903
E.	Total Adjusted Capital before surplus adjustment (Five-Year Historical Line 14)	$	
F.	Total Adjusted Capital after surplus adjustment (Five-Year Historical Line 14 minus 22B above)	$	
G.	Authorized Control Level (Five-Year Historical Line 15)	$	
H.	Would reporting the ACA assessment as of Dec. 31, 2016 have triggered an RBC action level (YES/NO)?	.....No.....	

23. Reinsurance

The Company renewed its reinsurance policy (effective January 1, 2016) with an unaffiliated third party reinsurance company. This reinsurance policy provides coverage for 90% of the cumulative claims in excess of $200,000 of deductible incurred by members during the policy term (January 1 through December 31, 2016) for unlimited amounts.

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

Section 2 – Ceded Reinsurance Report – Part A

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

Yes ( ) No (X)

a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate $_____.

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability for these agreements in this statement? $_____0_____.

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

Yes ( ) No (X)

B. Uncollectible Reinsurance

None

C. Commutation of Ceded Reinsurance

None

D. Certified Reinsurer Ratings Downgraded or Subject to Revocation

None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

The Company's participation in the Exchange program include a risk sharing program. Based on the prevision of risk score and risk assessment, the company estimates accrued retrospective premium adjustment for its commercial products through a prescribed formula approach. At the end of 2015, the Company recorded a liability of $1,575,000. As of March, 31, 2016 quarterly filing, the Company does not include any additional estimate as of result of limited information.

The Company also has health insurance business that is subject to a medical loss ratio rebate pursuant to the Public Health Service Act.

B. Method Used to Record

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

C. Amount and Percent of Net Retrospective Premiums

The amount of net premium written by the company at March 31, 2016 that are subject to retrospective rating features was $5,266,743, that represented 84% of the total net premium written for the total Company.

D. Medical Loss Ratio Rebates

The Company has no paid or payable medical loss ratio rebates.

E. Risk- Sharing Provisions of the Affordable Care Act (ACA)

(1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)? Yes [X] No [ ]

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

		AMOUNT
a.	Permanent ACA Risk Adjustment	
	Assets	
	1. Premium adjustments receivable due to ACA Risk Adjustment	$ .....
	Liabilities	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	$ 53,597
	3. Premium adjustments payable due to ACA Risk Adjustment	$ 1,575,000
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	$ 1,575,000
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	$ 53,597
b.	Transitional ACA Reinsurance Program	
	Assets	
	1. Amounts recoverable for claims paid due to ACA Reinsurance	$ 586,018
	2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	$ .....
	3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	$ .....
	Liabilities	
	4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	$ 41,513
	5. Ceded reinsurance premiums payable due to ACA Reinsurance	$ .....
	6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	$ .....
	Operations (Revenue & Expense)	
	7. Ceded reinsurance premiums due to ACA Reinsurance	$ .....
	8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	$ 586,018
	9. ACA Reinsurance contributions – not reported as ceded premium	$ 41,513
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	
						Prior Year Accrued Less Payments (Col 1 – 3)	Prior Year Accrued Less Payments (Col 2 – 4)	To Prior Year Balance	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 – 3 + 7)	Cumulative Balances from Prior Years (Col 2 – 4 + 8)
		1	2	3	4	5	6	7	8		9	10
		Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a.	Permanent ACA Risk Adjustment Program											
	1. Premium adjustments receivable	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	A	$ 0	$ 0
	2. Premium adjustments (payable)	$ 0	$ (1,575,000)	$ 0	$ 0	$ 0	$ (1,575,000)	$ 0	$ 0	B	$ 0	$ (1,575,000)
	3. Subtotal ACA Permanent Risk Adjustment Program	$ 0	$ (1,575,000)	$ 0	$ 0	$ 0	$ (1,575,000)	$ 0	$ 0		$ 0	$ (1,575,000)
b.	Transitional ACA Reinsurance Program											
	1. Amounts recoverable for claims paid	$ 501,690	$	$ 167,198	$	$ 334,492	$ 0	$ 153,961	$ 0	C	$ 488,453	$ 0
	2. Amounts recoverable for claims unpaid (contra liability)	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	D	$ 0	$ 0
	3. Amounts receivable relating to uninsured plans	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	E	$ 0	$ 0
	4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	$ 0	$ (105,237)	$ 0	$ (93,720)	$ 0	$ (11,517)	$ 11,517	$ 0	F	$ 11,517	$ (11,517)
	5. Ceded reinsurance premiums payable	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	G	$ 0	$ 0
	6. Liability for amounts held under uninsured plans	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	H	$ 0	$ 0
	7. Subtotal ACA Transitional Reinsurance Program	$ 501,690	$ (105,237)	$ 167,198	$ (93,720)	$ 334,492	$ (11,517)	$ 165,478	$ 0		$ 499,970	$ (11,517)
c.	Temporary ACA Risk Corridors Program											
	1. Accrued retrospective premium	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	I	$ 0	$ 0
	2. Reserve for rate credits or policy experience rating refunds	$ 0	$	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	J	$ 0	$ 0
	3. Subtotal ACA Risk Corridors Program	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0	$ 0		$ 0	$ 0
d.	Total for ACA Risk Sharing Provisions	$ 501,690	$ (1,680,237)	$ 167,198	$ (93,720)	$ 334,492	$ (1,586,517)	$ 165,478	$ 0		$ 499,970	$ (1,586,517)

Explanations of Adjustments

A .....

B .....

C Additional receivable related for 2015 date of service received in first quarter 2016.....

D .....

E .....

F Adjustment for 2015 accrual over stated.....

G .....

H .....

I .....

J .....

25. Change in Incurred Claims and Claim Adjustment Expenses

	Claims unpaid	Claim Adjustment expense
Balance at the beginning of the year	$ 1,942,647	$ 38,853
Incurred during the year	5,523,934	23,751
Paid during the year	(4,336,377)	-
Balance at the end of the year	3,130,204	62,604

26. Intercompany Pooling Arrangements

27. Structured Settlements

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
03/31/2015	$ 19,967	$ 22,599	$ 8,336	$ 11,592	$ 38
06/30/2015	$ 21,845	$ 25,737	$ 15,589	$ 6,257	$
09/30/2015	$ 36,975	$ 45,791	$ 26,706	$	$
12/31/2015	$ 102,740	$ 127,232	$	$	$
03/31/2016	$ 90,193	$	$	$	$

B. Risk Sharing Receivables

29. Participating Policies

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves $ 0
2. Date of the most recent evaluation of this liability 12/31/2015
3. Was anticipated investment income utilized in the calculation? Yes [ ] No [X]

31. Anticipated Salvage and Subrogation

Due to the Company's limited operating history, it has not recorded any estimates for anticipated salvage & subrogation. The Company has recorded salvage and subrogation based on actual claims identified through March 31, 2016.

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	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Current year change in encumbrances		0
4. Total gain (loss) on disposals		0
5. Deduct amounts received on disposals		0
6. Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other-than-temporary impairment recognized		0
8. Deduct current year's depreciation		0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

NONE

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	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Capitalized deferred interest and other		0
4. Accrual of discount		0
5. Unrealized valuation increase (decrease)		0
6. Total gain (loss) on disposals		0
7. Deduct amounts received on disposals		0
8. Deduct amortization of premium and mortgage interest points and commitment fees		0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		0
10. Deduct current year's other-than-temporary impairment recognized		0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance		0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

NONE

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	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		0
2.2 Additional investment made after acquisition		0
3. Capitalized deferred interest and other		0
4. Accrual of discount		0
5. Unrealized valuation increase (decrease)		0
6. Total gain (loss) on disposals		0
7. Deduct amounts received on disposals		0
8. Deduct amortization of premium and depreciation		0
9. Total foreign exchange change in book/adjusted carrying value		0
10. Deduct current year's other-than-temporary impairment recognized		0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

NONE

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	404,651	0
2. Cost of bonds and stocks acquired	0	9,046,946
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)		(26,654)
5. Total gain (loss) on disposals		0
6. Deduct consideration for bonds and stocks disposed of		8,601,806
7. Deduct amortization of premium	442	13,836
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other-than-temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	404,209	404,651
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	404,209	404,651

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	0	XXX	0	0	0

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	0	20,002
2. Cost of short-term investments acquired	0	0
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	0	20,002
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other-than-temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

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]
9999999 Totals						0	XXX	0	XXX

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