

# QUARTERLY STATEMENT

OF THE

# COSE Health and Wellness Trust

Of

# Cleveland

# in the state of

# Ohio

# to the Insurance Department

# of the State of Ohio

For the Period Ended

March 31, 2018

# 2018

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OFFICE OF RISK  
ASSESSMENT



**ASSETS**

	Current Statement Date			4 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	7,733,245		7,733,245	4,779,852
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....2,938,003), cash equivalents (\$.....12,417,026) and short-term investments (\$.....2,204,634).....	17,559,662		17,559,662	9,303,321
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	25,292,907	0	25,292,907	14,083,173
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	68,509		68,509	26,645
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	221,942		221,942	258,760
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			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	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....	275,942		275,942	228,880
25. Aggregate write-ins for other than invested assets.....	76,254	76,254	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	25,935,555	76,254	25,859,301	14,597,458
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	25,935,555	76,254	25,859,301	14,597,458

**DETAILS OF WRITE-INS**

1101. Prepaid Business Insurance.....			0	
1102. Prepaid State Certification Fee.....			0	
1103. ....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Business Insurance.....	75,854	75,854	0	
2502. Prepaid State Certification Fee.....			0	
2503. Prepaid State Domestic Assessment Fee.....	400	400	0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	76,254	76,254	0	0

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	13,857,490		13,857,490	6,116,369
2. Accrued medical incentive pool and bonus amounts.....			0	
3. Unpaid claims adjustment expenses.....	554,300		554,300	244,688
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....			0	
5. Aggregate life policy reserves.....			0	
6. Property/casualty unearned premium reserve.....			0	
7. Aggregate health claim reserves.....			0	
8. Premiums received in advance.....	1,403,119		1,403,119	587,611
9. General expenses due or accrued.....	68,951		68,951	104,410
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)).....	53,036		53,036	28,170
10.2 Net deferred tax liability.....			0	
11. Ceded reinsurance premiums payable.....			0	
12. Amounts withheld or retained for the account of others.....			0	
13. Remittances and items not allocated.....			0	
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....			0	
15. Amounts due to parent, subsidiaries and affiliates.....			0	
16. Derivatives.....			0	
17. Payable for securities.....			0	
18. Payable for securities lending.....			0	
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and certified \$.....0 reinsurers).....			0	
20. Reinsurance in unauthorized and certified (\$.....0) companies.....			0	
21. Net adjustments in assets and liabilities due to foreign exchange rates.....			0	
22. Liability for amounts held under uninsured plans.....			0	
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	3,457	0	3,457	0
24. Total liabilities (Lines 1 to 23).....	15,940,352	0	15,940,352	7,081,248
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
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	5,000,000	5,000,000
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	4,918,949	2,516,209
32. Less treasury stock, at cost:				
32.1 .....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX		
32.2 .....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	9,918,949	7,516,209
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	25,859,301	14,597,458

**DETAILS OF WRITE-INS**

2301. Ohio Trust Tax Payable - State.....	3,457		3,457	
2302. ....			0	
2303. ....			0	
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	3,457	0	3,457	0
2501. ....				
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	0	0
3001. ....				
3002. ....				
3003. ....				
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 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	66,172	14,074	96,143
2. Net premium income (including \$.....0 non-health premium income).....	.XXX	27,434,773	5,112,524	34,486,720
3. Change in unearned premium reserves and reserve 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	0	0	0
7. Aggregate write-ins for other non-health revenues.....	.XXX	0	0	0
8. Total revenues (Lines 2 to 7).....	.XXX	27,434,773	5,112,524	34,486,720
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits.....		13,978,870	2,471,802	16,936,402
10. Other professional services.....		708,077	120,713	976,368
11. Outside referrals.....		161,338	13,164	378,888
12. Emergency room and out-of-area.....		1,866,194	243,227	2,786,295
13. Prescription drugs.....		4,244,634	1,088,112	5,260,533
14. Aggregate write-ins for other hospital and medical.....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts.....				
16. Subtotal (Lines 9 to 15).....	0	20,959,113	3,937,017	26,338,486
<b>Less:</b>				
17. Net reinsurance recoveries.....		219,054		19,399
18. Total hospital and medical (Lines 16 minus 17).....	0	20,740,059	3,937,017	26,319,087
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....		309,611		244,688
21. General administrative expenses.....		3,962,611	810,185	5,372,350
22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only).....				
23. Total underwriting deductions (Lines 18 through 22).....	0	25,012,281	4,747,202	31,936,125
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	.XXX	2,422,491	365,323	2,550,595
25. Net investment income earned.....		77,210	4,253	89,546
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....				
27. Net investment gains or (losses) (Lines 25 plus 26).....	0	77,210	4,253	89,546
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....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	2,499,701	369,576	2,640,141
31. Federal and foreign income taxes incurred.....	.XXX	26,589		26,447
32. Net income (loss) (Lines 30 minus 31).....	.XXX	2,473,112	369,576	2,613,694

**DETAILS OF WRITE-INS**

0601. ....	.XXX			
0602. ....	.XXX			
0603. ....	.XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page.....	.XXX	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	.XXX	0	0	0
0701. ....	.XXX			
0702. ....	.XXX			
0703. ....	.XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page.....	.XXX	0	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above).....	.XXX	0	0	0
1401. ....				
1402. ....				
1403. ....				
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	0	0	0
2901. ....				
2902. ....				
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0	0	0

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year.....	7,516,209	4,903,315	4,903,315
34. Net income or (loss) from Line 32.....	2,473,112	369,576	2,613,694
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.....			
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....			
39. Change in nonadmitted assets.....	(70,372)	(35,733)	(800)
40. Change in unauthorized and certified reinsurance.....			
41. Change in treasury stock.....			
42. Change in surplus notes.....			
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.....			
47. Aggregate write-ins for gains or (losses) in surplus.....	0	0	0
48. Net change in capital and surplus (Lines 34 to 47).....	2,402,740	333,843	2,612,894
49. Capital and surplus end of reporting period (Line 33 plus 48).....	9,918,949	5,237,158	7,516,209

**DETAILS OF WRITE-INS**

4701. ....			
4702. ....			
4703. ....			
4798. Summary of remaining write-ins for Line 47 from overflow page.....	0	0	0
4799. Totals (Lines 4701 thru 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
<b>CASH FROM OPERATIONS</b>			
1. Premiums collected net of reinsurance.....	28,287,098	5,224,149	34,729,814
2. Net investment income.....	38,140	4,253	69,866
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	28,325,238	5,228,402	34,799,680
5. Benefit and loss related payments.....	13,046,001	1,942,303	21,039,320
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	3,994,613	815,857	5,505,637
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	1,723		(1,723)
10. Total (Lines 5 through 9).....	17,042,337	2,758,160	26,543,234
11. Net cash from operations (Line 4 minus Line 10).....	11,282,901	2,470,242	8,256,446
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....			
12.2 Stocks.....			
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.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	0	0	0
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	2,956,187		4,786,817
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	2,956,187	0	4,786,817
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).....	(2,956,187)	0	(4,786,817)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	(70,373)	(35,733)	(800)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(70,373)	(35,733)	(800)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	8,256,341	2,434,509	3,468,830
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	9,303,321	5,834,491	5,834,491
19.2 End of period (Line 18 plus Line 19.1).....	17,559,662	8,269,000	9,303,321

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			
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**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1		2		3	4	5	6	7	8	9	10
	Total	Individual	Comprehensive (Hospital & Medical)	Group								
<b>Total Members at End of:</b>												
1. Prior Year.....	12,746			12,746								
2. First Quarter.....	26,244			26,244								
3. Second Quarter.....	0											
4. Third Quarter.....	0											
5. Current Year.....	26,244			26,244								
6. Current Year Member Months.....	66,172			66,172								
<b>Total Member Ambulatory Encounters for Period:</b>												
7. Physician.....	28,853			28,853								
8. Non-Physician.....	21,456			21,456								
9. Total.....	50,309	0	0	50,309					0	0	0	0
10. Hospital Patient Days Incurred.....	789			789								
11. Number of Inpatient Admissions.....	199			199								
12. Health Premiums Written (a).....	29,766,680			29,766,680								
13. Life Premiums Direct.....	0											
14. Property/Casualty Premiums Written.....	0											
15. Health Premiums Earned.....	29,766,680			29,766,680								
16. Property/Casualty Premiums Earned.....	0											
17. Amount Paid for Provision of Health Care Services.....	12,422,309			12,422,309								
18. Amount Incurred for Provision of Health Care Services.....	20,959,113			20,959,113								

(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	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
<b>Claims Unpaid (Reported)</b>						
059999, Unreported Claims and Other Claim Reserves.....						13,857,490
079999, Total Claims Unpaid.....						13,857,490

## UNDERWRITING AND INVESTMENT EXHIBIT

### Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	Liability End of Current Quarter				6 Estimated Claim Reserve and Claim Liability December 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 December 31 of Prior Year	4 On Claims Incurred During the Year	
1. Comprehensive (hospital and medical).....	4,702,021	8,296,918	968,769	12,888,721	6,116,369
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).....	4,702,021	8,296,918	968,769	12,888,721	5,670,790
10. Healthcare receivables (a).....					
11. Other non-health.....					
12. Medical incentive pools and bonus amounts.....					
13. Totals (Lines 9-10+11+12).....	4,702,021	8,296,918	968,769	12,888,721	5,670,790

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

**NOTES TO FINANCIAL STATEMENTS****Note 1 – Summary of Significant Accounting Policies and Going Concern**

## A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	2018	2017
<b>NET INCOME</b>					
(1) COSE Health and Wellness Trust Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 2,473,112	\$ 2,613,694
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 2,473,112	\$ 2,613,694
<b>SURPLUS</b>					
(5) COSE Health and Wellness Trust Company state basis (Page 3, line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 9,918,949	\$ 7,516,209
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 9,918,949	\$ 7,516,209

## C. Accounting Policy

These financial statements have been prepared in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures Manual.

- (6) Basis for Loan-Backed Securities and Adjustment Methodology  
Not Applicable

## D. Going Concern

There is no substantial doubt by Management or the Trustees about the COSE Health and Wellness Trust's ability to continue as a Going Concern.

**Note 2 – Accounting Changes and Corrections of Errors**

No significant changes

**Note 3 – Business Combinations and Goodwill**

Not Applicable

**Note 4 – Discontinued Operations**

No Applicable

**Note 5 – Investments**

Not Applicable

**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

Not Applicable

**Note 7 – Investment Income**

No investment income was classified for exclusion.

**Note 8 – Derivative Instruments**

Not Applicable

**Note 9 – Income Taxes**

No significant changes

**Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties**

No Applicable

**Note 11 – Debt**

Not Applicable

**Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**

Not Applicable

**NOTES TO FINANCIAL STATEMENTS****Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations**

There were no changes to the Surplus level since the initial funding on August 15, 2016.

**Note 14 – Liabilities, Contingencies and Assessments**

Not Applicable

**Note 15 – Leases**

Not Applicable

**Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

Not Applicable

**Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

Not Applicable

**Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Portion of Partially Insured Plans**

Not Applicable

**Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators**

Not Applicable

**Note 20 – Fair Value Measurements**

## A. Fair Value Measurements

The Company restated or reported no assets or liabilities at fair value as of March 31, 2018.

## B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not Applicable

## C. Fair Value Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)	Net Asset Value (NAV) Included in Level 2
Bonds	\$ 7,733,245	\$ 7,733,245	\$	\$ 7,733,245	\$	\$	\$

## D. Not Practicable to Estimate Fair Value

Not Applicable

**Note 21 – Other Items**

Not Applicable

**Note 22 – Events Subsequent**

No Applicable

**Note 23 – Reinsurance**

No significant changes

**Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

## 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 Affordable Care Act risk sharing provisions

Yes [ ] No [X]

- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:

a. Permanent ACA Risk Adjustment Program	AMOUNT
<b>Assets</b>	
1. Premium adjustments receivable due to ACA Risk Adjustment	\$
<b>Liabilities</b>	
2. Risk adjustment user fees payable for ACA Risk Adjustment	\$
3. Premium adjustments payable due to ACA Risk Adjustment	\$
<b>Operations (Revenue &amp; Expenses)</b>	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk	\$

**NOTES TO FINANCIAL STATEMENTS**

a. Permanent ACA Risk Adjustment Program	AMOUNT
Adjustment	
5. Reported in expenses as ACA Risk Adjustment user fees (incurred/paid)	\$

b. Transitional ACA Reinsurance Program	AMOUNT
<b>Assets</b>	
1. Amounts recoverable for claims paid due to ACA Reinsurance	\$
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	\$
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$
<b>Liabilities</b>	
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	\$
5. Ceded reinsurance premiums payable due to ACA Reinsurance	\$
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$
<b>Operations (Revenue &amp; Expenses)</b>	
7. Ceded reinsurance premiums due to ACA Reinsurance	\$
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$
9. ACA Reinsurance contributions – not reported as ceded premium	\$

c. Temporary ACA Risk Corridors Program	AMOUNT
<b>Assets</b>	
1. Accrued retrospective premium due to ACA Risk Corridors	\$
<b>Liabilities</b>	
3. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$
<b>Operations (Revenue &amp; Expenses)</b>	
3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$
4. Effect of ACA Risk Corridors on change in reserves for rate credits	\$

(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 Dec. 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec. 31 of the Prior Year		Differences		Adjustments		Ref	Unsettled Balances as of the Reporting Date	
	1	2	3	4	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)
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)		Receivable	(Payable)
<b>a. Permanent ACA Risk Adjustment Program</b>											
1. Premium adjustments receivable	\$	\$	\$	\$	\$	\$	\$	\$	A	\$	\$
2. Premium adjustments (payable)									B		
3. Subtotal ACA Permanent Risk Adjustment Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
<b>b. Transitional ACA Reinsurance Program</b>											
1. Amounts recoverable for claims paid	\$	\$	\$	\$	\$	\$	\$	\$	C	\$	\$
2. Amounts recoverable for claims unpaid (contra liability)									D		
3. Amounts receivable relating to uninsured plans									E		
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premiums									F		
5. Ceded reinsurance premiums payable									G		
6. Liability for amounts held under uninsured plans									H		
7. Subtotal ACA Transitional Reinsurance Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
<b>c. Temporary ACA Risk Corridors Program</b>											
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	I	\$	\$
2. Reserve for rate credits or policy experience rating refunds									J		
3. Subtotal ACA Risk Corridors Program	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$
d. Total for ACA Risk	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$

**NOTES TO FINANCIAL STATEMENTS**

	Accrued the Prior Business Before the Prior	During Year on Written Dec. 31 of Year	Received or the Current Business Before the Prior	Paid as of Year on Written Dec. 31 of Year	Differences		Adjustments		Ref	Unsettled	Balances				
					1	2	3	4		5	6	7	8	as of the	Reporting Date
														Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	0	10				
Sharing Provisions															

Explanations of Adjustments

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

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

	Accrued the Prior Year Written Dec. 31 of the	During on Business Before Prior Year	Received or the Current Business Before the Prior	Paid as of Year on Written Dec. 31 of Year	Differences		Adjustments		Ref	Unsettled	Balances				
					1	2	3	4		5	6	7	8	as of the	Reporting Date
														Prior Year Accrued Less Payments (Col. 1-3)	Prior Year Accrued Less Payments (Col. 2-4)
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	9	10				
<b>a. 2014</b>															
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	A	\$	\$				
2. Reserve for rate credits for policy experience rating refunds	\$	\$	\$	\$	\$	\$	\$	\$	B	\$	\$				
<b>b. 2015</b>															
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	C	\$	\$				
2. Reserve for rate credits for policy experience rating refunds	\$	\$	\$	\$	\$	\$	\$	\$	D	\$	\$				
<b>c. 2018</b>															
1. Accrued retrospective premium	\$	\$	\$	\$	\$	\$	\$	\$	E	\$	\$				
2. Reserve for rate credits or policy experience rating refunds	\$	\$	\$	\$	\$	\$	\$	\$	F	\$	\$				
d. Total for Risk Corridors	\$	\$	\$	\$	\$	\$	\$	\$		\$	\$				

- A.
- B.
- C.
- D.
- E.
- F.

(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	5 Net Admitted Asset (4-5)
a. 2014	\$	\$	\$	\$	\$	\$
b. 2017						
c. 2018						
d. Total (a+b+c)	\$	\$	\$	\$	\$	\$

**Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

On March 31st, 2018, The Trust completed 19 months of operation and incurred significant participation and premium growth. With creditability still a factor, combined with the significant growth, Management exercised a conservative approach to the Trust's reserve balance.

Reserves as of March 31st, 2018 were \$27,076 million. As of March 31st, 2018, \$13,219 million has been paid for claims and \$13.857 million reserved (IBNR) attributed to insured future events of the current year. A reserve of \$6,116 million was established in 2017 for the prior year claims. Claims paid in 2018 associated with this reserve were \$4,702 million, leaving \$1,414 million of prior year reserve remaining. The IBNR level of reserve was calculated and verified by the Company's outside Actuary. The calculated loss ratio was 62%. With the Trust experiencing only 19 months of claims experience, Management decided to reserve to a loss ratio of 76%. A level close to 80%, the early pro-forma assumption of the Trust.

As the Trust becomes more creditable with its claims trend, Management will evaluate along with the Trust's outside Actuary the adjustments to reserves.

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## NOTES TO FINANCIAL STATEMENTS

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**Note 26 – Intercompany Pooling Arrangements**

Not Applicable

**Note 27 – Structured Settlements**

Not Applicable for Health Companies

**Note 28 – Health Care Receivables**

Not Applicable

**Note 29 – Participating Policies**

Not Applicable

**Note 30 – Premium Deficiency Reserves**

No reserve was necessary to establish as of March 31, 2018.

**Note 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]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [ ] No [ ]
- 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? If yes, complete Schedule Y, Parts 1 and 1A. Yes [ ] No [X]
- 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.

- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [ ] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. \_\_\_\_\_

- 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 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? If yes, attach an explanation. Yes [ ] No [X] N/A [ ]

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. \_\_\_\_\_

- 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. \_\_\_\_\_

- 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). \_\_\_\_\_

- 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 [ ]

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

- 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 with 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 the 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

- 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).

## GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

## 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]

14.2 If yes, please complete the following:

- 14.21 Bonds
- 14.22 Preferred Stock
- 14.23 Common Stock
- 14.24 Short-Term Investments
- 14.25 Mortgage Loans on Real Estate
- 14.26 All Other
- 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)
- 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above

	1 Prior Year End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
\$	0	\$ 0
	0	0
	0	0
	0	0
	0	0
	0	0
\$	0	\$ 0
\$	0	\$ 0

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]
- If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of 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 [X] 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
PNC Institutional Asset Management	PNC Center, 1900 East 9th St., Cleveland, OH 44114

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 [X]

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 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such ["...that have access to the investment accounts", "handle securities"].

1 Name of Firm or Individual	2 Affiliation
PNC Institutional Asset Management	U
Group Services Inc., (MEWA Administrator)	A

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets? Yes [X] No [ ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [ ] No [X]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
	PNC Institutional Asset Management		OCC	NO
	Group Services, Inc., (MEWA Administrator)			NO

- 18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [X] No [ ]

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES

18.2 If no, list exceptions:

19. By self-designating 5\*GI securities, the reporting entity is certifying the following elements for each self-designated 5\*GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist.
  - b. Issuer or obligor is current on all contracted interest and principal payments.
  - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5\*GI securities?

Yes [ ] No [X]

## GENERAL INTERROGATORIES (continued)

### PART 2 - HEALTH

1. Operating Percentages:			
1.1	A&H loss percent .....		76.4 %
1.2	A&H cost containment percent .....		0.0 %
1.3	A&H expense percent excluding cost containment expenses .....		13.4 %
2.1 Do you act as a custodian for health savings accounts? .....		Yes [ ]	No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.		0
2.3 Do you act as an administrator for health savings accounts? .....		Yes [ ]	No [X]
2.4	If yes, please provide the amount of funds administered as of the reporting date.		0
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?.....		Yes [ ]	No [X]
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile or the reporting entity?.....		Yes [ ]	No [X]

**SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

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

**NONE**

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

State, Etc.	1 Active Status (a)	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..								0
2. Alaska.....AK	..N..								0
3. Arizona.....AZ	..N..								0
4. Arkansas.....AR	..N..								0
5. California.....CA	..N..								0
6. Colorado.....CO	..N..								0
7. Connecticut.....CT	..N..								0
8. Delaware.....DE	..N..								0
9. District of Columbia.....DC	..N..								0
10. Florida.....FL	..N..								0
11. Georgia.....GA	..N..								0
12. Hawaii.....HI	..N..								0
13. Idaho.....ID	..N..								0
14. Illinois.....IL	..N..								0
15. Indiana.....IN	..N..								0
16. Iowa.....IA	..N..								0
17. Kansas.....KS	..N..								0
18. Kentucky.....KY	..N..								0
19. Louisiana.....LA	..N..								0
20. Maine.....ME	..N..								0
21. Maryland.....MD	..N..								0
22. Massachusetts.....MA	..N..								0
23. Michigan.....MI	..N..								0
24. Minnesota.....MN	..N..								0
25. Mississippi.....MS	..N..								0
26. Missouri.....MO	..N..								0
27. Montana.....MT	..N..								0
28. Nebraska.....NE	..N..								0
29. Nevada.....NV	..N..								0
30. New Hampshire.....NH	..N..								0
31. New Jersey.....NJ	..N..								0
32. New Mexico.....NM	..N..								0
33. New York.....NY	..N..								0
34. North Carolina.....NC	..N..								0
35. North Dakota.....ND	..N..								0
36. Ohio.....OH	..L..	29,766,680						29,766,680	
37. Oklahoma.....OK	..N..								0
38. Oregon.....OR	..N..								0
39. Pennsylvania.....PA	..N..								0
40. Rhode Island.....RI	..N..								0
41. South Carolina.....SC	..N..								0
42. South Dakota.....SD	..N..								0
43. Tennessee.....TN	..N..								0
44. Texas.....TX	..N..								0
45. Utah.....UT	..N..								0
46. Vermont.....VT	..N..								0
47. Virginia.....VA	..N..								0
48. Washington.....WA	..N..								0
49. West Virginia.....WV	..N..								0
50. Wisconsin.....WI	..N..								0
51. Wyoming.....WY	..N..								0
52. American Samoa.....AS	..N..								0
53. Guam.....GU	..N..								0
54. Puerto Rico.....PR	..N..								0
55. U.S. Virgin Islands.....VI	..N..								0
56. Northern Mariana Islands.....MP	..N..								0
57. Canada.....CAN	..N..								0
58. Aggregate Other alien.....OT	..XXX..	0	0	0	0	0	0	0	0
59. Subtotal.....	..XXX..	29,766,680	0	0	0	0	0	29,766,680	0
60. Reporting entity contributions for Employee Benefit Plans.....	..XXX..							0	
61. Total (Direct Business).....	..XXX..	29,766,680	0	0	0	0	0	29,766,680	0

**DETAILS OF WRITE-INS**

58001. ....									0
58002. ....									0
58003. ....									0
58998. Summary of remaining write-ins for line 58 from overflow page.....		0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....		0	0	0	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	1	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....	0	Q - Qualified - Qualified or accredited reinsurer.....	0
		N - None of the above - Not allowed to write business in the state.....	56

**Sch. Y - Pt. 1  
NONE**

**Sch. Y - Pt. 1A  
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

**Explanation:**

1. The data for this supplement is not required to be filed.

**Bar Code:**



**NONE**

**COSE Health and Wellness Trust**  
**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	
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 end of current period (Lines 1+2+3+4-5+6-7-8).....	.0	.0
10. Deduct total nonadmitted amounts.....		
11. Statement value at end of current period (Line 9 minus Line 10).....	.0	.0

**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	
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 and commitment fees.....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest.....		
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).....	.0	.0
12. Total valuation allowance.....		
13. Subtotal (Line 11 plus Line 12).....	.0	.0
14. Deduct total nonadmitted amounts.....		
15. Statement value at end of current period (Line 13 minus Line 14).....	.0	.0

**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	
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).....	.0	.0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	.0	.0

**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.....	4,779,852	
2. Cost of bonds and stocks acquired.....	2,956,187	4,786,817
3. Accrual of discount.....	2,574	438
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....		
7. Deduct amortization of premium.....	5,368	7,402
8. Total foreign exchange change in book/adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	7,733,245	4,779,852
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	7,733,245	4,779,852

**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

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a).....	5,938,394	3,810,635		(8,741)	9,740,289			5,938,394
2. NAIC 2 (a).....		197,420		170	197,590			
3. NAIC 3 (a).....					0			
4. NAIC 4 (a).....					0			
5. NAIC 5 (a).....					0			
6. NAIC 6 (a).....					0			
7. Total Bonds.....	5,938,394	4,008,055	0	(8,570)	9,937,879	0	0	5,938,394
<b>PREFERRED STOCK</b>								
8. NAIC 1.....					0			
9. NAIC 2.....					0			
10. NAIC 3.....					0			
11. NAIC 4.....					0			
12. NAIC 5.....					0			
13. NAIC 6.....					0			
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	5,938,394	4,008,055	0	(8,570)	9,937,879	0	0	5,938,394

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$.....2,204,634; 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.....	.....2,204,634	.....XXX.....	.....2,216,857	.....7,859	.....9,177

**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.....	.....1,158,542	.....
2. Cost of short-term investments acquired.....	.....1,051,868	.....1,164,989
3. Accrual of discount.....	.....607	.....(6,447)
4. Unrealized valuation increase (decrease).....	.....	.....
5. Total gain (loss) on disposals.....	.....	.....
6. Deduct consideration received on disposals.....	.....	.....
7. Deduct amortization of premium.....	.....6,384	.....
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).....	.....2,204,634	.....1,158,542
11. Deduct total nonadmitted amounts.....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11).....	.....2,204,634	.....1,158,542

**Sch. DB - Pt. A - Verification  
NONE**

**Sch. DB - Pt. B - Verification  
NONE**

**Sch. DB - Pt. C - Sn. 1  
NONE**

**Sch. DB - Pt. C - Sn. 2  
NONE**

**Sch. DB - Verification  
NONE**

**SCHEDULE E - PART 2 - VERIFICATION**

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	5,897,146	
2. Cost of cash equivalents acquired.....	6,519,880	5,897,146
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		
7. Deduct amortization of premium.....		
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).....	12,417,026	5,897,146
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	12,417,026	5,897,146

**Sch. A - Pt. 2  
NONE**

**Sch. A - Pt. 3  
NONE**

**Sch. B - Pt. 2  
NONE**

**Sch. B - Pt. 3  
NONE**

**Sch. BA - Pt. 2  
NONE**

**Sch. BA - Pt. 3  
NONE**

**SCHEDULE D - PART 3**

Showing all Long-Term Bonds and Stocks ACQUIRED During 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)
<b>Bonds - U.S. Government</b>									
3130AA BG 2	FEDERAL HOME LOAN BANK 1.875% DUE 11/29/2021		02/21/2018	PNC INVESTMENTS		146,528	150,000	648	1FE
3130AC TL 8	FEDERAL HOME LOAN BANK, 1.95%, DUE 11/25/2020		01/23/2018	PNC INVESTMENTS		496,450	500,000	1,490	1FE
3135G0 Q8 9	FEDERAL NATL MTG ASSN, 1.375% DUE 10/07/2021		01/26/2018	PNC INVESTMENT		482,691	500,000	2,139	1FE
3135G0 T7 8	FEDERAL NATL MTG ASSN, 2.00% DUE 10/05/2022		01/26/2018	PNC INVESTMENTS		488,697	500,000	3,139	1FE
0599999	Total - Bonds - U.S. Government					1,614,365	1,650,000	7,416	XXX
<b>Bonds - Industrial and Miscellaneous</b>									
037833 CK 4	APPLE INC. UNSC., 1.9% Due 2/7/2020		01/23/2018	PNC Investments		248,388	250,000	2,217	1FE
06051G FT 1	BANK OF AMERICA CORP 2.625% DUE 10/19/2020		01/23/2018	PNC INVESTMENTS		200,310	200,000	1,400	1FE
17325F AA 6	CITIBANK NA, 2.0% DUE 03/20/2019 CALL		01/24/2018	PNC INVESTMENT		249,220	250,000	1,750	1FE
666807 BL 5	NORTHROP GRUMMAN CORP, 2.08% DUE 10/15/2020		01/23/2018	PNC INVESTMENTS		197,420	200,000	1,179	2FE
90331H MY 6	US BANK NA CINCINNATI, 1.4% DUE 04/26/2019		01/24/2018	PNC INVESTMENTS		247,723	250,000	875	1FE
931142 DY 6	WAL-MART STORES INC, 1.75% DUE 10/09/2019		01/23/2018	PNC INVESTMENT		198,762	200,000	924	1FE
3899999	Total - Bonds - Industrial and Miscellaneous					1,341,822	1,350,000	8,344	XXX
8399997	Total - Bonds - Part 3					2,956,187	3,000,000	15,760	XXX
8399999	Total - Bonds					2,956,187	3,000,000	15,760	XXX
9999999	Total - Bonds, Preferred and Common Stocks					2,956,187	XXX	15,760	XXX

(a) For all common stock bearing NAIC market indicator "U" provide the number of such issues:.....0.

**Sch. D - Pt. 4  
NONE**

**Sch. DB - Pt. A - Sn. 1  
NONE**

**Sch. DB - Pt. B - Sn. 1  
NONE**

**Sch. DB - Pt. D - Sn. 1  
NONE**

**Sch. DB - Pt. D - Sn. 2  
NONE**

**Sch. DL - Pt. 1  
NONE**

**Sch. DL - Pt. 2  
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	
<b>Open Depositories</b>								
PNC Bank..... Cleveland, Ohio.....		.....0.250	.....2,459	.....	.....1,808,825	.....2,286,574	.....2,938,003	XXX
0199999. Total Open Depositories.....	XXX	XXX	.....2,459	.....0	.....1,808,825	.....2,286,574	.....2,938,003	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	.....2,459	.....0	.....1,808,825	.....2,286,574	.....2,938,003	XXX
0599999. Total Cash.....	XXX	XXX	.....2,459	.....0	.....1,808,825	.....2,286,574	.....2,938,003	XXX

### SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
<b>Sweep Accounts</b>								
	PNC Bank Money Market.....		05/11/2017.....	0.650.....		12,357,457.....	24,423.....	24,423.....
	PNC Investments Money Market.....		08/21/2017.....	1.120.....		59,569.....	2,837.....	2,769.....
8499999	Total - Sweep Accounts.....					12,417,026.....	27,260.....	27,192.....
8699999	Total - Cash Equivalents.....					12,417,026.....	27,260.....	27,192.....



## MEDICARE PART D COVERAGE SUPPLEMENT

(Net of Reinsurance)

NAIC Group Code.....0

NAIC Company Code.....122

	Individual Coverage		Group Coverage		5
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	Total Cash
1. Premiums collected.....		XXX		XXX	0
2. Earned premiums.....		XXX		XXX	XXX
3. Claims paid.....		XXX		XXX	0
4. Claims incurred.....	<b>NONE</b>				XXX
5. Reinsurance coverage and low income cost sharing - claims paid net of reimbursements applied (a).....	XXX		XXX		0
6. Aggregate policy reserves - change.....		XXX		XXX	XXX
7. Expenses paid.....		XXX		XXX	0
8. Expenses incurred.....		XXX		XXX	XXX
9. Underwriting gain or loss.....	0	XXX	0	XXX	XXX
10. Cash flow results.....	XXX	XXX	XXX	XXX	0

(a) Uninsured Receivable/Payable with CMS at End of Quarter \$.....0 due from CMS or \$.....0 due to CMS.

**March 31<sup>st</sup>, 2018 Quarterly Filing**

Regarding  
Claims Triangle and Reconciliation with  
Underwriting and Investment Exhibit

for

**COSE Health and Wellness Trust**



**LEWIS & ELLIS**

Actuaries and Consultant

Prepared by Michael Brown, FSA, MAAA  
Lewis & Ellis, Inc.  
11225 College Blvd., Suite 320  
Overland Park, KS 66210  
913-766-9777  
mabrown@lewisellis.com

Underwriting and Investment Exhibit

The Underwriting and Investment was reviewed for reasonableness and consistency with applicable Actuarial Standards of Practice. Columns 1 through 4 were reviewed and reconciled back to the data. That reconciliation is below.

**1. Paid Claims (Columns 1 and 2)**

The paid claims include medical and pharmacy. Lag claims included amounts paid by the TPA to provider. However, not all claims paid by the Trust align exactly with paid claims in the triangle due to invoice timing. These invoiced amounts were added or removed as noted in the table below. The claims difference is an amount required to tie lag amounts plus invoices to the claims ledger amounts in the U&I Exhibit, this amount typically should be less than 1% of total to be considered reasonable. It currently is 0.9% of the total. We are investigating the higher differences in column 1 and column 2. The difference is higher than desired, however, it does not indicate any material issues given the overall total reconciliation.

**Underwriting and Investment Exhibit**

Paid Claims	Column 1 - Claims Incurred Prior to January 1 of Current Year	Column 2 - Claims Incurred During the Year	Total
Claim Lag less reinsurance	\$3,793,506	\$10,014,350	\$13,807,855
Plus Invoiced Amounts in 2017 Lags, Paid in 2018	\$795,684	\$0	\$795,684
Less Invoiced Amount in Lags, not paid yet	\$0	(\$1,485,805)	(\$1,485,805)
Total	\$4,589,190	\$8,528,545	\$13,117,735
<b>U&amp;I Exhibit</b>	<b>\$4,702,021</b>	<b>\$8,296,918</b>	<b>\$12,998,938</b>
\$ Difference	-\$112,831	\$231,627	\$118,796
% Difference	-2.4%	2.8%	0.9%

**Claim Reserve & Claim Liability (Column 3 and 4)**

The total claim reserve shown in column 3 and 4 equals the liabilities on Page 3, Line 1 on the Quarterly Statement. This reserve was determined by the Trust using a 76.4% loss ratio method which is conservative when compared to an actuarial lag method estimation performed by MMO. Further detail can be provided upon request. Holding a conservative reserve amount is acceptable in my opinion given the uncertainty with a large increase in membership in 2018. However, standard lag and pmpm methods are used to determine claims liabilities at year end. I recommend the Trust start using a lag method in addition to the loss ratio in the future quarters.

**Underwriting and Investment Exhibit**

<b>Claim Reserve</b>	<b>Column 3 - Claims Unpaid December 31 of Prior Year</b>	<b>Column 4 - Claims Incurred During the Year</b>	<b>Total</b>
Claim Lag Reserve + Invoices	\$968,769	\$12,888,721	\$13,857,490
<b><i>U&amp;I Exhibit</i></b>	<b><i>\$968,769</i></b>	<b><i>\$12,888,721</i></b>	<b><i>\$13,857,490</i></b>
\$ Difference	\$0	\$0	\$0
% Difference	0.0%	0.0%	0.0%

Claims Triangles (Lag Triangles) on the following page.

Medical Lag Triangle

Incurred Date	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Total
Sep-16	0	74	0	0	235	0	0	0	0	0	0	0	85,447
Oct-16	343	147	0	1,223	208	261	128	0	0	107	0	0	131,269
Nov-16	47,538	588	297	7,297	222	105	752	586	0	17,268	0	0	357,025
Dec-16	92,130	10,019	3,945	197	173	132	494	70	0	0	335	500	469,577
Jan-17	33,807	13,140	13,356	3,347	5,342	1,383	36,795	370	493	351	569	0	463,576
Feb-17	102,448	21,996	5,537	3,445	1,689	5,629	1,288	1,052	1,542	281	555	530	763,136
Mar-17	361,437	286,531	22,863	25,861	2,899	2,930	3,942	752	928	-145	749	368	973,659
Apr-17	250,886	438,286	45,658	45,742	-3,257	1,936	5,702	502	2,100	631	3,471	243	791,899
May-17		383,475	543,941	554,455	42,514	99,759	9,677	6,217	-4,588	-3,088	5,180	13,604	1,651,146
Jun-17			331,656	714,015	130,991	87,230	19,521	27,262	4,806	-942	4,043	1,385	1,319,965
Jul-17				336,132	840,554	491,249	45,420	293,008	21,559	42,088	3,254	16,680	2,089,945
Aug-17					552,828	969,513	302,087	33,861	-1,744	32,023	14,108	18,077	1,920,754
Sep-17						465,858	1,080,409	138,368	379,719	357,730	10,626	21,485	2,454,194
Oct-17							646,707	1,124,920	590,026	248,856	51,272	41,835	2,703,617
Nov-17								633,495	1,234,724	563,090	58,842	258,003	2,748,154
Dec-17									730,428	1,389,248	269,109	197,651	2,586,436
Jan-18										732,083	1,719,591	524,672	2,976,346
Feb-18											995,661	2,077,566	3,073,227
Mar-18												1,498,088	1,498,088
<b>Total</b>	<b>888,588</b>	<b>1,154,256</b>	<b>967,254</b>	<b>1,691,714</b>	<b>1,574,398</b>	<b>2,125,985</b>	<b>2,152,922</b>	<b>2,260,465</b>	<b>2,959,993</b>	<b>3,379,582</b>	<b>3,137,365</b>	<b>4,670,684</b>	<b>29,057,461</b>

Pharmacy Lag Triangle

Incurring Date	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Total
Sep-16	0	0	0	0	0	0	0	0	0	0	0	0	3,047
Oct-16	0	0	0	45	0	0	0	0	231	0	0	0	49,971
Nov-16	0	67	0	0	0	0	0	0	0	0	0	0	91,501
Dec-16	0	13	0	0	0	0	0	0	0	0	0	0	104,687
Jan-17	1,146	1,347	66	0	0	0	314	489	0	0	0	0	119,283
Feb-17	1,842	490	22	895	8	-1	0	249	0	0	0	0	203,316
Mar-17	75,903	1,948	133	0	0	394	94	489	0	0	0	0	319,505
Apr-17	163,917	116,760	198	832	0	11	727	14	367	0	0	0	282,826
May-17	168,354	109,725	176,575	300	500	41	7	20	30	0	0	0	278,977
Jun-17				119,976	1,557	849	0	0	35	0	0	0	381,951
Jul-17					234,903	607	5	-50	378	978	0	0	356,911
Aug-17					114,583	357,957	1,238	516	65	0	291	39	474,688
Sep-17						339,359	132,734	529	632	0	0	421	473,676
Oct-17							315,712	227,172	326	688	319	113	544,331
Nov-17								254,349	318,797	6,207	1,752	338	581,443
Dec-17									270,638	353,887	5,534	1,889	631,948
Jan-18										216,934	539,411	20,669	777,014
Feb-18											225,866	689,310	915,175
Mar-18												774,500	774,500
<b>Total</b>	<b>242,808</b>	<b>288,978</b>	<b>286,718</b>	<b>324,965</b>	<b>351,550</b>	<b>699,218</b>	<b>450,831</b>	<b>483,779</b>	<b>591,497</b>	<b>578,694</b>	<b>773,172</b>	<b>1,487,412</b>	<b>7,364,750</b>

Combined Lag Triangle

Incurring Date	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Total
Sep-16	0	74	0	0	235	0	0	0	0	0	0	0	88,495
Oct-16	343	147	0	1,268	208	261	128	0	231	107	0	0	181,240
Nov-16	47,538	654	297	7,297	222	105	752	586	0	17,268	0	0	448,526
Dec-16	92,130	10,032	3,945	197	173	132	494	70	0	0	335	500	574,264
Jan-17	34,953	14,486	13,422	3,347	5,342	1,383	37,109	859	493	351	569	0	582,859
Feb-17	104,290	22,487	5,559	4,340	1,696	5,628	1,288	1,302	1,542	281	555	530	966,452
Mar-17	437,339	288,479	22,996	25,861	2,899	3,324	4,035	1,241	928	-145	749	368	1,293,164
Apr-17	414,803	555,046	45,857	46,574	-3,257	1,946	6,429	516	2,466	631	3,471	243	1,074,725
May-17		551,829	653,666	554,754	43,014	99,801	9,685	6,237	-4,559	-3,088	5,180	13,604	1,930,124
Jun-17			508,230	916,932	132,548	88,079	19,521	27,262	4,841	-942	4,043	1,403	1,701,916
Jul-17				456,109	1,075,457	491,857	45,425	292,958	21,937	43,065	3,254	16,794	2,446,857
Aug-17					667,411	1,327,470	303,325	34,377	-1,679	32,023	14,399	18,116	2,395,442
Sep-17						805,217	1,213,143	138,897	380,351	357,730	10,626	21,906	2,927,870
Oct-17							962,420	1,352,092	590,353	249,545	51,591	41,948	3,247,948
Nov-17								887,845	1,553,521	569,297	60,594	258,340	3,329,596
Dec-17									1,001,066	1,743,135	274,643	199,540	3,218,385
Jan-18										949,017	2,259,002	545,341	3,753,360
Feb-18											1,221,527	2,766,876	3,988,402
Mar-18												2,272,587	2,272,587
<b>Total</b>	<b>1,131,395</b>	<b>1,443,234</b>	<b>1,253,972</b>	<b>2,016,679</b>	<b>1,925,948</b>	<b>2,825,203</b>	<b>2,603,753</b>	<b>2,744,243</b>	<b>3,551,490</b>	<b>3,958,276</b>	<b>3,910,538</b>	<b>6,158,096</b>	<b>36,422,212</b>