



HEALTH QUARTERLY STATEMENT

As of March 31, 2019
of the Condition and Affairs of the

Dental Care Plus, Inc.

NAIC Group Code..... 0, 0
(Current Period) (Prior Period)

NAIC Company Code..... 96265

Employer's ID Number..... 31-1185262

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Licensed as Business Type Health Maintenance Organization

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized..... January 6, 1986

Commenced Business..... March 1, 1988

Statutory Home Office

100 Crowne Point Place .. Cincinnati .. OH 45241
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

100 Crowne Point Place .. Cincinnati .. OH 45241
(Street and Number) (City or Town, State, Country and Zip Code)

513-554-1100
(Area Code) (Telephone Number)

Mail Address

100 Crowne Point Place .. Cincinnati .. OH 45241
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records

100 Crowne Point Place .. Cincinnati .. OH 45241
(Street and Number) (City or Town, State, Country and Zip Code)

513-554-1100
(Area Code) (Telephone Number)

Internet Web Site Address

www2.Dentalcareplus.com

Statutory Statement Contact

Robert Carr Hodgkins Jr.
(Name)

513-554-1100
(Area Code) (Telephone Number) (Extension)

rhodgkins@dentalcareplus.com
(E-Mail Address)

513-554-3189
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Robert Carr Hodgkins Jr.	President, CEO & CFO	2. Jodi Fronczek	Vice President & COO
3. David A. Kreyling D.M.D.	Secretary	4. Michael J. Carl D.D.S.	Treasurer

OTHER

Timothy P. Berghoff F.S.A., M.A.A.A Consulting Actuary

DIRECTORS OR TRUSTEES

Michael J. Carl D.D.S.	Jack M. Cook M.H.A.	James T. Foley	David A. Kreyling D.M.D.
James E. Kroeger M.B.A., C.P.A	Donald J. Peak C.P.A.	Fred H. Peck D.D.S.	Ronald L. Poulos D.D.S.
Molly Meakin Rogers C.P.A.	Stephen T. Schuler D.M.D.		

State of..... Ohio
County of..... Hamilton

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.

(Signature)
Robert Carr Hodgkins Jr.
1. (Printed Name)
President, CEO & CFO
(Title)

(Signature)
Jodi Fronczek
2. (Printed Name)
Vice President & COO
(Title)

(Signature)
David A. Kreyling D.M.D.
3. (Printed Name)
Secretary
(Title)

Subscribed and sworn to before me
This _____ day of _____

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

Yes [X] No []

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1. Bonds.....	7,757,318		7,757,318	9,581,308
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 (\$....9,687,977), cash equivalents (\$....2,135,201) and short-term investments (\$.....0).....	11,823,178		11,823,178	11,828,632
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....	1,570,788		1,570,788	
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).....	21,151,284	0	21,151,284	21,409,939
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	62,215		62,215	80,354
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	1,392,676		1,392,676	1,213,981
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.....	489,679		489,679	165,620
18.1 Current federal and foreign income tax recoverable and interest thereon.....	327,391		327,391	12,640
18.2 Net deferred tax asset.....	129,563	12,271	117,292	122,476
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	1,271,115	1,109,793	161,322	157,492
21. Furniture and equipment, including health care delivery assets (\$.....0).....	58,049	58,049	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		275	420
25. Aggregate write-ins for other than invested assets.....	29,013	29,013	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	24,911,260	1,209,126	23,702,134	23,162,922
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	24,911,260	1,209,126	23,702,134	23,162,922

DETAILS OF WRITE-INS

1101.			0	
1102.			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 Expenses.....	29,013	29,013	0	
2502.			0	
2503.			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).....	29,013	29,013	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).....	3,940,176		3,940,176	2,555,303
2. Accrued medical incentive pool and bonus amounts.....			.0	
3. Unpaid claims adjustment expenses.....	57,514		57,514	57,514
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.....	1,829,014		1,829,014	1,997,709
9. General expenses due or accrued.....	2,238,400		2,238,400	2,024,685
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)).....			.0	
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.....	452,426		452,426	1,899,244
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.....	815,123		815,123	178,881
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	.0	.0	.0	.0
24. Total liabilities (Lines 1 to 23).....	9,332,653	.0	9,332,653	8,713,336
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	114,554	122,191
26. Common capital stock.....	XXX	XXX	1,365,663	1,365,663
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX	2,773,089	2,773,089
29. Surplus notes.....	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	.0	.0
31. Unassigned funds (surplus).....	XXX	XXX	10,116,175	10,188,641
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	14,369,481	14,449,584
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	23,702,134	23,162,920

DETAILS OF WRITE-INS

2301.			.0	
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).....	.0	.0	.0	.0
2501. Gain on sale of building.....	XXX	XXX	114,554	122,191
2502. Reclassification of surplus for Federal Premium Tax - SSAP 35R.....	XXX	XXX		
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	114,554	122,191
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.....	1,182,718	1,707,765	4,399,829
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	20,455,262	20,052,812	79,495,926
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.....	803,200	711,672	2,872,922
7. Aggregate write-ins for other non-health revenues.....	XXX.....	0	0	0
8. Total revenues (Lines 2 to 7).....	XXX.....	21,258,462	20,764,484	82,368,848
Hospital and Medical:				
9. Hospital/medical benefits.....				
10. Other professional services.....		15,183,333	14,709,069	56,631,712
11. Outside referrals.....				
12. Emergency room and out-of-area.....				
13. Prescription drugs.....				
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	15,183,333	14,709,069	56,631,712
Less:				
17. Net reinsurance recoveries.....				
18. Total hospital and medical (Lines 16 minus 17).....	0	15,183,333	14,709,069	56,631,712
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....		844,324	649,200	2,535,970
21. General administrative expenses.....		5,335,605	6,020,506	21,047,310
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	21,363,262	21,378,775	80,214,992
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(104,800)	(614,291)	2,153,856
25. Net investment income earned.....		70,933	64,922	189,391
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....		(291)	(88)	(5,833)
27. Net investment gains or (losses) (Lines 25 plus 26).....	0	70,642	64,834	183,558
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)].....		(57,943)	(7,764)	(79,105)
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.....	(92,101)	(557,220)	2,258,309
31. Federal and foreign income taxes incurred.....	XXX.....	(93,632)	48,739	581,723
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	1,531	(605,959)	1,676,586

DETAILS OF WRITE-INS

0601. Self Insured.....	XXX.....	803,200	711,672	2,872,922
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.....	803,200	711,672	2,872,922
0701. Other income.....	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. Other income.....				
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.....	14,449,582	14,799,691	14,799,691
34. Net income or (loss) from Line 32.....	1,531	(605,959)	1,676,586
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.....	(5,544)	12,357	85,745
39. Change in nonadmitted assets.....	(76,088)	(131,811)	(695,137)
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.....		52,697	52,697
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.....	7,637	7,637	30,548
46. Dividends to stockholders.....			(1,470,000)
47. Aggregate write-ins for gains or (losses) in surplus.....	(7,637)	(7,637)	(30,548)
48. Net change in capital and surplus (Lines 34 to 47).....	(80,101)	(672,716)	(350,109)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	14,369,481	14,126,975	14,449,582

DETAILS OF WRITE-INS			
4701. Amortization of special surplus from gain on sale-leaseback.....	(7,637)	(7,637)	(30,548)
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).....	(7,637)	(7,637)	(30,548)

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.....	20,107,872	20,945,113	79,804,112
2. Net investment income.....	91,505	68,775	184,456
3. Miscellaneous income.....	803,200	711,672	2,872,922
4. Total (Lines 1 through 3).....	21,002,577	21,725,560	82,861,490
5. Benefit and loss related payments.....	13,798,315	14,373,698	57,592,310
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	5,711,974	6,194,532	23,757,919
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	221,119	3,058	547,154
10. Total (Lines 5 through 9).....	19,731,408	20,571,288	81,897,383
11. Net cash from operations (Line 4 minus Line 10).....	1,271,169	1,154,272	964,107
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	1,993,751	421,186	1,990,188
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).....	1,993,751	421,186	1,990,188
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	172,602	581,278	1,922,150
13.2 Stocks.....			
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....	1,570,788		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	1,743,390	581,278	1,922,150
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).....	250,360	(160,092)	68,038
CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....			
16.2 Capital and paid in surplus, less treasury stock.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			
16.6 Other cash provided (applied).....	(1,526,983)	153,025	(123,641)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(1,526,983)	153,025	(123,641)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(5,454)	1,147,205	908,505
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	11,828,632	10,920,128	10,920,128
19.2 End of period (Line 18 plus Line 19.1).....	11,823,179	12,067,333	11,828,632

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

20.0001			
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

Q07

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at End of:										
1. Prior Year.....	366,629					366,629				
2. First Quarter.....	391,658					391,658				
3. Second Quarter.....	0									
4. Third Quarter.....	0									
5. Current Year.....	0									
6. Current Year Member Months.....	0									
Total Member Ambulatory Encounters for Period:										
7. Physician.....	0									
8. Non-Physician.....	0									
9. Total.....	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred.....	0									
11. Number of Inpatient Admissions.....	0									
12. Health Premiums Written (a).....	20,455,262					20,455,262				
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	20,286,567					20,286,567				
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services.....	13,798,459					13,798,459				
18. Amount Incurred for Provision of Health Care Services.....	15,183,333					15,183,333				

(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
Claims Unpaid (Reported)						
IBNR.....	3,096,293	336,224	203,237	98,996	205,426	3,940,176
0199999. Individually Listed Claims Unpaid.....	3,096,293	336,224	203,237	98,996	205,426	3,940,176
0499999. Subtotals.....	3,096,293	336,224	203,237	98,996	205,426	3,940,176
0799999. Total Claims Unpaid.....						3,940,176

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability 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).....					0	
2. Medicare Supplement.....					0	
3. Dental only.....	2,142,229	11,656,230	304,421	3,635,755	2,446,650	2,555,302
4. Vision only.....					0	
5. Federal Employees Health Benefits Plan.....					0	
6. Title XVIII - Medicare.....					0	
7. Title XIX - Medicaid.....					0	
8. Other health.....					0	
9. Health subtotal (Lines 1 to 8).....	2,142,229	11,656,230	304,421	3,635,755	2,446,650	2,555,302
10. Healthcare receivables (a).....					0	
11. Other non-health.....					0	
12. Medical incentive pools and bonus amounts.....					0	
13. Totals (Lines 9-10+11+12).....	2,142,229	11,656,230	304,421	3,635,755	2,446,650	2,555,302

(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
No significant change from December 31, 2018 and the statement has been completed in accordance with the Accounting Practices and Procedures Manual.

	SSAP #	F/S Page	F/S Line #	Current Year to Date	2018
NET INCOME					
(1) Dental Care Plus, Inc. Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 1,531	\$ 1,676,586
(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	\$ 1,531	\$ 1,676,586
SURPLUS					
(5) Dental Care Plus, Inc. Company state basis (Page 3, line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 14,369,481	\$ 14,449,584
(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	\$ 14,369,481	\$ 14,449,584

Note 2 – Accounting Changes and Corrections of Errors

Not applicable. Dental Care Plus, Inc. (“DCP”) had no accounting changes or corrections of errors to report.

Note 3 – Business Combinations and Goodwill

Not applicable.

Note 4 – Discontinued Operations

Not applicable.

Note 5 – Investments

Not applicable. The Company did not have any investments in mortgage loans, debt restructuring, reverse mortgages, loan backed securities, or repurchase agreements for the three months ended March 31, 2019.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

Not applicable. The Company has no joint ventures, partnerships or limited liability companies that exceed 10% of its admitted assets for the three months ended March 31, 2019.

Note 7 – Investment Income

Not applicable. The Company did not have any excluded (nonadmitted) investment income due and accrued for the three months ended March 31, 2019.

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 significant changes

Note 11 – Debt

No significant changes

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

Effective July 1, 2005, the Company no longer has employees and the services are rendered by the employees of DCP Holding Company.

NOTES TO FINANCIAL STATEMENTS

Note 13 – Capital and Surplus, Shareholder’s Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

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

The Company does not have any financial instruments that pose off-balance sheet risk or financial instruments with concentrations of credit risk

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

The Company did not have any securities sold and reacquired within 30 days of the sales.

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

No significant changes

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

No significant changes

Note 20 – Fair Value Measurements

The Company classifies the assets and liabilities that require measurement of fair value on a recurring basis based on the priority of the observable and market-based sources of data into a three-level fair value hierarchy. The fair value hierarchy gives the highest priority to quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are as follows:

- Level 1 – Valuations based on quoted prices in active markets for identical assets or liabilities that the entity has the ability to access.
- Level 2 – Valuations based on significant other observable inputs other than those included in Level 1 such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable data for substantially the full term of the assets or liabilities.
- Level 3 – Valuations based on unobservable inputs such as when observable inputs are not available or inputs that are supported by little or no market activity and that are significant to the fair value of the assets or liabilities.

The following table presents the aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall on the statements of admitted assets, liabilities, and capital and surplus as of March 31, 2019 and December 31, 2018:

	March 31, 2019			December 31, 2018		
	Level 1	Level 2	Total Balance	Level 1	Level 2	Total Balance
Assets:						
Cash:						
Federally- Insured certificates of deposits		\$ 75,223	\$ 75,223		\$ 75,085	\$ 75,085
Bonds:						
Federally- Insured certificates of deposits		\$ 700,265	\$ 700,265		\$ 900,005	\$ 900,005
Investment grade corporate bonds		\$ 5,270,275	\$ 5,270,275		\$ 6,701,288	\$ 6,701,288
U.S. Government Securities	\$ 1,775,172		\$ 1,775,172	\$ 1,774,174		\$ 1,774,174
Short-term investments - Money Market Funds	\$ 664,549		\$ 664,549	\$ 454,224		\$ 454,224
Total Assets	\$ 2,439,721	\$ 6,045,763	\$ 8,485,484	\$ 2,228,398	\$ 7,676,378	\$ 9,904,776

The Company measures fair value using the following valuation methodologies. The Company uses quoted market prices in active markets to determine the fair value of exchange-traded money market securities; such items are classified as Level 1 of the fair-value hierarchy. The Company obtains and reviews the pricing service’s valuation methodologies and validates these prices using various inputs including quotes from other independent regulatory sources. When deemed necessary, the Company validates prices by replicating a sample using a discounted cash flow model and observable inputs. Such items are classified as Level 2 of the fair-value hierarchy. The Company obtains a price from an independent vendor to determine the fair value of the interest rate swap. The independent vendor uses a discounted cash flow method whereby the significant observable inputs include the replacement interest rates of similar swap instruments in the market and swap curves; such items are classified as Level 2 of the fair value hierarchy. The Company did not have any transfers between Level 1 and 2 for the three months ended March 31, 2019 and the year ended December 31, 2018. The Company did not have any Level 3 financial instruments at March 31, 2019 or December 31, 2018.

Note 21 – Other Items

No significant changes

NOTES TO FINANCIAL STATEMENTS

Note 22 – Events Subsequent

On March 12, 2019, the parent company of Dental Care Plus Inc., DCP Holding Company ("DCPG") entered in an Agreement and Plan of Merger with DentaQuest, LLC., a Delaware limited liability company. The Merger Agreement provides for the acquisition of DCPG by DentaQuest through the merger of a newly organized acquisition subsidiary of DentaQuest with and into DCPG. The Board of Directors of both companies have approved the Merger Agreement. A special meeting of the shareholders of DCPG to approve the Merger will be scheduled for a later date. Consummation of the Merger is subject to approval by state insurance regulatory authorities, approval by the shareholders of DCPG and certain other conditions set forth in the Merger Agreement. Assuming such approvals are timely secured, DentaQuest expects the Merger will be completed in the second or third quarter of 2019

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

Not applicable.

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

No significant changes

Note 26 – Intercompany Pooling Arrangements

No significant changes

Note 27 – Structured Settlements

Not applicable.

Note 28 – Health Care Receivables

Not applicable.

Note 29 – Participating Policies

Not applicable.

Note 30 – Premium Deficiency Reserves

No significant changes

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 [☒ X] No [☐]

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?
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

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	2	3
Name of Entity	NAIC Company Code	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.

12/31/2017

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.

12/31/2017

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).

09/19/2018

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 [☒ X] No [☐] N/A [☐]

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [☒ X] 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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?
(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.

Yes [☒ X] No [☐]

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:

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

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

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

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

Yes [☒ X] No [☐]

18.2 If no, list exceptions:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

19.

By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

a.

Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

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 5GI securities?

Yes [☐]

No [☒]

20.

By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:

a.

The security was purchased prior to January 1, 2018.

b.

The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c.

The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.

d.

The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes [☐]

No [☒]

Q11.2

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

1.	Operating Percentages:		
1.1	A&H loss percent		0.0 %
1.2	A&H cost containment percent		0.0 %
1.3	A&H expense percent excluding cost containment expenses		0.0 %
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 [X]	No []
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 of the reporting entity?.....	Yes []	No []

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

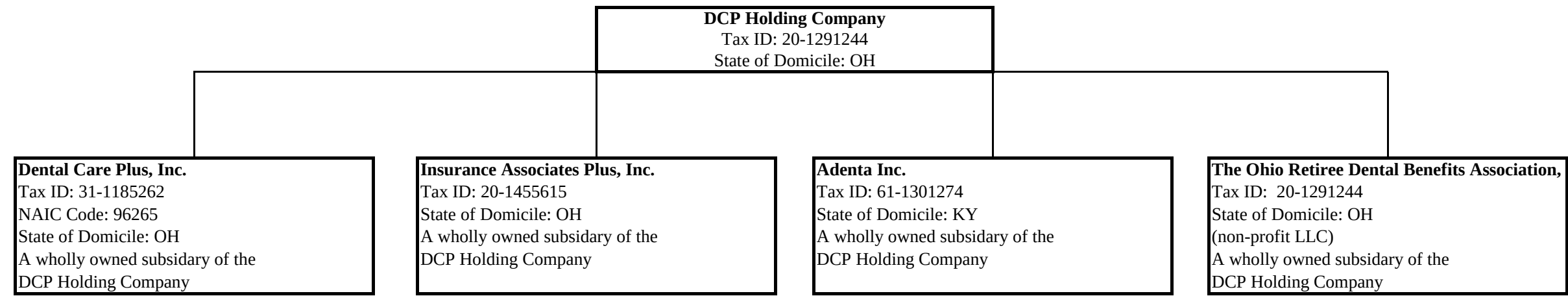
		1	Direct Business Only							
		Active Status (a)	2	3	4	5	6	7	8	9
State, Etc.			Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 through 7	Deposit-Type Contracts
1.	Alabama.....AL	...L...	46,424						46,424	
2.	Alaska.....AK	...N...							0	
3.	Arizona.....AZ	...L...	57,565						57,565	
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	...L...	399,662						399,662	
12.	Hawaii.....HI	...N...							0	
13.	Idaho.....ID	...N...							0	
14.	Illinois.....IL	...L...	158,105						158,105	
15.	Indiana.....IN	...L...	404,674						404,674	
16.	Iowa.....IA	...N...							0	
17.	Kansas.....KS	...N...							0	
18.	Kentucky.....KY	...L...	3,226,859						3,226,859	
19.	Louisiana.....LA	...N...							0	
20.	Maine.....ME	...N...							0	
21.	Maryland.....MD	...N...							0	
22.	Massachusetts.....MA	...N...							0	
23.	Michigan.....MI	...L...	118,957						118,957	
24.	Minnesota.....MN	...N...							0	
25.	Mississippi.....MS	...N...							0	
26.	Missouri.....MO	...L...	215,126						215,126	
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...	14,876,952						14,876,952	
37.	Oklahoma.....OK	...N...							0	
38.	Oregon.....OR	...N...							0	
39.	Pennsylvania.....PA	...L...	73,399						73,399	
40.	Rhode Island.....RI	...N...							0	
41.	South Carolina.....SC	...N...							0	
42.	South Dakota.....SD	...N...							0	
43.	Tennessee.....TN	...L...	88,569						88,569	
44.	Texas.....TX	...L...	469,102						469,102	
45.	Utah.....UT	...N...							0	
46.	Vermont.....VT	...N...							0	
47.	Virginia.....VA	...L...	173,690						173,690	
48.	Washington.....WA	...N...							0	
49.	West Virginia.....WV	...N...							0	
50.	Wisconsin.....WI	...L...	146,178						146,178	
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...	20,455,262	0	0	0	0	0	20,455,262	0
60.	Reporting entity contributions for Employee Benefit Plans.....	...XXX...							0	
61.	Total (Direct Business).....	...XXX...	20,455,262	0	0	0	0	0	20,455,262	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.....					14	R - Registered - Non-domiciled RRGs.....			
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state					0	Q - Qualified - Qualified or accredited reinsurer.....			
						N - None of the above - Not allowed to write business in the state.....			

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
.....			201291244...	.....	.....	.....	DCP Holding Company.....	OH.....	UDP.....	.....	Other.....	.....	.....	.....N.....	.....
.....			201455615...	.....	.....	.....	Insurance Associates Plus, Inc.....	OH.....	NIA.....	DCP Holding Company.....	Ownership.....	100.000	DCP Holding Company.....	N.....	.....
.....			611301274...	.....	.....	.....	Adenta, Inc.....	OH.....	NIA.....	DCP Holding Company.....	Ownership.....	100.000	DCP Holding Company.....	N.....	.....
.....			201291244...	.....	.....	.....	OH Retiree Dental Benefits Assoc., LLC.....	OH.....	NIA.....	DCP Holding Company.....	Ownership.....	100.000	DCP Holding Company.....	N.....	.....

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.

Bar Code:



Overflow Page for Write-Ins

NONE

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	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	2
	Year to Date	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	2
	Year to Date	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	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	9,581,307	9,667,819
2. Cost of bonds and stocks acquired.....	172,602	1,922,150
3. Accrual of discount.....	1,317	3,834
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....	(408)	(7,384)
6. Deduct consideration for bonds and stocks disposed of.....	1,993,751	1,990,601
7. Deduct amortization of premium.....	3,750	14,924
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.....		413
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	7,757,318	9,581,307
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	7,757,318	9,581,307

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
NAIC Designation	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
BONDS								
1. NAIC 1 (a).....	7,172,791	100,000	1,451,932	198,480	6,019,339			7,172,791
2. NAIC 2 (a).....	2,215,177	72,602	473,406	(200,981)	1,613,393			2,215,177
3. NAIC 3 (a).....	193,340		68,821	68	124,586			193,340
4. NAIC 4 (a).....					0			
5. NAIC 5 (a).....					0			
6. NAIC 6 (a).....					0			
7. Total Bonds.....	9,581,308	172,602	1,994,159	(2,433)	7,757,318	0	0	9,581,308
PREFERRED STOCK								
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.....	9,581,308	172,602	1,994,159	(2,433)	7,757,318	0	0	9,581,308

(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 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

Sch. DA - Pt. 1
NONE

Sch. DA - Verification
NONE

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	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	3,481,550	206,239
2. Cost of cash equivalents acquired.....	224,571	3,625,676
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	1,570,920	350,365
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).....	2,135,201	3,481,550
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	2,135,201	3,481,550

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	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation and Administrative Symbol/Market Indicator (a)
Bonds - Industrial and Miscellaneous									
24737B AA 3	DAL 191AA AA - ABS.....		03/06/2019.....	Paine Webber.....		100,000	100,000		1FE.....
25470D AH 2	DISCOVERY COMMUNICATIONS LLC.....		01/15/2019.....	Paine Webber.....		72,602	75,000	718	2FE.....
3899999.	Total - Bonds - Industrial and Miscellaneous.....					172,602	175,000	718	XXX.....
8399997.	Total - Bonds - Part 3.....					172,602	175,000	718	XXX.....
8399999.	Total - Bonds.....					172,602	175,000	718	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....					172,602	XXX	718	XXX.....

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

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter

1	2		3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
											11	12	13	14	15								
CUSIP Identification	Description		F o r e i g n	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Admini- strative Symbol/ Market Indicator (a)	
Bonds - Industrial and Miscellaneous																							
03027X	AD	2		03/28/2019.	Paine Webber.....			27,005	25,000	26,393	25,897		(39)	(39)		25,858		1,147	1,147	785	02/15/2024.	2FE.....	
03027X	AQ	3		03/28/2019.	Paine Webber.....			74,889	75,000	74,807	74,842		8	8		74,850		39	39	663	06/15/2023.	2FE.....	
037833	AK	6		03/28/2019.	Paine Webber.....			49,628	50,000	47,881	47,905		112	112		48,018		1,610	1,610	493	05/03/2023.	1FE.....	
05531F	AX	1		03/28/2019.	Paine Webber.....			75,143	75,000	74,860	74,908		7	7		74,914		229	229		04/01/2022.	1FE.....	
059165	EF	3		03/28/2019.	Paine Webber.....			25,462	25,000	25,218	25,184		(10)	(10)		25,174		288	288	628	07/01/2023.	1FE.....	
06051G	FW	4		03/28/2019.	Paine Webber.....			74,894	75,000	76,409	75,705		(74)	(74)		75,631		(737)	(737)	886	04/19/2021.	1FE.....	
06051G	FZ	7		03/28/2019.	Paine Webber.....			49,512	50,000	47,647	47,739		138	138		47,877		1,635	1,635	556	10/21/2022.	1FE.....	
06406R	AJ	6		03/28/2019.	Paine Webber.....			82,182	80,000	79,986	79,987		1	1		79,987		2,194	2,194	1,748	08/11/2023.	1FE.....	
14913Q	2L	2		03/28/2019.	Paine Webber.....			77,182	75,000	74,949	74,955		2	2		74,957		2,224	2,224	978	05/15/2023.	1FE.....	
191216	BT	6		03/06/2019.	Paine Webber.....			74,042	75,000	74,868	74,952		5	5		74,957		(915)	(915)	512	10/27/2020.	1FE.....	
20030N	BN	0		03/28/2019.	Paine Webber.....			5,082	5,000	5,107	5,075		(3)	(3)		5,073		10	10	106	08/15/2025.	1FE.....	
20030N	BV	2		03/28/2019.	Paine Webber.....			24,336	25,000	24,670	24,807		15	15		24,822		(486)	(486)	289	01/15/2022.	1FE.....	
21036P	AW	8		03/28/2019.	Paine Webber.....			74,092	75,000	74,687	74,755		15	15		74,770		(678)	(678)	795	11/07/2022.	2FE.....	
23283P	AK	0		03/28/2019.	Paine Webber.....			72,132	70,000	68,775	68,788		33	33		68,821		3,310	3,310	2,048	03/15/2027.	3FE.....	
235851	AP	7		03/28/2019.	Paine Webber.....			49,787	50,000	50,753	50,277		(42)	(42)		50,235		(448)	(448)	653	09/15/2020.	1FE.....	
25468P	DJ	2		03/28/2019.	Paine Webber.....			24,916	25,000	24,976	24,990		1	1		24,991		(75)	(75)	366	02/12/2021.	1FE.....	
25470D	AH	2		03/28/2019.	Paine Webber.....			74,866	75,000	72,602		111	111		72,713		2,153	2,153		04/01/2023.	2FE.....		
29364W	AW	8		03/28/2019.	Paine Webber.....			24,917	25,000	23,712	23,786		27	27		23,813		1,104	1,104		04/01/2028.	1FE.....	
38148J	6K	2		01/28/2019.	Maturity @ 100.00.....			200,000	200,000	200,000	200,000			0		200,000			0	1,571	01/28/2019.	1FE.....	
419838	AA	5		01/15/2019.	Paydown.....			1,237	1,237	1,237	1,237			0		1,237		(0)	(0)		07/15/2027.	1FE.....	
46625H	RT	9		03/28/2019.	Paine Webber.....			74,525	75,000	74,881	74,941		6	6		74,947		(422)	(422)	570	06/07/2021.	1FE.....	
594918	BR	4		03/28/2019.	Paine Webber.....			63,227	65,000	60,178	65,114		(4)	(4)		65,110		(1,883)	(1,883)	1,010	08/08/2026.	1FE.....	
594918	BW	3		03/28/2019.	Paine Webber.....			50,064	50,000	49,893	49,932		5	5		49,937		126	126	783	02/06/2022.	1FE.....	
68389X	AS	4		03/28/2019.	Paine Webber.....			129,865	125,000	125,558	125,303		(16)	(16)		125,287		4,578	4,578	3,222	07/15/2023.	1FE.....	
693475	AT	2		03/28/2019.	Paine Webber.....			75,035	75,000	74,847	74,869		3	3		74,872		163	163	866	05/19/2027.	1FE.....	
69353R	EK	0		03/28/2019.	Paine Webber.....			49,887	50,000	50,427	50,280		(10)	(10)		50,270		(383)	(383)	893	02/23/2025.	1FE.....	
694308	HB	6		01/08/2019.	Paine Webber.....			83,000	100,000	99,354	99,509		3	3		99,512		(16,512)	(16,512)	987	08/15/2022.	2FE.....	
713448	CX	4		03/28/2019.	Paine Webber.....			76,548	75,000	77,630	76,797		(127)	(127)		76,670		(122)	(122)	1,640	07/17/2022.	1FE.....	
747262	AS	2		03/28/2019.	Paine Webber.....			51,226	50,000	51,129	50,899		(38)	(38)		50,861		365	365		04/01/2024.	2FE.....	
84858W	AA	4		02/15/2019.	Paydown.....			2,842	2,842	2,853	2,852		(0)	(0)		2,852		(10)	(10)		08/15/2031.	1FE.....	
91159J	AA	4		03/28/2019.	Paine Webber.....			50,213	50,000	50,486	50,384		(26)	(26)		50,358		(145)	(145)	1,049	07/15/2022.	1FE.....	
92343V	DG	6		03/29/2019.	Call @ 100.00.....			75,000	75,000	74,673	74,827		15	15		74,842		158	158	817	08/15/2021.	2FE.....	
94974B	GP	9		03/28/2019.	Paine Webber.....			51,019	50,000	49,913	49,940		2	2		49,942		1,077	1,077	897	09/29/2025.	1FE.....	
3899999.	Total - Bonds - Industrial and Miscellaneous.....							1,993,751	1,999,080	1,991,355	1,921,434	0	123	0	123	0	1,994,159	0	(408)	(408)	25,812	XXX	XXX
8399997.	Total - Bonds - Part 4.....							1,993,751	1,999,080	1,991,355	1,921,434	0	123	0	123	0	1,994,159	0	(408)	(408)	25,812	XXX	XXX
8399999.	Total - Bonds.....							1,993,751	1,999,080	1,991,355	1,921,434	0	123	0	123	0	1,994,159	0	(408)	(408)	25,812	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks.....							1,993,751	XXX	1,991,355	1,921,434	0	123	0	123	0	1,994,159	0	(408)	(408)	25,812	XXX	XXX

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

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	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Fifth Third.....					5,099,343	4,108,564	4,901,404	XXX
Key.....					3,399,672	3,520,268	4,353,072	XXX
UBS.....					1,781,452	1,807,341	433,471	XXX
0199999. Total Open Depositories.....	XXX	XXX	0	0	10,280,467	9,436,173	9,687,947	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	0	0	10,280,467	9,436,173	9,687,947	XXX
0499999. Cash in Company's Office.....	XXX	XXX	XXX	XXX	30	30	30	XXX
0599999. Total Cash.....	XXX	XXX	0	0	10,280,497	9,436,203	9,687,977	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
Exempt Money Market Mutual Funds as Identified by the SVO												
90262Y 80 2	UBS SELECT TREASURY INST.....						03/29/2019.....	2.290		1,445,429		13,977
94975H 29 6	WELLS FRGO TREASURY PLUS CL I MMF.....						03/04/2019.....	2.270		25,223	48	138
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO.....										1,470,652	48	14,114
Other Cash Equivalents												
	Federated Gov Obligation Institutional S.....						03/26/2019.....			664,549	1,287	2,909
8799999. Total - Other Cash Equivalents.....										664,549	1,287	2,909
8899999. Total - Cash Equivalents										2,135,201	1,336	17,023