

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **DECEMBER 31, 2004**

OF THE **El Paso First Health Plans, Inc.**
(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION **CONSOLIDATED**
(Location)

EXHIBIT II - 2004 Quarter/Annual
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES

Indicate Reporting Period: Current Quarter Annual

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)		4. MEDICAID (Omit Provider HMO Business)		5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. PUBLICLY SUPPORTED HEALTH CARE	9. NON-RISK
			RISK	COST	RISK	COST					
1. ENROLLEES AT THE END OF REPT PERIOD.....	41,554	1,530	0	0	28,313	0	0	0	11,711	0	0
2. MEMBER MONTHS.....	122,723	4,643	0	0	82,100	0	0	0	35,980	0	0
3. Direct Premiums.....	15,104,328	474,188	0	0	12,393,138	0	0	XXXXXXXX	2,237,002	0	XXXXXXXX
4. Net Premiums.....	15,104,328	474,188	0	0	12,393,138	0	0	XXXXXXXX	2,237,002	0	XXXXXXXX
5. Change in unearned premium reserve & reserve for rate cre	0	0	0	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk Revenue.....	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0	0
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8).....	15,104,328	474,188	0	0	12,393,138	0	0	0	2,237,002	0	0
10. Other Revenues (excluding investment income).....	0	0	0	0	0	0	0	0	0	0	0
11. TOTAL REVENUE (L9 to L10).....	15,104,328	474,188	0	0	12,393,138	0	0	0	2,237,002	0	0
MEDICAL AND HOSPITAL:											
12. Hospital/Medical Benefits.....	9,161,217	284,652	0	0	7,637,612	0	0	0	1,238,953	0	0
13. Other Professional Services.....	1,526,869	47,442	0	0	1,272,935	0	0	0	206,492	0	0
14. Outside Referrals.....	1,804,482	56,068	0	0	1,504,378	0	0	0	244,036	0	0
15. Emergency Room and Out-of-Area.....	1,388,064	43,129	0	0	1,157,214	0	XXXXXXXX	0	187,721	0	0
16. Other Medical & Hospital.....	0	0	0	0	0	0	0	0	0	0	0
17. Incentive Pool & Withhold Adjustments.....	0	0	0	0	0	0	0	0	0	0	0
18. SUBTOTAL MED & HOSP (L12 to L17).....	13,880,632	431,291	0	0	11,572,139	0	0	0	1,877,202	0	0
19. Net Reins Claims Incurred.....	0	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	13,880,632	431,291	0	0	11,572,139	0	0	0	1,877,202	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	1,223,940	43,141	0	0	820,999	0	0	0	359,800	0	0
23. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0	0
24. TOTAL UNDERWRITING DEDUCTIONS(L20 to L23).....	15,104,572	474,432	0	0	12,393,138	0	0	0	2,237,002	0	0
25. NET UNDERWRITING GAIN/(LOSS) (L9 less L24).....	(244)	(244)	0	0	0	0	0	0	0	0	0
26. Net Investment Income Earned.....	5,600	62	0	0	5,331	0	0	0	207	0	0
27. Net Realized Capital Gains/(Losses).....	0	0	0	0	0	0	0	0	0	0	0
28. NET INVESTMENT GAINS/(LOSSES) (L26 to L27).....	5,600	62	0	0	5,331	0	0	0	207	0	0
29. Other Expenses.....	0	0	0	0	0	0	0	0	0	0	0
30. INCOME (LOSS) BEFORE FIT & EXP ITEMS (L10 + L25 +	5,356	(182)	0	0	5,331	0	0	0	207	0	0
31. Extraordinary Items & Federal Income Taxes.....	0	0	0	0	0	0	0	0	0	0	0
32. NET INCOME (LOSS) (L30 less L31).....	5,356	(182)	0	0	5,331	0	0	0	207	0	0
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State								
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)								

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ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES

Indicate Reporting Period: Year-to-Date **X**

	1. Total	2. COMMERCIAL RISK (Omit Provider HMO Business)	3. MEDICARE (Omit Provider HMO Business)		4. MEDICAID (Omit Provider HMO Business)		5. POINT OF SERVICE RIDER COVERAGE	6. ASSUMED RISK (as Provider HMO)	7. CHILDREN'S HEALTH INSURANCE PLAN	8. PUBLICLY SUPPORTED HEALTH CARE	9. NON-RISK
			RISK	COST	RISK	COST					
1. ENROLLEES AT THE END OF REPT PERIOD.....	41,554	1,530	0	0	28,313	0	0	0	11,711	0	0
2. MEMBER MONTHS.....	477,086	12,350	0	0	305,306	0	0	0	159,430	0	0
3. Direct Premiums.....	56,959,486	2,270,308	0	0	44,734,528	0	0	XXXXXXXX	9,954,650	0	XXXXXXXX
4. Net Premiums.....	56,959,486	2,270,308	0	0	44,734,528	0	0	XXXXXXXX	9,954,650	0	XXXXXXXX
5. Change in unearned premium reserve & reserve for rate cre	0	0	0	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk Revenue.....	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0	0
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8).....	56,959,486	2,270,308	0	0	44,734,528	0	0	0	9,954,650	0	0
10. Other Revenues (excluding investment income).....	0	0	0	0	0	0	0	0	0	0	0
11. TOTAL REVENUE (L9 to L10).....	56,959,486	2,270,308	0	0	44,734,528	0	0	0	9,954,650	0	0
MEDICAL AND HOSPITAL:											
12. Hospital/Medical Benefits.....	34,444,654	1,417,054	0	0	27,509,769	0	0	0	5,517,831	0	0
13. Other Professional Services.....	5,740,776	236,175	0	0	4,584,963	0	0	0	919,638	0	0
14. Outside Referrals.....	6,784,553	279,117	0	0	5,418,590	0	0	0	1,086,846	0	0
15. Emergency Room and Out-of-Area.....	5,218,887	214,705	0	0	4,168,147	0	XXXXXXXX	0	836,035	0	0
16. Other Medical & Hospital.....	0	0	0	0	0	0	0	0	0	0	0
17. Incentive Pool & Withhold Adjustments.....	0	0	0	0	0	0	0	0	0	0	0
18. SUBTOTAL MED & HOSP (L12 to L17).....	52,188,870	2,147,051	0	0	41,681,469	0	0	0	8,360,350	0	0
19. Net Reins Claims Incurred.....	0	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	52,188,870	2,147,051	0	0	41,681,469	0	0	0	8,360,350	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	4,770,860	123,501	0	0	3,053,059	0	0	0	1,594,300	0	0
23. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0	0
24. TOTAL UNDERWRITING DEDUCTIONS(L20 to L23).....	56,959,730	2,270,552	0	0	44,734,528	0	0	0	9,954,650	0	0
25. NET UNDERWRITING GAIN/(LOSS) (L9 less L24).....	(244)	(244)	0	0	0	0	0	0	0	0	0
26. Net Investment Income Earned.....	23,498	850	0	0	19,166	0	0	0	3,482	0	0
27. Net Realized Capital Gains/(Losses).....	0	0	0	0	0	0	0	0	0	0	0
28. NET INVESTMENT GAINS/(LOSSES) (L26 to L27).....	23,498	850	0	0	19,166	0	0	0	3,482	0	0
29. Other Expenses.....	0	0	0	0	0	0	0	0	0	0	0
30. INCOME (LOSS) BEFORE FIT & EXP ITEMS (L10 + L25 +	23,254	606	0	0	19,166	0	0	0	3,482	0	0
31. Extraordinary Items & Federal Income Taxes.....	0	0	0	0	0	0	0	0	0	0	0
32. NET INCOME (LOSS) (L30 less L31).....	23,254	606	0	0	19,166	0	0	0	3,482	0	0
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State								
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)								