

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **JUNE 30, 2005**

OF THE **EI Paso First Health Plans, Inc.**

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION **CONSOLIDATED**

(Location)

**EXHIBIT II (Filed Annually and Quarterly)
ACTUAL REVENUES AND EXPENSES BY MAJOR SPECIFIED LINES**

Indicate Reporting Period: Current Quarter **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.....	43,508	1,529	0	0	31,062	0	0	0	10,917	0	0
2. MEMBER MONTHS.....	128,700	4,574	0	0	91,052	0	0	0	33,074	0	0
3. Direct Premium.....	16,927,524	1,011,415	0	0	13,857,747	0	0	XXXXXXXX	2,058,362	0	XXXXXXXX
4. Premiums.....	16,927,524	1,011,415	0	0	13,857,747	0	0	XXXXXXXX	2,058,362	0	XXXXXXXX
5. Chg in unearned prem. reserve & reserve for rate credits...	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)	16,927,524	1,011,415	0	0	13,857,747	0	0	0	2,058,362	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).....	16,927,524	1,011,415	0	0	13,857,747	0	0	0	2,058,362	0	0
MEDICAL AND HOSPITAL:											
12. Hospital/Medical Benefits.....	10,322,781	637,380	0	0	8,545,170	0	0	0	1,140,231	0	0
13. Other Professional Services.....	1,720,463	106,230	0	0	1,424,195	0	0	0	190,038	0	0
14. Outside Referrals.....	2,033,275	125,544	0	0	1,683,140	0	0	0	224,591	0	0
15. Emergency Room and Out-of-Area.....	1,564,056	96,572	0	0	1,294,722	0	XXXXXXXX	0	172,762	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).....	15,640,575	965,726	0	0	12,947,227	0	0	0	1,727,622	0	0
19. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	15,640,575	965,726	0	0	12,947,227	0	0	0	1,727,622	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	1,286,760	45,500	0	0	910,520	0	0	0	330,740	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)....	16,927,335	1,011,226	0	0	13,857,747	0	0	0	2,058,362	0	0
25. NET UNDERWRITING GAIN/(LOSS) (L9 less L24).....	189	189	0	0	0	0	0	0	0	0	0
26. Net Investment Income Earned.....	12,966	774	0	0	10,615	0	0	0	1,577	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).....	12,966	774	0	0	10,615	0	0	0	1,577	0	0
29. Other Expenses.....	0	0	0	0	0	0	0	0	0	0	0
30. INCOME (LOSS) BEFORE FIT & EX ITEMS(L10+L25+L2	13,155	963	0	0	10,615	0	0	0	1,577	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).....	13,155	963	0	0	10,615	0	0	0	1,577	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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**EXHIBIT II (Filed Annually and Quarterly)
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	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.....	43,508	1,529	0	0	31,062	0	0	0	10,917	0	0
2. MEMBER MONTHS.....	254,439	9,125	0	0	178,165	0	0	0	67,149	0	0
3. Direct Premium.....	33,233,269	1,986,991	0	0	27,069,587	0	0	XXXXXXXX	4,176,691	0	XXXXXXXX
4. Premiums.....	33,233,269	1,986,991	0	0	27,069,587	0	0	XXXXXXXX	4,176,691	0	XXXXXXXX
5. Chg in unearned prem. reserve & reserve for rate credits...	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)	33,233,269	1,986,991	0	0	27,069,587	0	0	0	4,176,691	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).....	33,233,269	1,986,991	0	0	27,069,587	0	0	0	4,176,691	0	0
MEDICAL AND HOSPITAL:											
12. Hospital/Medical Benefits.....	20,256,688	1,253,216	0	0	16,690,039	0	0	0	2,313,433	0	0
13. Other Professional Services.....	3,376,114	208,869	0	0	2,781,673	0	0	0	385,572	0	0
14. Outside Referrals.....	3,989,953	246,845	0	0	3,287,432	0	0	0	455,676	0	0
15. Emergency Room and Out-of-Area.....	3,069,194	189,881	0	0	2,528,793	0	XXXXXXXX	0	350,520	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).....	30,691,949	1,898,811	0	0	25,287,937	0	0	0	3,505,201	0	0
19. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	30,691,949	1,898,811	0	0	25,287,937	0	0	0	3,505,201	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	2,541,320	88,180	0	0	1,781,650	0	0	0	671,490	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)....	33,233,269	1,986,991	0	0	27,069,587	0	0	0	4,176,691	0	0
25. NET UNDERWRITING GAIN/(LOSS) (L9 less L24).....	0	0	0	0	0	0	0	0	0	0	0
26. Net Investment Income Earned.....	21,669	1,296	0	0	17,665	0	0	0	2,708	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).....	21,669	1,296	0	0	17,665	0	0	0	2,708	0	0
29. Other Expenses.....	0	0	0	0	0	0	0	0	0	0	0
30. INCOME (LOSS) BEFORE FIT & EX ITEMS(L10+L25+L2	21,669	1,296	0	0	17,665	0	0	0	2,708	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).....	21,669	1,296	0	0	17,665	0	0	0	2,708	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.)								