

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **SEPTEMBER 30, 2006**

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

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISIONATION / 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 B	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						
1. ENROLLEES AT THE END OF REPT PERIOD.....	44,585	888	0	0	34,467	0	0	9,230	0	0
2. MEMBER MONTHS.....	134,962	2,784	0	0	103,442	0	0	28,736	0	0
3. Direct Premium.....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	XXXXXXXX
4. Net Premium.....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	XXXXXXXX
5. Change in unearned premium reserve and reserve for rate cre	0	0	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8)....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	0
10. Other Revenues (excluding investment income).....	0	0	0	0	0	0	0	0	0	0
11. TOTAL REVENUE (L9 to L10).....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	0
MEDICAL AND HOSPITAL:										
12. Hospital/Medical Benefits.....	12,247,779	394,910	0	0	10,807,052	0	0	1,045,817	0	0
13. Other Professional Services.....	2,041,296	65,818	0	0	1,801,175	0	0	174,303	0	0
14. Outside Referrals.....	2,412,442	77,786	0	0	2,128,662	0	0	205,994	0	0
15. Emergency Room and Out-of-Area.....	1,855,724	59,835	0	0	1,637,432	XXXXXXXX	0	158,457	0	0
16. Other Medical & Hospital.....	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
18. SUBTOTAL MED & HOSP (L12 to L17).....	18,557,241	598,349	0	0	16,374,321	0	0	1,584,571	0	0
19. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	18,557,241	598,349	0	0	16,374,321	0	0	1,584,571	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	1,349,140	27,910	0	0	1,034,420	0	0	286,810	0	0
23. Increase in Reserves for A&H contracts.....	0	0	0	0	0	0	0	0	0	0
24. TOTAL UNDERWRITING DEDUCTIONS (L20 to L23).....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	0
25. NET UNDERWRITING GAIN/LOSS (L9 less L24).....	0	0	0	0	0	0	0	0	0	0
26. Net Investment Income Earned.....	28,967	911	0	0	25,333	0	0	2,723	0	0
27. Net Realized Capital Gains/Losses.....	0	0	0	0	0	0	0	0	0	0
28. NET INVESTMENT GAINS/LOSSES (L26 to L27).....	28,967	911	0	0	25,333	0	0	2,723	0	0
29. Other Expenses.....	0	0	0	0	0	0	0	0	0	0
30. INCOME/LOSSES before FIT + EX Items (L10+L25+L28-L2	28,967	911	0	0	25,333	0	0	2,723	0	0
31. Extraordinary Items & Federal income taxes.....	0	0	0	0	0	0	0	0	0	0
32. NET INCOME/LOSS (L30 less L31).....	28,967	911	0	0	25,333	0	0	2,723	0	0
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....	0	0	(Examples of non-taxable enrollees are State			0		# of Enrollees in		
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....	0	0	of Texas enrollees and Federal employees.)			0		# of Member Months in		

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

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4. Net Premium.....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	XXXXXXXX
5. Change in unearned premium reserve and reserve for rate cre	0	0	0	0	0	0	0	0	0	0
6. Fee-for-Service (gross revenues).....	0	XXXXXXXX	0	0	0	XXXXXXXX	XXXXXXXX	XXXXXXXX	0	0
7. Risk Revenue.....	0	XXXXXXXX	0	0	XXXXXXXX	XXXXXXXX	0	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	0	0	0	0	0	0	0	0	0	0
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8)....	19,906,381	626,259	0	0	17,408,741	0	0	1,871,381	0	0
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