

TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING **JUNE 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.....	44,897	534	0	0	35,550	0	0	8,813	0	0
2. MEMBER MONTHS.....	134,098	1,810	0	0	105,584	0	0	26,704	0	0
3. Direct Premium.....	20,077,807	440,437	0	0	17,918,821	0	0	1,718,549	0	XXXXXXXX
4. Net Premium.....	20,077,807	440,437	0	0	17,918,821	0	0	1,718,549	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)....	20,077,807	440,437	0	0	17,918,821	0	0	1,718,549	0	0
10. Other Revenues (excluding investment income).....	63,763	0	0	0	0	0	0	0	0	63,763
11. TOTAL REVENUE (L9 to L10).....	20,141,570	440,437	0	0	17,918,821	0	0	1,718,549	0	63,763
MEDICAL AND HOSPITAL:										
12. Hospital/Medical Benefits.....	12,133,898	282,654	0	0	10,934,811	0	0	916,433	0	0
13. Other Professional Services.....	2,022,316	47,109	0	0	1,822,468	0	0	152,739	0	0
14. Outside Referrals.....	2,390,010	55,674	0	0	2,153,826	0	0	180,510	0	0
15. Emergency Room and Out-of-Area.....	1,838,469	42,826	0	0	1,656,789	XXXXXXXX	0	138,854	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).....	18,384,693	428,263	0	0	16,567,894	0	0	1,388,536	0	0
19. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	18,384,693	428,263	0	0	16,567,894	0	0	1,388,536	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	1,558,054	21,748	0	0	1,241,611	0	0	294,695	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).....	19,942,747	450,011	0	0	17,809,505	0	0	1,683,231	0	0
25. NET UNDERWRITING GAIN/LOSS (L9 less L24).....	135,060	(9,574)	0	0	109,316	0	0	35,318	0	0
26. Net Investment Income Earned.....	61,355	1,346	0	0	54,757	0	0	5,252	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).....	61,355	1,346	0	0	54,757	0	0	5,252	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	260,178	(8,228)	0	0	164,073	0	0	40,570	0	63,763
31. Extraordinary Items & Federal income taxes.....	0	0	0	0	0	0	0	0	0	0
32. NET INCOME/LOSS (L30 less L31).....	260,178	(8,228)	0	0	164,073	0	0	40,570	0	63,763
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		0	(Examples of non-taxable enrollees are State			0 # of Enrollees in C3-Pt D included in C3-Basic				
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		0	of Texas enrollees and Federal employees.)			0 # of Member Months in C3-Pt D included in C3-Basic				

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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 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.....	44,897	534	0	0	35,550	0	0	8,813	0	0
2. MEMBER MONTHS.....	269,060	4,594	0	0	209,026	0	0	55,440	0	0
3. Direct Premium.....	39,984,188	1,066,696	0	0	35,327,562	0	0	3,589,930	0	XXXXXXXX
4. Net Premium.....	39,984,188	1,066,696	0	0	35,327,562	0	0	3,589,930	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)....	39,984,188	1,066,696	0	0	35,327,562	0	0	3,589,930	0	0
10. Other Revenues (excluding investment income).....	63,763	0	0	0	0	0	0	0	0	63,763
11. TOTAL REVENUE (L9 to L10).....	40,047,951	1,066,696	0	0	35,327,562	0	0	3,589,930	0	63,763
MEDICAL AND HOSPITAL:										
12. Hospital/Medical Benefits.....	24,381,676	677,564	0	0	21,741,862	0	0	1,962,250	0	0
13. Other Professional Services.....	4,063,613	112,927	0	0	3,623,644	0	0	327,042	0	0
14. Outside Referrals.....	4,802,452	133,460	0	0	4,282,488	0	0	386,504	0	0
15. Emergency Room and Out-of-Area.....	3,694,194	102,661	0	0	3,294,222	XXXXXXXX	0	297,311	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).....	36,941,935	1,026,612	0	0	32,942,216	0	0	2,973,107	0	0
19. Net Reins Recoveries Incurred.....	0	0	0	0	0	0	0	0	0	0
20. TOTAL MEDICAL & HOSP (L18 less L19).....	36,941,935	1,026,612	0	0	32,942,216	0	0	2,973,107	0	0
21. Claims Adjustment Expenses.....	0	0	0	0	0	0	0	0	0	0
22. General Administrative Expenses.....	2,907,193	49,658	0	0	2,276,030	0	0	581,505	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).....	39,849,128	1,076,270	0	0	35,218,246	0	0	3,554,612	0	0
25. NET UNDERWRITING GAIN/LOSS (L9 less L24).....	135,060	(9,574)	0	0	109,316	0	0	35,318	0	0
26. Net Investment Income Earned.....	90,322	2,257	0	0	80,090	0	0	7,975	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).....	90,322	2,257	0	0	80,090	0	0	7,975	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-L29).....	289,145	(7,317)	0	0	189,406	0	0	43,293	0	63,763
31. Extraordinary Items & Federal income taxes.....	0	0	0	0	0	0	0	0	0	0
32. NET INCOME/LOSS (L30 less L31).....	289,145	(7,317)	0	0	189,406	0	0	43,293	0	63,763
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....	0	0	(Examples of non-taxable enrollees are State			0 # of Enrollees in C3-Pt D included in C3-Basic				
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....	0	0	of Texas enrollees and Federal employees.)			0 # of Member Months in C3-Pt D included in C3-Basic				