## TEXAS HMO SUPPLEMENT

OF THE Scott & White Health Plan

(Name of Company)

REPORT FOR :1. CORPORATION / 2. DIVISION CONSOLIDATED

STATEMENT FOR THE PERIOD ENDING JUNE 30, 2003

31b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS...

(Location)

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

Indicate Reporting Period: Current Quarter X

Part	F	indicate Reporting Period: Current Quarter A										•
ENROLLEES AT THE END OF REPT PERIOD.   16(1)(2)   140,007   0   25.115   10   0   0   0   0   0   0   0   0		1. Total	(Omit Provider					SERVICE RIDER		HEALTH	SUPPORTED	9. NON-RISK
Application			Tiwo Business)	RISK	COST	RISK	COST	COVERAGE			HEALTH GARE	
Promission   Section   S	1. ENROLLEES AT THE END OF REPT PERIOD	166,122	140,807	0	25,315	0	0	0	0	0	0	0
4. Change in Unexam. Penn. Resrv & Resrv for Rate Credits. 5.00.0 \$0.00	2. MEMBER MONTHS	499,439	423,609	0	75,830	0	0	0	0	0	0	0
5   5   5   5   5   5   5   5   5   5	3. Premiums	\$203.37	\$195.62	\$0.00	\$246.69	\$0.00	\$0.00	\$0.00	XXXXXXXX	\$0.00	\$0.00	XXXXXXXX
6. Ref. Revenue	4. Change in Unearn. Prem. Resrv & Resrv for Rate Credits	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.00   3.00	5. Fee-for-Service (gross revenues)	\$0.00	XXXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	\$0.00	\$0.00
8. TOTAL HEALTHCARE RELATED REVENUES (L3 to L7) 9. Other Revenues (excluding investment income). 513.31 \$156.82 \$0.00 \$0	6. Risk Revenue	\$0.00	XXXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXX	XXXXXXXX	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXX
9. Other Revenues (excluding investment income).  \$13.41   \$15.68   \$3.00   \$3	7. Other Health Related Revenues	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. TOTAL REVENUE (1.8 to 1.9)	8. TOTAL HEALTHCARE RELATED REVENUES(L3 to L7)	\$203.37	\$195.62	\$0.00	\$246.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MEDICAL AND HOSPITAL:	Other Revenues (excluding investment income)	\$13.31	\$15.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11. Hospital/Medical Benefits. \$13.66 \$0.00 \$196.38 \$0.00 \$0	10. TOTAL REVENUE (L8 to L9)	\$216.68	\$211.31	\$0.00	\$246.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
1.2. Other Professional Services   \$0.00   \$	MEDICAL AND HOSPITAL:											
13. Outside Referrals.   \$6.07   \$6.38   \$0.00   \$4.37   \$0.00   \$0.	11. Hospital/Medical Benefits	\$134.62	\$123.56	\$0.00	\$196.38	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14. Emergency Room and Out-of-Area	12. Other Professional Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15. Other Medical & Hospital	13. Outside Referrals	\$6.07	\$6.38	\$0.00	\$4.37	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16. Incentive Pool & Withhold Adjustments	14. Emergency Room and Out-of-Area	\$2.98	\$5.44	\$0.00	(\$10.78)	\$0.00	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	\$0.00
17. SUBTOTAL MED & HOSP (L11 to L16)	15. Other Medical & Hospital	\$33.78	\$29.59	\$0.00	\$57.18	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18. Net Reins Recoveries Incurred	16. Incentive Pool & Withhold Adjustments	\$11.61	\$13.69	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19. TOTAL MEDICAL & HOSP (L17 less L18)	17. SUBTOTAL MED & HOSP (L11 to L16)	\$189.05	\$178.65	\$0.00	\$247.15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20. Claims Adjustment Expenses	18. Net Reins Recoveries Incurred	\$0.25	\$0.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21. General Administrative Expenses	19. TOTAL MEDICAL & HOSP (L17 less L18)	\$188.80	\$178.35	\$0.00	\$247.15	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22. Increase in Reserves for A&H contracts	20. Claims Adjustment Expenses	\$8.65	\$10.19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23. TOTAL UNDERWRITING DEDUCTIONS(L19 to L22) \$212.40 \$203.31 \$0.00 \$263.20 \$0.00	21. General Administrative Expenses	\$16.81	\$18.93	\$0.00	\$4.91	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24. NET UNDERWRITING GAIN/(LOSS) (L8 less L23)       (\$9.03)       (\$7.69)       \$0.00       (\$16.51)       \$0.00	22. Increase in Reserves for A&H contracts	(\$1.85)	(\$4.17)	\$0.00	\$11.14	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25. Net Investment Income Earned	23. TOTAL UNDERWRITING DEDUCTIONS(L19 to L22)	\$212.40	\$203.31	\$0.00	\$263.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26. Net Realized Capital Gains/(Losses)       \$0.05       \$0.05       \$0.00 </td <td>24. NET UNDERWRITING GAIN/(LOSS) (L8 less L23)</td> <td>(\$9.03)</td> <td>(\$7.69)</td> <td>\$0.00</td> <td>(\$16.51)</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td> <td>\$0.00</td>	24. NET UNDERWRITING GAIN/(LOSS) (L8 less L23)	(\$9.03)	(\$7.69)	\$0.00	(\$16.51)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27. NET INVESTMENT GAINS/(LOSSES) (L25 to L26)       \$0.60       \$0.70       \$0.00	25. Net Investment Income Earned	\$0.55	\$0.65	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28. Other Expenses	26. Net Realized Capital Gains/(Losses)	\$0.05	\$0.05	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29. INCOME (LOSS) BEFORE FIT & EXP ITEMS(L9+L24+L2       \$4.87       \$8.70       \$0.00       (\$16.51)       \$0.00	27. NET INVESTMENT GAINS/(LOSSES) (L25 to L26)	\$0.60	\$0.70	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30. Extraordinary Items & Federal income taxes	28. Other Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31. <b>NET INCOME (LOSS) (L29 less L30)</b>	29. INCOME (LOSS) BEFORE FIT & EXP ITEMS(L9+L24+L2	\$4.87	\$8.70	\$0.00	(\$16.51)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	30. Extraordinary Items & Federal income taxes	\$0.18	\$0.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31a. NON-TAXABLE COMMERCIAL RISK ENROLLEES	31. NET INCOME (LOSS) (L29 less L30)	\$4.69	\$8.48	\$0.00	(\$16.51)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	31a. NON-TAXABLE COMMERCIAL RISK ENROLLEES		44,810	(Examples of nor	-taxable enrollees a	are State						

135,777 of Texas enrollees and Federal employees.)

31b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.

## TEXAS HMO SUPPLEMENT

STATEMENT FOR THE PERIOD ENDING JUNE 30, 2003 OF THE Scott & White Health Plan

(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: Year-to-Date X

F	,			1				od: Year-to-Date		•	•
	1. Total	2. COMMERCIAL RISK (Omit Provider	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	8. PUBLICLY SUPPORTED	9. NON-RISK
		HMO Business)	RISK	соѕт	RISK	COST			INSURANCE PLAN	HEALTH CARE	
1. ENROLLEES AT THE END OF REPT PERIOD	166,122	140,807	0	25,315	0	0	0	0	0	0	0
2. MEMBER MONTHS	1,003,096	851,372	0	151,724	0	0	0	0	0	0	0
3. Premiums	\$204.37	\$196.76	\$0.00	\$247.07	\$0.00	\$0.00	\$0.00	XXXXXXXX	\$0.00	\$0.00	XXXXXXXX
4. Change in Unearn. Prem. Resrv & Resrv for Rate Credits	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
5. Fee-for-Service (gross revenues)	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	\$0.00	\$0.00
6. Risk Revenue	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXXX	XXXXXXX	XXXXXXXX	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXX
7. Other Health Related Revenues	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
8. TOTAL HEALTHCARE RELATED REVENUES(L3 to L7)	\$204.37	\$196.76	\$0.00	\$247.07	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Revenues (excluding investment income)	\$13.82	\$16.28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. TOTAL REVENUE (L8 to L9)	\$218.19	\$213.04	\$0.00	\$247.07	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MEDICAL AND HOSPITAL:											
11. Hospital/Medical Benefits	\$136.29	\$126.10	\$0.00	\$193.48	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
12. Other Professional Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13. Outside Referrals	\$5.95	\$6.25	\$0.00	\$4.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14. Emergency Room and Out-of-Area	\$4.94	\$6.60	\$0.00	(\$4.43)	\$0.00	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	\$0.00
15. Other Medical & Hospital	\$33.18	\$28.87	\$0.00	\$57.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16. Incentive Pool & Withhold Adjustments	\$7.88	\$9.28	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17. SUBTOTAL MED & HOSP (L11 to L16)	\$188.23	\$177.11	\$0.00	\$250.66	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18. Net Reins Recoveries Incurred	\$0.05	\$0.06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19. TOTAL MEDICAL & HOSP (L17 less L18)	\$188.18	\$177.05	\$0.00	\$250.66	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20. Claims Adjustment Expenses	\$8.78	\$10.34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21. General Administrative Expenses	\$16.46	\$18.23	\$0.00	\$6.52	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22. Increase in Reserves for A&H contracts	(\$0.42)	\$0.14	\$0.00	(\$3.57)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23. TOTAL UNDERWRITING DEDUCTIONS(L19 to L22)	\$213.00	\$205.77	\$0.00	\$253.62	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24. NET UNDERWRITING GAIN/(LOSS) (L8 less L23)	(\$8.63)	(\$9.00)	\$0.00	(\$6.54)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25. Net Investment Income Earned	\$0.54	\$0.64	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26. Net Realized Capital Gains/(Losses)	(\$0.08)	(\$0.09)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27. NET INVESTMENT GAINS/(LOSSES) (L25 to L26)	\$0.46	\$0.54	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28. Other Expenses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29. INCOME (LOSS) BEFORE FIT & EXP ITEMS(L9+L24+L2	\$5.65	\$7.82	\$0.00	(\$6.54)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30. Extraordinary Items & Federal income taxes	\$0.25	\$0.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31. NET INCOME (LOSS) (L29 less L30)	\$5.40	\$7.53	\$0.00	(\$6.54)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31a. NON-TAXABLE COMMERCIAL RISK ENROLLEES		44,810	(Examples of non	-taxable enrollees a	ire State						

272,692 of Texas enrollees and Federal employees.)