

TEXAS HMO SUPPLEMENT

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

OF THE **Scott & White Health Plan**

(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.....	185,643	145,037	23,997	16,609	0	0	0	0	0	0
2. MEMBER MONTHS.....	553,885	433,538	71,920	48,427	0	0	0	0	0	0
3. Direct Premium.....	\$214.02	\$224.76	\$258.24	\$52.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	XXXXXXXX
4. Net Premium.....	\$214.02	\$224.76	\$258.24	\$52.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	XXXXXXXX
5. Change in unearned premium reserve and reserve for rate cre	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6. Fee-for-Service (gross revenues).....	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX	\$0.00	\$0.00
7. Risk Revenue.....	\$0.00	XXXXXXXX	\$0.00	\$0.00	XXXXXXXX	XXXXXXXX	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	\$11.67	\$13.19	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8)....	\$225.69	\$237.95	\$258.24	\$52.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. Other Revenues (excluding investment income).....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11. TOTAL REVENUE (L9 to L10).....	\$225.69	\$237.95	\$258.24	\$52.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MEDICAL AND HOSPITAL:										
12. Hospital/Medical Benefits.....	\$129.24	\$130.81	\$206.26	\$0.86	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13. Other Professional Services.....	\$1.82	\$2.01	\$1.88	\$0.04	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14. Outside Referrals.....	\$18.87	\$22.53	\$9.45	\$0.11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15. Emergency Room and Out-of-Area.....	\$16.68	\$18.84	\$14.76	\$0.17	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	\$0.00
16. Other Medical & Hospital.....	\$31.34	\$26.75	\$49.50	\$45.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17. Incentive Pool & Withhold Adjustments.....	\$4.51	\$5.77	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18. SUBTOTAL MED & HOSP (L12 to L17).....	\$202.47	\$206.71	\$281.84	\$46.64	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19. Net Reins Recoveries Incurred.....	\$1.07	\$1.36	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20. TOTAL MEDICAL & HOSP (L18 less L19).....	\$201.40	\$205.34	\$281.84	\$46.64	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21. Claims Adjustment Expenses.....	\$2.89	\$3.66	\$0.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22. General Administrative Expenses.....	\$15.66	\$14.46	\$17.45	\$15.56	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23. Increase in Reserves for A&H contracts.....	\$0.63	\$0.00	\$4.86	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24. TOTAL UNDERWRITING DEDUCTIONS (L20 to L23).....	\$220.59	\$223.46	\$304.36	\$62.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25. NET UNDERWRITING GAIN/LOSS (L9 less L24).....	\$5.11	\$14.49	(\$46.12)	(\$10.00)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26. Net Investment Income Earned.....	\$1.21	\$1.55	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27. Net Realized Capital Gains/Losses.....	\$0.19	\$0.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28. NET INVESTMENT GAINS/LOSSES (L26 to L27).....	\$1.40	\$1.79	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29. Other Expenses.....	\$5.62	\$7.18	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30. INCOME/LOSSES before FIT + EX Items (L10+L25+L28-L2	\$0.89	\$9.11	(\$46.12)	(\$10.00)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31. Extraordinary Items & Federal income taxes.....	\$0.17	\$0.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32. NET INCOME/LOSS (L30 less L31).....	\$0.72	\$8.90	(\$46.12)	(\$10.00)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		51,053	(Examples of non-taxable enrollees are State			0				
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		153,318	of Texas enrollees and Federal employees.)			0				

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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.....	185,643	145,037	23,997	16,609	0	0	0	0	0	0
2. MEMBER MONTHS.....	1,104,125	866,556	143,905	93,664	0	0	0	0	0	0
3. Direct Premium.....	\$214.97	\$223.74	\$251.71	\$77.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	XXXXXXXX
4. Net Premium.....	\$214.97	\$223.74	\$251.71	\$77.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	XXXXXXXX
5. Change in unearned premium reserve and reserve for rate cre	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6. Fee-for-Service (gross revenues).....	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX	\$0.00	\$0.00
7. Risk Revenue.....	\$0.00	XXXXXXXX	\$0.00	\$0.00	XXXXXXXX	XXXXXXXX	\$0.00	XXXXXXXX	XXXXXXXX	XXXXXXXX
8. Other Health Related Revenues.....	\$10.54	\$11.71	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9. TOTAL HEALTHCARE RELATED REVENUES (L4 to L8)....	\$225.51	\$235.45	\$251.71	\$77.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10. Other Revenues (excluding investment income).....	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11. TOTAL REVENUE (L9 to L10).....	\$225.51	\$235.45	\$251.71	\$77.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MEDICAL AND HOSPITAL:										
12. Hospital/Medical Benefits.....	\$128.13	\$128.85	\$206.82	\$0.56	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
13. Other Professional Services.....	\$1.92	\$2.07	\$2.26	\$0.03	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14. Outside Referrals.....	\$16.48	\$19.50	\$8.96	\$0.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
15. Emergency Room and Out-of-Area.....	\$17.39	\$19.70	\$14.73	\$0.11	\$0.00	XXXXXXXX	\$0.00	\$0.00	\$0.00	\$0.00
16. Other Medical & Hospital.....	\$30.24	\$25.46	\$34.10	\$68.53	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
17. Incentive Pool & Withhold Adjustments.....	\$4.80	\$6.12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18. SUBTOTAL MED & HOSP (L12 to L17).....	\$198.96	\$201.69	\$266.88	\$69.34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19. Net Reins Recoveries Incurred.....	\$0.51	\$0.65	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20. TOTAL MEDICAL & HOSP (L18 less L19).....	\$198.44	\$201.03	\$266.88	\$69.34	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21. Claims Adjustment Expenses.....	\$2.90	\$3.65	\$0.21	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22. General Administrative Expenses.....	\$15.36	\$14.21	\$16.86	\$13.98	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23. Increase in Reserves for A&H contracts.....	\$0.44	\$0.00	\$3.35	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24. TOTAL UNDERWRITING DEDUCTIONS (L20 to L23).....	\$217.13	\$218.90	\$287.30	\$83.31	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25. NET UNDERWRITING GAIN/LOSS (L9 less L24).....	\$8.37	\$16.55	(\$35.60)	(\$6.02)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26. Net Investment Income Earned.....	\$1.15	\$1.47	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27. Net Realized Capital Gains/Losses.....	\$0.44	\$0.56	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28. NET INVESTMENT GAINS/LOSSES (L26 to L27).....	\$1.59	\$2.03	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
29. Other Expenses.....	\$5.45	\$6.94	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30. INCOME/LOSSES before FIT + EX Items (L10+L25+L28-L2	\$4.51	\$11.64	(\$35.60)	(\$6.02)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
31. Extraordinary Items & Federal income taxes.....	\$0.19	\$0.25	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32. NET INCOME/LOSS (L30 less L31).....	\$4.32	\$11.39	(\$35.60)	(\$6.02)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33a. NON-TAXABLE COMMERCIAL RISK ENROLLEES.....		51,053	(Examples of non-taxable enrollees are State			15,869				
33b. NON-TAXABLE COMMERCIAL RISK MEMBER MONTHS.....		308,860	of Texas enrollees and Federal employees.)			90,515				