

**CY2012**  
**Accident and Health Markets**  
**Gross Annual Premium and Enrollment**



**Florida Office of Insurance Regulation**  
**Market Research Unit**

**November 1, 2013**

*This information is compiled from data filed with the Office by each Accident and/or Health Coverage Provider.  
It has not been audited or independently verified.*

## Amended GAP Report Summary of Changes (11/01/2013)

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Changes to the CY2012 GAP Report since original publication on 7/26/2013:

UnitedHealthcare of Florida. (NAIC code 95264). UnitedHealthcare of Florida corrected certain premium, losses, and enrollment after the publication of the original GAP report due to reporting figures erroneously attributed to GAP that should have been attributed to the Florida Healthy Kids program (not included in GAP). This revised version reflects these changes. Direct Premium Earned for Individually Underwritten was reduced from \$82,153,098 to zero, Direct Losses Incurred was reduced from \$72,619,746 to zero, and Primary Enrollees was reduced from 66,134 to zero.

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## *CY2012 Accident and Health Report of Gross Annual Premium and Enrollment Statewide Data: Summary by Major Medical Lines of Business*

	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
Guarantee Issue	\$318,820,820	\$275,611,276	\$86,508,894	0	38,492	6,074	44,566
Out-of-State Individually Underwritten	\$433,335,899	\$291,707,139	\$71,239,216	17,395	100,643	69,102	169,745
Out-of-State Self-Employed or Sole Proprietor	\$626,020	\$838,903	\$51,051	211	211	166	377
Out-of-State 2 - 5 Member Groups	\$2,417,444	\$2,853,089	\$238,013	215	578	408	986
Out-of-State 6 - 50 Member Groups	\$10,204,329	\$7,598,862	\$1,635,444	55	646	502	1,148
Out-of-State 51+ Member Groups	\$280,947,635	\$240,349,799	\$35,868,289	4,968	47,397	38,874	86,271
Out-of-State Short Term Major Medical	\$9,518,257	\$4,565,550	\$3,675,742	496	4,503	1,186	5,689
Out-of-State Conversion	\$71,252	\$1,027,104	\$0	0	5	2	7
Individually Underwritten	\$1,587,893,482	\$1,216,458,737	\$241,754,622	0	411,881	207,345	619,226
Self-Employed or Sole Proprietor	\$186,267,181	\$172,602,529	\$2,777,979	11,754	11,754	9,680	21,434
2 - 5 Member Groups	\$848,471,396	\$679,560,575	\$42,470,766	35,921	104,822	64,035	168,857
6 - 50 Member Groups	\$2,498,777,304	\$1,852,927,056	\$241,378,211	47,215	369,572	216,800	586,372
51+ Member Groups	\$6,554,272,781	\$5,451,689,120	\$488,611,578	23,196	944,520	659,464	1,603,984
Short Term Major Medical	\$3,960,614	\$2,150,844	\$2,503,195	2	1,765	992	2,757
Conversion	\$120,126,913	\$178,368,415	\$12,775,278	0	20,993	8,131	29,124
Out-of-State Guarantee Issue	\$18,023,068	\$24,172,762	\$4,439,038	0	1,649	234	1,883

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment Statewide Data: Summary by Other Accident and Health Business

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Other Prepaid Health Services	\$6,581,687	\$0	\$1,225,483	216	64,905	26,082	90,987
Discount Medical Plan	\$43,018	\$0	\$1,596	4	82	47	129
Accident Only	\$244,360,874	\$0	\$58,841,762	32,693	4,191,660	631,445	4,823,105
Accidental Death & Dismemberment	\$142,811,310	\$0	\$11,885,999	22,054	5,916,016	754,225	6,670,241
Blanket Accident/Sickness	\$4,661,961	\$0	\$751,121	1,601	240,322	130,707	371,029
Dental	\$1,051,283,804	\$0	\$104,523,586	96,610	4,150,112	2,509,542	6,659,654
Disability Income	\$1,159,843,185	\$0	\$138,307,727	41,735	3,414,174	4,657	3,418,831
Excess/Stop Loss	\$343,435,276	\$0	\$42,989,028	2,513	757,560	739,811	1,497,371
Hospital Indemnity	\$194,551,062	\$0	\$51,996,696	20,373	497,088	226,448	723,536
Limited Benefit	\$279,551,573	\$0	\$47,033,831	13,688	718,651	512,702	1,231,353
Long Term Care	\$633,324,440	\$0	\$28,342,478	8,169	420,489	22,141	442,630
Short Term Care	\$632,392	\$0	\$0	0	675	19	694
Medicare Supplement	\$1,634,461,536	\$0	\$52,600,044	701	665,790	1,441	667,231
Champus/Tricare Supplement	\$9,780,795	\$0	\$491,155	48	14,981	3,750	18,731
Prescription Drug	\$610,561	\$0	\$156,653	51	8,194	9,170	17,364
Sickness	\$392,831	\$0	\$85,925	0	2,351	1,516	3,867
Student	\$39,426,293	\$0	\$3,254,556	3,782	98,201	9,424	107,625
Travel	\$31,059,683	\$0	\$1,258,329	382	739,324	136,582	875,906
Vision	\$163,407,331	\$0	\$21,211,268	46,789	1,929,331	1,746,472	3,675,803

## *CY2012 Accident and Health Report of Gross Annual Premium and Enrollment Major Medical Marketshare and Rankings*

<i>Rank</i>	<i>Company Name</i>	<i>NAIC Company Code</i>	<i>Direct Premiums Earned</i>	<i>Covered Lives</i>	<i>Market Share (By Premium)</i>
1	BLUE CROSS & BLUE SHIELD OF FLORIDA, INC.	98167	\$3,779,864,050	1,033,443	29.36%
2	UNITEDHEALTHCARE INSURANCE COMPANY	79413	\$1,814,002,712	383,944	14.09%
3	AETNA HEALTH INC.	95088	\$1,337,720,018	297,815	10.39%
4	CONNECTICUT GENERAL LIFE INSURANCE COMPANY	62308	\$636,876,707	284,261	4.95%
5	HUMANA MEDICAL PLAN, INC.	95270	\$632,910,908	131,405	4.92%
6	COVENTRY HEALTH CARE OF FLORIDA, INC.	95114	\$527,252,282	109,668	4.10%
7	HEALTH OPTIONS, INC.	95089	\$515,412,210	154,984	4.00%
8	CAPITAL HEALTH PLAN, INC.	95112	\$454,138,634	107,750	3.53%
9	NEIGHBORHOOD HEALTH PARTNERSHIP, INC.	95123	\$448,849,475	104,595	3.49%
10	AVMED, INC.	95263	\$439,588,186	93,654	3.41%
11	UNITEDHEALTHCARE OF FLORIDA, INC.	95264	\$385,985,070	94,392	3.00%
12	GOLDEN RULE INSURANCE COMPANY	62286	\$305,224,687	117,039	2.37%
13	AETNA LIFE INSURANCE COMPANY	60054	\$271,458,759	67,125	2.11%
14	PHYSICIANS UNITED PLAN, INC.	10775	\$261,929,817	25,127	2.03%
15	HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.	69671	\$180,216,359	48,679	1.40%
16	FLORIDA HEALTH CARE PLAN, INC.	13567	\$149,172,495	30,751	1.16%
17	HEALTH FIRST HEALTH PLANS, INC.	95019	\$100,456,921	20,012	0.78%
18	CIGNA HEALTH AND LIFE INSURANCE COMPANY	67369	\$91,757,875	47,544	0.71%
19	HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY	70670	\$87,534,133	20,985	0.68%
20	COVENTRY HEALTH PLAN OF FLORIDA, INC.	95266	\$78,126,168	23,381	0.61%
21	PREFERRED MEDICAL PLAN, INC.	95271	\$55,959,120	21,076	0.43%
22	HUMANA INSURANCE COMPANY	73288	\$51,958,892	29,661	0.40%
23	COVENTRY HEALTH AND LIFE INSURANCE COMPANY	81973	\$48,620,984	15,963	0.38%
24	TIME INSURANCE COMPANY	69477	\$39,566,789	13,730	0.31%
25	QCC INSURANCE COMPANY	93688	\$30,864,634	5,643	0.24%
26	STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY	25178	\$22,760,805	3,924	0.18%
27	UNITEDHEALTHCARE LIFE INSURANCE COMPANY	97179	\$12,999,497	2,041	0.10%
28	MEGA LIFE & HEALTH INSURANCE COMPANY	97055	\$12,464,252	2,719	0.10%
29	NEW YORK LIFE INSURANCE COMPANY	66915	\$11,167,837	3,064	0.09%
30	MID-WEST NATIONAL LIFE INSURANCE COMPANY OF TN	66087	\$10,896,115	3,200	0.08%
31	CELTIC INSURANCE COMPANY	80799	\$9,935,104	1,634	0.08%
32	FREEDOM LIFE INSURANCE COMPANY OF AMERICA	62324	\$9,880,887	3,027	0.08%
33	UNITED AMERICAN INSURANCE COMPANY	92916	\$9,818,915	6,225	0.08%
34	UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK	70106	\$7,788,612	14,869	0.06%
35	MEDICA HEALTH PLANS OF FLORIDA, INC.	12756	\$6,652,423	1,508	0.05%
36	CIGNA HEALTHCARE OF FLORIDA, INC.	95136	\$5,733,527	1,114	0.04%
37	JOHN ALDEN LIFE INSURANCE COMPANY	65080	\$3,221,358	754	0.03%
38	STANDARD SECURITY LIFE INSURANCE CO. OF NEW YORK	69078	\$2,914,349	1,958	0.02%
39	AXA EQUITABLE LIFE INSURANCE COMPANY	62944	\$2,888,700	694	0.02%
40	STARR INDEMNITY & LIABILITY COMPANY	38318	\$2,764,716	886	0.02%
41	EMPLOYER CHOICE INSURANCE COMPANY, INC.	13663	\$1,722,219	1,120	0.01%
42	4 EVER LIFE INSURANCE COMPANY	80985	\$1,686,966	668	0.01%
43	GREAT WEST LIFE ASSURANCE COMPANY	80705	\$1,100,504	105	0.01%
44	INDEPENDENCE AMERICAN INSURANCE COMPANY	26581	\$1,064,401	452	0.01%

## *CY2012 Accident and Health Report of Gross Annual Premium and Enrollment Major Medical Marketshare and Rankings*

<i>Rank</i>	<i>Company Name</i>	<i>NAIC Company Code</i>	<i>Direct Premiums Earned</i>	<i>Covered Lives</i>	<i>Market Share (By Premium)</i>
45	AMERICAN HERITAGE LIFE INSURANCE COMPANY	60534	\$991,662	3,466	0.01%
46	TRUSTMARK INSURANCE COMPANY	61425	\$957,717	125	0.01%
47	BCS INSURANCE COMPANY	38245	\$924,378	1,495	0.01%
48	AMERICAN NATIONAL LIFE INS. CO. OF TEXAS	71773	\$835,741	121	0.01%
49	PRUDENTIAL INSURANCE COMPANY OF AMERICA (THE)	68241	\$672,114	631	0.01%
50	WORLD INSURANCE COMPANY	70629	\$566,009	87	0.00%
51	THRIVENT FINANCIAL FOR LUTHERANS	56014	\$552,223	30	0.00%
52	HCC LIFE INSURANCE COMPANY	92711	\$494,362	671	0.00%
53	AMERICAN GENERAL LIFE INSURANCE COMPANY	60488	\$485,539	1,146	0.00%
54	AMERICAN REPUBLIC INSURANCE COMPANY	60836	\$405,177	56	0.00%
55	ILLINOIS MUTUAL LIFE INSURANCE COMPANY	64580	\$390,114	31	0.00%
56	THE PUBLIC HEALTH TRUST OF DADE COUNTY	95126	\$332,874	41	0.00%
57	AMERICAN NATIONAL INSURANCE COMPANY	60739	\$269,860	86	0.00%
58	METROPOLITAN LIFE INSURANCE COMPANY	65978	\$254,873	235	0.00%
59	GUARDIAN LIFE INSURANCE COMPANY OF AMERICA	64246	\$233,963	0	0.00%
60	PHOENIX LIFE INSURANCE COMPANY	67814	\$200,097	0	0.00%
61	PYRAMID LIFE INSURANCE COMPANY (THE)	68284	\$172,188	18	0.00%
62	MADISON NATIONAL LIFE INSURANCE COMPANY INC.	65781	\$158,913	153	0.00%
63	PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY	67784	\$128,496	206	0.00%
64	CENTRAL UNITED LIFE INSURANCE COMPANY	61883	\$125,253	83	0.00%
65	AMERICAN ALTERNATIVE INSURANCE CORPORATION	19720	\$115,556	70	0.00%
66	RESERVE NATIONAL INSURANCE COMPANY	68462	\$111,430	31	0.00%
67	PRINCIPAL LIFE INSURANCE COMPANY	61271	\$110,948	0	0.00%
68	ULLICO CASUALTY COMPANY	37893	\$108,624	10	0.00%
69	MUTUAL OF OMAHA INSURANCE COMPANY	71412	\$98,997	256	0.00%
70	NATIONAL CASUALTY COMPANY	11991	\$94,491	1	0.00%
71	PHYSICIANS MUTUAL INSURANCE COMPANY	80578	\$82,960	14	0.00%
72	CONTINENTAL GENERAL INSURANCE COMPANY	71404	\$81,509	18	0.00%
73	UNITED TEACHER ASSOCIATES INSURANCE COMPANY	63479	\$80,936	124	0.00%
74	CONTINENTAL ASSURANCE COMPANY	62413	\$76,627	15	0.00%
75	MARKEL INSURANCE COMPANY	38970	\$72,930	30	0.00%
76	WASHINGTON NATIONAL INSURANCE COMPANY	70319	\$66,828	19	0.00%
77	GLOBE LIFE AND ACCIDENT INSURANCE COMPANY	91472	\$66,580	75	0.00%
78	GUARANTEE TRUST LIFE INSURANCE COMPANY	64211	\$61,234	0	0.00%
79	UNION LABOR LIFE INSURANCE COMPANY	69744	\$51,056	30	0.00%
80	UNION BANKERS INSURANCE COMPANY	69701	\$48,958	20	0.00%
81	FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY	69140	\$46,875	14	0.00%
82	MONY LIFE INSURANCE COMPANY	66370	\$41,545	34	0.00%
83	UNIFIED LIFE INSURANCE COMPANY	11121	\$39,696	47	0.00%
84	HEALTH NET LIFE INSURANCE COMPANY	66141	\$34,960	2	0.00%
85	NATIONAL BENEFIT LIFE INSURANCE COMPANY	61409	\$23,655	60	0.00%
86	FIDELITY SECURITY LIFE INSURANCE COMPANY	71870	\$14,394	1	0.00%
87	PRIMERICA LIFE INSURANCE COMPANY	65919	\$11,669	5	0.00%
88	CINCINNATI LIFE INSURANCE COMPANY (THE)	76236	\$11,274	13	0.00%

## *CY2012 Accident and Health Report of Gross Annual Premium and Enrollment Major Medical Marketshare and Rankings*

<i>Rank</i>	<i>Company Name</i>	<i>NAIC Company Code</i>	<i>Direct Premiums Earned</i>	<i>Covered Lives</i>	<i>Market Share (By Premium)</i>
89	TRANSAMERICA LIFE INSURANCE COMPANY	86231	\$11,079	27	0.00%
90	CHESAPEAKE LIFE INSURANCE COMPANY	61832	\$10,648	4	0.00%
91	GENERAL AMERICAN LIFE INSURANCE COMPANY	63665	\$7,869	9	0.00%
92	JACKSON NATIONAL LIFE INSURANCE COMPANY	65056	\$7,040	75	0.00%
93	CITRUS HEALTH CARE, INC.	11836	\$6,985	0	0.00%
94	AMERICAN STATES INSURANCE COMPANY	19704	\$6,980	5	0.00%
95	STANDARD LIFE AND ACCIDENT INSURANCE COMPANY	86355	\$6,858	9	0.00%
96	CONSECO LIFE INSURANCE COMPANY	65900	\$6,327	4	0.00%
97	COMMONWEALTH ANNUITY AND LIFE INSURANCE COMPANY	84824	\$6,219	10	0.00%
98	CENTRE LIFE INSURANCE COMPANY	80896	\$6,190	60	0.00%
99	CONTINENTAL LIFE INS. CO. OF BRENTWOOD, TENNESSEE	68500	\$5,318	3	0.00%
100	LINCOLN LIFE & ANNUITY COMPANY OF NEW YORK	62057	\$5,057	4	0.00%
101	LIFESECURE INSURANCE COMPANY	77720	\$4,671	2	0.00%
102	LINCOLN NATIONAL LIFE INSURANCE COMPANY	65676	\$3,719	2	0.00%
103	STATE LIFE INSURANCE COMPANY	69116	\$3,231	5	0.00%
104	PAN-AMERICAN LIFE INSURANCE COMPANY	67539	\$3,167	5	0.00%
105	KANSAS CITY LIFE INSURANCE COMPANY	65129	\$2,919	2	0.00%
106	GREAT SOUTHERN LIFE INSURANCE COMPANY	90212	\$2,577	1	0.00%
107	UNION FIDELITY LIFE INSURANCE COMPANY	62596	\$2,488	3	0.00%
108	SYMETRA LIFE INSURANCE COMPANY	68608	\$2,208	2	0.00%
109	UNIVERSAL HEALTH CARE, INC.	11574	\$2,184	1	0.00%
110	UNION SECURITY INSURANCE COMPANY	70408	\$1,344	1	0.00%
111	CONTINENTAL CASUALTY COMPANY	20443	\$1,245	11	0.00%
112	ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA	90611	\$1,148	0	0.00%
113	JEFFERSON NATIONAL LIFE INSURANCE COMPANY	64017	\$974	3	0.00%
114	WILLIAM PENN LIFE INSURANCE COMPANY OF NEW YORK	66230	\$829	6	0.00%
115	SECURITY MUTUAL LIFE INSURANCE COMPANY OF NEW YORK	68772	\$829	0	0.00%
116	LIBERTY MUTUAL INSURANCE COMPANY	23043	\$809	0	0.00%
117	OHIO STATE LIFE INSURANCE COMPANY (THE)	67180	\$551	3	0.00%
118	METLIFE INSURANCE COMPANY OF CONNECTICUT	87726	\$508	1	0.00%
119	BANNER LIFE INSURANCE COMPANY	94250	\$502	4	0.00%
120	OHIO NATIONAL LIFE INSURANCE COMPANY	67172	\$365	1	0.00%
121	ING LIFE INSURANCE AND ANNUITY COMPANY	86509	\$269	1	0.00%
122	STATE AUTOMOBILE MUTUAL INSURANCE COMPANY	25135	\$249	1	0.00%
123	MONUMENTAL LIFE INSURANCE COMPANY	66281	\$232	1	0.00%
124	ASSURITY LIFE INSURANCE COMPANY	71439	\$205	1	0.00%
125	KNIGHTS OF COLUMBUS	58033	\$197	0	0.00%

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### 20/20 EYECARE PLAN, INC

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Vision	\$344,089	\$166,723	\$0	23	3,767	3,686	7,453
<b>TOTAL</b>	<b>\$344,089</b>	<b>\$166,723</b>	<b>\$0</b>	<b>23</b>	<b>3,767</b>	<b>3,686</b>	<b>7,453</b>

### 21ST CENTURY CENTENNIAL INSURANCE COMPANY

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
34789							
Accidental Death & Dismemberment	\$455	\$391	\$0	0	1	0	1
Hospital Indemnity	\$565	(\$22)	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$1,020</b>	<b>\$369</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

### 21ST CENTURY PREMIER INSURANCE COMPANY

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
20796							
Accidental Death & Dismemberment	\$657	\$50	\$0	0	2	1	3
Hospital Indemnity	\$6,737	(\$24)	\$0	0	21	11	32
Medicare Supplement	\$23,400	\$19,039	\$0	0	12	2	14
<b>TOTAL</b>	<b>\$30,794</b>	<b>\$19,065</b>	<b>\$0</b>	<b>0</b>	<b>35</b>	<b>1</b>	<b>49</b>

### 4 EVER LIFE INSURANCE COMPANY

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80985							
Disability Income	\$179,605	\$71,697	\$29,591	23	936	0	936
Out-of-State 51+ Member Groups	\$1,686,966	\$1,092,630	\$1,667,580	77	551	117	668
<b>TOTAL</b>	<b>\$1,866,571</b>	<b>\$1,164,327</b>	<b>\$1,697,171</b>	<b>100</b>	<b>1,487</b>	<b>0</b>	<b>1,604</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## 5 STAR LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
77879							
Limited Benefit	\$2,054	\$0	\$1,869	2	37	3	40
<b>TOTAL</b>	<b>\$2,054</b>	<b>\$0</b>	<b>\$1,869</b>	<b>2</b>	<b>37</b>	<b>3</b>	<b>40</b>

## AAA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71854							
Accident Only	\$9,197,269	\$1,995,118	\$1,086,811	2	47,339	33,598	80,937
Hospital Indemnity	\$43,615	\$30,576	\$1,869	0	96	0	96
<b>TOTAL</b>	<b>\$9,240,884</b>	<b>\$2,025,694</b>	<b>\$1,088,680</b>	<b>2</b>	<b>47,435</b>	<b>33,598</b>	<b>81,033</b>

## ABILITY INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71471							
Long Term Care	\$1,510,376	\$11,926,561	\$0	0	2,017	0	2,017
Medicare Supplement	\$0	(\$1,549)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,510,376</b>	<b>\$11,925,012</b>	<b>\$0</b>	<b>0</b>	<b>2,017</b>	<b>0</b>	<b>2,017</b>

## ACACIA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60038							
Disability Income	\$244	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$244</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ACE AMERICAN INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
22667							
Accident Only	\$8,336,899	\$814,430	\$38,434	116	221,980	0	221,980
Accidental Death & Dismemberment	\$1,050,857	\$481,781	\$104,030	73	75,764	0	75,764
Blanket Accident/Sickness	\$277,788	\$11,112	\$44,165	19	658	0	658
Dental	\$110,033	\$15,902	\$0	2	141	70	211
Disability Income	(\$3,405)	\$0	(\$6,117)	1	1	0	1
Excess/Stop Loss	\$4,842,088	\$3,738,391	\$0	18	9,648	4,824	14,472
Hospital Indemnity	\$18,324	\$0	\$2	5	25	0	25
Limited Benefit	\$1,815,842	\$226,508	\$0	12	427	213	640
Prescription Drug	\$36,973	\$0	\$0	2	3	2	5
Student	\$178,455	\$245,292	\$0	1	83	0	83
<b>TOTAL</b>	<b>\$16,663,854</b>	<b>\$5,533,416</b>	<b>\$180,514</b>	<b>249</b>	<b>308,730</b>	<b>0</b>	<b>313,839</b>

## ADVANTICA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
Vision	\$3,386,345	\$2,225,294	\$30,014	334	28,192	22,713	50,905
<b>TOTAL</b>	<b>\$3,386,345</b>	<b>\$2,225,294</b>	<b>\$30,014</b>	<b>334</b>	<b>28,192</b>	<b>22,713</b>	<b>50,905</b>

## AEGIS SECURITY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
33898							
Accident Only	\$15,862	\$8,779	\$12,553	15	2,357	0	2,357
<b>TOTAL</b>	<b>\$15,862</b>	<b>\$8,779</b>	<b>\$12,553</b>	<b>15</b>	<b>2,357</b>	<b>0</b>	<b>2,357</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### AETNA HEALTH INC.

NAIC Company Code

95088

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
2 - 5 Member Groups	\$132,751,686	\$105,849,862	\$6,897,612	6,534	18,858	11,299	30,157
51+ Member Groups	\$760,458,416	\$660,303,453	\$58,110,700	739	92,139	60,276	152,415
6 - 50 Member Groups	\$220,581,995	\$175,847,221	\$23,894,721	3,198	42,128	20,342	62,470
Conversion	\$8,137,625	\$14,561,950	\$499,749	0	534	84	618
Guarantee Issue	\$4,616,121	\$6,306,706	\$1,137,770	0	516	51	567
Individually Underwritten	\$104,755,622	\$70,872,560	\$12,716,860	0	27,615	13,891	41,506
Self-Employed or Sole Proprietor	\$106,418,553	\$90,869,078	\$1,053,438	5,265	5,265	4,817	10,082
<b>TOTAL</b>	<b>\$1,337,720,018</b>	<b>\$1,124,610,830</b>	<b>\$104,310,850</b>	<b>15,736</b>	<b>187,055</b>	<b>11,299</b>	<b>297,815</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AETNA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60054							
2 - 5 Member Groups	\$10,221,576	\$8,283,344	\$1,013,093	417	1,119	789	1,908
51+ Member Groups	\$90,022,149	\$73,978,314	\$7,196,956	144	8,916	8,106	17,022
6 - 50 Member Groups	\$8,100,626	\$6,030,187	\$1,303,267	105	1,243	972	2,215
Accidental Death & Dismemberment	\$3,810,716	\$2,431,250	\$131,158	1,429	336,168	1,198	337,366
Conversion	\$2,989,071	\$4,734,668	\$559,915	0	397	84	481
Dental	\$92,107,065	\$67,887,938	\$5,113,000	4,648	155,509	141,378	296,887
Disability Income	\$70,037,585	\$39,046,515	\$667,571	131	313,437	0	313,437
Excess/Stop Loss	\$25,160,610	\$15,535,237	\$4,177,151	43	36,945	38,983	75,928
Guarantee Issue	\$382,389	\$406,080	\$116,563	0	43	0	43
Individually Underwritten	\$16,966,345	\$6,392,969	\$6,536,368	0	4,124	1,111	5,235
Long Term Care	\$2,286,458	\$3,264,785	\$0	0	1,612	1,230	2,842
Medicare Supplement	\$113,570	\$89,002	\$0	0	0	0	0
Out-of-State 2 - 5 Member Groups	\$2,401,430	\$1,946,067	\$238,013	215	578	408	986
Out-of-State 51+ Member Groups	\$122,372,686	\$100,563,307	\$31,300,247	1,379	19,372	17,611	36,983
Out-of-State 6 - 50 Member Groups	\$10,165,314	\$7,567,161	\$1,635,444	54	642	502	1,144
Out-of-State Self-Employed or Sole Proprietor	\$626,020	\$831,141	\$51,051	211	211	166	377
Self-Employed or Sole Proprietor	\$7,211,153	\$9,573,958	\$588,064	409	409	322	731
Student	\$1,781,563	\$2,919,338	\$0	3	1,239	13	1,252
<b>TOTAL</b>	<b>\$466,756,326</b>	<b>\$351,481,261</b>	<b>\$60,627,861</b>	<b>9,188</b>	<b>881,964</b>	<b>789</b>	<b>1,094,837</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ALLIANZ LIFE INSURANCE COMPANY OF NORTH AMERICA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
90611							
Accidental Death & Dismemberment	\$806	\$0	\$0	0	16	0	16
Disability Income	\$0	\$1,200	\$0	0	0	0	0
Hospital Indemnity	\$18,195	\$29,595	\$0	0	110	0	110
Limited Benefit	\$76	\$0	\$0	0	1	0	1
Long Term Care	\$10,070,543	\$3,300,535	\$0	0	6,038	0	6,038
Medicare Supplement	\$14,124	\$33,895	\$0	0	10	0	10
Out-of-State 51+ Member Groups	\$1,148	\$1,462	\$0	1	0	0	0
<b>TOTAL</b>	<b>\$10,104,892</b>	<b>\$3,366,687</b>	<b>\$0</b>	<b>1</b>	<b>6,175</b>	<b>0</b>	<b>6,175</b>

## ALLSTATE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60186							
Accidental Death & Dismemberment	\$3,194,116	\$1,457,553	\$0	0	32,069	0	32,069
Disability Income	\$0	(\$223)	\$0	0	1	0	1
Hospital Indemnity	\$147,632	\$142,745	\$0	0	548	0	548
Long Term Care	\$268,617	\$1,287,138	\$0	0	133	0	133
<b>TOTAL</b>	<b>\$3,610,365</b>	<b>\$2,887,213</b>	<b>\$0</b>	<b>0</b>	<b>32,751</b>	<b>0</b>	<b>32,751</b>

## AMALGAMATED LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60216							
Excess/Stop Loss	\$93,456	\$28,972	\$93,456	1	765	0	765
<b>TOTAL</b>	<b>\$93,456</b>	<b>\$28,972</b>	<b>\$93,456</b>	<b>1</b>	<b>765</b>	<b>0</b>	<b>765</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN ALTERNATIVE INSURANCE CORPORATION

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
19720							
Excess/Stop Loss	\$5,760,113	\$6,362,944	\$509,480	8	6,184	7,829	14,013
Short Term Major Medical	\$115,556	(\$283)	\$115,556	1	58	12	70
<b>TOTAL</b>	<b>\$5,875,669</b>	<b>\$6,362,661</b>	<b>\$625,036</b>	<b>9</b>	<b>6,242</b>	<b>7,829</b>	<b>14,083</b>

## AMERICAN AUTOMOBILE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
21849							
Accident Only	\$0	\$1,262	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$1,262</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## AMERICAN BANKERS INSURANCE COMPANY OF FLORIDA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
10111							
Accidental Death & Dismemberment	\$114,242	\$9,424	\$0	1	952	0	952
Disability Income	\$10,141	\$837	\$0	1	85	0	85
<b>TOTAL</b>	<b>\$124,383</b>	<b>\$10,261</b>	<b>\$0</b>	<b>2</b>	<b>1,037</b>	<b>0</b>	<b>1,037</b>

## AMERICAN BANKERS LIFE ASSURANCE COMPANY OF FLORIDA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60275							
Accidental Death & Dismemberment	\$308,269	(\$46,690)	\$0	1	17,231	1,218	18,449
Disability Income	\$36,095	\$1,376	\$0	1	103	9	112
<b>TOTAL</b>	<b>\$344,364</b>	<b>(\$45,314)</b>	<b>\$0</b>	<b>2</b>	<b>17,334</b>	<b>1,218</b>	<b>18,561</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN CASUALTY COMPANY OF READING, PENNSYLVANIA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
20427							
Disability Income	\$204	\$3,843	\$0	0	5	0	5
Hospital Indemnity	\$244	\$218	\$0	0	1	0	1
Limited Benefit	\$40	\$0	\$0	0	21	0	21
<b>TOTAL</b>	<b>\$488</b>	<b>\$4,061</b>	<b>\$0</b>	<b>0</b>	<b>27</b>	<b>0</b>	<b>27</b>

## AMERICAN CONTINENTAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
12321							
Medicare Supplement	\$63,013	\$39,311	\$0	0	21	0	21
<b>TOTAL</b>	<b>\$63,013</b>	<b>\$39,311</b>	<b>\$0</b>	<b>0</b>	<b>21</b>	<b>0</b>	<b>21</b>

## AMERICAN FAMILY LIFE ASSURANCE COMPANY OF COLUMBUS

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60380							
Accident Only	\$76,019,253	\$43,809,178	\$18,978,965	0	226,140	244,798	470,938
Dental	\$7,631,919	\$3,216,028	\$2,586,961	0	15,157	10,292	25,449
Disability Income	\$51,432,369	\$25,937,692	\$15,013,821	0	102,248	0	102,248
Hospital Indemnity	\$62,894,677	\$33,247,135	\$18,503,111	0	114,551	101,688	216,239
Limited Benefit	\$100,294,341	\$60,755,735	\$16,846,947	0	265,960	240,544	506,504
Long Term Care	\$2,155,852	\$1,264,627	\$0	0	1,683	175	1,858
Medicare Supplement	\$3,715,704	\$3,427,400	\$0	0	1,544	0	1,544
Vision	\$1,035,467	(\$20,040)	\$404,829	0	5,432	3,964	9,396
<b>TOTAL</b>	<b>\$305,179,582</b>	<b>\$171,637,755</b>	<b>\$72,334,634</b>	<b>0</b>	<b>732,715</b>	<b>244,798</b>	<b>1,334,176</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN FIDELITY ASSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60410							
Accident Only	\$1,416,789	\$544,601	\$362,743	0	4,642	2,533	7,175
Accidental Death & Dismemberment	\$1,324	\$18,175	\$0	3	10	2	12
Dental	\$726	(\$54)	\$0	1	2	0	2
Disability Income	\$5,958,704	\$4,621,831	\$1,118,570	39	9,412	0	9,412
Excess/Stop Loss	\$2,522,259	\$2,531,135	\$104,182	7	5,028	3,900	8,928
Hospital Indemnity	\$5,620,547	\$2,846,797	\$2,900,777	10	11,691	3,000	14,691
Limited Benefit	\$2,340,780	\$2,446,335	\$376,974	0	5,394	3,009	8,403
Long Term Care	\$434,702	\$93,600	\$40,209	0	346	46	392
<b>TOTAL</b>	<b>\$18,295,831</b>	<b>\$13,102,420</b>	<b>\$4,903,455</b>	<b>60</b>	<b>36,525</b>	<b>2,533</b>	<b>49,015</b>

## AMERICAN GENERAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60488							
Accident Only	\$1,344,242	\$581,246	\$50,371	27,622	33,975	278	34,253
Accidental Death & Dismemberment	\$2,266,519	(\$38,764)	\$364,388	7,808	7,758	17,885	25,643
Dental	\$1,400,438	\$1,096,273	\$92,669	73	2,086	1,920	4,006
Disability Income	\$2,583,813	\$1,919,133	\$449,197	3,150	11,759	117	11,876
Hospital Indemnity	\$635,086	\$405,840	\$1,034	6,882	8,693	51	8,744
Limited Benefit	\$4,204,690	\$3,773,367	\$44,578	11,305	15,226	207	15,433
Long Term Care	\$950,416	\$1,576,595	\$0	347	436	0	436
Medicare Supplement	\$475,798	\$566,022	\$0	231	266	0	266
Out-of-State 51+ Member Groups	\$485,539	\$360,047	\$0	767	1,146	0	1,146
Vision	\$349,100	\$0	\$1,389	14	2,618	1,160	3,778
<b>TOTAL</b>	<b>\$14,695,641</b>	<b>\$10,239,759</b>	<b>\$1,003,626</b>	<b>58,199</b>	<b>83,963</b>	<b>278</b>	<b>105,581</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN HEALTH AND LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60518							
Accident Only	\$25,606	(\$684)	\$0	1	165	0	165
Long Term Care	\$6,414	\$122,846	\$0	1	2	0	2
<b>TOTAL</b>	<b>\$32,020</b>	<b>\$122,162</b>	<b>\$0</b>	<b>2</b>	<b>167</b>	<b>0</b>	<b>167</b>

## AMERICAN HERITAGE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60534							
51+ Member Groups	\$991,662	\$2,566,333	\$65,390	11	2,782	684	3,466
Accident Only	\$20,689,441	\$10,541,061	\$6,413,957	131	58,640	58,214	116,854
Dental	\$535,032	\$169,028	\$52,558	56	2,106	799	2,905
Disability Income	\$10,335,990	\$5,554,887	\$1,947,656	14	19,607	0	19,607
Hospital Indemnity	\$11,077,888	\$7,066,220	\$4,087,126	72	22,945	22,426	45,371
Limited Benefit	\$33,823,294	\$20,980,579	\$6,812,707	190	100,537	100,114	200,651
Long Term Care	\$1,025,731	\$2,562,480	\$0	0	649	0	649
<b>TOTAL</b>	<b>\$78,479,038</b>	<b>\$49,440,588</b>	<b>\$19,379,394</b>	<b>474</b>	<b>207,266</b>	<b>684</b>	<b>389,503</b>

## AMERICAN HOME ASSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
19380							
Accidental Death & Dismemberment	\$37,609	\$1,610	\$0	0	86	0	86
Travel	\$1,094	(\$453)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$38,703</b>	<b>\$1,157</b>	<b>\$0</b>	<b>0</b>	<b>86</b>	<b>0</b>	<b>86</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN INCOME LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60577							
Accident Only	\$1,979,231	\$779,893	\$146,192	0	21,086	9,368	30,454
Accidental Death & Dismemberment	\$208,460	\$164,977	\$39,653	348	2,714	0	2,714
Blanket Accident/Sickness	\$65,600	\$16,170	\$65,600	166	0	0	0
Disability Income	\$2,590	\$0	\$0	0	7	0	7
Hospital Indemnity	\$494,826	\$227,639	\$87,582	0	4,876	2,317	7,193
Limited Benefit	\$292,530	\$146,660	\$26,993	0	3,006	606	3,612
Medicare Supplement	\$83,662	\$59,568	\$0	0	43	0	43
<b>TOTAL</b>	<b>\$3,126,899</b>	<b>\$1,394,907</b>	<b>\$366,020</b>	<b>514</b>	<b>31,732</b>	<b>9,368</b>	<b>44,023</b>

## AMERICAN MEDICAL AND LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
81418							
Limited Benefit	\$3,726,111	\$1,888,551	\$78,160	20	1,483	1,911	3,394
<b>TOTAL</b>	<b>\$3,726,111</b>	<b>\$1,888,551</b>	<b>\$78,160</b>	<b>20</b>	<b>1,483</b>	<b>1,911</b>	<b>3,394</b>

## AMERICAN MEMORIAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67989							
Disability Income	\$250	\$5,336	\$0	0	1	0	1
Limited Benefit	\$5	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$255</b>	<b>\$5,336</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN MODERN HOME INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
23469							
Travel	\$191,175	\$12,001	\$191,175	0	1,164	1,164	2,328
<b>TOTAL</b>	<b>\$191,175</b>	<b>\$12,001</b>	<b>\$191,175</b>	<b>0</b>	<b>1,164</b>	<b>1,164</b>	<b>2,328</b>

## AMERICAN NATIONAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60739							
Accident Only	\$5,242	(\$6)	\$0	0	60	10	70
Accidental Death & Dismemberment	\$1,571	\$0	\$0	0	142	0	142
Disability Income	\$17,117	\$327,572	\$0	0	38	0	38
Individually Underwritten	\$174,165	\$517,202	\$0	0	57	19	76
Limited Benefit	\$63,111	\$124,765	\$0	0	182	91	273
Medicare Supplement	\$735	\$520	\$0	0	1	0	1
Out-of-State Individually Underwritten	\$95,695	\$67,915	\$0	3	8	2	10
<b>TOTAL</b>	<b>\$357,636</b>	<b>\$1,037,968</b>	<b>\$0</b>	<b>3</b>	<b>488</b>	<b>10</b>	<b>610</b>

## AMERICAN NATIONAL LIFE INS. CO. OF TEXAS

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71773							
Accident Only	\$276	\$1,020	\$276	1	1	0	1
Conversion	\$496,324	\$432,672	\$0	0	42	12	54
Individually Underwritten	(\$10)	\$62,552	\$0	0	0	0	0
Medicare Supplement	\$84,596	\$50,984	\$0	1	30	0	30
Out-of-State Individually Underwritten	\$339,427	\$313,189	\$0	5	49	18	67
<b>TOTAL</b>	<b>\$920,613</b>	<b>\$860,417</b>	<b>\$276</b>	<b>7</b>	<b>122</b>	<b>0</b>	<b>152</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERICAN PIONEER LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60763							
Dental	\$50,230	\$40,188	\$610	0	139	0	139
Disability Income	\$16,429	\$54,164	\$0	0	0	0	0
Hospital Indemnity	\$741	\$23,852	\$0	0	1	0	1
Limited Benefit	\$8,579	\$2,430	\$0	0	65	0	65
Long Term Care	\$3,700,463	\$13,929,840	\$0	0	1,278	0	1,278
Medicare Supplement	\$39,797,546	\$40,556,988	\$398,512	0	13,816	0	13,816
<b>TOTAL</b>	<b>\$43,573,988</b>	<b>\$54,607,462</b>	<b>\$399,122</b>	<b>0</b>	<b>15,299</b>	<b>0</b>	<b>15,299</b>

## AMERICAN PUBLIC LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60801							
Accident Only	\$55,245	\$38,858	\$4,521	0	198	0	198
Dental	\$47,287	\$33,261	\$20,512	20	128	50	178
Disability Income	\$90,926	\$63,956	\$2,167	35	5	0	5
Hospital Indemnity	\$3,713,398	\$2,611,965	\$3,773,154	12,398	53	30,995	31,048
Limited Benefit	\$321,276	\$225,982	\$20,512	98	553	245	798
Medicare Supplement	(\$564)	(\$396)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$4,227,568</b>	<b>\$2,973,626</b>	<b>\$3,820,866</b>	<b>12,551</b>	<b>937</b>	<b>0</b>	<b>32,227</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### AMERICAN REPUBLIC INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60836							
Accident Only	\$282	\$0	\$0	0	8	1	9
Hospital Indemnity	\$11,089	\$303	\$0	0	59	5	64
Individually Underwritten	\$32,645	\$186,283	\$0	0	4	2	6
Limited Benefit	\$4,407	\$1,066	\$0	1	76	25	101
Long Term Care	\$8,780	(\$19,638)	\$0	1	14	0	14
Medicare Supplement	\$1,069,524	\$886,423	\$0	1	427	12	439
Out-of-State Individually Underwritten	\$372,532	\$358,514	\$0	1	29	21	50
<b>TOTAL</b>	<b>\$1,499,259</b>	<b>\$1,412,951</b>	<b>\$0</b>	<b>4</b>	<b>617</b>	<b>1</b>	<b>683</b>

### AMERICAN STATES INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
19704							
Disability Income	\$48,859	(\$113,833)	\$0	0	35	0	35
Individually Underwritten	\$6,980	(\$16,262)	\$0	0	5	0	5
<b>TOTAL</b>	<b>\$55,839</b>	<b>(\$130,095)</b>	<b>\$0</b>	<b>0</b>	<b>40</b>	<b>0</b>	<b>40</b>

### AMERICAN UNITED LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60895							
Accidental Death & Dismemberment	\$54,373	\$0	(\$24)	69	2,159	879	3,038
Disability Income	\$477,537	\$864,930	\$16,100	18	1,292	0	1,292
Excess/Stop Loss	\$137,384	\$713,768	\$128,879	0	0	0	0
<b>TOTAL</b>	<b>\$669,294</b>	<b>\$1,578,698</b>	<b>\$144,955</b>	<b>87</b>	<b>3,451</b>	<b>879</b>	<b>4,330</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AMERITAS LIFE INSURANCE CORP.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61301							
Dental	\$17,697,273	\$13,045,956	\$2,905,768	788	29,996	74,990	104,986
Disability Income	\$159,268	\$59,326	\$0	0	115	0	115
Vision	\$3,105,606	\$1,500,232	\$308,438	293	26,494	66,235	92,729
<b>TOTAL</b>	<b>\$20,962,147</b>	<b>\$14,605,514</b>	<b>\$3,214,206</b>	<b>1,081</b>	<b>56,605</b>	<b>74,990</b>	<b>197,830</b>

## AMEX ASSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
27928							
Accident Only	\$1,087,824	\$36,154	\$0	0	5,514	2,295	7,809
Accidental Death & Dismemberment	\$5,960,225	\$135,058	\$0	0	2,466,182	296,207	2,762,389
Hospital Indemnity	\$78,853	\$15,218	\$0	0	473	176	649
Travel	\$2,926,943	\$1,023,557	\$0	0	74,906	68,500	143,406
<b>TOTAL</b>	<b>\$10,053,845</b>	<b>\$1,209,987</b>	<b>\$0</b>	<b>0</b>	<b>2,547,075</b>	<b>2,295</b>	<b>2,914,253</b>

## AMFIRST INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60250							
Dental	\$23,170	\$297	\$0	1	5	12	17
Limited Benefit	\$549,844	\$264,467	\$5,045	6	450	383	833
<b>TOTAL</b>	<b>\$573,014</b>	<b>\$264,764</b>	<b>\$5,045</b>	<b>7</b>	<b>455</b>	<b>12</b>	<b>850</b>

## ANTHEM LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61069							
Disability Income	\$133	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$133</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ARCH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
11150							
Travel	\$72,274	\$30,971	\$72,274	0	4,049	0	4,049
<b>TOTAL</b>	<b>\$72,274</b>	<b>\$30,971</b>	<b>\$72,274</b>	<b>0</b>	<b>4,049</b>	<b>0</b>	<b>4,049</b>

## ARGUS DENTAL PLAN, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
Dental	\$7,882,091	\$5,852,421	\$291,624	36	56,077	839	56,916
Discount Medical Plan	\$43,018	\$0	\$1,596	4	82	47	129
<b>TOTAL</b>	<b>\$7,925,109</b>	<b>\$5,852,421</b>	<b>\$293,220</b>	<b>40</b>	<b>56,159</b>	<b>839</b>	<b>57,045</b>

## ARROWOOD INDEMNITY COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
24678							
Hospital Indemnity	\$178	\$0	\$0	0	1	1	2
<b>TOTAL</b>	<b>\$178</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>2</b>

## ASSURITY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71439							
Accident Only	\$174,396	\$11,341	\$34,933	0	1,052	6	1,058
Disability Income	\$1,746,101	\$1,224,657	\$130,026	0	1,974	0	1,974
Hospital Indemnity	\$134,901	\$169,538	\$75,128	0	245	100	345
Individually Underwritten	\$205	\$0	\$0	0	1	0	1
Limited Benefit	\$479,918	\$79,448	\$114,681	0	1,069	404	1,473
Long Term Care	\$12,643	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$2,548,164</b>	<b>\$1,484,984</b>	<b>\$354,768</b>	<b>0</b>	<b>4,341</b>	<b>6</b>	<b>4,851</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ATHENE ANNUITY & LIFE ASSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61492							
Accident Only	\$587,751	\$208,469	\$1,397	0	5,326	1,922	7,248
Disability Income	\$154,797	\$106,239	\$0	0	240	9	249
Hospital Indemnity	\$552	\$0	\$0	0	10	3	13
Limited Benefit	\$3,705	\$3,728	\$0	0	110	120	230
<b>TOTAL</b>	<b>\$746,805</b>	<b>\$318,436</b>	<b>\$1,397</b>	<b>0</b>	<b>5,686</b>	<b>1,922</b>	<b>7,740</b>

## ATLANTA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61093							
Accidental Death & Dismemberment	\$790	\$0	\$0	0	149	0	149
Hospital Indemnity	\$8,427	\$1,111	\$0	0	125	0	125
Limited Benefit	\$67	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$9,284</b>	<b>\$1,111</b>	<b>\$0</b>	<b>0</b>	<b>274</b>	<b>0</b>	<b>274</b>

## ATLANTIC AMBULANCE SERVICES ACQUISITION, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Other Prepaid Health Services	\$348,844	\$188,102	\$0	56	16,911	0	16,911
<b>TOTAL</b>	<b>\$348,844</b>	<b>\$188,102</b>	<b>\$0</b>	<b>56</b>	<b>16,911</b>	<b>0</b>	<b>16,911</b>

## ATLANTIC SPECIALTY INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
27154							
Accident Only	\$714,957	\$274,998	\$12,220	76	58,046	0	58,046
<b>TOTAL</b>	<b>\$714,957</b>	<b>\$274,998</b>	<b>\$12,220</b>	<b>76</b>	<b>58,046</b>	<b>0</b>	<b>58,046</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### AURIGEN REINSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
74900							
Accidental Death & Dismemberment	\$1,201	\$0	\$0	0	11	48	59
Dental	\$972,408	\$624,594	\$0	31	449	53	502
Hospital Indemnity	\$2,845	\$600	\$0	0	2	5	7
<b>TOTAL</b>	<b>\$976,454</b>	<b>\$625,194</b>	<b>\$0</b>	<b>31</b>	<b>462</b>	<b>48</b>	<b>568</b>

### AUTO-OWNERS LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61190							
Disability Income	\$360,662	(\$80,187)	\$5,760	0	370	0	370
Long Term Care	\$144,376	\$101	\$882	0	73	0	73
Medicare Supplement	\$50,181	\$58,924	\$0	0	29	0	29
<b>TOTAL</b>	<b>\$555,219</b>	<b>(\$21,162)</b>	<b>\$6,642</b>	<b>0</b>	<b>472</b>	<b>0</b>	<b>472</b>

### AVIVA LIFE AND ANNUITY COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61689							
Disability Income	\$467,072	\$640,261	\$0	0	655	0	655
<b>TOTAL</b>	<b>\$467,072</b>	<b>\$640,261</b>	<b>\$0</b>	<b>0</b>	<b>655</b>	<b>0</b>	<b>655</b>

### AVIVA LIFE AND ANNUITY COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
63932							
Disability Income	\$7,428	(\$52,038)	\$0	0	16	0	16
<b>TOTAL</b>	<b>\$7,428</b>	<b>(\$52,038)</b>	<b>\$0</b>	<b>0</b>	<b>16</b>	<b>0</b>	<b>16</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AVMED, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95263							
2 - 5 Member Groups	\$39,325,762	\$36,625,857	\$2,843,771	2,259	5,574	1,713	7,287
51+ Member Groups	\$159,993,836	\$137,236,320	\$9,299,324	77	17,522	14,706	32,228
6 - 50 Member Groups	\$208,795,135	\$179,001,147	\$12,615,184	3,007	27,466	16,323	43,789
Administrative Services Only (ASO)	\$46,033,166	\$0	\$20,875,431	0	0	0	0
Conversion	\$4,485,850	\$7,050,548	\$0	0	511	347	858
Guarantee Issue	\$49,775	\$29,339	\$0	0	3	3	6
Individually Underwritten	\$25,819,500	\$15,218,942	\$5,053,355	0	6,000	3,385	9,385
Self-Employed or Sole Proprietor	\$1,118,328	\$1,023,587	\$56,902	75	75	26	101
TOTAL	\$485,621,352	\$376,185,740	\$50,743,967	5,418	57,151	1,713	93,654

## AXA EQUITABLE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62944							
Conversion	\$36,181	\$73,552	\$0	0	9	0	9
Disability Income	\$3,087,733	\$27,773,566	\$0	0	2,643	0	2,643
Individually Underwritten	\$2,852,519	\$3,645,494	\$0	0	439	246	685
Out-of-State Conversion	\$0	\$210,365	\$0	0	0	0	0
TOTAL	\$5,976,433	\$31,702,977	\$0	0	3,091	0	3,337

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## AXIS INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
37273							
Accidental Death & Dismemberment	\$55,966	\$32,787	\$51,480	28	2,929	0	2,929
Blanket Accident/Sickness	\$284,740	\$188,010	\$206,205	114	122,051	0	122,051
Dental	\$49,020	\$31,768	\$49,020	7	192	48	240
Disability Income	\$9,907	\$6,420	\$9,907	7	192	48	240
Hospital Indemnity	\$874,744	\$566,883	\$874,744	17	1,689	338	2,027
Limited Benefit	\$5,316	\$3,445	\$5,316	14	99	24	123
Vision	\$11,051	\$7,162	\$11,051	6	192	48	240
<b>TOTAL</b>	<b>\$1,290,744</b>	<b>\$836,475</b>	<b>\$1,207,723</b>	<b>193</b>	<b>127,344</b>	<b>0</b>	<b>127,850</b>

## BALBOA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68160							
Accidental Death & Dismemberment	\$179,149	\$115,272	\$1,902	0	22,598	0	22,598
<b>TOTAL</b>	<b>\$179,149</b>	<b>\$115,272</b>	<b>\$1,902</b>	<b>0</b>	<b>22,598</b>	<b>0</b>	<b>22,598</b>

## BALTIMORE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61212							
Accident Only	\$157	\$0	\$0	0	15	0	15
Accidental Death & Dismemberment	\$573	\$0	\$0	1	37	0	37
Hospital Indemnity	\$1,016	\$1,050	\$0	0	6	0	6
Limited Benefit	\$21,409	\$0	\$0	8	78	57	135
Sickness	\$109	\$0	\$0	0	11	0	11
<b>TOTAL</b>	<b>\$23,264</b>	<b>\$1,050</b>	<b>\$0</b>	<b>9</b>	<b>147</b>	<b>0</b>	<b>204</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## BANKERS FIDELITY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
61239							
Accident Only	\$3,934	\$210	\$0	0	13	0	13
Disability Income	\$14,999	\$5,100	\$0	0	14	0	14
Hospital Indemnity	\$4,056	\$5,385	\$0	0	6	0	6
Limited Benefit	\$24,358	\$6,872	\$0	0	180	0	180
Medicare Supplement	\$324,071	\$273,265	\$0	0	101	0	101
Short Term Care	\$431	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$371,849</b>	<b>\$290,832</b>	<b>\$0</b>	<b>0</b>	<b>315</b>	<b>0</b>	<b>315</b>

## BANKERS INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
33162							
Individually Underwritten	\$0	(\$25,000)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>(\$25,000)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## BANKERS LIFE AND CASUALTY COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
61263							
Accident Only	\$19,328	\$26,688	\$6,092	0	318	0	318
Disability Income	\$353,558	\$485,139	\$4,252	0	475	0	475
Hospital Indemnity	\$54,972	\$75,904	\$9,488	0	230	8	238
Limited Benefit	\$262,936	\$363,055	\$109	0	1,499	439	1,938
Long Term Care	\$52,900,892	\$60,494,371	\$1,004,466	0	24,634	6,313	30,947
Medicare Supplement	\$58,895,306	\$44,985,279	\$0	0	19,431	393	19,824
Short Term Care	\$235,812	\$245,003	\$0	0	259	13	272
<b>TOTAL</b>	<b>\$112,722,804</b>	<b>\$106,675,439</b>	<b>\$1,024,407</b>	<b>0</b>	<b>46,846</b>	<b>0</b>	<b>54,012</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## BANKERS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
81043							
Accidental Death & Dismemberment	\$10,828	\$0	\$0	0	77	77	154
Individually Underwritten	\$0	(\$56,955)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$10,828</b>	<b>(\$56,955)</b>	<b>\$0</b>	<b>0</b>	<b>77</b>	<b>77</b>	<b>154</b>

## BANNER LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
94250							
Disability Income	\$20	\$0	\$0	0	0	0	0
Guarantee Issue	\$502	\$0	\$0	0	4	0	4
<b>TOTAL</b>	<b>\$522</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>4</b>

## BCS INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
38245							
Accident Only	\$2,589,885	\$2,600,161	\$2,589,885	6	5,663	3,502	9,165
Blanket Accident/Sickness	\$2,688,030	\$1,983,996	\$0	10	2,448	533	2,981
Dental	\$617,176	\$169,714	\$17,204	26	2,492	481	2,973
Excess/Stop Loss	\$629,478	\$387,257	\$0	1	3,231	3,555	6,786
Hospital Indemnity	\$775,327	\$434,949	\$110,761	17	1,211	259	1,470
Long Term Care	\$9,203	\$57,266	\$0	1	3	0	3
Out-of-State Short Term Major Medical	\$924,378	\$688,169	\$924,378	15	1,473	22	1,495
Vision	\$159,168	(\$227)	\$0	25	1,772	391	2,163
<b>TOTAL</b>	<b>\$8,392,645</b>	<b>\$6,321,285</b>	<b>\$3,642,228</b>	<b>101</b>	<b>18,293</b>	<b>3,502</b>	<b>27,036</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## BERKLEY LIFE AND HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
64890							
Accident Only	\$962,940	\$385,607	\$962,940	1,402	452,525	0	452,525
Excess/Stop Loss	\$1,340,167	\$470,918	\$1,340,167	5	3,529	0	3,529
<b>TOTAL</b>	<b>\$2,303,107</b>	<b>\$856,525</b>	<b>\$2,303,107</b>	<b>1,407</b>	<b>456,054</b>	<b>0</b>	<b>456,054</b>

## BERKSHIRE LIFE INSURANCE COMPANY OF AMERICA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71714							
Disability Income	\$19,493,825	\$10,026,500	\$2,237,826	0	8,554	0	8,554
Long Term Care	\$2,713,741	\$8,095	\$279,138	0	506	0	506
<b>TOTAL</b>	<b>\$22,207,566</b>	<b>\$10,034,595</b>	<b>\$2,516,964</b>	<b>0</b>	<b>9,060</b>	<b>0</b>	<b>9,060</b>

## BEST LIFE AND HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
90638							
Dental	\$190,080	\$107,243	\$4,400	37	235	145	380
Vision	\$28,513	\$11,411	\$0	9	226	106	332
<b>TOTAL</b>	<b>\$218,593</b>	<b>\$118,654</b>	<b>\$4,400</b>	<b>46</b>	<b>461</b>	<b>145</b>	<b>712</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## BLUE CROSS & BLUE SHIELD OF FLORIDA, INC.

NAIC Company Code  98167	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
2 - 5 Member Groups	\$174,893,421	\$162,428,370	\$11,965,490	12,083	18,684	14,172	32,856
51+ Member Groups	\$1,611,655,050	\$1,185,743,699	\$126,158,843	5,812	225,713	155,884	381,597
6 - 50 Member Groups	\$895,567,986	\$674,339,799	\$74,318,077	26,986	119,104	76,027	195,131
Administrative Services Only (ASO)	\$99,652,507	\$0	\$2,778,929	0	0	0	0
Conversion	\$52,702,149	\$73,722,411	\$7,652,774	0	13,700	6,870	20,570
Excess/Stop Loss	\$37,354,446	\$21,970,158	\$0	67	38,657	30,631	69,288
Guarantee Issue	\$42,616,256	\$37,957,116	\$2,771,664	0	11,078	5,555	16,633
Individually Underwritten	\$983,483,739	\$777,722,724	\$121,474,830	0	255,649	128,196	383,845
Long Term Care	\$12,787,469	\$8,388,559	\$0	0	7,728	0	7,728
Medicare Supplement	\$347,027,933	\$274,337,893	\$20,992,534	12	152,790	11	152,801
Self-Employed or Sole Proprietor	\$16,585,675	\$17,435,906	\$200,040	1,173	1,173	717	1,890
Short Term Major Medical	\$2,359,774	\$1,391,560	\$902,355	0	613	308	921
<b>TOTAL</b>	<b>\$4,276,686,405</b>	<b>\$3,235,438,195</b>	<b>\$369,215,536</b>	<b>46,133</b>	<b>844,889</b>	<b>14,172</b>	<b>1,263,260</b>

## BOSTON MUTUAL LIFE INSURANCE COMPANY

NAIC Company Code  61476	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$406,678	\$127,931	\$124,259	0	1,118	2,706	3,824
Accidental Death & Dismemberment	\$9,883	\$0	\$0	28	457	0	457
Disability Income	\$431,821	\$447,280	\$67,102	22	925	0	925
Hospital Indemnity	\$375,714	\$293,134	\$0	1	111	123	234
Limited Benefit	\$346,611	\$0	\$0	92	964	301	1,265
<b>TOTAL</b>	<b>\$1,570,707</b>	<b>\$868,345</b>	<b>\$191,361</b>	<b>143</b>	<b>3,575</b>	<b>2,706</b>	<b>6,705</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CANADA LIFE ASSURANCE COMPANY (US BUSINESS OF THE)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80659							
Disability Income	\$172,386	\$517,337	\$0	0	164	0	164
Limited Benefit	\$24,142	\$29,018	\$0	0	25	0	25
<b>TOTAL</b>	<b>\$196,528</b>	<b>\$546,355</b>	<b>\$0</b>	<b>0</b>	<b>189</b>	<b>0</b>	<b>189</b>

## CAPITAL HEALTH PLAN, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95112							
2 - 5 Member Groups	\$16,291,759	\$14,348,374	\$445,845	919	1,821	1,740	3,561
51+ Member Groups	\$386,884,594	\$372,492,684	\$1,777,427	119	43,657	49,769	93,426
6 - 50 Member Groups	\$46,048,693	\$38,839,877	\$864,671	679	5,666	4,241	9,907
Conversion	\$1,618,864	\$1,841,053	\$0	0	223	108	331
Self-Employed or Sole Proprietor	\$3,294,724	\$3,895,281	\$63,416	279	279	246	525
<b>TOTAL</b>	<b>\$454,138,634</b>	<b>\$431,417,269</b>	<b>\$3,151,359</b>	<b>1,996</b>	<b>51,646</b>	<b>1,740</b>	<b>107,750</b>

## CAPITOL INDEMNITY CORPORATION

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
10472							
Accident Only	\$2,943	(\$10,660)	\$2,943	6	5,283	0	5,283
<b>TOTAL</b>	<b>\$2,943</b>	<b>(\$10,660)</b>	<b>\$2,943</b>	<b>6</b>	<b>5,283</b>	<b>0</b>	<b>5,283</b>

## CATHOLIC ASSOCIATION OF FORESTERS

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
58130							
Hospital Indemnity	\$350	\$0	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$350</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### CATHOLIC FINANCIAL LIFE

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56030							
Accidental Death & Dismemberment	\$30	\$0	\$0	0	2	0	2
Hospital Indemnity	\$47	\$833	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$77</b>	<b>\$833</b>	<b>\$0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>4</b>

### CELTIC INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80799							
Conversion	\$812,735	\$990,790	\$108,005	0	108	18	126
Medicare Supplement	\$7,497,516	\$5,851,997	\$0	0	2,079	0	2,079
Out-of-State Individually Underwritten	\$9,099,128	\$8,127,179	\$3,732,379	1	1,131	377	1,508
Out-of-State Short Term Major Medical	\$23,241	\$1,036	\$15,807	0	0	0	0
<b>TOTAL</b>	<b>\$17,432,620</b>	<b>\$14,971,002</b>	<b>\$3,856,191</b>	<b>1</b>	<b>3,318</b>	<b>18</b>	<b>3,713</b>

### CENTRAL SECURITY LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61735							
Accidental Death & Dismemberment	\$75	\$0	\$0	0	1	0	1
Limited Benefit	\$2,414	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$2,489</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CENTRAL STATES HEALTH & LIFE COMPANY OF OMAHA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61751							
Disability Income	\$3,529	\$19	\$0	0	74	0	74
Hospital Indemnity	\$902	\$0	\$0	0	5	2	7
Limited Benefit	\$36,710	\$280,149	\$0	0	21	8	29
Long Term Care	\$68,042	\$80,527	\$0	0	43	0	43
Medicare Supplement	\$4,771,869	\$3,529,213	\$0	2	1,752	0	1,752
<b>TOTAL</b>	<b>\$4,881,052</b>	<b>\$3,889,908</b>	<b>\$0</b>	<b>2</b>	<b>1,895</b>	<b>0</b>	<b>1,905</b>

## CENTRAL STATES INDEMNITY COMPANY OF OMAHA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
34274							
Disability Income	\$55,981	\$30,416	\$0	1	6,494	0	6,494
<b>TOTAL</b>	<b>\$55,981</b>	<b>\$30,416</b>	<b>\$0</b>	<b>1</b>	<b>6,494</b>	<b>0</b>	<b>6,494</b>

## CENTRAL UNITED LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61883							
Accident Only	\$1,427	\$2,297	\$78	0	60	66	126
Champus/Tricare Supplement	\$48,583	\$38,724	\$0	0	71	131	202
Dental	\$7,838	\$4,492	\$0	0	26	28	54
Disability Income	\$18,512	\$17,933	\$325	0	69	77	146
Hospital Indemnity	\$29,766	\$6,008	\$1,210	0	122	143	265
Individually Underwritten	\$125,253	\$55,178	\$0	0	34	49	83
Limited Benefit	\$948,244	\$988,486	\$0	0	2,502	3,834	6,336
Long Term Care	\$20,737	\$22,054	\$0	0	26	27	53
Medicare Supplement	\$237,590	\$191,764	\$0	0	166	176	342
<b>TOTAL</b>	<b>\$1,437,950</b>	<b>\$1,326,936</b>	<b>\$1,613</b>	<b>0</b>	<b>3,076</b>	<b>66</b>	<b>7,607</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CENTRE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
80896							
Disability Income	\$843,086	\$790,930	\$0	0	729	0	729
Individually Underwritten	\$6,190	\$115,975	\$0	0	50	10	60
<b>TOTAL</b>	<b>\$849,276</b>	<b>\$906,905</b>	<b>\$0</b>	<b>0</b>	<b>779</b>	<b>0</b>	<b>789</b>

## CHESAPEAKE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
61832							
Accident Only	\$269,501	\$111,775	\$224,928	0	3,050	1,505	4,555
Dental	\$94,743	\$21,716	\$85,326	0	757	341	1,098
Disability Income	\$109	(\$1)	\$0	0	0	0	0
Hospital Indemnity	\$257,196	\$12,165	\$248,238	0	1,476	687	2,163
Individually Underwritten	\$8,111	\$7,107	\$0	0	4	0	4
Limited Benefit	\$383,730	\$295,369	\$372,339	0	2,016	904	2,920
Out-of-State Individually Underwritten	\$2,537	(\$20)	\$0	0	0	0	0
Vision	\$63,314	\$22,576	\$32,555	0	1,449	877	2,326
<b>TOTAL</b>	<b>\$1,079,241</b>	<b>\$470,687</b>	<b>\$963,386</b>	<b>0</b>	<b>8,752</b>	<b>1,505</b>	<b>13,066</b>

## CIGNA DENTAL HEALTH OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
52021							
Dental	\$34,406,513	\$16,712,389	\$1,714,110	199	80,287	83,257	163,544
<b>TOTAL</b>	<b>\$34,406,513</b>	<b>\$16,712,389</b>	<b>\$1,714,110</b>	<b>199</b>	<b>80,287</b>	<b>83,257</b>	<b>163,544</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CIGNA HEALTH AND LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67369							
51+ Member Groups	\$91,751,914	\$75,968,939	\$13,331,266	476	25,574	21,968	47,542
Accidental Death & Dismemberment	\$5,642	\$0	\$0	3	3,208	0	3,208
Administrative Services Only (ASO)	\$71,917,123	\$0	\$24,076,276	0	0	0	0
Conversion	\$5,961	\$47,238	\$6,525	0	2	0	2
Dental	\$7,442,244	\$4,909,730	\$838,345	331	16,649	15,660	32,309
Excess/Stop Loss	\$49,981,531	\$37,124,715	\$1,206,294	1,115	69,148	65,632	134,780
Vision	\$265,214	\$216,829	\$50,512	140	5,794	5,270	11,064
TOTAL	\$221,369,629	\$118,267,451	\$39,509,218	2,065	120,375	21,968	228,905

## CIGNA HEALTHCARE OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
95136							
51+ Member Groups	\$5,200,114	\$4,064,360	\$65,865	36	525	545	1,070
Conversion	\$533,413	\$991,901	\$0	0	44	0	44
TOTAL	\$5,733,527	\$5,056,261	\$65,865	36	569	545	1,114

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CINCINNATI LIFE INSURANCE COMPANY (THE)

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
76236							
Accident Only	\$110	\$0	\$0	0	17	0	17
Disability Income	\$27,770	\$8,031	\$0	0	33	0	33
Hospital Indemnity	\$11	\$0	\$0	0	2	0	2
Individually Underwritten	\$11,274	\$4,163	\$0	0	13	0	13
Limited Benefit	\$1,244	\$0	\$0	0	20	0	20
Long Term Care	\$138,680	\$50,303	\$0	0	59	0	59
Medicare Supplement	\$265	\$1,097	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$179,354</b>	<b>\$63,594</b>	<b>\$0</b>	<b>0</b>	<b>146</b>	<b>0</b>	<b>146</b>

## CITIZENS NATIONAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
82082							
Dental	\$3,955	\$5,826	\$0	0	3	0	3
Disability Income	\$367	\$0	\$0	0	1	0	1
Limited Benefit	\$3,025	\$0	\$0	0	13	0	13
Medicare Supplement	\$2,746	\$2,854	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$10,093</b>	<b>\$8,680</b>	<b>\$0</b>	<b>0</b>	<b>18</b>	<b>0</b>	<b>18</b>

## CITIZENS SECURITY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
61921							
Dental	\$8,570	\$81,683	\$0	0	0	0	0
Hospital Indemnity	\$490	\$0	\$0	0	0	0	0
Limited Benefit	\$1,576	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$10,636</b>	<b>\$81,683</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### CITRUS HEALTH CARE, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
11836							
Individually Underwritten	\$6,985	(\$77,250)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$6,985</b>	<b>(\$77,250)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### CLARENDON NATIONAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
20532							
Excess/Stop Loss	\$0	(\$8,836)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>(\$8,836)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### CMFG LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62626							
Accident Only	\$138,874	(\$1,684)	\$0	0	2,108	0	2,108
Accidental Death & Dismemberment	\$5,284,918	\$1,624,602	\$746,650	0	363,627	65,970	429,597
Dental	\$7,951	\$9,123	\$0	0	17	0	17
Disability Income	\$334,044	\$275,330	\$0	35	1,467	0	1,467
Hospital Indemnity	\$29,264	\$6,703	\$0	0	177	344	521
Individually Underwritten	\$0	\$87	\$0	0	0	0	0
Long Term Care	\$4,591,256	\$696,838	\$18,267	0	3,211	0	3,211
Medicare Supplement	\$3,716	\$12,546	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$10,390,023</b>	<b>\$2,623,545</b>	<b>\$764,917</b>	<b>35</b>	<b>370,614</b>	<b>0</b>	<b>436,928</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## COLONIAL LIFE AND ACCIDENT INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62049							
Accident Only	\$23,370,911	\$11,547,155	\$5,660,601	0	80,970	81,139	162,109
Disability Income	\$28,735,098	\$15,317,839	\$7,328,702	19	53,619	157	53,776
Hospital Indemnity	\$12,745,741	\$6,787,556	\$3,050,719	156	29,335	18,840	48,175
Limited Benefit	\$18,006,646	\$10,094,111	\$4,592,479	34	50,985	49,955	100,940
Long Term Care	\$509	\$0	\$0	0	2	0	2
Sickness	\$386,197	\$252,107	\$85,497	0	2,237	1,516	3,753
<b>TOTAL</b>	<b>\$83,245,102</b>	<b>\$43,998,768</b>	<b>\$20,717,998</b>	<b>209</b>	<b>217,148</b>	<b>81,139</b>	<b>368,755</b>

## COLONIAL PENN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62065							
Accident Only	\$3,353	\$616	\$0	0	29	0	29
Accidental Death & Dismemberment	\$1,907	\$162	\$0	0	16	10	26
Disability Income	\$48,040	\$131,128	\$0	0	2	0	2
Hospital Indemnity	\$1,285	\$160	\$0	0	6	1	7
Limited Benefit	\$768	\$113	\$0	0	2	0	2
Long Term Care	\$7,226	\$0	\$0	0	11	0	11
Medicare Supplement	\$25,587,873	\$16,042,610	\$8,383,588	0	11,678	0	11,678
<b>TOTAL</b>	<b>\$25,650,452</b>	<b>\$16,174,789</b>	<b>\$8,383,588</b>	<b>0</b>	<b>11,744</b>	<b>0</b>	<b>11,755</b>

## COLORADO BANKERS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
84786							
Accident Only	\$45,616	\$24,556	\$1,194	0	222	0	222
Dental	\$10,449	\$2,813	\$10,449	0	21	0	21
<b>TOTAL</b>	<b>\$56,065</b>	<b>\$27,369</b>	<b>\$11,643</b>	<b>0</b>	<b>243</b>	<b>0</b>	<b>243</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### COLUMBIAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
76023							
Accident Only	\$961	\$0	\$0	0	3	0	3
Dental	\$9,165	\$168	\$0	0	4	0	4
<b>TOTAL</b>	<b>\$10,126</b>	<b>\$168</b>	<b>\$0</b>	<b>0</b>	<b>7</b>	<b>0</b>	<b>7</b>

### COLUMBIAN MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62103							
Accident Only	\$1,298	\$0	\$1,291	0	8	0	8
Medicare Supplement	\$9,890	\$8,702	\$2,256	0	2	0	2
<b>TOTAL</b>	<b>\$11,188</b>	<b>\$8,702</b>	<b>\$3,547</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>10</b>

### COLUMBUS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
99937							
Disability Income	\$16,345	\$82,450	\$0	0	67	0	67
<b>TOTAL</b>	<b>\$16,345</b>	<b>\$82,450</b>	<b>\$0</b>	<b>0</b>	<b>67</b>	<b>0</b>	<b>67</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## COMBINED INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62146							
Accident Only	\$3,161,228	\$913,218	\$82,001	0	25,993	6,301	32,294
Champus/Tricare Supplement	\$4,124	\$4,146	\$0	0	4	6	10
Disability Income	\$3,230,473	\$1,132,864	\$236,056	0	8,871	0	8,871
Hospital Indemnity	\$2,363,568	\$939,310	\$764,525	0	7,106	776	7,882
Limited Benefit	\$1,552,240	\$666,896	\$109,957	0	6,937	3,608	10,545
Medicare Supplement	\$1,544,957	\$1,179,971	\$0	0	588	0	588
Sickness	\$3,044	\$1,976	\$0	0	17	0	17
Vision	\$9,251,740	\$7,550,652	\$948,902	15	74,116	138,017	212,133
<b>TOTAL</b>	<b>\$21,111,374</b>	<b>\$12,389,033</b>	<b>\$2,141,441</b>	<b>15</b>	<b>123,632</b>	<b>6,301</b>	<b>272,340</b>

## COMBINED LIFE INSURANCE COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
78697							
Accident Only	\$284,738	\$118,989	\$7,940	0	4,447	0	4,447
Disability Income	\$87,858	\$166,131	\$5,704	0	263	0	263
Hospital Indemnity	\$218,553	\$308,264	\$7,122	0	1,020	37	1,057
Limited Benefit	\$78,286	\$67,240	\$469	0	213	102	315
<b>TOTAL</b>	<b>\$669,435</b>	<b>\$660,624</b>	<b>\$21,235</b>	<b>0</b>	<b>5,943</b>	<b>0</b>	<b>6,082</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### COMMERCIAL TRAVELERS MUTUAL INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
81426							
Accident Only	\$25,033	\$6,257	\$0	30	2,700	0	2,700
Accidental Death & Dismemberment	\$12,478	\$0	\$0	0	130	0	130
Disability Income	\$19,997	\$5,066	\$0	0	416	0	416
Hospital Indemnity	\$17,044	\$14,313	\$0	0	160	0	160
<b>TOTAL</b>	<b>\$74,552</b>	<b>\$25,636</b>	<b>\$0</b>	<b>30</b>	<b>3,406</b>	<b>0</b>	<b>3,406</b>

### COMMONWEALTH ANNUITY AND LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
84824							
Disability Income	\$57,915	\$609,054	\$0	0	20	0	20
Guarantee Issue	\$6,219	\$145,052	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$64,134</b>	<b>\$754,106</b>	<b>\$0</b>	<b>0</b>	<b>30</b>	<b>0</b>	<b>30</b>

### COMPANION LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
77828							
Dental	\$588,300	\$431,493	\$130,141	16	804	1,436	2,240
Disability Income	\$81,758	\$451,812	\$0	10	124	124	248
Excess/Stop Loss	\$5,859,894	\$4,576,717	\$0	26	10,025	23,397	33,422
Hospital Indemnity	\$8,983,143	\$4,781,568	\$1,106,658	144	1,938	2,558	4,496
Prescription Drug	\$12,152	\$4,286	\$0	3	5,674	8,201	13,875
Student	\$81,963	\$6	\$82,638	39	9,395	9,395	18,790
Vision	\$48,220	\$47,742	\$9,636	8	315	563	878
<b>TOTAL</b>	<b>\$15,655,430</b>	<b>\$10,293,624</b>	<b>\$1,329,073</b>	<b>246</b>	<b>28,275</b>	<b>1,436</b>	<b>73,949</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### COMPBENEFITS COMPANY

NAIC Company Code

52015	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Administrative Services Only (ASO)	\$286,293	\$0	\$0	0	0	0	0
Dental	\$76,796,891	\$47,398,900	\$0	3,731	397,720	283,176	680,896
Vision	\$37,619,712	\$26,043,573	\$0	691	670,021	529,782	1,199,803
<b>TOTAL</b>	<b>\$114,702,896</b>	<b>\$73,442,473</b>	<b>\$0</b>	<b>4,422</b>	<b>1,067,741</b>	<b>0</b>	<b>1,880,699</b>

### COMPBENEFITS INSURANCE COMPANY

NAIC Company Code

60984	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Dental	\$40,181,406	\$32,542,690	\$0	219	82,839	76,256	159,095
Vision	\$563,016	\$290,917	\$0	8	3,964	4,094	8,058
<b>TOTAL</b>	<b>\$40,744,422</b>	<b>\$32,833,607</b>	<b>\$0</b>	<b>227</b>	<b>86,803</b>	<b>76,256</b>	<b>167,153</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CONNECTICUT GENERAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62308							
2 - 5 Member Groups	\$637,116	\$719,654	\$0	0	0	0	0
51+ Member Groups	\$452,437,995	\$389,865,245	\$63,932,003	1,341	108,438	98,071	206,509
6 - 50 Member Groups	\$668,031	\$499,136	\$0	0	0	0	0
Administrative Services Only (ASO)	\$164,541,944	\$0	\$207,682	0	0	0	0
Conversion	\$2,275,466	\$3,196,789	\$367,895	0	177	42	219
Dental	\$74,438,852	\$33,921,312	\$13,028,078	917	66,791	65,307	132,098
Disability Income	\$435,587	(\$1,382,274)	\$0	1	324	0	324
Excess/Stop Loss	\$31,358,265	\$22,620,507	\$5,169,650	400	89,965	71,726	161,691
Guarantee Issue	\$5,477,650	\$7,211,194	\$2,202,697	0	502	62	564
Individually Underwritten	\$175,380,449	\$123,085,961	\$75,579,901	0	45,050	31,919	76,969
Long Term Care	\$85,242	(\$502,681)	\$0	9	168	0	168
Medicare Supplement	\$78,081	\$181,934	\$0	45	45	2	47
Prescription Drug	\$40,530	\$46,785	\$2,687	6	40	5	45
Vision	\$2,137,087	\$1,417,583	\$596,013	327	19,095	16,601	35,696
<b>TOTAL</b>	<b>\$909,992,295</b>	<b>\$580,881,145</b>	<b>\$161,086,606</b>	<b>3,046</b>	<b>330,595</b>	<b>0</b>	<b>614,330</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### CONSECO LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65900							
Accident Only	\$2,037	\$371	\$0	0	46	4	50
Disability Income	\$20,684	\$39,463	\$0	2	42	0	42
Hospital Indemnity	\$129,367	\$115,045	\$0	0	195	18	213
Individually Underwritten	\$6,327	\$79,407	\$0	0	4	0	4
Limited Benefit	\$317,168	\$298,171	\$0	0	820	0	820
Long Term Care	\$15,301	\$143,622	\$0	0	18	0	18
Medicare Supplement	\$301,094	\$504,215	\$0	2	180	3	183
<b>TOTAL</b>	<b>\$791,978</b>	<b>\$1,180,294</b>	<b>\$0</b>	<b>4</b>	<b>1,305</b>	<b>4</b>	<b>1,330</b>

### CONSTITUTION LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62359							
Dental	\$22,014	\$8,668	\$4,694	0	89	0	89
Hospital Indemnity	\$184,429	\$43,232	\$39,798	0	536	0	536
Limited Benefit	\$54,168	\$0	\$50,925	0	152	0	152
Long Term Care	\$3,640	\$0	\$0	0	4	0	4
Medicare Supplement	\$3,600,750	\$2,577,097	\$9,230	0	1,133	0	1,133
<b>TOTAL</b>	<b>\$3,865,001</b>	<b>\$2,628,997</b>	<b>\$104,647</b>	<b>0</b>	<b>1,914</b>	<b>0</b>	<b>1,914</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CONTINENTAL AMERICAN INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71730							
Accident Only	\$6,528,400	\$8,509,931	\$4,628,355	225	38,690	31,456	70,146
Accidental Death & Dismemberment	\$117,869	\$2	\$3,454	0	812	442	1,254
Dental	\$41,496	\$4,513	\$25,545	7	115	34	149
Disability Income	\$1,481,201	\$1,082,389	\$583,365	28	3,497	50	3,547
Hospital Indemnity	\$3,073,611	\$1,648,044	\$2,191,469	118	6,008	2,568	8,576
Limited Benefit	\$5,586,743	\$1,839,261	\$3,357,750	230	22,553	6,526	29,079
<b>TOTAL</b>	<b>\$16,829,320</b>	<b>\$13,084,140</b>	<b>\$10,789,938</b>	<b>608</b>	<b>71,675</b>	<b>31,456</b>	<b>112,751</b>

## CONTINENTAL ASSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62413							
Conversion	\$76,627	\$322,749	\$0	0	14	1	15
Disability Income	\$12,999	(\$573,735)	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$89,626</b>	<b>(\$250,986)</b>	<b>\$0</b>	<b>0</b>	<b>24</b>	<b>1</b>	<b>25</b>

## CONTINENTAL CASUALTY COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
20443							
Accident Only	\$0	\$652,127	\$0	0	0	0	0
Accidental Death & Dismemberment	\$3,063	\$33,767	\$0	3	3	0	3
Disability Income	\$2,931	\$1,462,391	\$0	0	5	0	5
Individually Underwritten	\$1,245	(\$3,529)	\$0	0	11	0	11
Limited Benefit	\$121	(\$343)	\$0	0	6	0	6
Long Term Care	(\$3,419,901)	\$46,082,912	\$399,589	362	27,638	0	27,638
<b>TOTAL</b>	<b>(\$3,412,541)</b>	<b>\$48,227,325</b>	<b>\$399,589</b>	<b>365</b>	<b>27,663</b>	<b>0</b>	<b>27,663</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## CONTINENTAL GENERAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71404							
Accident Only	\$10,210	\$196	\$0	0	36	0	36
Dental	\$4,883	\$822	\$0	0	5	1	6
Disability Income	\$59,213	\$42,395	\$0	0	92	0	92
Guarantee Issue	(\$98)	\$0	\$0	0	0	0	0
Hospital Indemnity	\$87,644	\$9,295	\$0	0	261	0	261
Individually Underwritten	\$81,607	\$21,913	\$0	0	12	6	18
Limited Benefit	\$13,448	\$3,074	\$0	0	42	26	68
Long Term Care	\$923,862	\$2,053,299	\$0	0	365	151	516
Medicare Supplement	\$8,883,876	\$8,082,162	\$0	0	2,957	0	2,957
Out-of-State Individually Underwritten	\$0	(\$55)	\$0	0	0	0	0
Short Term Care	\$640	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$10,065,285</b>	<b>\$10,213,101</b>	<b>\$0</b>	<b>0</b>	<b>3,771</b>	<b>0</b>	<b>3,955</b>

## CONTINENTAL LIFE INS. CO. OF BRENTWOOD, TENNESSEE

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68500							
Hospital Indemnity	\$44,586	\$44,885	\$0	0	128	0	128
Individually Underwritten	\$5,318	\$2,101	\$0	0	3	0	3
Limited Benefit	\$1,490	\$0	\$0	0	9	0	9
Long Term Care	\$23,140	\$47,998	\$0	0	26	0	26
Medicare Supplement	\$12,372,645	\$10,604,021	\$0	0	4,786	0	4,786
<b>TOTAL</b>	<b>\$12,447,179</b>	<b>\$10,699,005</b>	<b>\$0</b>	<b>0</b>	<b>4,952</b>	<b>0</b>	<b>4,952</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### COUNTRY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62553							
Disability Income	\$44,811	\$99,908	\$217	1	51	0	51
Long Term Care	\$187,081	\$109,909	\$12,673	0	122	0	122
Medicare Supplement	\$773,809	\$649,555	\$7,851	0	298	0	298
<b>TOTAL</b>	<b>\$1,005,701</b>	<b>\$859,372</b>	<b>\$20,741</b>	<b>1</b>	<b>471</b>	<b>0</b>	<b>471</b>

### COVENTRY HEALTH AND LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
81973							
2 - 5 Member Groups	\$1,067,260	\$936,818	\$178,690	59	153	67	220
51+ Member Groups	\$26,324,655	\$24,955,605	\$4,154,530	69	4,296	1,967	6,263
6 - 50 Member Groups	\$7,354,430	\$6,647,013	\$1,209,127	129	825	442	1,267
Conversion	\$127,218	\$57,840	\$0	0	14	0	14
Guarantee Issue	\$1,249	\$8,364	\$1,225	0	11	1	12
Individually Underwritten	\$13,725,174	\$11,015,772	\$3,290,352	0	4,437	3,749	8,186
Self-Employed or Sole Proprietor	\$20,998	\$7,559	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$48,620,984</b>	<b>\$43,628,971</b>	<b>\$8,833,924</b>	<b>258</b>	<b>9,737</b>	<b>67</b>	<b>15,963</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### COVENTRY HEALTH CARE OF FLORIDA, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95114							
2 - 5 Member Groups	\$27,991,198	\$25,423,063	\$2,438,954	1,266	3,851	1,944	5,795
51+ Member Groups	\$413,775,387	\$358,544,575	\$10,254,191	206	57,973	25,446	83,419
6 - 50 Member Groups	\$80,776,891	\$70,853,881	\$10,423,559	1,292	13,947	6,111	20,058
Administrative Services Only (ASO)	\$2,541,950	\$0	\$2,497,974	0	0	0	0
Conversion	\$3,157,595	\$5,185,722	\$0	0	299	0	299
Self-Employed or Sole Proprietor	\$1,551,211	\$1,909,623	\$18,496	97	97	0	97
<b>TOTAL</b>	<b>\$529,794,232</b>	<b>\$461,916,864</b>	<b>\$25,633,174</b>	<b>2,861</b>	<b>76,167</b>	<b>1,944</b>	<b>109,668</b>

### COVENTRY HEALTH PLAN OF FLORIDA, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95266							
Conversion	\$858,931	\$603,768	\$0	0	43	0	43
Guarantee Issue	\$3,744	\$6,919	\$3,779	0	8	0	8
Individually Underwritten	\$77,263,493	\$64,183,016	\$9,056,820	0	19,574	3,756	23,330
<b>TOTAL</b>	<b>\$78,126,168</b>	<b>\$64,793,703</b>	<b>\$9,060,599</b>	<b>0</b>	<b>19,625</b>	<b>0</b>	<b>23,381</b>

### CROATIAN FRATERNAL UNION OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56634							
Sickness	\$37	\$0	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$37</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## DEARBORN NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71129							
Dental	\$16,347,028	\$18,244,646	\$1,309,972	33	30,436	39,529	69,965
Disability Income	\$1,324,868	\$813,385	\$453,386	80	5,850	0	5,850
<b>TOTAL</b>	<b>\$17,671,896</b>	<b>\$19,058,031</b>	<b>\$1,763,358</b>	<b>113</b>	<b>36,286</b>	<b>39,529</b>	<b>75,815</b>

## DELTA DENTAL INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
81396							
Dental	\$123,364,300	\$99,343,717	\$7,021,217	1,347	280,914	200,595	481,509
<b>TOTAL</b>	<b>\$123,364,300</b>	<b>\$99,343,717</b>	<b>\$7,021,217</b>	<b>1,347</b>	<b>280,914</b>	<b>200,595</b>	<b>481,509</b>

## DENTAL BENEFIT PROVIDERS OF ILLINOIS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
52053							
Dental	\$1,674,633	\$1,072,203	\$0	3	6,827	5,872	12,699
<b>TOTAL</b>	<b>\$1,674,633</b>	<b>\$1,072,203</b>	<b>\$0</b>	<b>3</b>	<b>6,827</b>	<b>5,872</b>	<b>12,699</b>

## DENTAL CONCERN, INC., THE

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
54739							
Dental	\$72,707	\$31,468	\$0	43	200	153	353
<b>TOTAL</b>	<b>\$72,707</b>	<b>\$31,468</b>	<b>\$0</b>	<b>43</b>	<b>200</b>	<b>153</b>	<b>353</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## DENTAQUEST OF FLORIDA, INC.

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Dental	\$6,323	\$17,460,954	\$0	21	1,169,699	450	1,170,149
Vision	\$0	\$493,692	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$6,323</b>	<b>\$17,954,646</b>	<b>\$0</b>	<b>21</b>	<b>1,169,699</b>	<b>450</b>	<b>1,170,149</b>

## EMC NATIONAL LIFE COMPANY

NAIC Company Code

62928

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Disability Income	\$1,208	\$3,932	\$0	0	8	0	8
<b>TOTAL</b>	<b>\$1,208</b>	<b>\$3,932</b>	<b>\$0</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>8</b>

## EMPLOYER CHOICE INSURANCE COMPANY, INC.

NAIC Company Code

13663

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
2 - 5 Member Groups	\$167,583	\$234,153	\$156,406	21	47	19	66
51+ Member Groups	\$847,668	\$528,245	\$0	1	674	141	815
6 - 50 Member Groups	\$706,968	\$565,702	\$536,863	14	136	103	239
<b>TOTAL</b>	<b>\$1,722,219</b>	<b>\$1,328,100</b>	<b>\$693,269</b>	<b>36</b>	<b>857</b>	<b>19</b>	<b>1,120</b>

## EVERENCE ASSOCIATION, INC.

NAIC Company Code

57991

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Individually Underwritten	(\$3,497)	\$5,277	\$0	0	0	0	0
Medicare Supplement	\$713,423	\$466,934	\$0	0	233	57	290
<b>TOTAL</b>	<b>\$709,926</b>	<b>\$472,211</b>	<b>\$0</b>	<b>0</b>	<b>233</b>	<b>0</b>	<b>290</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### FAMILY HERITAGE LIFE INSURANCE COMPANY OF AMERICA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
77968							
Accident Only	\$417,487	\$41,728	\$91,836	0	618	396	1,014
Hospital Indemnity	\$1,645	\$915	\$687	0	4	4	8
Limited Benefit	\$2,189,154	\$687,306	\$434,416	0	3,257	4,463	7,720
<b>TOTAL</b>	<b>\$2,608,286</b>	<b>\$729,949</b>	<b>\$526,939</b>	<b>0</b>	<b>3,879</b>	<b>396</b>	<b>8,742</b>

### FAMILY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63053							
Accident Only	\$2,626	\$0	\$1,394	0	30	17	47
Champus/Tricare Supplement	\$122,239	\$126,426	\$0	0	145	69	214
Hospital Indemnity	\$138,046	\$95,833	\$62,493	0	494	211	705
Limited Benefit	\$10,311	\$5,402	\$3,154	0	56	8	64
Medicare Supplement	\$120,976	\$161,062	\$6,061	0	82	0	82
Sickness	\$231	\$79	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$394,429</b>	<b>\$388,802</b>	<b>\$73,102</b>	<b>0</b>	<b>807</b>	<b>17</b>	<b>1,112</b>

### FARMERS NEW WORLD LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63177							
Accident Only	\$11,896	\$0	\$0	0	93	0	93
<b>TOTAL</b>	<b>\$11,896</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>93</b>	<b>0</b>	<b>93</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## FEDERAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
20281							
Accident Only	\$3,011,248	\$1,014,158	\$361,931	204	343,089	386	343,475
<b>TOTAL</b>	<b>\$3,011,248</b>	<b>\$1,014,158</b>	<b>\$361,931</b>	<b>204</b>	<b>343,089</b>	<b>386</b>	<b>343,475</b>

## FEDERAL LIFE INSURANCE COMPANY (MUTUAL)

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63223							
Accident Only	\$257	\$0	\$0	0	112	0	112
Disability Income	\$18,623	\$4,458	\$0	0	50	0	50
<b>TOTAL</b>	<b>\$18,880</b>	<b>\$4,458</b>	<b>\$0</b>	<b>0</b>	<b>162</b>	<b>0</b>	<b>162</b>

## FEDERATED LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63258							
Disability Income	\$908,111	\$329,485	\$55,848	0	733	0	733
<b>TOTAL</b>	<b>\$908,111</b>	<b>\$329,485</b>	<b>\$55,848</b>	<b>0</b>	<b>733</b>	<b>0</b>	<b>733</b>

## FIDELITY & GUARANTY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63274							
Disability Income	\$0	\$2,304	\$0	2	2	0	2
<b>TOTAL</b>	<b>\$0</b>	<b>\$2,304</b>	<b>\$0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>2</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## FIDELITY LIFE ASSOCIATION, A LEGAL RESERVE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63290							
Disability Income	\$4,411	(\$6)	\$1,240	0	44	0	44
Long Term Care	\$42,327	\$1,495	\$35,636	42	1,043	0	1,043
<b>TOTAL</b>	<b>\$46,738</b>	<b>\$1,489</b>	<b>\$36,876</b>	<b>42</b>	<b>1,087</b>	<b>0</b>	<b>1,087</b>

## FIDELITY SECURITY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71870							
Accident Only	\$5,012	(\$2,379)	\$356	0	70	47	117
Accidental Death & Dismemberment	\$48	\$0	\$0	0	0	0	0
Conversion	\$14,394	(\$1,681)	\$0	0	1	0	1
Dental	\$8,266,960	\$5,835,504	\$4,169,870	5	3,374	26	3,400
Disability Income	\$620,711	(\$194,987)	\$68,404	0	165	0	165
Excess/Stop Loss	\$284,902	(\$231,067)	\$284,902	0	0	0	0
Hospital Indemnity	\$4,716,099	\$3,094,514	\$136,781	134	6,780	2,924	9,704
Limited Benefit	\$249,725	\$232,794	\$1,032	2	2,122	1,731	3,853
Out-of-State Individually Underwritten	\$0	(\$10,934)	\$0	0	0	0	0
Out-of-State Short Term Major Medical	\$0	(\$182)	\$0	0	0	0	0
Prescription Drug	\$498,987	\$272,458	\$153,966	40	2,442	943	3,385
Vision	\$16,255,865	\$12,524,560	\$2,423,358	1,081	128,235	112,836	241,071
<b>TOTAL</b>	<b>\$30,912,703</b>	<b>\$21,518,600</b>	<b>\$7,238,669</b>	<b>1,262</b>	<b>143,189</b>	<b>47</b>	<b>261,696</b>

## FIREMAN'S FUND INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
21873							
Accident Only	\$0	\$958	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$958</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## FIRST ALLMERICA FINANCIAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69140							
Conversion	\$45,645	\$114,107	\$0	0	8	3	11
Disability Income	\$1,660	\$662,967	\$0	0	1	0	1
Guarantee Issue	\$1,230	\$14,757	\$0	0	3	0	3
Hospital Indemnity	\$410	\$4,919	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$48,945</b>	<b>\$796,750</b>	<b>\$0</b>	<b>0</b>	<b>13</b>	<b>3</b>	<b>16</b>

## FIRST HEALTH LIFE & HEALTH INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
90328							
Dental	\$1,185,295	\$786,611	\$38,330	1	1,766	859	2,625
<b>TOTAL</b>	<b>\$1,185,295</b>	<b>\$786,611</b>	<b>\$38,330</b>	<b>1</b>	<b>1,766</b>	<b>859</b>	<b>2,625</b>

## FIRST INVESTORS LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
63495							
Disability Income	\$479	\$5,330	\$0	0	2	0	2
Hospital Indemnity	\$206	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$685</b>	<b>\$5,330</b>	<b>\$0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>4</b>

## FLORIDA DENTAL BENEFITS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Dental	\$262,429	\$108,323	\$220,217	18	1,010	160	1,170
<b>TOTAL</b>	<b>\$262,429</b>	<b>\$108,323</b>	<b>\$220,217</b>	<b>18</b>	<b>1,010</b>	<b>160</b>	<b>1,170</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## FLORIDA HEALTH CARE PLAN, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
13567							
2 - 5 Member Groups	\$8,022,507	\$6,752,648	\$313,043	546	1,011	429	1,440
51+ Member Groups	\$121,776,083	\$99,935,413	\$1,693,295	53	15,404	10,355	25,759
6 - 50 Member Groups	\$15,745,598	\$10,095,676	\$686,675	289	2,265	816	3,081
Conversion	\$3,114,513	\$3,740,763	\$159,192	0	296	82	378
Individually Underwritten	\$79,255	\$33,030	\$36,152	0	40	0	40
Self-Employed or Sole Proprietor	\$434,539	\$446,817	\$4,735	53	53	0	53
<b>TOTAL</b>	<b>\$149,172,495</b>	<b>\$121,004,347</b>	<b>\$2,893,092</b>	<b>941</b>	<b>19,069</b>	<b>429</b>	<b>30,751</b>

## FORETHOUGHT LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
91642							
Medicare Supplement	\$47,567	\$54,288	\$8,748	0	70	0	70
<b>TOTAL</b>	<b>\$47,567</b>	<b>\$54,288</b>	<b>\$8,748</b>	<b>0</b>	<b>70</b>	<b>0</b>	<b>70</b>

## FREEDOM LIFE INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62324							
Accident Only	\$1,496,144	\$909,842	\$1,447,418	0	1,724	1,250	2,974
Accidental Death & Dismemberment	\$610	\$826	\$0	0	5	0	5
Dental	\$51,047	\$31,028	\$22,133	0	78	54	132
Hospital Indemnity	\$4,457,621	\$2,710,032	\$4,367,434	0	4,392	1,713	6,105
Individually Underwritten	\$16,339	\$22,110	\$833	0	3	2	5
Limited Benefit	\$2,380,303	\$1,653,006	\$2,061,211	0	2,627	1,323	3,950
Out-of-State Individually Underwritten	\$9,864,548	\$5,995,927	\$1,074,270	2	1,685	1,337	3,022
<b>TOTAL</b>	<b>\$18,266,612</b>	<b>\$11,322,771</b>	<b>\$8,973,299</b>	<b>2</b>	<b>10,514</b>	<b>1,250</b>	<b>16,193</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## GARDEN STATE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63657							
Accident Only	\$4,972	\$0	\$0	1	19	18	37
<b>TOTAL</b>	<b>\$4,972</b>	<b>\$0</b>	<b>\$0</b>	<b>1</b>	<b>19</b>	<b>18</b>	<b>37</b>

## GENERAL AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63665							
Disability Income	\$576,892	\$5,945,234	\$0	0	405	0	405
Hospital Indemnity	\$105	\$0	\$0	0	3	0	3
Individually Underwritten	\$7,869	\$17,304	\$0	0	9	0	9
<b>TOTAL</b>	<b>\$584,866</b>	<b>\$5,962,538</b>	<b>\$0</b>	<b>0</b>	<b>417</b>	<b>0</b>	<b>417</b>

## GENESIS INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
38962							
Long Term Care	\$60,440	\$479,511	\$0	0	102	0	102
<b>TOTAL</b>	<b>\$60,440</b>	<b>\$479,511</b>	<b>\$0</b>	<b>0</b>	<b>102</b>	<b>0</b>	<b>102</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### GENWORTH LIFE AND ANNUITY INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65536							
Accident Only	\$2,742	\$0	\$0	0	33	0	33
Disability Income	\$28,091	\$88,994	\$0	0	32	0	32
Hospital Indemnity	\$1,352	\$108	\$0	0	11	0	11
Limited Benefit	\$4,735	\$98	\$0	0	28	0	28
Long Term Care	\$15,020	\$111,143	\$0	0	9	0	9
Medicare Supplement	\$3,016,882	\$2,128,947	\$0	0	1,088	0	1,088
Short Term Care	\$0	\$15,266	\$0	0	0	0	0
TOTAL	\$3,068,822	\$2,344,556	\$0	0	1,201	0	1,201

### GENWORTH LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
70025							
Accident Only	\$203	\$384	\$0	0	1	0	1
Long Term Care	\$124,413,422	\$105,256,456	\$11,994,735	2,830	62,599	7,116	69,715
Medicare Supplement	\$43,903	\$36,125	\$0	0	14	0	14
TOTAL	\$124,457,528	\$105,292,965	\$11,994,735	2,830	62,614	0	69,730

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## GERBER LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70939							
Accidental Death & Dismemberment	\$1,659,648	\$589,581	\$0	98	7,536	8,365	15,901
Dental	\$610	\$743	\$0	1	1	0	1
Excess/Stop Loss	\$1,903,155	\$1,726,336	\$0	8	1,248	2,496	3,744
Hospital Indemnity	\$26,888	\$47,915	\$0	0	50	0	50
Long Term Care	\$9,337	\$70,642	\$0	0	10	0	10
Medicare Supplement	\$6,871,078	\$5,720,346	\$0	0	3,015	0	3,015
<b>TOTAL</b>	<b>\$10,470,716</b>	<b>\$8,155,563</b>	<b>\$0</b>	<b>107</b>	<b>11,860</b>	<b>8,365</b>	<b>22,721</b>

## GLOBE LIFE AND ACCIDENT INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
91472							
Accident Only	\$7,686	(\$162)	\$0	0	72	24	96
Accidental Death & Dismemberment	\$1,821,466	\$202,673	\$65,836	0	11,991	0	11,991
Hospital Indemnity	\$1,546	\$99	\$0	0	8	1	9
Individually Underwritten	\$66,580	\$52,890	\$0	0	58	17	75
Limited Benefit	\$18,720	\$9,456	\$0	0	256	123	379
Medicare Supplement	\$80,075	\$33,762	\$19,445	0	40	0	40
<b>TOTAL</b>	<b>\$1,996,073</b>	<b>\$298,718</b>	<b>\$85,281</b>	<b>0</b>	<b>12,425</b>	<b>24</b>	<b>12,590</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## GOLDEN RULE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
62286							
Conversion	\$3,846	\$0	\$0	0	1	0	1
Dental	\$5,915,033	\$3,583,816	\$1,711,393	0	11,263	6,483	17,746
Disability Income	\$320	\$0	\$321	0	11	0	11
Hospital Indemnity	\$384	\$0	\$0	0	3	0	3
Individually Underwritten	\$831,108	\$558,978	\$18,955	0	158	87	245
Limited Benefit	\$16,455	\$0	\$15,523	0	879	87	966
Medicare Supplement	\$2,707,447	\$2,544,344	\$0	0	940	0	940
Out-of-State Guarantee Issue	\$17,340,347	\$23,459,230	\$4,090,400	0	1,514	188	1,702
Out-of-State Individually Underwritten	\$284,150,911	\$196,668,145	\$36,375,936	1	65,467	47,784	113,251
Out-of-State Short Term Major Medical	\$2,898,475	\$1,365,313	\$2,426,182	1	1,259	581	1,840
<b>TOTAL</b>	<b>\$313,864,326</b>	<b>\$228,179,826</b>	<b>\$44,638,710</b>	<b>2</b>	<b>81,495</b>	<b>0</b>	<b>136,705</b>

## GOVERNMENT EMPLOYEES INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
22063							
Accident Only	\$6,096	\$1,060	\$0	0	73	0	73
<b>TOTAL</b>	<b>\$6,096</b>	<b>\$1,060</b>	<b>\$0</b>	<b>0</b>	<b>73</b>	<b>0</b>	<b>73</b>

## GOVERNMENT PERSONNEL MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63967							
Champus/Tricare Supplement	\$59,229	\$35,780	\$0	0	0	0	0
Medicare Supplement	\$394,117	\$294,268	\$292,926	0	235	0	235
<b>TOTAL</b>	<b>\$453,346</b>	<b>\$330,048</b>	<b>\$292,926</b>	<b>0</b>	<b>235</b>	<b>0</b>	<b>235</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## GREAT AMERICAN INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
16691							
Accident Only	\$434,120	\$105,249	\$0	4	656	656	1,312
<b>TOTAL</b>	<b>\$434,120</b>	<b>\$105,249</b>	<b>\$0</b>	<b>4</b>	<b>656</b>	<b>656</b>	<b>1,312</b>

## GREAT AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63312							
Accident Only	\$254	\$0	\$0	0	3	0	3
Disability Income	\$295	\$61,700	\$0	0	1	0	1
Hospital Indemnity	\$180	\$0	\$0	0	1	0	1
Long Term Care	\$29,303	(\$91)	\$0	0	20	0	20
Medicare Supplement	\$685,508	\$470,273	\$0	0	249	0	249
<b>TOTAL</b>	<b>\$715,540</b>	<b>\$531,882</b>	<b>\$0</b>	<b>0</b>	<b>274</b>	<b>0</b>	<b>274</b>

## GREAT SOUTHERN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
90212							
Conversion	\$2,577	\$163	\$0	0	1	0	1
Disability Income	\$230,744	(\$65,400)	\$5,099	0	0	0	0
Limited Benefit	\$76	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$233,397</b>	<b>(\$65,237)</b>	<b>\$5,099</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## GREAT WEST LIFE ASSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
80705							
Disability Income	\$157,003	\$208,784	\$0	0	143	0	143
Out-of-State 51+ Member Groups	\$1,100,504	(\$931)	\$0	31	43	62	105
<b>TOTAL</b>	<b>\$1,257,507</b>	<b>\$207,853</b>	<b>\$0</b>	<b>31</b>	<b>186</b>	<b>0</b>	<b>248</b>

## GREAT-WEST LIFE & ANNUITY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68322							
Disability Income	\$1,937,739	\$1,893,689	\$77,730	2	1,482	0	1,482
Hospital Indemnity	\$101,415	\$37,464	\$2,028	1	103	240	343
<b>TOTAL</b>	<b>\$2,039,154</b>	<b>\$1,931,153</b>	<b>\$79,758</b>	<b>3</b>	<b>1,585</b>	<b>0</b>	<b>1,825</b>

## GUARANTEE TRUST LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
64211							
Accident Only	\$1,202,018	\$413,040	\$475,279	25	5,924	32	5,956
Disability Income	\$4,161	\$2,648	\$0	0	64	0	64
Hospital Indemnity	\$3,459,798	\$771,909	\$942,432	0	5,741	0	5,741
Individually Underwritten	\$61,234	\$85,874	\$0	0	0	0	0
Limited Benefit	\$137,228	\$119,253	\$27,828	0	617	554	1,171
Long Term Care	\$640,913	\$1,319,035	\$0	0	283	0	283
Medicare Supplement	\$1,092,859	\$844,338	\$0	0	277	0	277
Out-of-State Individually Underwritten	\$0	(\$64,071)	\$0	0	0	0	0
Student	\$0	\$13,964	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$6,598,211</b>	<b>\$3,505,990</b>	<b>\$1,445,539</b>	<b>25</b>	<b>12,906</b>	<b>32</b>	<b>13,492</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### GUARANTY INCOME LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
64238							
Long Term Care	\$181,898	\$41,232	\$14,016	0	150	0	150
<b>TOTAL</b>	<b>\$181,898</b>	<b>\$41,232</b>	<b>\$14,016</b>	<b>0</b>	<b>150</b>	<b>0</b>	<b>150</b>

### GUARDIAN LIFE INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
64246							
Accidental Death & Dismemberment	\$1,423,866	\$801,477	\$369,070	1,868	89,929	1,413	91,342
Conversion	\$53,114	(\$3,308,599)	\$0	0	0	0	0
Dental	\$93,515,919	\$86,479,609	\$15,892,356	4,838	201,551	201,551	403,102
Disability Income	\$28,864,332	\$51,449,171	\$4,674,328	2,169	70,742	0	70,742
Excess/Stop Loss	\$1,778	\$0	\$0	0	0	0	0
Individually Underwritten	\$61,585	(\$1,147,135)	\$0	0	0	0	0
Limited Benefit	\$58,606	\$154,017	\$32,075	8	243	84	327
Out-of-State 2 - 5 Member Groups	\$16,014	\$1,371	\$0	0	0	0	0
Out-of-State 51+ Member Groups	\$103,250	(\$326,610)	\$0	0	0	0	0
Vision	\$5,080,719	\$3,405,057	\$1,515,956	1,250	46,260	46,260	92,520
<b>TOTAL</b>	<b>\$129,179,183</b>	<b>\$137,508,358</b>	<b>\$22,483,785</b>	<b>10,133</b>	<b>408,725</b>	<b>1,413</b>	<b>658,033</b>

### HARLEYSVILLE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
64327							
Disability Income	\$180	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$180</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## HARTFORD FIRE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
19682							
Disability Income	\$0	\$2,450	\$0	0	0	0	0
Excess/Stop Loss	\$0	(\$121)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$2,329</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## HARTFORD LIFE AND ACCIDENT INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
70815							
Accidental Death & Dismemberment	\$32,172,392	\$14,067,184	\$138,522	543	457,601	87,821	545,422
Blanket Accident/Sickness	\$1,116,746	\$701,931	\$425,274	1,287	114,187	130,173	244,360
Champus/Tricare Supplement	\$881,313	\$464,617	\$157,789	0	1,296	0	1,296
Disability Income	\$99,337,912	\$118,979,907	\$4,391,848	772	404,586	0	404,586
Hospital Indemnity	\$313,074	\$487,791	\$219	0	2,846	644	3,490
Limited Benefit	\$5,240,535	\$3,255,737	\$173,716	9	3,053	1,392	4,445
Medicare Supplement	\$1,106,289	\$687,393	\$36,672	2	645	294	939
Travel	\$1,398,395	\$1,274,965	\$30,915	241	351,740	66,830	418,570
<b>TOTAL</b>	<b>\$141,566,656</b>	<b>\$139,919,525</b>	<b>\$5,354,955</b>	<b>2,854</b>	<b>1,335,954</b>	<b>87,821</b>	<b>1,623,108</b>

## HARTFORD LIFE AND ANNUITY INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71153							
Disability Income	\$3,634	\$1,779	\$0	0	14	0	14
Hospital Indemnity	\$4,556	\$3,686	\$0	0	29	0	29
Limited Benefit	\$25,015	\$40,289	\$0	0	317	0	317
<b>TOTAL</b>	<b>\$33,205</b>	<b>\$45,754</b>	<b>\$0</b>	<b>0</b>	<b>360</b>	<b>0</b>	<b>360</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## HARTFORD LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
88072							
Accidental Death & Dismemberment	\$649,084	\$335,697	\$8,118	0	10,015	645	10,660
Blanket Accident/Sickness	(\$86)	\$207	\$0	0	0	0	0
Champus/Tricare Supplement	\$3,098,926	\$2,470,133	\$2,284	0	8,674	0	8,674
Disability Income	\$2,593,860	\$6,404,191	\$32,952	17	7,524	0	7,524
Excess/Stop Loss	\$9,162	\$0	\$0	0	0	0	0
Hospital Indemnity	\$103,278	\$170,533	\$45	0	439	99	538
Limited Benefit	\$923,885	\$815,784	\$54,488	2	233	106	339
Long Term Care	\$43,644	\$0	\$0	0	21	0	21
Medicare Supplement	\$770,487	\$680,335	\$45,441	2	194	89	283
Travel	\$811	\$0	\$0	1	188	36	224
<b>TOTAL</b>	<b>\$8,193,051</b>	<b>\$10,876,880</b>	<b>\$143,328</b>	<b>22</b>	<b>27,288</b>	<b>645</b>	<b>28,263</b>

## HCC LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
92711							
Disability Income	\$1,743,055	\$563,263	\$1,717,128	1	1	0	1
Excess/Stop Loss	\$11,825,823	\$8,201,316	\$6,109,848	38	27,958	62,525	90,483
Out-of-State Short Term Major Medical	\$287,568	\$570,743	\$287,568	1	192	125	317
Short Term Major Medical	\$206,794	\$17,357	\$206,794	0	270	84	354
<b>TOTAL</b>	<b>\$14,063,240</b>	<b>\$9,352,679</b>	<b>\$8,321,338</b>	<b>40</b>	<b>28,421</b>	<b>0</b>	<b>91,155</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## HEALTH CARE SERVICE CORPORATION, A MUTUAL LEGAL RESERVE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
70670							
Administrative Services Only (ASO)	\$31,647,998	\$0	\$0	0	0	0	0
Dental	\$918,160	\$834,968	\$0	415	1,290	1,316	2,606
Excess/Stop Loss	\$1,470,842	\$1,116,823	\$0	3	4,988	6,747	11,735
Medicare Supplement	\$10,121,178	\$8,020,285	\$0	0	3,345	0	3,345
Out-of-State 51+ Member Groups	\$85,289,879	\$78,995,480	\$0	2,170	10,158	9,810	19,968
Out-of-State Individually Underwritten	\$2,242,683	\$3,775,676	\$0	0	703	313	1,016
Out-of-State Short Term Major Medical	\$1,571	\$2,695	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$131,692,311</b>	<b>\$92,745,927</b>	<b>\$0</b>	<b>2,588</b>	<b>20,485</b>	<b>0</b>	<b>38,671</b>

## HEALTH FIRST HEALTH PLANS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95019							
2 - 5 Member Groups	\$16,969,620	\$12,401,850	\$680,008	652	2,080	1,339	3,419
51+ Member Groups	\$56,875,252	\$51,787,438	\$613,089	78	6,058	5,694	11,752
6 - 50 Member Groups	\$24,735,397	\$18,672,353	\$485,169	282	2,997	1,606	4,603
Administrative Services Only (ASO)	\$2,594,733	\$0	\$0	0	0	0	0
Conversion	\$871,441	\$697,046	\$147,120	0	79	48	127
Self-Employed or Sole Proprietor	\$1,005,211	\$851,435	\$33,503	74	74	37	111
<b>TOTAL</b>	<b>\$103,051,654</b>	<b>\$84,410,122</b>	<b>\$1,958,889</b>	<b>1,086</b>	<b>11,288</b>	<b>1,339</b>	<b>20,012</b>

## HEALTH FIRST INSURANCE, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
14140							
Medicare Supplement	\$23,240	\$23,277	\$23,240	27	27	0	27
<b>TOTAL</b>	<b>\$23,240</b>	<b>\$23,277</b>	<b>\$23,240</b>	<b>27</b>	<b>27</b>	<b>0</b>	<b>27</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### HEALTH NET LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66141							
Conversion	\$34,960	\$24,374	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$34,960</b>	<b>\$24,374</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

### HEALTH OPTIONS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95089							
2 - 5 Member Groups	\$10,298,046	\$9,850,931	\$4,838,065	642	1,132	797	1,929
51+ Member Groups	\$419,224,846	\$351,613,141	\$107,600,735	1,465	81,679	45,842	127,521
6 - 50 Member Groups	\$71,171,078	\$46,465,150	\$39,285,598	2,774	15,251	7,373	22,624
Conversion	\$5,934,943	\$12,166,434	\$3,128,222	0	883	358	1,241
Guarantee Issue	\$250,515	\$480,714	\$8,638	0	37	15	52
Individually Underwritten	\$7,028,174	\$4,956,443	\$1,455,547	0	1,047	424	1,471
Self-Employed or Sole Proprietor	\$1,504,608	\$2,389,908	\$38,520	107	107	39	146
<b>TOTAL</b>	<b>\$515,412,210</b>	<b>\$427,922,721</b>	<b>\$156,355,325</b>	<b>4,988</b>	<b>100,136</b>	<b>797</b>	<b>154,984</b>

### HEARTLAND NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66214							
Hospital Indemnity	\$15,089	\$0	\$15,089	0	173	0	173
Medicare Supplement	\$17,489	\$23,363	\$7,101	0	16	0	16
<b>TOTAL</b>	<b>\$32,578</b>	<b>\$23,363</b>	<b>\$22,190</b>	<b>0</b>	<b>189</b>	<b>0</b>	<b>189</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### HM LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
93440							
Disability Income	\$0	\$354,756	\$0	0	0	0	0
Excess/Stop Loss	\$10,219,542	\$7,559,511	\$0	16	22,387	24,626	47,013
Limited Benefit	\$1,411,616	\$349,766	\$0	10	4,973	5,470	10,443
Student	\$54,676	\$59,553	\$0	2	28	0	28
Vision	\$3,676,785	\$3,212,393	\$3,630,485	236	22,061	24,267	46,328
<b>TOTAL</b>	<b>\$15,362,619</b>	<b>\$11,535,979</b>	<b>\$3,630,485</b>	<b>264</b>	<b>49,449</b>	<b>0</b>	<b>103,812</b>

### HORACE MANN LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
64513							
Accidental Death & Dismemberment	\$1,509	(\$2)	\$0	0	36	0	36
Disability Income	\$148,718	\$68,242	\$2,043	9	337	0	337
Hospital Indemnity	\$201	(\$4)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$150,428</b>	<b>\$68,236</b>	<b>\$2,043</b>	<b>9</b>	<b>373</b>	<b>0</b>	<b>373</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## HUMANA HEALTH INSURANCE COMPANY OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
69671							
2 - 5 Member Groups	\$6,004,249	\$4,508,483	\$0	112	282	166	448
51+ Member Groups	\$57,900,235	\$43,476,249	\$83,320	33	3,283	4,699	7,982
6 - 50 Member Groups	\$4,710,137	\$3,536,757	\$15,031	23	147	147	294
Conversion	\$1,887,500	\$0	\$104,217	0	137	43	180
Excess/Stop Loss	\$3,748,233	\$1,646,583	\$0	9	29,059	0	29,059
Guarantee Issue	\$1,923,433	\$1,444,271	\$0	0	432	281	713
Individually Underwritten	\$104,763,164	\$78,664,781	\$331,800	0	23,540	15,332	38,872
Medicare Supplement	\$3,995,011	\$2,664,689	\$0	0	2,117	0	2,117
Self-Employed or Sole Proprietor	\$3,027,641	\$2,273,401	\$5,415	118	118	72	190
<b>TOTAL</b>	<b>\$187,959,603</b>	<b>\$138,215,214</b>	<b>\$539,783</b>	<b>295</b>	<b>59,115</b>	<b>166</b>	<b>79,855</b>

## HUMANA INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
73288							
Accidental Death & Dismemberment	\$180,085	(\$13,881)	\$0	0	0	0	0
Dental	\$190,548	\$132,733	\$0	2	269	419	688
Disability Income	\$117,175	\$148,557	\$0	36	261	0	261
Out-of-State Guarantee Issue	\$293,593	\$0	\$219,130	0	56	5	61
Out-of-State Individually Underwritten	\$50,115,340	\$30,842,713	\$13,580,843	17,359	17,359	11,612	28,971
Out-of-State Short Term Major Medical	\$1,549,959	\$311,543	\$0	477	477	152	629
Vision	\$7,755,802	\$4,921,557	\$0	987	78,809	63,800	142,609
<b>TOTAL</b>	<b>\$60,202,502</b>	<b>\$36,343,222</b>	<b>\$13,799,973</b>	<b>18,861</b>	<b>97,231</b>	<b>0</b>	<b>173,219</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## HUMANA MEDICAL PLAN, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
95270							
2 - 5 Member Groups	\$34,842,387	\$28,067,807	\$1,623,170	1,437	4,490	2,224	6,714
51+ Member Groups	\$503,323,140	\$405,459,499	\$23,993,945	175	64,102	39,682	103,784
6 - 50 Member Groups	\$88,066,002	\$70,942,887	\$5,908,342	970	13,520	6,573	20,093
Conversion	\$1,514,176	\$1,219,767	\$1,796	0	104	11	115
Self-Employed or Sole Proprietor	\$5,165,203	\$4,160,907	\$98,317	425	425	274	699
<b>TOTAL</b>	<b>\$632,910,908</b>	<b>\$509,850,867</b>	<b>\$31,625,570</b>	<b>3,007</b>	<b>82,641</b>	<b>2,224</b>	<b>131,405</b>

## HUMANADENTAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70580							
Dental	\$35,215,410	\$25,164,818	\$0	1,773	69,239	51,580	120,819
<b>TOTAL</b>	<b>\$35,215,410</b>	<b>\$25,164,818</b>	<b>\$0</b>	<b>1,773</b>	<b>69,239</b>	<b>51,580</b>	<b>120,819</b>

## IA AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
91693							
Accidental Death & Dismemberment	\$59	\$0	\$0	0	4	0	4
Hospital Indemnity	\$127	\$0	\$0	0	1	0	1
Limited Benefit	\$2,945	\$4,659	\$0	0	27	0	27
Travel	\$0	\$1,834	\$0	0	1,109	0	1,109
<b>TOTAL</b>	<b>\$3,131</b>	<b>\$6,493</b>	<b>\$0</b>	<b>0</b>	<b>1,141</b>	<b>0</b>	<b>1,141</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## IDEALIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
97764							
Medicare Supplement	\$844,743	\$684,215	\$0	0	215	0	215
<b>TOTAL</b>	<b>\$844,743</b>	<b>\$684,215</b>	<b>\$0</b>	<b>0</b>	<b>215</b>	<b>0</b>	<b>215</b>

## IDS PROPERTY CASUALTY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
29068							
Accidental Death & Dismemberment	\$400	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$400</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## ILLINOIS MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
64580							
Accident Only	\$25,782	\$11,363	\$8,205	0	85	49	134
Disability Income	\$4,166,562	\$4,460,033	\$58,614	0	5,381	0	5,381
Hospital Indemnity	\$2,822	\$171	\$0	0	6	2	8
Individually Underwritten	\$390,114	\$466,361	\$0	0	24	7	31
<b>TOTAL</b>	<b>\$4,585,280</b>	<b>\$4,937,928</b>	<b>\$66,819</b>	<b>0</b>	<b>5,496</b>	<b>49</b>	<b>5,554</b>

## IMPERIUM INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
35408							
Excess/Stop Loss	\$547,280	\$107,852	\$547,280	2	119	95	214
Travel	\$721,125	\$979,901	\$721,125	1	8,631	0	8,631
<b>TOTAL</b>	<b>\$1,268,405</b>	<b>\$1,087,753</b>	<b>\$1,268,405</b>	<b>3</b>	<b>8,750</b>	<b>95</b>	<b>8,845</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### INDEPENDENCE AMERICAN INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
26581							
Dental	\$36,525	\$13,707	\$36,525	1	59	59	118
Hospital Indemnity	\$453,292	\$145,797	\$453,292	1	201	201	402
Limited Benefit	\$185,962	\$44,255	\$185,962	1	76	76	152
Out-of-State 51+ Member Groups	\$1,050,305	\$512,995	\$1,050,305	0	223	223	446
Short Term Major Medical	\$14,096	\$9,349	\$14,096	1	3	3	6
<b>TOTAL</b>	<b>\$1,740,180</b>	<b>\$726,103</b>	<b>\$1,740,180</b>	<b>4</b>	<b>562</b>	<b>59</b>	<b>1,124</b>

### INDEPENDENT ORDER OF FORESTERS

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
58068							
Accident Only	\$81,054	\$0	\$58,651	0	478	0	478
Disability Income	\$2,004	\$14,400	\$0	0	22	0	22
<b>TOTAL</b>	<b>\$83,058</b>	<b>\$14,400</b>	<b>\$58,651</b>	<b>0</b>	<b>500</b>	<b>0</b>	<b>500</b>

### ING LIFE INSURANCE AND ANNUITY COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
86509							
Individually Underwritten	\$269	\$1,050	\$0	0	1	0	1
Long Term Care	\$25,019	(\$57,226)	\$0	0	26	0	26
Medicare Supplement	\$11,584	\$8,650	\$0	0	5	0	5
<b>TOTAL</b>	<b>\$36,872</b>	<b>(\$47,526)</b>	<b>\$0</b>	<b>0</b>	<b>32</b>	<b>0</b>	<b>32</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ING USA ANNUITY AND LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80942							
Disability Income	\$137	\$0	\$0	0	1	0	1
Limited Benefit	\$1,755	\$1,676	\$0	0	283	0	283
<b>TOTAL</b>	<b>\$1,892</b>	<b>\$1,676</b>	<b>\$0</b>	<b>0</b>	<b>284</b>	<b>0</b>	<b>284</b>

## INSURANCE COMPANY OF NORTH AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
22713							
Accident Only	\$0	\$475,573	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$475,573</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## INSURANCE COMPANY OF THE STATE OF PENNSYLVANIA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
19429							
Travel	\$844,755	\$354,756	\$0	0	3,636	0	3,636
<b>TOTAL</b>	<b>\$844,755</b>	<b>\$354,756</b>	<b>\$0</b>	<b>0</b>	<b>3,636</b>	<b>0</b>	<b>3,636</b>

## INVESTORS CONSOLIDATED INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
85189							
Accident Only	\$31	\$0	\$31	0	1	0	1
Hospital Indemnity	\$150	\$4,181	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$181</b>	<b>\$4,181</b>	<b>\$31</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### INVESTORS HERITAGE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
64904							
Medicare Supplement	\$1,177	\$5,681	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$1,177</b>	<b>\$5,681</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

### INVESTORS LIFE INSURANCE COMPANY OF NORTH AMERICA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
63487							
Accident Only	\$34	\$0	\$0	0	1	0	1
Disability Income	\$774	\$12,457	\$0	0	5	0	5
Hospital Indemnity	\$648	(\$10)	\$0	0	4	0	4
Limited Benefit	\$168	\$8	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$1,624</b>	<b>\$12,455</b>	<b>\$0</b>	<b>0</b>	<b>12</b>	<b>0</b>	<b>12</b>

### JACKSON NATIONAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65056							
Accident Only	\$24,707	\$2,352	\$0	0	961	26	987
Champus/Tricare Supplement	\$2,303	\$1,350	\$0	0	1	2	3
Dental	\$22,737	\$34,556	\$0	0	59	0	59
Disability Income	\$2,497,239	\$10,211,025	\$0	0	1,940	0	1,940
Hospital Indemnity	\$37,902	\$19,452	\$0	0	219	14	233
Limited Benefit	\$820,684	\$846,673	\$0	0	3,212	414	3,626
Long Term Care	\$1,368,164	\$3,182,882	\$0	0	677	0	677
Medicare Supplement	\$0	\$13	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$7,040	\$10,234	\$0	0	75	0	75
Sickness	\$795	\$32	\$0	0	75	0	75
<b>TOTAL</b>	<b>\$4,781,571</b>	<b>\$14,308,569</b>	<b>\$0</b>	<b>0</b>	<b>7,219</b>	<b>26</b>	<b>7,675</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## JEFFERSON NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code

64017

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$180	\$36	\$0	0	3	0	3
Disability Income	\$46,749	\$208,269	\$0	0	29	0	29
Hospital Indemnity	\$308	(\$133)	\$0	0	1	0	1
Individually Underwritten	\$974	\$7,518	\$0	0	3	0	3
Limited Benefit	\$2,010	\$3,205	\$0	0	24	0	24
Medicare Supplement	\$28,571	\$53,263	\$0	0	9	0	9
<b>TOTAL</b>	<b>\$78,792</b>	<b>\$272,158</b>	<b>\$0</b>	<b>0</b>	<b>69</b>	<b>0</b>	<b>69</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## JOHN ALDEN LIFE INSURANCE COMPANY

NAIC Company Code  65080	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
2 - 5 Member Groups	\$190,604	\$163,085	\$13,460	8	21	13	34
51+ Member Groups	\$118,565	\$14,821	\$0	1	33	4	37
6 - 50 Member Groups	\$150,120	\$26,432	\$56,021	3	18	8	26
Accident Only	\$16,418	\$1,407	\$0	0	66	100	166
Accidental Death & Dismemberment	\$29	\$0	\$0	1	2	0	2
Conversion	\$56,572	\$51,703	\$0	0	5	0	5
Dental	\$10,881	\$6,312	\$8	2	25	11	36
Disability Income	\$160,836	\$210,199	\$0	0	294	10	304
Hospital Indemnity	\$3,347	\$715	\$0	0	4	1	5
Individually Underwritten	\$2	\$0	\$0	0	0	0	0
Limited Benefit	\$32,668	\$29,011	\$0	0	91	71	162
Long Term Care	\$531,916	\$1,193,721	\$0	0	296	0	296
Medicare Supplement	\$452,322	\$286,732	\$0	0	156	0	156
Out-of-State 2 - 5 Member Groups	\$0	\$4,991	\$0	0	0	0	0
Out-of-State 6 - 50 Member Groups	\$0	\$9,334	\$0	0	0	0	0
Out-of-State Conversion	\$64,518	\$144,152	\$0	0	4	2	6
Out-of-State Guarantee Issue	\$71,276	\$355,023	\$4,755	0	12	6	18
Out-of-State Individually Underwritten	\$2,475,841	\$913,705	\$165,169	1	410	193	603
Out-of-State Short Term Major Medical	\$85,380	\$49,100	\$0	0	17	7	24
Self-Employed or Sole Proprietor	\$8,480	\$49	\$0	1	1	0	1
Travel	\$139	(\$6)	\$0	0	8	0	8
<b>TOTAL</b>	<b>\$4,429,914</b>	<b>\$3,460,486</b>	<b>\$239,413</b>	<b>17</b>	<b>1,463</b>	<b>13</b>	<b>1,889</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## JOHN HANCOCK LIFE & HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
93610							
Long Term Care	\$11,100,670	\$10,883,649	\$4,419	19	2,830	0	2,830
<b>TOTAL</b>	<b>\$11,100,670</b>	<b>\$10,883,649</b>	<b>\$4,419</b>	<b>19</b>	<b>2,830</b>	<b>0</b>	<b>2,830</b>

## JOHN HANCOCK LIFE INSURANCE COMPANY U.S.A.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65838							
Disability Income	\$684,677	\$2,801,007	\$0	0	352	0	352
Long Term Care	\$122,528,601	\$73,109,972	\$1,371,271	377	63,379	2,992	66,371
<b>TOTAL</b>	<b>\$123,213,278</b>	<b>\$75,910,979</b>	<b>\$1,371,271</b>	<b>377</b>	<b>63,731</b>	<b>0</b>	<b>66,723</b>

## KANAWHA INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65110							
Accident Only	\$523,965	\$69,211	\$223,250	133	2,140	0	2,140
Accidental Death & Dismemberment	\$709,722	\$147,175	\$247,717	90	2,536	0	2,536
Dental	\$39	\$0	\$0	0	0	0	0
Disability Income	\$3,732,659	\$1,997,719	\$632,930	109	8,335	0	8,335
Excess/Stop Loss	\$2,761,350	\$2,793,089	\$0	1	9,760	13,530	23,290
Hospital Indemnity	\$638,939	\$177,634	\$346,369	30	5,455	3	5,458
Limited Benefit	\$798,593	\$425,699	\$54,530	0	1,766	2,410	4,176
Long Term Care	\$14,791,595	\$24,584,348	\$0	0	8,404	0	8,404
Medicare Supplement	\$376,640	\$335,186	\$0	0	123	0	123
Other Prepaid Health Services	\$3,187,763	\$663,176	\$1,087,612	157	10,779	1,787	12,566
<b>TOTAL</b>	<b>\$27,521,265</b>	<b>\$31,193,237</b>	<b>\$2,592,408</b>	<b>520</b>	<b>49,298</b>	<b>0</b>	<b>67,028</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## KANSAS CITY LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65129							
Dental	\$200,100	\$135,125	\$0	30	279	227	506
Disability Income	\$702,004	\$541,540	\$1,604	97	1,400	0	1,400
Hospital Indemnity	\$56,677	\$9,251	\$0	1	34	0	34
Individually Underwritten	\$2,919	\$6,412	\$0	0	2	0	2
Limited Benefit	\$87	\$0	\$0	0	3	0	3
Medicare Supplement	\$774	\$437	\$0	0	1	0	1
Vision	\$4,018	\$780	\$0	2	30	25	55
<b>TOTAL</b>	<b>\$966,579</b>	<b>\$693,545</b>	<b>\$1,604</b>	<b>130</b>	<b>1,749</b>	<b>227</b>	<b>2,001</b>

## KNIGHTS OF COLUMBUS

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
58033							
Accident Only	\$274	\$0	\$0	0	2	0	2
Disability Income	\$24,989	\$52,907	\$19,091	0	51	0	51
Hospital Indemnity	\$11,537	\$1,848	\$0	0	34	6	40
Individually Underwritten	\$197	(\$61)	\$0	0	0	0	0
Long Term Care	\$1,990,600	\$588,900	\$135,424	0	1,514	0	1,514
<b>TOTAL</b>	<b>\$2,027,597</b>	<b>\$643,594</b>	<b>\$154,515</b>	<b>0</b>	<b>1,601</b>	<b>0</b>	<b>1,607</b>

## LAFAYETTE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65242							
Disability Income	\$19,032	\$648,548	\$0	0	6	0	6
<b>TOTAL</b>	<b>\$19,032</b>	<b>\$648,548</b>	<b>\$0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>6</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### LAKEVIEW CENTER, INC.

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Administrative Services Only (ASO)	\$15,391,240	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$15,391,240</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### LIBERTY DENTAL PLAN OF FLORIDA, INC.

NAIC Company Code

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Dental	\$1,473,391	\$966,185	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,473,391</b>	<b>\$966,185</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### LIBERTY LIFE ASSURANCE COMPANY OF BOSTON

NAIC Company Code

65315

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Disability Income	\$26,894,911	\$27,861,605	\$515,696	23	112,070	0	112,070
<b>TOTAL</b>	<b>\$26,894,911</b>	<b>\$27,861,605</b>	<b>\$515,696</b>	<b>23</b>	<b>112,070</b>	<b>0</b>	<b>112,070</b>

### LIBERTY MUTUAL INSURANCE COMPANY

NAIC Company Code

23043

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
51+ Member Groups	\$0	\$2,820	\$0	0	0	0	0
Conversion	\$809	\$1,297	\$0	0	0	0	0
Individually Underwritten	\$0	(\$595)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$809</b>	<b>\$3,522</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### LIBERTY NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code 65331	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$549,979	\$64,352	\$129,552	0	21,414	0	21,414
Disability Income	\$1,132	\$0	\$0	0	7	0	7
Hospital Indemnity	\$632,884	\$613,482	\$63,164	0	4,263	0	4,263
Limited Benefit	\$11,245,926	\$5,046,435	\$493,738	0	30,880	10,190	41,070
Medicare Supplement	\$560,312	\$399,653	\$87,820	0	414	0	414
<b>TOTAL</b>	<b>\$12,990,233</b>	<b>\$6,123,922</b>	<b>\$774,274</b>	<b>0</b>	<b>56,978</b>	<b>0</b>	<b>67,168</b>

### LIFE INSURANCE COMPANY OF ALABAMA

NAIC Company Code 65412	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$10,308	\$0	\$1,439	0	27	0	27
Accidental Death & Dismemberment	\$1,149	\$0	\$60	0	22	0	22
Disability Income	\$4,404	\$0	\$1,717	0	1	0	1
Hospital Indemnity	\$21,985	\$0	\$4,238	0	19	16	35
Limited Benefit	\$322,943	\$67,153	\$17,515	0	303	325	628
Sickness	\$817	\$1,333	\$428	0	1	0	1
<b>TOTAL</b>	<b>\$361,606</b>	<b>\$68,486</b>	<b>\$25,397</b>	<b>0</b>	<b>373</b>	<b>0</b>	<b>714</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## LIFE INSURANCE COMPANY OF NORTH AMERICA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65498							
Accident Only	\$6,741,332	\$3,375,869	\$0	23	269,653	0	269,653
Accidental Death & Dismemberment	\$44,165	\$0	\$1,109	99	3,236	0	3,236
Disability Income	\$67,919,845	\$53,371,452	\$0	69	339,599	0	339,599
Excess/Stop Loss	\$0	(\$438)	\$0	0	0	0	0
Hospital Indemnity	\$1,688,389	\$1,329,929	\$0	4	5,628	0	5,628
Limited Benefit	\$38	\$432,891	\$0	1	0	0	0
<b>TOTAL</b>	<b>\$76,393,769</b>	<b>\$58,509,703</b>	<b>\$1,109</b>	<b>196</b>	<b>618,116</b>	<b>0</b>	<b>618,116</b>

## LIFE INSURANCE COMPANY OF THE SOUTHWEST

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65528							
Limited Benefit	\$300	\$0	\$0	0	2	2	4
<b>TOTAL</b>	<b>\$300</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>4</b>

## LIFE OF THE SOUTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
97691							
Accidental Death & Dismemberment	\$0	(\$22,348)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>(\$22,348)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## LIFESECURE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
77720							
Accidental Death & Dismemberment	\$582	(\$1,162)	\$0	0	4	0	4
Disability Income	\$263	\$0	\$0	0	6	0	6
Hospital Indemnity	\$110,890	\$34,415	\$102,289	0	479	0	479
Individually Underwritten	\$4,671	\$846	\$0	0	2	0	2
Limited Benefit	\$6,894	\$5,313	\$0	0	92	0	92
Long Term Care	\$1,001,049	\$98,897	\$462,457	0	1,286	0	1,286
<b>TOTAL</b>	<b>\$1,124,349</b>	<b>\$138,309</b>	<b>\$564,746</b>	<b>0</b>	<b>1,869</b>	<b>0</b>	<b>1,869</b>

## LINCOLN BENEFIT LIFE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65595							
Long Term Care	\$6,373,161	\$10,549,964	\$0	0	2,917	0	2,917
<b>TOTAL</b>	<b>\$6,373,161</b>	<b>\$10,549,964</b>	<b>\$0</b>	<b>0</b>	<b>2,917</b>	<b>0</b>	<b>2,917</b>

## LINCOLN HERITAGE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65927							
Accidental Death & Dismemberment	\$1,316	\$0	\$0	0	10	0	10
Medicare Supplement	\$3,422,622	\$2,455,801	\$0	0	1,211	0	1,211
<b>TOTAL</b>	<b>\$3,423,938</b>	<b>\$2,455,801</b>	<b>\$0</b>	<b>0</b>	<b>1,221</b>	<b>0</b>	<b>1,221</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### LINCOLN LIFE & ANNUITY COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62057							
Accidental Death & Dismemberment	\$23,574	\$0	\$0	0	1,025	0	1,025
Conversion	\$5,057	\$112,874	\$0	0	4	0	4
Dental	\$0	\$41,784	\$0	0	0	0	0
Disability Income	\$181,479	\$414,785	\$0	0	950	0	950
<b>TOTAL</b>	<b>\$210,110</b>	<b>\$569,443</b>	<b>\$0</b>	<b>0</b>	<b>1,979</b>	<b>0</b>	<b>1,979</b>

### LINCOLN NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65676							
Accident Only	\$783,849	\$1,294,854	\$607,858	56	6,155	0	6,155
Accidental Death & Dismemberment	\$4,198,465	\$1,137,465	\$666,314	1,786	269,283	0	269,283
Conversion	\$3,719	(\$2,382)	\$0	0	1	1	2
Dental	\$17,184,392	\$11,137,015	\$4,696,800	356	25,700	0	25,700
Disability Income	\$76,890,876	\$66,437,386	\$8,641,422	2,673	273,905	0	273,905
Excess/Stop Loss	\$9,543,503	\$8,491,840	\$0	129	1,133	0	1,133
Hospital Indemnity	\$722	\$1,925	\$0	0	0	0	0
Limited Benefit	\$415,014	\$92,546	\$406,645	43	4,292	0	4,292
Long Term Care	\$292,776	\$144,444	\$0	0	141	0	141
<b>TOTAL</b>	<b>\$109,313,316</b>	<b>\$88,735,093</b>	<b>\$15,019,039</b>	<b>5,043</b>	<b>580,610</b>	<b>0</b>	<b>580,611</b>

### LONDON LIFE REINSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
76694							
Excess/Stop Loss	\$0	(\$66,460)	\$0	0	0	0	0
Medicare Supplement	\$891	\$459	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$891</b>	<b>(\$66,001)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## LOYAL AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>		<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65722								
Accident Only		\$430,772	\$272,334	\$135,151	0	893	388	1,281
Disability Income		\$13,567	\$19,474	\$0	0	48	0	48
Hospital Indemnity		\$10,395	\$2,912	\$2,706	0	80	51	131
Limited Benefit		\$353,986	\$301,753	\$45,231	0	2,301	2,372	4,673
Long Term Care		\$3,780	(\$59)	\$0	0	3	0	3
Medicare Supplement		\$158,227	\$115,647	\$4,146	0	66	0	66
<b>TOTAL</b>		<b>\$970,727</b>	<b>\$712,061</b>	<b>\$187,234</b>	<b>0</b>	<b>3,391</b>	<b>388</b>	<b>6,202</b>

## MADISON NATIONAL LIFE INSURANCE COMPANY INC.

<i>NAIC Company Code</i>		<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65781								
Accident Only		\$68,953	\$16,504	\$0	1	93	37	130
Dental		\$278,339	\$128,800	\$26,360	256	466	350	816
Disability Income		\$152,412	(\$381,659)	\$0	2	1,240	496	1,736
Excess/Stop Loss		\$972,133	\$709,862	\$0	5	1,120	0	1,120
Limited Benefit		\$68,432	\$53,871	\$0	1	93	37	130
Out-of-State Individually Underwritten		\$158,913	\$61,769	\$152,889	1	83	70	153
Vision		\$3,154	\$2,171	\$0	3	26	10	36
<b>TOTAL</b>		<b>\$1,702,336</b>	<b>\$591,318</b>	<b>\$179,249</b>	<b>269</b>	<b>3,121</b>	<b>37</b>	<b>4,121</b>

## MANAGED CARE OF NORTH AMERICA, INC.

<i>NAIC Company Code</i>		<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
52014								
Dental		\$86,153	\$0	\$9,787	544	912	660	1,572
<b>TOTAL</b>		<b>\$86,153</b>	<b>\$0</b>	<b>\$9,787</b>	<b>544</b>	<b>912</b>	<b>660</b>	<b>1,572</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MANHATTAN LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65870							
Disability Income	\$224,518	\$112,047	\$80,557	5	228	40	268
<b>TOTAL</b>	<b>\$224,518</b>	<b>\$112,047</b>	<b>\$80,557</b>	<b>5</b>	<b>228</b>	<b>40</b>	<b>268</b>

## MANHATTAN NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67083							
Limited Benefit	\$255	\$0	\$0	0	1	0	1
Long Term Care	\$158,044	\$120,506	\$0	0	362	9	371
<b>TOTAL</b>	<b>\$158,299</b>	<b>\$120,506</b>	<b>\$0</b>	<b>0</b>	<b>363</b>	<b>0</b>	<b>372</b>

## MARKEL INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
38970							
Accident Only	\$1,128,010	\$476,999	\$157,986	0	359,716	0	359,716
Blanket Accident/Sickness	\$24,004	(\$7,359)	\$0	0	802	0	802
Hospital Indemnity	\$21,348	\$26,283	\$0	0	5	0	5
Out-of-State Short Term Major Medical	\$72,930	(\$28,521)	\$2,118	0	30	0	30
Student	\$697	\$221,428	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,246,989</b>	<b>\$688,830</b>	<b>\$160,104</b>	<b>0</b>	<b>360,553</b>	<b>0</b>	<b>360,553</b>

## MARQUETTE NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71072							
Medicare Supplement	\$33,569	\$0	\$3,012	0	21	0	21
<b>TOTAL</b>	<b>\$33,569</b>	<b>\$0</b>	<b>\$3,012</b>	<b>0</b>	<b>21</b>	<b>0</b>	<b>21</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65935							
Disability Income	\$16,501,487	\$10,810,325	\$1,083,567	0	7,021	0	7,021
Long Term Care	\$7,192,584	\$2,354,034	\$1,421,701	0	2,148	539	2,687
<b>TOTAL</b>	<b>\$23,694,071</b>	<b>\$13,164,359</b>	<b>\$2,505,268</b>	<b>0</b>	<b>9,169</b>	<b>0</b>	<b>9,708</b>

## MEDAMERICA INSURANCE COMPANY OF FLORIDA

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
12967							
Long Term Care	\$3,559,252	\$669,021	\$269,373	46	2,225	0	2,225
<b>TOTAL</b>	<b>\$3,559,252</b>	<b>\$669,021</b>	<b>\$269,373</b>	<b>46</b>	<b>2,225</b>	<b>0</b>	<b>2,225</b>

## MEDICA HEALTH PLANS OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
12756							
2 - 5 Member Groups	\$1,716,534	\$2,451,896	\$163,582	96	310	89	399
51+ Member Groups	\$0	\$436,281	\$0	0	0	0	0
6 - 50 Member Groups	\$1,654,577	\$1,583,718	\$300,850	34	350	90	440
Individually Underwritten	\$3,281,312	\$2,485,089	\$124,590	0	669	0	669
<b>TOTAL</b>	<b>\$6,652,423</b>	<b>\$6,956,984</b>	<b>\$589,022</b>	<b>130</b>	<b>1,329</b>	<b>89</b>	<b>1,508</b>

## MEDICAL AIR SERVICES ASSOCIATION OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
52008							
Other Prepaid Health Services	\$920,600	\$245,423	\$71,464	0	6,711	0	6,711
<b>TOTAL</b>	<b>\$920,600</b>	<b>\$245,423</b>	<b>\$71,464</b>	<b>0</b>	<b>6,711</b>	<b>0</b>	<b>6,711</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MEDICO INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
31119							
Accident Only	\$497	\$431	\$0	0	0	0	0
Disability Income	\$18,235	(\$16,977)	\$0	0	28	0	28
Hospital Indemnity	\$34,611	\$77,177	\$0	0	72	4	76
Limited Benefit	\$285,626	\$506,885	\$0	0	1,098	543	1,641
Long Term Care	\$976,051	(\$6,170,108)	\$0	0	24	0	24
Medicare Supplement	\$13,754,110	\$12,998,083	\$0	0	4,875	0	4,875
Short Term Care	\$25,083	\$13,560	\$0	0	5	0	5
<b>TOTAL</b>	<b>\$15,094,213</b>	<b>\$7,409,051</b>	<b>\$0</b>	<b>0</b>	<b>6,102</b>	<b>0</b>	<b>6,649</b>

## MEGA LIFE & HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
97055							
Accident Only	\$90,160	\$69,939	\$24,157	0	70	16	86
Conversion	\$313,101	\$588,060	\$0	0	30	4	34
Dental	\$99,520	\$38,957	\$6,176	0	363	235	598
Disability Income	\$200,802	\$68,028	\$33,975	0	659	0	659
Hospital Indemnity	\$414,314	\$290,383	\$116,326	0	976	508	1,484
Individually Underwritten	\$202,517	\$101,014	\$0	0	29	12	41
Limited Benefit	\$695,813	\$390,748	\$123,157	0	1,731	819	2,550
Medicare Supplement	\$2,061	\$5,490	\$0	0	0	0	0
Out-of-State Guarantee Issue	\$4,970	\$0	\$0	0	1	0	1
Out-of-State Individually Underwritten	\$11,943,664	\$6,361,720	\$0	1	1,736	907	2,643
Prescription Drug	\$18,554	\$3,291	\$0	0	32	19	51
Vision	\$106,413	\$59,096	\$15,460	0	1,868	1,236	3,104
<b>TOTAL</b>	<b>\$14,091,889</b>	<b>\$7,976,726</b>	<b>\$319,251</b>	<b>1</b>	<b>7,495</b>	<b>16</b>	<b>11,251</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### MEMBERS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
86126							
Disability Income	\$45	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$45</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

### MERIT LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65951							
Accidental Death & Dismemberment	\$361,503	\$93,422	\$361,503	3	19,611	3,796	23,407
<b>TOTAL</b>	<b>\$361,503</b>	<b>\$93,422</b>	<b>\$361,503</b>	<b>3</b>	<b>19,611</b>	<b>3,796</b>	<b>23,407</b>

### METLIFE INSURANCE COMPANY OF CONNECTICUT

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
87726							
Disability Income	\$680,838	\$5,633,300	\$0	0	500	0	500
Hospital Indemnity	\$102,031	\$52,712	\$0	0	91	15	106
Individually Underwritten	\$508	\$65	\$0	0	1	0	1
Long Term Care	\$23,885,432	\$60,876,321	\$0	33	10,861	0	10,861
<b>TOTAL</b>	<b>\$24,668,809</b>	<b>\$66,562,398</b>	<b>\$0</b>	<b>33</b>	<b>11,453</b>	<b>0</b>	<b>11,468</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## METROPOLITAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65978							
Accidental Death & Dismemberment	\$8,440,191	\$5,054,241	\$446,600	893	462,431	0	462,431
Dental	\$155,947,228	\$162,862,364	\$15,331,746	1,875	308,384	370,062	678,446
Disability Income	\$96,363,895	\$97,124,581	\$5,655,156	780	372,575	0	372,575
Hospital Indemnity	\$89,128	\$31,368	\$0	0	845	4	849
Individually Underwritten	\$254,873	\$451,204	\$0	0	163	72	235
Limited Benefit	\$1,950,612	\$179,038	\$0	0	11,808	0	11,808
Long Term Care	\$35,593,644	\$18,403,332	\$0	6	37,268	0	37,268
<b>TOTAL</b>	<b>\$298,639,571</b>	<b>\$284,106,128</b>	<b>\$21,433,502</b>	<b>3,554</b>	<b>1,193,474</b>	<b>0</b>	<b>1,563,612</b>

## MHNET OF FLORIDA, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66044							
Other Prepaid Health Services	\$1,710,327	\$1,295,707	\$0	3	28,947	23,158	52,105
<b>TOTAL</b>	<b>\$1,710,327</b>	<b>\$1,295,707</b>	<b>\$0</b>	<b>3</b>	<b>28,947</b>	<b>23,158</b>	<b>52,105</b>

## MIDLAND NATIONAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66044							
Accident Only	\$662	\$0	\$0	0	0	0	0
Disability Income	\$6,603	\$12,430	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$7,265</b>	<b>\$12,430</b>	<b>\$0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MID-WEST NATIONAL LIFE INSURANCE COMPANY OF TN

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66087							
Accident Only	\$26,174	\$576	\$2,598	0	29	1	30
Dental	\$46,307	\$20,432	\$3,075	0	183	103	286
Disability Income	\$747	\$3,445	\$0	0	0	0	0
Hospital Indemnity	\$59,428	\$14,865	\$131	0	240	119	359
Individually Underwritten	\$22,399	\$15,269	\$0	0	4	1	5
Limited Benefit	\$331,563	\$107,208	\$7,357	0	1,294	489	1,783
Out-of-State Guarantee Issue	(\$207)	\$0	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$10,873,923	\$5,388,082	\$0	1	2,082	1,113	3,195
Prescription Drug	\$3,365	\$2,400	\$0	0	3	0	3
Vision	\$91,849	\$44,720	\$0	0	1,824	1,236	3,060
<b>TOTAL</b>	<b>\$11,455,548</b>	<b>\$5,596,997</b>	<b>\$13,161</b>	<b>1</b>	<b>5,659</b>	<b>1</b>	<b>8,721</b>

## MINNESOTA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66168							
Accidental Death & Dismemberment	\$9,321,325	\$3,905,941	\$3,509,717	5	53,302	0	53,302
Disability Income	\$2,422,920	\$17,174,867	\$65	1	1,008	0	1,008
Hospital Indemnity	\$120	\$0	\$0	0	1	0	1
Long Term Care	\$45,914	\$0	\$0	0	16	0	16
<b>TOTAL</b>	<b>\$11,790,279</b>	<b>\$21,080,808</b>	<b>\$3,509,782</b>	<b>6</b>	<b>54,327</b>	<b>0</b>	<b>54,327</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MONITOR LIFE INSURANCE COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
81442							
Hospital Indemnity	\$213	\$0	\$0	0	0	0	0
Limited Benefit	\$325,647	\$53,273	\$325,647	20	380	264	644
<b>TOTAL</b>	<b>\$325,860</b>	<b>\$53,273</b>	<b>\$325,647</b>	<b>20</b>	<b>380</b>	<b>0</b>	<b>644</b>

## MONUMENTAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66281							
Accident Only	\$2,562,067	\$1,958,206	\$5,595	216	123,574	134	123,708
Accidental Death & Dismemberment	\$13,921,683	\$2,356,276	\$972,497	90	143,597	20,111	163,708
Champus/Tricare Supplement	\$5,458,949	\$3,806,075	\$331,082	47	4,717	3,526	8,243
Disability Income	\$33,804	\$27,662	\$0	21	442	7	449
Excess/Stop Loss	\$745,331	\$716,368	\$745,331	3	542	705	1,247
Hospital Indemnity	\$551,449	\$694,710	\$6,159	54	3,091	401	3,492
Individually Underwritten	\$232	\$2,332	\$0	0	1	0	1
Limited Benefit	\$6,999,427	\$4,267,626	\$555,117	192	11,049	3,883	14,932
Long Term Care	\$6,053,214	\$2,836,154	\$0	0	3,848	14	3,862
Medicare Supplement	\$5,850,281	\$4,611,806	\$4,431	66	2,308	1	2,309
Student	\$3,616,121	\$1,467,069	\$0	91	8,003	0	8,003
<b>TOTAL</b>	<b>\$45,792,558</b>	<b>\$22,744,284</b>	<b>\$2,620,212</b>	<b>780</b>	<b>301,172</b>	<b>134</b>	<b>329,954</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### MONY LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66370							
Accidental Death & Dismemberment	\$20	\$0	\$0	0	1	0	1
Disability Income	\$2,553,943	\$2,711,717	\$0	0	1,924	0	1,924
Hospital Indemnity	\$1,672	\$1,863	\$0	0	17	0	17
Individually Underwritten	\$41,545	\$14,426	\$0	0	32	2	34
<b>TOTAL</b>	<b>\$2,597,180</b>	<b>\$2,728,006</b>	<b>\$0</b>	<b>0</b>	<b>1,974</b>	<b>0</b>	<b>1,976</b>

### MTL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66427							
Disability Income	\$39,095	\$136,255	\$0	0	33	0	33
<b>TOTAL</b>	<b>\$39,095</b>	<b>\$136,255</b>	<b>\$0</b>	<b>0</b>	<b>33</b>	<b>0</b>	<b>33</b>

### MUTUAL OF AMERICA LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
88668							
Disability Income	\$85,688	\$366,887	\$0	28	263	0	263
<b>TOTAL</b>	<b>\$85,688</b>	<b>\$366,887</b>	<b>\$0</b>	<b>28</b>	<b>263</b>	<b>0</b>	<b>263</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## MUTUAL OF OMAHA INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71412							
Accident Only	\$5,079,820	\$3,765,074	\$889,798	238	287,180	211	287,391
Accidental Death & Dismemberment	\$1,546,115	\$598,680	\$426,508	28	20,279	6,190	26,469
Conversion	\$4,123	\$8,407	\$0	0	2	0	2
Dental	\$6,830	\$9,474	\$0	0	30	5	35
Disability Income	\$1,984,258	\$1,180,259	\$243,610	13	3,494	1	3,495
Hospital Indemnity	\$566,416	\$185,272	\$826	0	1,796	320	2,116
Individually Underwritten	\$94,874	(\$8,105)	\$0	0	230	24	254
Limited Benefit	\$1,994,157	\$908,183	\$53,636	0	16,434	4,486	20,920
Long Term Care	\$9,892,950	\$6,100,451	\$1,043,419	8	5,889	0	5,889
Medicare Supplement	\$49,956,610	\$36,457,910	\$1,682,347	0	15,134	1	15,135
Travel	\$34,327	\$36,627	\$0	0	1,983	52	2,035
<b>TOTAL</b>	<b>\$71,160,480</b>	<b>\$49,242,232</b>	<b>\$4,340,144</b>	<b>287</b>	<b>352,451</b>	<b>211</b>	<b>363,741</b>

## MUTUAL SAVINGS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66397							
Accidental Death & Dismemberment	\$2,211	\$0	\$0	0	138	0	138
Hospital Indemnity	\$4,095	\$0	\$0	0	90	0	90
Limited Benefit	\$21,084	\$37,903	\$0	0	249	0	249
<b>TOTAL</b>	<b>\$27,390</b>	<b>\$37,903</b>	<b>\$0</b>	<b>0</b>	<b>477</b>	<b>0</b>	<b>477</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## NATIONAL BENEFIT LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61409							
Accident Only	\$27	\$0	\$0	0	1	0	1
Disability Income	\$356	(\$7,291)	\$0	0	2	0	2
Hospital Indemnity	\$34,886	\$48,854	\$0	0	205	0	205
Individually Underwritten	\$23,655	\$15,310	\$0	0	40	20	60
<b>TOTAL</b>	<b>\$58,924</b>	<b>\$56,873</b>	<b>\$0</b>	<b>0</b>	<b>248</b>	<b>0</b>	<b>268</b>

## NATIONAL CASUALTY COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
11991							
Accident Only	\$54,765	\$14,673	\$3,233	87	298	5	303
Disability Income	\$403	\$877	\$0	0	6	0	6
Hospital Indemnity	\$983	\$19,048	\$0	0	6	0	6
Individually Underwritten	\$94,491	\$37,196	\$0	0	1	0	1
Limited Benefit	\$376	\$0	\$0	0	6	0	6
<b>TOTAL</b>	<b>\$151,018</b>	<b>\$71,794</b>	<b>\$3,233</b>	<b>87</b>	<b>317</b>	<b>5</b>	<b>322</b>

## NATIONAL GUARDIAN LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66583							
Accident Only	\$12,118	\$0	\$12,118	0	4,677	0	4,677
Dental	\$3,294,577	\$1,984,805	\$3,294,577	73	4,452	3,036	7,488
Disability Income	\$23,317	\$50,062	\$0	0	0	0	0
Hospital Indemnity	\$254	\$0	\$0	0	1	0	1
Medicare Supplement	\$977	\$231	\$0	0	1	0	1
Vision	\$8,212,645	\$5,242,516	\$8,212,645	472	71,733	64,605	136,338
<b>TOTAL</b>	<b>\$11,543,888</b>	<b>\$7,277,614</b>	<b>\$11,519,340</b>	<b>545</b>	<b>80,864</b>	<b>0</b>	<b>148,505</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66680							
Disability Income	\$2,211,613	\$9,523,193	\$13,706	0	1,064	0	1,064
<b>TOTAL</b>	<b>\$2,211,613</b>	<b>\$9,523,193</b>	<b>\$13,706</b>	<b>0</b>	<b>1,064</b>	<b>0</b>	<b>1,064</b>

## NATIONAL TEACHERS ASSOCIATES LIFE INSURANCE CO.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
87963							
Disability Income	\$162,062	\$51,769	\$50,293	0	485	462	947
Hospital Indemnity	\$36	\$0	\$0	0	1	0	1
Limited Benefit	\$772,471	\$1,182,648	\$21,651	0	1,606	1,440	3,046
<b>TOTAL</b>	<b>\$934,569</b>	<b>\$1,234,417</b>	<b>\$71,944</b>	<b>0</b>	<b>2,092</b>	<b>462</b>	<b>3,994</b>

## NATIONAL UNION FIRE INSURANCE CO. OF PITTSBURGH, PA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
19445							
Accident Only	\$19,906,842	\$8,642,379	\$252,819	0	882,898	0	882,898
Accidental Death & Dismemberment	\$5,672,474	\$1,622,763	\$9,669	23	84,805	0	84,805
Excess/Stop Loss	\$2,151,276	\$830,893	\$366,522	10	1,182	1,776	2,958
Hospital Indemnity	\$2,842,871	\$645,769	\$0	0	1,404	0	1,404
Limited Benefit	\$1,091,183	(\$94,943)	\$3,290	13	4,809	1,570	6,379
Student	\$221,876	\$76,598	\$0	0	0	0	0
Travel	\$24,753,170	\$104,563	\$242,340	102	285,636	0	285,636
Vision	\$188,599	\$121,499	\$0	4	1,572	0	1,572
<b>TOTAL</b>	<b>\$56,828,291</b>	<b>\$11,949,521</b>	<b>\$874,640</b>	<b>152</b>	<b>1,262,306</b>	<b>0</b>	<b>1,265,652</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## NATIONAL WESTERN LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66850							
Limited Benefit	\$2,950	\$2,964	\$0	0	30	0	30
<b>TOTAL</b>	<b>\$2,950</b>	<b>\$2,964</b>	<b>\$0</b>	<b>0</b>	<b>30</b>	<b>0</b>	<b>30</b>

## NATIONWIDE LIFE AND ANNUITY INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
92657							
Accident Only	\$735	\$0	\$0	5	5	0	5
<b>TOTAL</b>	<b>\$735</b>	<b>\$0</b>	<b>\$0</b>	<b>5</b>	<b>5</b>	<b>0</b>	<b>5</b>

## NATIONWIDE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
66869							
Accident Only	\$2,649,488	\$1,567,583	\$2,370,361	478	8	0	8
Blanket Accident/Sickness	\$44,062	\$14,240	\$0	1	172	1	173
Dental	\$147,704	\$100,626	\$40,178	0	3	2	5
Disability Income	\$13,114	\$9,204	\$4,041	0	15	0	15
Excess/Stop Loss	\$349,808	\$109,953	\$0	3	404	1	405
Hospital Indemnity	\$2,222,710	\$1,013,169	\$0	42	1,762	594	2,356
Limited Benefit	\$1,392	\$1,246	\$0	0	6	0	6
Medicare Supplement	\$1,192,087	\$1,098,752	\$0	0	0	0	0
Out-of-State 51+ Member Groups	(\$453)	\$101,944	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$6,619,912</b>	<b>\$4,016,717</b>	<b>\$2,414,580</b>	<b>524</b>	<b>2,370</b>	<b>0</b>	<b>2,968</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## NEIGHBORHOOD HEALTH PARTNERSHIP, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
95123							
2 - 5 Member Groups	\$57,085,088	\$39,780,548	\$3,344,160	2,084	4,918	1,713	6,631
51+ Member Groups	\$217,885,402	\$167,753,525	\$23,080,203	401	37,939	18,439	56,378
6 - 50 Member Groups	\$168,327,739	\$117,301,555	\$17,766,839	2,821	24,776	15,996	40,772
Conversion	\$5,551,246	\$8,391,436	\$39,868	0	814	0	814
<b>TOTAL</b>	<b>\$448,849,475</b>	<b>\$333,227,064</b>	<b>\$44,231,070</b>	<b>5,306</b>	<b>68,447</b>	<b>1,713</b>	<b>104,595</b>

## NEW ENGLAND LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
91626							
Disability Income	\$211,538	\$1,375,676	\$0	0	143	0	143
<b>TOTAL</b>	<b>\$211,538</b>	<b>\$1,375,676</b>	<b>\$0</b>	<b>0</b>	<b>143</b>	<b>0</b>	<b>143</b>

## NEW YORK LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66915							
51+ Member Groups	\$0	\$10,668	\$0	0	0	0	0
Accidental Death & Dismemberment	\$704,285	\$202,239	\$32,989	54	26,976	792	27,768
Disability Income	\$7,753,568	\$12,061,479	\$179,091	49	6,605	160	6,765
Hospital Indemnity	\$1,053,572	\$403,359	\$3,559	14	1,004	291	1,295
Individually Underwritten	\$69,610	\$16,734	\$0	0	19	3	22
Long Term Care	\$10,257,720	\$5,472,916	\$990,970	2	5,348	0	5,348
Medicare Supplement	\$291,832	\$242,664	\$0	0	84	2	86
Out-of-State 51+ Member Groups	\$11,098,227	\$13,296,706	\$1,850,157	15	1,811	1,231	3,042
<b>TOTAL</b>	<b>\$31,228,814</b>	<b>\$31,706,765</b>	<b>\$3,056,766</b>	<b>134</b>	<b>41,847</b>	<b>0</b>	<b>44,326</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## NORTH AMERICAN COMPANY FOR LIFE AND HEALTH INSURANCE

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66974							
Accident Only	\$1,798	(\$16,871)	\$0	0	0	0	0
Disability Income	\$405	\$21,048	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$2,203</b>	<b>\$4,177</b>	<b>\$0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>

## NORTH AMERICAN SPECIALTY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
29874							
Excess/Stop Loss	\$821,846	\$224,078	\$0	1	9,013	11,176	20,189
<b>TOTAL</b>	<b>\$821,846</b>	<b>\$224,078</b>	<b>\$0</b>	<b>1</b>	<b>9,013</b>	<b>11,176</b>	<b>20,189</b>

## NORTHWESTERN LONG TERM CARE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
69000							
Long Term Care	\$19,543,665	\$4,728,521	\$4,578,473	0	9,003	0	9,003
<b>TOTAL</b>	<b>\$19,543,665</b>	<b>\$4,728,521</b>	<b>\$4,578,473</b>	<b>0</b>	<b>9,003</b>	<b>0</b>	<b>9,003</b>

## NORTHWESTERN MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67091							
Disability Income	\$64,939,280	\$85,653,993	\$13,068,105	13,840	35,076	0	35,076
<b>TOTAL</b>	<b>\$64,939,280</b>	<b>\$85,653,993</b>	<b>\$13,068,105</b>	<b>13,840</b>	<b>35,076</b>	<b>0</b>	<b>35,076</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## OCIDENTAL LIFE INSURANCE COMPANY OF N CAROLINA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67148							
Accident Only	\$6,284	\$11,302	\$0	0	22	0	22
Disability Income	\$3,198	\$16,456	\$0	0	14	0	14
Hospital Indemnity	\$421	\$0	\$0	0	3	0	3
Limited Benefit	\$47,074	\$134,570	\$0	0	208	227	435
<b>TOTAL</b>	<b>\$56,977</b>	<b>\$162,328</b>	<b>\$0</b>	<b>0</b>	<b>247</b>	<b>0</b>	<b>474</b>

## OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
89206							
Disability Income	\$821,001	\$818,847	\$27,853	0	513	0	513
<b>TOTAL</b>	<b>\$821,001</b>	<b>\$818,847</b>	<b>\$27,853</b>	<b>0</b>	<b>513</b>	<b>0</b>	<b>513</b>

## OHIO NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67172							
Disability Income	\$708,859	\$251,566	\$12,234	0	285	0	285
Individually Underwritten	\$365	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$709,224</b>	<b>\$251,566</b>	<b>\$12,234</b>	<b>0</b>	<b>286</b>	<b>0</b>	<b>286</b>

## OHIO STATE LIFE INSURANCE COMPANY (THE)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67180							
Conversion	\$551	(\$27)	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$551</b>	<b>(\$27)</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## OLD AMERICAN INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67199							
Accident Only	\$8,329	\$155	\$0	0	263	0	263
Disability Income	\$69	\$3	\$0	0	1	0	1
Hospital Indemnity	\$3,397	\$1,207	\$0	0	80	0	80
Limited Benefit	\$2,772	(\$11)	\$0	0	46	0	46
Long Term Care	\$10,063	\$108,253	\$0	0	6	0	6
Medicare Supplement	\$166	\$419	\$0	0	1	0	1
Short Term Care	\$159,619	\$2,315,888	\$0	0	124	0	124
<b>TOTAL</b>	<b>\$184,415</b>	<b>\$2,425,914</b>	<b>\$0</b>	<b>0</b>	<b>521</b>	<b>0</b>	<b>521</b>

## OLD REPUBLIC INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
24147							
Accident Only	\$1,670,090	\$1,132,511	\$1,670,090	0	7,096	0	7,096
<b>TOTAL</b>	<b>\$1,670,090</b>	<b>\$1,132,511</b>	<b>\$1,670,090</b>	<b>0</b>	<b>7,096</b>	<b>0</b>	<b>7,096</b>

## OLD REPUBLIC LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67261							
Accident Only	\$180,862	(\$150,733)	\$0	1	130	0	130
Accidental Death & Dismemberment	\$0	\$27,637	\$0	0	81,335	0	81,335
<b>TOTAL</b>	<b>\$180,862</b>	<b>(\$123,096)</b>	<b>\$0</b>	<b>1</b>	<b>81,465</b>	<b>0</b>	<b>81,465</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## ONEBEACON AMERICA INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
20621							
Accident Only	\$3,739,405	\$2,222,245	\$28,218	11	13,036	0	13,036
<b>TOTAL</b>	<b>\$3,739,405</b>	<b>\$2,222,245</b>	<b>\$28,218</b>	<b>11</b>	<b>13,036</b>	<b>0</b>	<b>13,036</b>

## ORDER OF UNITED COMMERCIAL TRAVELERS OF AMERICA (THE)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56383							
Accident Only	\$5,141	\$10,141	\$409	0	220	17	237
Dental	\$229	\$0	\$229	0	2	0	2
Disability Income	\$26,135	\$6,649	\$0	0	144	0	144
Hospital Indemnity	\$2,909	\$4,463	\$44	0	19	14	33
Medicare Supplement	\$4,901,694	\$4,253,079	\$0	0	1,794	0	1,794
Sickness	\$1,601	\$3,433	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$4,937,709</b>	<b>\$4,277,765</b>	<b>\$682</b>	<b>0</b>	<b>2,186</b>	<b>17</b>	<b>2,217</b>

## OXFORD LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
76112							
Medicare Supplement	\$5,605,106	\$5,261,077	\$0	1	1,942	0	1,942
<b>TOTAL</b>	<b>\$5,605,106</b>	<b>\$5,261,077</b>	<b>\$0</b>	<b>1</b>	<b>1,942</b>	<b>0</b>	<b>1,942</b>

## OZARK NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67393							
Limited Benefit	\$2,343	\$0	\$0	0	40	25	65
<b>TOTAL</b>	<b>\$2,343</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>40</b>	<b>25</b>	<b>65</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PACIFIC LIFE & ANNUITY COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
97268							
Disability Income	\$0	\$23,510	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$23,510</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## PACIFICARE LIFE AND HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70785							
Medicare Supplement	\$777,752	\$709,701	\$37,365	0	325	0	325
<b>TOTAL</b>	<b>\$777,752</b>	<b>\$709,701</b>	<b>\$37,365</b>	<b>0</b>	<b>325</b>	<b>0</b>	<b>325</b>

## PAN-AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67539							
51+ Member Groups	\$0	(\$3,029)	\$0	0	0	0	0
Accidental Death & Dismemberment	\$5,058	\$0	\$4,829	30	103	138	241
Dental	\$6,357	\$15,140	\$527	3	3	0	3
Disability Income	\$749,474	\$1,448,529	\$3,421	2	323	0	323
Excess/Stop Loss	\$4,875,183	\$2,423,883	\$132,113	39	1,558	1,372	2,930
Individually Underwritten	\$3,167	\$0	\$0	0	5	0	5
Limited Benefit	\$3,283,827	\$2,101,951	\$1,256,066	334	2,000	730	2,730
Student	\$5,876,895	\$3,797,173	\$0	9	7,753	16	7,769
Vision	\$292	\$332	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$14,800,253</b>	<b>\$9,783,979</b>	<b>\$1,396,956</b>	<b>417</b>	<b>11,745</b>	<b>0</b>	<b>14,001</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### PAUL REVERE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67598							
Accident Only	\$5,329	\$0	\$0	0	25	0	25
Accidental Death & Dismemberment	\$2,433	\$9,976	\$0	8	156	0	156
Disability Income	\$17,279,016	\$55,169,794	\$0	68	9,795	0	9,795
Hospital Indemnity	\$53,502	\$7,491	\$0	0	255	0	255
Limited Benefit	\$4,383	\$925	\$0	0	12	0	12
<b>TOTAL</b>	<b>\$17,344,663</b>	<b>\$55,188,186</b>	<b>\$0</b>	<b>76</b>	<b>10,243</b>	<b>0</b>	<b>10,243</b>

### PAVONIA LIFE INSURANCE COMPANY OF MICHIGAN

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
93777							
Accidental Death & Dismemberment	\$490	(\$3,184)	\$0	1	43	0	43
<b>TOTAL</b>	<b>\$490</b>	<b>(\$3,184)</b>	<b>\$0</b>	<b>1</b>	<b>43</b>	<b>0</b>	<b>43</b>

### PENN MUTUAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67644							
Disability Income	\$1,324,088	\$3,939,024	\$0	660	660	0	660
<b>TOTAL</b>	<b>\$1,324,088</b>	<b>\$3,939,024</b>	<b>\$0</b>	<b>660</b>	<b>660</b>	<b>0</b>	<b>660</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### PENNSYLVANIA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67660							
Accident Only	\$512,869	\$374,713	\$0	0	368	0	368
Dental	\$46,221	\$18,666	\$0	0	152	0	152
Disability Income	\$230,154	\$17,062	\$0	0	1,848	0	1,848
Hospital Indemnity	\$40,317	\$7,442	\$0	0	321	0	321
Limited Benefit	\$10,598	\$2,679	\$0	0	28	0	28
Long Term Care	\$41,980	\$40,568	\$0	0	15	0	15
Medicare Supplement	\$80,750	\$0	\$0	0	21	0	21
TOTAL	\$962,889	\$461,130	\$0	0	2,753	0	2,753

### PERICO LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
85561							
Accidental Death & Dismemberment	\$6,124	(\$155)	\$0	0	39	7	46
Excess/Stop Loss	\$141,378	\$120,652	\$0	6	48	58	106
Hospital Indemnity	\$2,803	\$0	\$0	0	22	6	28
TOTAL	\$150,305	\$120,497	\$0	6	109	7	180

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PHILADELPHIA AMERICAN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67784							
6 - 50 Member Groups	\$35,292	\$3,775	\$0	2	60	0	60
Accident Only	\$18,729	\$1,010	\$0	1	39	4	43
Accidental Death & Dismemberment	\$1,414	\$0	\$0	0	63	0	63
Conversion	\$77,910	\$128,177	\$0	0	63	0	63
Disability Income	\$613,292	\$451,159	\$0	9	4,479	26	4,505
Hospital Indemnity	\$424	\$1	\$0	0	4	1	5
Individually Underwritten	\$15,294	\$3,720	\$0	0	60	23	83
Limited Benefit	\$2,071,064	\$3,293,159	\$0	0	2,268	1,106	3,374
Long Term Care	\$1,631	\$78,560	\$0	0	3	3	6
Medicare Supplement	\$19,906	\$55,398	\$0	0	15	1	16
<b>TOTAL</b>	<b>\$2,854,956</b>	<b>\$4,014,959</b>	<b>\$0</b>	<b>12</b>	<b>7,054</b>	<b>0</b>	<b>8,218</b>

## PHOENIX LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67814							
Individually Underwritten	\$200,097	\$1,014,859	\$0	0	0	0	0
Out-of-State 2 - 5 Member Groups	\$0	\$32,315	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$200,097</b>	<b>\$1,047,174</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PHYSICIANS MUTUAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
80578							
Accident Only	\$1,545	(\$134)	\$0	0	9	2	11
Dental	\$387,267	\$188,542	\$207,462	0	1,316	198	1,514
Disability Income	\$2,702	\$1,699	\$0	0	8	0	8
Guarantee Issue	\$11,926	\$299	\$0	0	2	0	2
Hospital Indemnity	\$1,952,846	\$1,293,664	\$38,004	0	5,083	1,040	6,123
Individually Underwritten	\$71,034	\$58,742	\$0	0	10	2	12
Limited Benefit	\$102,374	\$39,932	\$0	0	562	128	690
Long Term Care	\$1,045,999	\$1,204,506	\$0	0	570	0	570
Medicare Supplement	\$2,510,919	\$1,762,122	\$67,955	0	739	23	762
Short Term Care	\$8,309	\$42,725	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$6,094,921</b>	<b>\$4,592,097</b>	<b>\$313,421</b>	<b>0</b>	<b>8,301</b>	<b>2</b>	<b>9,694</b>

## PHYSICIANS UNITED PLAN, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
10775							
Guarantee Issue	\$261,929,817	\$219,774,138	\$80,255,702	0	25,127	0	25,127
<b>TOTAL</b>	<b>\$261,929,817</b>	<b>\$219,774,138</b>	<b>\$80,255,702</b>	<b>0</b>	<b>25,127</b>	<b>0</b>	<b>25,127</b>

## PREFERRED MEDICAL PLAN, INC.

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
95271							
51+ Member Groups	\$2,687,863	\$2,712,759	\$167,887	6	655	430	1,085
Guarantee Issue	\$849,620	\$618,151	\$10,856	0	170	9	179
Individually Underwritten	\$52,421,637	\$41,022,833	\$4,139,319	0	16,455	3,357	19,812
<b>TOTAL</b>	<b>\$55,959,120</b>	<b>\$44,353,743</b>	<b>\$4,318,062</b>	<b>6</b>	<b>17,280</b>	<b>430</b>	<b>21,076</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PRESIDENTIAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68039							
Accident Only	\$7,854	\$28,374	\$0	0	0	0	0
Excess/Stop Loss	\$89,379	\$12,234	\$0	2	44	7	51
<b>TOTAL</b>	<b>\$97,233</b>	<b>\$40,608</b>	<b>\$0</b>	<b>2</b>	<b>44</b>	<b>0</b>	<b>51</b>

## PRIMERICA LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65919							
Disability Income	\$10,480	\$336,160	\$0	36	36	0	36
Hospital Indemnity	\$15,648	\$15,231	\$0	27	27	0	27
Long Term Care	\$22,511	\$91,958	\$0	27	27	0	27
Out-of-State Individually Underwritten	\$11,669	\$2,025	\$0	5	5	0	5
<b>TOTAL</b>	<b>\$60,308</b>	<b>\$445,374</b>	<b>\$0</b>	<b>95</b>	<b>95</b>	<b>0</b>	<b>95</b>

## PRINCIPAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
61271							
51+ Member Groups	(\$7,137)	(\$180,981)	\$0	0	0	0	0
Conversion	\$118,085	\$1,285,657	\$0	0	0	0	0
Dental	\$31,123,276	\$19,614,375	\$3,993,505	2,374	46,616	41,185	87,801
Disability Income	\$28,502,585	\$16,263,028	\$4,380,836	1,497	46,968	0	46,968
Long Term Care	\$26,844	\$0	\$0	0	0	0	0
Medicare Supplement	\$13,547,223	\$11,035,554	\$0	0	4,042	352	4,394
Vision	\$712,102	\$304,065	\$122,913	282	6,333	3,673	10,006
<b>TOTAL</b>	<b>\$74,022,978</b>	<b>\$48,321,698</b>	<b>\$8,497,254</b>	<b>4,153</b>	<b>103,959</b>	<b>0</b>	<b>149,169</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PROFESSIONAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68047							
Disability Income	\$3,456,888	\$1,700,696	\$0	0	4,879	1,220	6,099
Hospital Indemnity	\$1,493,521	\$910,735	\$0	0	4,115	2,058	6,173
Limited Benefit	\$370,763	\$413,133	\$0	0	1,711	1,283	2,994
<b>TOTAL</b>	<b>\$5,321,172</b>	<b>\$3,024,564</b>	<b>\$0</b>	<b>0</b>	<b>10,705</b>	<b>1,220</b>	<b>15,266</b>

## PROTECTIVE LIFE AND ANNUITY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
88536							
Disability Income	\$1,523	\$15,616	\$0	0	8	0	8
<b>TOTAL</b>	<b>\$1,523</b>	<b>\$15,616</b>	<b>\$0</b>	<b>0</b>	<b>8</b>	<b>0</b>	<b>8</b>

## PROTECTIVE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68136							
Disability Income	\$285,566	\$47,415	\$0	0	118	0	118
Hospital Indemnity	\$215	\$0	\$0	0	6	0	6
Limited Benefit	\$7,711,962	\$9,779,241	\$0	0	6,073	2,732	8,805
Medicare Supplement	\$13,857	\$22,572	\$0	0	11	0	11
<b>TOTAL</b>	<b>\$8,011,600</b>	<b>\$9,849,228</b>	<b>\$0</b>	<b>0</b>	<b>6,208</b>	<b>0</b>	<b>8,940</b>

## PROVIDENT AMERICAN LIFE AND HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
67903							
Medicare Supplement	\$62,810	\$45,133	\$0	0	14	0	14
<b>TOTAL</b>	<b>\$62,810</b>	<b>\$45,133</b>	<b>\$0</b>	<b>0</b>	<b>14</b>	<b>0</b>	<b>14</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## PROVIDENT LIFE AND ACCIDENT INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68195							
Accident Only	\$8,689,305	\$4,322,707	\$1,337,513	0	30,742	0	30,742
Accidental Death & Dismemberment	\$56,255	\$101,993	\$0	9	3,915	0	3,915
Disability Income	\$42,782,150	\$112,694,251	\$6,573,554	34	38,712	0	38,712
Hospital Indemnity	\$60,090	\$0	\$0	0	342	0	342
Limited Benefit	\$4,980,951	\$4,054,976	\$760,540	18	16,778	0	16,778
Long Term Care	\$6,247,267	\$1,370,428	\$0	0	6,130	0	6,130
<b>TOTAL</b>	<b>\$62,816,018</b>	<b>\$122,544,355</b>	<b>\$8,671,607</b>	<b>61</b>	<b>96,619</b>	<b>0</b>	<b>96,619</b>

## PRUDENTIAL INSURANCE COMPANY OF AMERICA (THE)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68241							
Accidental Death & Dismemberment	\$7,103,555	\$6,599,598	\$246,220	111	128,390	0	128,390
Dental	\$1,219,437	\$1,136,293	\$363,705	42	1,972	2,235	4,207
Disability Income	\$54,101,605	\$61,684,711	\$4,782,681	347	160,132	0	160,132
Guarantee Issue	\$672,114	\$1,202,418	\$0	0	534	97	631
Hospital Indemnity	\$1,612	\$381	\$0	0	36	2	38
Long Term Care	\$15,932,094	\$6,830,724	\$1,659,539	3,552	3,647	0	3,647
Medicare Supplement	\$1,427	\$46,744	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$79,031,844</b>	<b>\$77,500,869</b>	<b>\$7,052,145</b>	<b>4,052</b>	<b>294,713</b>	<b>0</b>	<b>297,047</b>

## PURITAN LIFE INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
71390							
Medicare Supplement	\$46,953	\$37,166	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$46,953</b>	<b>\$37,166</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### PYRAMID LIFE INSURANCE COMPANY (THE)

NAIC Company Code 68284	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Dental	\$5,486	\$1,570	\$0	0	18	0	18
Disability Income	\$46	\$0	\$0	0	1	0	1
Hospital Indemnity	\$89	\$0	\$0	0	6	0	6
Individually Underwritten	\$172,188	\$114,422	\$0	0	11	7	18
Limited Benefit	\$110,321	\$70,999	\$0	0	243	102	345
Long Term Care	\$259,069	\$729,729	\$0	0	119	69	188
Medicare Supplement	\$1,575,019	\$1,499,352	\$0	0	474	0	474
TOTAL	\$2,122,218	\$2,416,072	\$0	0	872	0	1,050

### OBE INSURANCE CORPORATION

NAIC Company Code 39217	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$1,288,064	\$1,617,264	\$1,288,064	377	131,950	0	131,950
Excess/Stop Loss	\$1,352,539	\$497,689	\$1,352,539	5	807	431	1,238
TOTAL	\$2,640,603	\$2,114,953	\$2,640,603	382	132,757	0	133,188

### QCC INSURANCE COMPANY

NAIC Company Code 93688	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Out-of-State 51+ Member Groups	\$30,864,634	\$20,317,765	\$0	492	3,084	2,559	5,643
TOTAL	\$30,864,634	\$20,317,765	\$0	492	3,084	2,559	5,643

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## RELIABLE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68357							
Accidental Death & Dismemberment	\$281	\$0	\$0	0	2	0	2
Limited Benefit	\$20	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$301</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>2</b>

## RELIANCE STANDARD LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68381							
Accident Only	\$10,804	\$0	\$112	60	60	0	60
Accidental Death & Dismemberment	\$929,279	\$193,736	\$329,408	82	44,507	0	44,507
Dental	\$10,814,535	\$7,295,646	\$4,915,230	424	22,275	0	22,275
Disability Income	\$33,108,775	\$32,712,307	\$14,175,134	972	105,734	0	105,734
Limited Benefit	\$3,733,544	\$1,052,073	\$424,625	80	80	0	80
Student	\$2,253,259	\$1,014,096	\$2,253,259	70	50,500	0	50,500
Travel	\$111,745	\$0	\$500	28	6,265	0	6,265
Vision	\$432,381	\$254,540	\$155,592	85	4,435	0	4,435
<b>TOTAL</b>	<b>\$51,394,322</b>	<b>\$42,522,398</b>	<b>\$22,253,860</b>	<b>1,801</b>	<b>233,856</b>	<b>0</b>	<b>233,856</b>

## RELIASTAR LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
67105							
Accident Only	\$529,825	\$22,015	\$121,329	39	5,666	7,336	13,002
Disability Income	\$4,695,365	\$4,025,371	\$305,043	96	6,450	0	6,450
Excess/Stop Loss	\$26,967,236	\$12,113,577	\$7,554,788	264	52,520	10,320	62,840
Limited Benefit	\$545,554	\$128,065	\$96,004	0	1,534	132	1,666
<b>TOTAL</b>	<b>\$32,737,980</b>	<b>\$16,289,028</b>	<b>\$8,077,164</b>	<b>399</b>	<b>66,170</b>	<b>7,336</b>	<b>83,958</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## RELIASTAR LIFE INSURANCE COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61360							
Accident Only	(\$87)	\$0	\$207	1	1	0	1
Disability Income	\$20,757	\$115,593	\$0	2	110	0	110
Excess/Stop Loss	\$1,062,640	\$0	\$85,958	23	3,270	234	3,504
Hospital Indemnity	\$152	(\$2,420)	\$0	0	2	0	2
Limited Benefit	\$216,807	\$451,474	\$0	0	271	220	491
<b>TOTAL</b>	<b>\$1,300,269</b>	<b>\$564,647</b>	<b>\$86,165</b>	<b>26</b>	<b>3,654</b>	<b>0</b>	<b>4,108</b>

## RENAISSANCE LIFE & HEALTH INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61700							
Dental	\$3,466,744	\$2,958,914	\$201,124	56	6,650	2,158	8,808
<b>TOTAL</b>	<b>\$3,466,744</b>	<b>\$2,958,914</b>	<b>\$201,124</b>	<b>56</b>	<b>6,650</b>	<b>2,158</b>	<b>8,808</b>

## RESCUECARE

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Other Prepaid Health Services	\$30,744	\$7,539	\$558	0	663	449	1,112
<b>TOTAL</b>	<b>\$30,744</b>	<b>\$7,539</b>	<b>\$558</b>	<b>0</b>	<b>663</b>	<b>449</b>	<b>1,112</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### RESERVE NATIONAL INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68462							
Accident Only	\$4,119	\$0	\$0	0	32	8	40
Hospital Indemnity	\$6,268	\$1,901	\$0	0	6	2	8
Individually Underwritten	\$104,319	\$15,242	\$0	0	22	4	26
Limited Benefit	\$1,829	\$0	\$0	0	34	4	38
Medicare Supplement	\$560,393	\$546,439	\$0	0	181	0	181
Out-of-State Individually Underwritten	\$7,111	(\$2)	\$0	1	5	0	5
Short Term Care	\$11,812	\$2,414	\$0	0	19	1	20
<b>TOTAL</b>	<b>\$695,851</b>	<b>\$565,994</b>	<b>\$0</b>	<b>1</b>	<b>299</b>	<b>8</b>	<b>318</b>

### RIVERSOURCE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
65005							
Disability Income	\$8,583,865	\$3,476,977	\$330,657	0	6,667	0	6,667
Long Term Care	\$11,254,684	\$9,172,332	\$0	0	8,186	0	8,186
<b>TOTAL</b>	<b>\$19,838,549</b>	<b>\$12,649,309</b>	<b>\$330,657</b>	<b>0</b>	<b>14,853</b>	<b>0</b>	<b>14,853</b>

### ROYAL NEIGHBORS OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
57657							
Medicare Supplement	\$359,293	\$227,338	\$0	0	119	0	119
<b>TOTAL</b>	<b>\$359,293</b>	<b>\$227,338</b>	<b>\$0</b>	<b>0</b>	<b>119</b>	<b>0</b>	<b>119</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## S.USA LIFE INSURANCE COMPANY, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60183							
Accidental Death & Dismemberment	\$10,607	\$0	\$0	130	130	0	130
<b>TOTAL</b>	<b>\$10,607</b>	<b>\$0</b>	<b>\$0</b>	<b>130</b>	<b>130</b>	<b>0</b>	<b>130</b>

## SAFEGUARD HEALTH PLANS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
52009							
Dental	\$19,551,062	\$14,899,844	\$1,427,027	883	86,843	72,348	159,191
<b>TOTAL</b>	<b>\$19,551,062</b>	<b>\$14,899,844</b>	<b>\$1,427,027</b>	<b>883</b>	<b>86,843</b>	<b>72,348</b>	<b>159,191</b>

## SAFEHEALTH LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
79014							
Vision	\$861,653	\$386,747	\$138,075	144	21,717	14,345	36,062
<b>TOTAL</b>	<b>\$861,653</b>	<b>\$386,747</b>	<b>\$138,075</b>	<b>144</b>	<b>21,717</b>	<b>14,345</b>	<b>36,062</b>

## SAGICOR LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60445							
Long Term Care	\$1,761	\$0	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$1,761</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>3</b>

## SEARS LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69914							
Accident Only	\$675,478	\$312,400	\$0	2	7,047	4,936	11,983
Hospital Indemnity	\$13,037	\$14,138	\$0	1	54	4	58
<b>TOTAL</b>	<b>\$688,515</b>	<b>\$326,538</b>	<b>\$0</b>	<b>3</b>	<b>7,101</b>	<b>4,936</b>	<b>12,041</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### SECURIAN LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
93742							
Accident Only	\$25,488	\$1,114	\$498	0	453	0	453
Accidental Death & Dismemberment	\$3,114	\$0	\$0	0	18	0	18
Dental	\$50,406	\$27,523	\$2,495	14	66	57	123
Disability Income	\$1	\$0	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$79,009</b>	<b>\$28,637</b>	<b>\$2,993</b>	<b>14</b>	<b>537</b>	<b>0</b>	<b>594</b>

### SECURITY LIFE INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68721							
Dental	\$277,649	\$221,055	\$622	0	393	529	922
Disability Income	\$4,778	\$66,467	\$0	0	12	0	12
Limited Benefit	\$1,692	\$39,057	\$0	0	6	0	6
Vision	\$7,251	\$17,294	\$0	10	149	212	361
<b>TOTAL</b>	<b>\$291,370</b>	<b>\$343,873</b>	<b>\$622</b>	<b>10</b>	<b>560</b>	<b>529</b>	<b>1,301</b>

### SECURITY LIFE OF DENVER INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68713							
Accident Only	\$390	\$0	\$0	0	30	3	33
Disability Income	\$1,953	\$0	\$0	0	11	0	11
Hospital Indemnity	\$2,146	\$0	\$0	0	87	5	92
Limited Benefit	\$3,046	\$0	\$0	0	25	1	26
<b>TOTAL</b>	<b>\$7,535</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>153</b>	<b>3</b>	<b>162</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### SECURITY MUTUAL LIFE INSURANCE COMPANY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68772							
Accidental Death & Dismemberment	\$6,800	\$0	\$0	5	243	0	243
Disability Income	\$52,643	\$321,007	\$0	2	25	0	25
Hospital Indemnity	\$138	\$0	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$829	\$0	\$0	0	0	0	0
Student	(\$4,209)	\$79,724	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$56,201</b>	<b>\$400,731</b>	<b>\$0</b>	<b>7</b>	<b>268</b>	<b>0</b>	<b>268</b>

### SECURITY NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69485							
Accident Only	\$4,106	\$524	\$0	0	297	0	297
Accidental Death & Dismemberment	\$47	\$0	\$0	0	8	0	8
Limited Benefit	\$6,655	\$0	\$0	0	22	0	22
<b>TOTAL</b>	<b>\$10,808</b>	<b>\$524</b>	<b>\$0</b>	<b>0</b>	<b>327</b>	<b>0</b>	<b>327</b>

### SENIOR HEALTH INSURANCE COMPANY OF PENNSYLVANIA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
76325							
Long Term Care	\$17,070,372	\$45,341,615	\$0	0	12,664	0	12,664
<b>TOTAL</b>	<b>\$17,070,372</b>	<b>\$45,341,615</b>	<b>\$0</b>	<b>0</b>	<b>12,664</b>	<b>0</b>	<b>12,664</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### SENTRY INSURANCE A MUTUAL COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
24988							
Accident Only	\$10,432	\$3,417	\$0	29	2,347	0	2,347
Disability Income	\$924	\$2,529	\$0	1	1	0	1
Hospital Indemnity	\$671	(\$55)	\$0	3	3	0	3
Long Term Care	(\$6,795)	\$60,401	\$0	5	207	0	207
<b>TOTAL</b>	<b>\$5,232</b>	<b>\$66,292</b>	<b>\$0</b>	<b>38</b>	<b>2,558</b>	<b>0</b>	<b>2,558</b>

### SENTRY LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68810							
Accident Only	\$108,172	\$123,822	\$9,566	30	13,416	0	13,416
Dental	\$59,370	\$21,936	\$11,350	16	76	0	76
Disability Income	\$86,486	\$52,671	\$11,396	26	308	0	308
Hospital Indemnity	\$39	(\$29)	\$0	0	1	0	1
Long Term Care	\$921	\$1,173	\$0	6	15	0	15
Out-of-State Conversion	(\$2)	(\$60)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$254,986</b>	<b>\$199,513</b>	<b>\$32,312</b>	<b>78</b>	<b>13,816</b>	<b>0</b>	<b>13,816</b>

### SKYMED INTERNATIONAL (FLORIDA) INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
52038							
Other Prepaid Health Services	\$383,409	\$67,531	\$65,849	0	894	688	1,582
<b>TOTAL</b>	<b>\$383,409</b>	<b>\$67,531</b>	<b>\$65,849</b>	<b>0</b>	<b>894</b>	<b>688</b>	<b>1,582</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### SOLSTICE BENEFITS, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
12341							
Administrative Services Only (ASO)	\$466,375	\$0	\$70,732	0	0	0	0
Dental	\$9,481,920	\$7,439,518	\$873,515	1,051	38,395	26,652	65,047
Vision	\$244,739	\$93,527	\$51,373	247	3,411	2,572	5,983
<b>TOTAL</b>	<b>\$10,193,034</b>	<b>\$7,533,045</b>	<b>\$995,620</b>	<b>1,298</b>	<b>41,806</b>	<b>0</b>	<b>71,030</b>

### SONS OF NORWAY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
57142							
Disability Income	\$6,646	\$0	\$0	0	12	0	12
Limited Benefit	\$494	\$60	\$0	0	8	4	12
<b>TOTAL</b>	<b>\$7,140</b>	<b>\$60</b>	<b>\$0</b>	<b>0</b>	<b>20</b>	<b>0</b>	<b>24</b>

### SOUTHERN FARM BUREAU LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68896							
Disability Income	\$27,960	\$98,181	\$0	0	302	0	302
Hospital Indemnity	\$1,022	\$0	\$0	0	40	8	48
Limited Benefit	\$9,496	\$33,522	\$0	0	665	465	1,130
Long Term Care	\$134,355	\$267,547	\$0	0	699	0	699
<b>TOTAL</b>	<b>\$172,833</b>	<b>\$399,250</b>	<b>\$0</b>	<b>0</b>	<b>1,706</b>	<b>0</b>	<b>2,179</b>

### ST. PAUL FIRE & MARINE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
24767							
Blanket Accident/Sickness	\$0	\$651	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>\$651</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## STANDARD INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
69019							
Accidental Death & Dismemberment	\$3,720,948	\$3,040,807	\$869,658	650	214,771	6,380	221,151
Dental	\$15,248,016	\$11,587,472	\$2,634,942	294	26,216	12,336	38,552
Disability Income	\$53,151,554	\$44,472,351	\$17,776,778	630	122,825	0	122,825
Vision	\$1,392,419	\$970,033	\$472,280	98	11,117	4,972	16,089
<b>TOTAL</b>	<b>\$73,512,937</b>	<b>\$60,070,663</b>	<b>\$21,753,658</b>	<b>1,672</b>	<b>374,929</b>	<b>6,380</b>	<b>398,617</b>

## STANDARD LIFE AND ACCIDENT INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
86355							
Accident Only	\$3,247	(\$6,280)	\$0	0	1,881	10	1,891
Accidental Death & Dismemberment	\$0	\$4,056	\$0	0	3	0	3
Dental	\$77,068	\$22,791	\$39,782	1	112	96	208
Disability Income	\$338	(\$5)	\$0	0	3	0	3
Hospital Indemnity	\$1,712	\$11,973	\$0	0	64	3	67
Individually Underwritten	\$6,737	\$8,023	\$0	0	9	0	9
Limited Benefit	\$1,930,847	\$1,061,521	\$216,781	62	1,532	1,285	2,817
Long Term Care	\$46,794	(\$3,271)	\$0	0	28	3	31
Medicare Supplement	\$8,261,943	\$6,351,328	\$0	0	2,662	0	2,662
Out-of-State Individually Underwritten	\$121	\$0	\$0	0	0	0	0
Short Term Care	\$11,136	(\$27,405)	\$0	0	32	0	32
<b>TOTAL</b>	<b>\$10,339,943</b>	<b>\$7,422,731</b>	<b>\$256,563</b>	<b>63</b>	<b>6,326</b>	<b>10</b>	<b>7,723</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## STANDARD LIFE AND CASUALTY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
71706							
Accident Only	\$23,773	\$0	\$0	7	400	0	400
Hospital Indemnity	\$2,934	\$5,404	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$26,707</b>	<b>\$5,404</b>	<b>\$0</b>	<b>7</b>	<b>403</b>	<b>0</b>	<b>403</b>

## STANDARD SECURITY LIFE INSURANCE CO. OF NEW YORK

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
69078							
Blanket Accident/Sickness	\$9,877	\$286	\$9,877	0	0	0	0
Dental	\$72,198	\$37,412	\$72,198	1	112	0	112
Disability Income	\$6,614	\$70,595	\$0	0	22	16	38
Excess/Stop Loss	\$2,030,294	\$1,505,179	\$2,030,294	4	2,044	1,457	3,501
Hospital Indemnity	\$15,950	(\$6,426)	\$0	0	147	0	147
Individually Underwritten	\$1,649,955	\$1,295,372	\$1,649,955	0	322	230	552
Limited Benefit	\$1,098,171	\$395,687	\$1,098,171	5	680	485	1,165
Short Term Major Medical	\$1,264,394	\$732,861	\$1,264,394	0	821	585	1,406
<b>TOTAL</b>	<b>\$6,147,453</b>	<b>\$4,030,966</b>	<b>\$6,124,889</b>	<b>10</b>	<b>4,148</b>	<b>0</b>	<b>6,921</b>

## STARMOUNT LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
68985							
Accident Only	\$17,770	\$0	\$0	0	199	0	199
Dental	\$72,662	\$7,966	\$56,788	12	521	226	747
Vision	\$26,875	\$2,946	\$11,851	5	347	160	507
<b>TOTAL</b>	<b>\$117,307</b>	<b>\$10,912</b>	<b>\$68,639</b>	<b>17</b>	<b>1,067</b>	<b>0</b>	<b>1,453</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## STARNET INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
40045							
Accident Only	\$57,297	\$198,487	\$57,297	3	8,059	0	8,059
<b>TOTAL</b>	<b>\$57,297</b>	<b>\$198,487</b>	<b>\$57,297</b>	<b>3</b>	<b>8,059</b>	<b>0</b>	<b>8,059</b>

## STARR INDEMNITY & LIABILITY COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
38318							
Accidental Death & Dismemberment	\$196,436	\$51,598	\$38,420	0	2,153	110	2,263
Blanket Accident/Sickness	\$151,161	\$173,781	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$336,528	\$330,340	\$0	0	0	0	0
Out-of-State Short Term Major Medical	\$2,428,188	\$1,075,677	\$19,689	1	667	219	886
<b>TOTAL</b>	<b>\$3,112,313</b>	<b>\$1,631,396</b>	<b>\$58,109</b>	<b>1</b>	<b>2,820</b>	<b>110</b>	<b>3,149</b>

## STATE AUTOMOBILE MUTUAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
25135							
Individually Underwritten	\$249	(\$3,227)	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$249</b>	<b>(\$3,227)</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
25178							
Accidental Death & Dismemberment	\$155,499	\$14,988	\$0	2	3,184	4,801	7,985
Conversion	\$48,671	\$69,751	\$0	0	7	0	7
Disability Income	\$5,807,908	\$2,628,075	\$110,003	0	9,891	0	9,891
Guarantee Issue	\$0	(\$1,446)	\$0	0	0	0	0
Hospital Indemnity	\$13,412,895	\$13,260,171	\$726,375	0	56,385	7,878	64,263
Individually Underwritten	\$3,605,796	\$3,408,468	\$0	0	422	94	516
Long Term Care	\$590,111	\$7,419,608	\$213,579	0	6,806	0	6,806
Medicare Supplement	\$15,564,276	\$14,603,590	\$317,036	0	5,463	8	5,471
Out-of-State 51+ Member Groups	\$19,106,338	\$18,081,393	\$0	1	1,703	1,698	3,401
<b>TOTAL</b>	<b>\$58,291,494</b>	<b>\$59,484,598</b>	<b>\$1,366,993</b>	<b>3</b>	<b>83,861</b>	<b>4,801</b>	<b>98,340</b>

### STATE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69116							
Disability Income	\$12,768	\$22,246	\$0	0	26	0	26
Individually Underwritten	\$3,231	\$34,854	\$0	0	5	0	5
Long Term Care	\$840,385	\$1,042,181	\$0	0	272	0	272
<b>TOTAL</b>	<b>\$856,384</b>	<b>\$1,099,281</b>	<b>\$0</b>	<b>0</b>	<b>303</b>	<b>0</b>	<b>303</b>

### STATE MUTUAL INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69132							
Long Term Care	\$3,864	\$0	\$0	0	4	0	4
Medicare Supplement	\$3,153,648	\$2,518,046	\$622	0	1,157	0	1,157
<b>TOTAL</b>	<b>\$3,157,512</b>	<b>\$2,518,046</b>	<b>\$622</b>	<b>0</b>	<b>1,161</b>	<b>0</b>	<b>1,161</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## STERLING INVESTORS LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
89184							
Medicare Supplement	\$815,010	\$523,699	\$122,252	0	292	0	292
Short Term Care	\$4,694	\$499	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$819,704</b>	<b>\$524,198</b>	<b>\$122,252</b>	<b>0</b>	<b>293</b>	<b>0</b>	<b>293</b>

## STERLING LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
77399							
Long Term Care	\$764	\$0	\$0	0	1	0	1
Medicare Supplement	\$406,692	\$231,833	\$17,655	221	221	0	221
<b>TOTAL</b>	<b>\$407,456</b>	<b>\$231,833</b>	<b>\$17,655</b>	<b>221</b>	<b>222</b>	<b>0</b>	<b>222</b>

## STONEBRIDGE LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
65021							
Accident Only	\$1,846,988	\$405,772	\$43,235	676	14,939	12,948	27,887
Accidental Death & Dismemberment	\$13,153,989	\$5,099,565	\$793,034	0	110,955	126,989	237,944
Dental	\$1,426,073	\$0	\$232,813	0	3,248	551	3,799
Disability Income	\$208,183	\$0	\$0	0	2,919	939	3,858
Excess/Stop Loss	\$161,345	\$257,286	\$161,345	1	40	52	92
Hospital Indemnity	\$258,339	\$261,320	\$0	105	1,761	182	1,943
Limited Benefit	\$90,589	\$54,938	\$0	39	776	328	1,104
Long Term Care	\$247,692	\$141,876	\$0	0	158	0	158
<b>TOTAL</b>	<b>\$17,393,198</b>	<b>\$6,220,757</b>	<b>\$1,230,427</b>	<b>821</b>	<b>134,796</b>	<b>12,948</b>	<b>276,785</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## SUN LIFE AND HEALTH INSURANCE COMPANY (U.S.)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80926							
Dental	\$5,723,050	\$3,474,293	\$144,502	259	7,554	5,754	13,308
Disability Income	\$1,983,925	\$1,778,996	\$184,534	351	5,850	0	5,850
<b>TOTAL</b>	<b>\$7,706,975</b>	<b>\$5,253,289</b>	<b>\$329,036</b>	<b>610</b>	<b>13,404</b>	<b>5,754</b>	<b>19,158</b>

## SUN LIFE ASSURANCE COMPANY OF CANADA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80802							
Dental	\$2,747,002	\$2,013,553	\$926,006	92	5,340	4,991	10,331
Disability Income	\$30,881,719	\$16,466,580	\$2,861,489	672	143,705	0	143,705
Excess/Stop Loss	\$32,845,090	\$21,858,357	\$2,407,389	63	98,601	114,519	213,120
<b>TOTAL</b>	<b>\$66,473,811</b>	<b>\$40,338,490</b>	<b>\$6,194,884</b>	<b>827</b>	<b>247,646</b>	<b>4,991</b>	<b>367,156</b>

## SURETY LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69310							
Disability Income	\$12,091	\$32,580	\$0	14	14	0	14
<b>TOTAL</b>	<b>\$12,091</b>	<b>\$32,580</b>	<b>\$0</b>	<b>14</b>	<b>14</b>	<b>0</b>	<b>14</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### SYMETRA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
68608							
Accidental Death & Dismemberment	\$38,928	\$5,456	\$27,679	32	8,327	0	8,327
Conversion	\$2,208	\$22,139	\$0	0	2	0	2
Dental	\$207,947	\$182,235	\$9,013	1	280	126	406
Disability Income	\$432,189	\$141,996	\$266,341	16	3,206	0	3,206
Excess/Stop Loss	\$50,735,174	\$38,867,897	\$4,386,422	97	164,214	169,305	333,519
Hospital Indemnity	\$497,514	\$825,201	\$36,324	30	311	321	632
<b>TOTAL</b>	<b>\$51,913,960</b>	<b>\$40,044,924</b>	<b>\$4,725,779</b>	<b>176</b>	<b>176,340</b>	<b>0</b>	<b>346,092</b>

### TEACHERS INS. & ANNUITY ASSOCIATION OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69345							
Disability Income	\$0	\$25,116	\$0	0	0	0	0
Long Term Care	\$949,632	\$878,401	\$0	0	504	0	504
<b>TOTAL</b>	<b>\$949,632</b>	<b>\$903,517</b>	<b>\$0</b>	<b>0</b>	<b>504</b>	<b>0</b>	<b>504</b>

### THE PUBLIC HEALTH TRUST OF DADE COUNTY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95126							
Conversion	\$332,874	\$2,134,147	\$0	0	31	10	41
<b>TOTAL</b>	<b>\$332,874</b>	<b>\$2,134,147</b>	<b>\$0</b>	<b>0</b>	<b>31</b>	<b>10</b>	<b>41</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### THRIVENT FINANCIAL FOR LUTHERANS

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56014							
Accident Only	\$35	\$0	\$0	0	3	0	3
Disability Income	\$1,029,270	\$999,904	\$12,725	0	1,352	4	1,356
Hospital Indemnity	\$9,586	\$3,089	\$0	0	69	14	83
Individually Underwritten	\$552,223	\$577,374	\$0	0	25	5	30
Long Term Care	\$5,289,251	\$7,642,996	\$0	0	2,877	488	3,365
Medicare Supplement	\$528,133	\$258,802	\$0	0	138	0	138
<b>TOTAL</b>	<b>\$7,408,498</b>	<b>\$9,482,165</b>	<b>\$12,725</b>	<b>0</b>	<b>4,464</b>	<b>0</b>	<b>4,975</b>

### TIAA-CREF LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
60142							
Long Term Care	\$856,301	\$836,727	\$0	0	486	0	486
<b>TOTAL</b>	<b>\$856,301</b>	<b>\$836,727</b>	<b>\$0</b>	<b>0</b>	<b>486</b>	<b>0</b>	<b>486</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## TIME INSURANCE COMPANY

NAIC Company Code

69477

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
2 - 5 Member Groups	\$130,407	\$37,881	\$0	5	11	10	21
Accident Only	\$857,415	\$174,533	\$694,821	0	3,722	2,314	6,036
Accidental Death & Dismemberment	\$54	(\$3)	\$0	2	4	0	4
Conversion	\$28,733	\$13,975	\$0	0	4	1	5
Dental	\$1,170,765	\$481,363	\$1,006,890	0	6,291	2,376	8,667
Disability Income	\$28,947	\$21,867	\$231	0	40	2	42
Hospital Indemnity	\$11,149,486	\$4,532,539	\$0	0	6,258	1,718	7,976
Individually Underwritten	\$175,292	\$609,537	\$0	0	82	1	83
Limited Benefit	\$11,779	\$1,315	\$0	0	27	23	50
Long Term Care	\$11,422,521	\$31,789,562	\$0	0	6,932	0	6,932
Out-of-State Guarantee Issue	\$291,039	\$181,860	\$124,753	0	66	35	101
Out-of-State Individually Underwritten	\$37,694,751	\$23,554,161	\$16,157,730	3	8,484	4,569	13,053
Out-of-State Short Term Major Medical	\$1,246,567	\$529,977	\$0	1	387	80	467
<b>TOTAL</b>	<b>\$64,207,756</b>	<b>\$61,928,567</b>	<b>\$17,984,425</b>	<b>11</b>	<b>32,308</b>	<b>10</b>	<b>43,437</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## TRANSAMERICA FINANCIAL LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70688							
Accident Only	\$42,995	\$5,431	\$0	0	134	44	178
Accidental Death & Dismemberment	\$1,809,132	\$462,584	\$0	47	3,219	3,617	6,836
Champus/Tricare Supplement	\$23,335	\$6,881	\$0	0	4	2	6
Disability Income	\$30,943	\$19,794	\$0	0	67	31	98
Hospital Indemnity	\$359,013	\$467,972	\$0	15	403	72	475
Limited Benefit	\$450,344	\$395,887	\$0	6	40	8	48
Long Term Care	\$7,243	\$18,377	\$0	0	5	0	5
Medicare Supplement	\$119,669	\$116,443	\$0	0	7	0	7
<b>TOTAL</b>	<b>\$2,842,674</b>	<b>\$1,493,369</b>	<b>\$0</b>	<b>68</b>	<b>3,879</b>	<b>44</b>	<b>7,653</b>

## TRANSAMERICA LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
86231							
Accident Only	\$636,646	\$103,127	\$468,968	206	3,773	4,754	8,527
Accidental Death & Dismemberment	\$520,109	\$40,570	\$57	7	2,464	1,159	3,623
Dental	\$168,988	\$11,729	\$125,311	26	506	638	1,144
Disability Income	\$237,468	\$106,397	\$118,881	34	595	631	1,226
Excess/Stop Loss	\$123,210	\$0	\$123,210	0	0	0	0
Hospital Indemnity	\$1,803,468	\$785,626	\$1,337,047	66	725	668	1,393
Individually Underwritten	\$11,079	\$43,203	\$0	0	27	0	27
Limited Benefit	\$3,575,474	\$1,238,087	\$2,393,425	797	11,495	14,495	25,990
Long Term Care	\$20,514,934	\$18,127,659	\$1,411,248	0	11,876	84	11,960
Medicare Supplement	\$13,540,174	\$10,281,269	\$828,078	82	5,540	0	5,540
Out-of-State Self-Employed or Sole Proprietor	\$0	\$7,762	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$41,131,550</b>	<b>\$30,745,429</b>	<b>\$6,806,225</b>	<b>1,218</b>	<b>37,001</b>	<b>4,754</b>	<b>59,430</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### TRANS-OCEANIC LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69523							
Limited Benefit	\$4,945	\$0	\$0	0	65	0	65
<b>TOTAL</b>	<b>\$4,945</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>65</b>	<b>0</b>	<b>65</b>

### TRAVELERS INDEMNITY COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
25658							
Blanket Accident/Sickness	\$39	\$0	\$0	4	4	0	4
<b>TOTAL</b>	<b>\$39</b>	<b>\$0</b>	<b>\$0</b>	<b>4</b>	<b>4</b>	<b>0</b>	<b>4</b>

### TRAVELERS INDEMNITY COMPANY OF CONNECTICUT

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
25682							
Blanket Accident/Sickness	\$0	(\$225,835)	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$0</b>	<b>(\$225,835)</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

### TRAVELERS PROTECTIVE ASSOCIATION OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56006							
Accident Only	\$1,331	\$6,360	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$1,331</b>	<b>\$6,360</b>	<b>\$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### TRUSTMARK INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
61425							
Accident Only	\$2,596,647	\$740,828	\$1,577,047	2	9,273	8,555	17,828
Conversion	\$141,485	\$14,850	\$0	0	17	3	20
Dental	\$0	\$204	\$0	0	0	0	0
Disability Income	\$2,746,286	\$4,196,942	\$334,222	4	4,117	0	4,117
Excess/Stop Loss	\$505,280	\$99,555	\$0	1	301	141	442
Hospital Indemnity	\$24,242	\$97,559	\$0	0	69	13	82
Individually Underwritten	\$611,895	\$622,725	\$0	0	76	19	95
Limited Benefit	\$10,570,350	\$2,328,980	\$1,060,145	11	21,017	7,246	28,263
Long Term Care	\$9,474	\$0	\$0	0	7	0	7
Medicare Supplement	\$29,813	\$30,922	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$191,342	\$178,526	\$0	8	8	1	9
Self-Employed or Sole Proprietor	\$12,995	\$0	\$0	1	1	0	1
<b>TOTAL</b>	<b>\$17,439,809</b>	<b>\$8,311,091</b>	<b>\$2,971,414</b>	<b>27</b>	<b>34,886</b>	<b>8,555</b>	<b>50,864</b>

### TRUSTMARK LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62863							
Accidental Death & Dismemberment	\$14,545	\$22,374	\$0	5	1,426	0	1,426
Dental	\$3,991	\$11,771	\$0	1	2	0	2
Disability Income	\$713	\$91,757	\$0	1	2	0	2
Excess/Stop Loss	\$953,246	\$681,612	\$804,553	29	500	378	878
Out-of-State 2 - 5 Member Groups	\$0	\$868,345	\$0	0	0	0	0
<b>TOTAL</b>	<b>\$972,495</b>	<b>\$1,675,859</b>	<b>\$804,553</b>	<b>36</b>	<b>1,930</b>	<b>0</b>	<b>2,308</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## U.S. SPECIALTY INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
29599							
Accident Only	\$1,135,282	\$933,570	\$141,517	19	491	0	491
<b>TOTAL</b>	<b>\$1,135,282</b>	<b>\$933,570</b>	<b>\$141,517</b>	<b>19</b>	<b>491</b>	<b>0</b>	<b>491</b>

## ULLICO CASUALTY COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
37893							
Conversion	\$108,624	\$408,375	\$0	0	9	1	10
<b>TOTAL</b>	<b>\$108,624</b>	<b>\$408,375</b>	<b>\$0</b>	<b>0</b>	<b>9</b>	<b>1</b>	<b>10</b>

## UNICARE LIFE & HEALTH INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
80314							
Accidental Death & Dismemberment	\$99,142	\$71,873	\$0	2	5,195	0	5,195
Dental	\$9,195	\$7,899	\$0	28	48	37	85
<b>TOTAL</b>	<b>\$108,337</b>	<b>\$79,772</b>	<b>\$0</b>	<b>30</b>	<b>5,243</b>	<b>0</b>	<b>5,280</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### UNIFIED LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
11121							
Accident Only	\$19,033	\$0	\$0	0	461	0	461
Disability Income	\$19,920	\$7,524	\$0	0	172	0	172
Hospital Indemnity	\$9,472	\$10,967	\$0	0	44	0	44
Individually Underwritten	\$39,696	\$91,762	\$0	0	42	5	47
Limited Benefit	\$324,186	\$198,390	\$315,661	0	424	97	521
Medicare Supplement	\$186,680	\$183,545	\$0	0	96	0	96
Short Term Care	\$24,716	\$122,538	\$0	0	34	5	39
<b>TOTAL</b>	<b>\$623,703</b>	<b>\$614,726</b>	<b>\$315,661</b>	<b>0</b>	<b>1,273</b>	<b>0</b>	<b>1,380</b>

### UNIMERICA INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
91529							
Disability Income	\$0	\$43,219	\$0	0	0	0	0
Excess/Stop Loss	\$4,054,814	\$2,419,398	\$1,704,704	41	21,660	27,205	48,865
<b>TOTAL</b>	<b>\$4,054,814</b>	<b>\$2,462,617</b>	<b>\$1,704,704</b>	<b>41</b>	<b>21,660</b>	<b>0</b>	<b>48,865</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### UNION BANKERS INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69701							
Accident Only	\$24	\$0	\$0	0	2	0	2
Disability Income	\$1,946	\$0	\$0	0	15	0	15
Hospital Indemnity	\$11,588	\$7,406	\$0	0	39	0	39
Individually Underwritten	\$48,958	\$15,493	\$0	0	20	0	20
Limited Benefit	\$1,655	\$374	\$0	0	55	0	55
Long Term Care	\$38,329	\$57,631	\$0	0	50	0	50
Medicare Supplement	\$907,980	\$559,838	\$0	0	343	0	343
TOTAL	\$1,010,480	\$640,742	\$0	0	524	0	524

### UNION CENTRAL LIFE INSURANCE COMPANY (THE)

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
80837							
Disability Income	\$2,950,806	\$3,044,469	\$64,869	0	1,505	0	1,505
TOTAL	\$2,950,806	\$3,044,469	\$64,869	0	1,505	0	1,505

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### UNION FIDELITY LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62596							
Accident Only	\$338,852	\$575,094	\$0	0	4,617	2,797	7,414
Accidental Death & Dismemberment	\$209,325	\$47,317	\$0	0	2,531	2,821	5,352
Champus/Tricare Supplement	\$2,276	\$5,790	\$0	0	3	0	3
Disability Income	\$151	\$42,708	\$0	0	1	0	1
Hospital Indemnity	\$77,792	\$57,160	\$0	0	378	80	458
Individually Underwritten	\$2,488	\$0	\$0	0	3	0	3
Limited Benefit	\$700,012	\$333,355	\$0	0	3,723	1,418	5,141
Medicare Supplement	\$136,780	\$86,648	\$0	0	62	0	62
Short Term Care	\$2,057	\$0	\$0	0	10	0	10
<b>TOTAL</b>	<b>\$1,469,733</b>	<b>\$1,148,072</b>	<b>\$0</b>	<b>0</b>	<b>11,328</b>	<b>2,797</b>	<b>18,444</b>

### UNION LABOR LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69744							
Accident Only	\$1,876	(\$102)	\$0	0	0	0	0
Accidental Death & Dismemberment	\$98,580	\$8,513	\$20,589	85	10,506	747	11,253
Conversion	\$51,056	\$345,500	\$0	0	30	0	30
Dental	\$2,862	\$418	\$0	3	11	15	26
Disability Income	\$1,823	(\$94)	\$1,094	1	7	0	7
Excess/Stop Loss	\$188,454	\$190,763	\$0	1	66	99	165
Hospital Indemnity	\$43,494	\$38,826	\$1,142	0	143	35	178
Limited Benefit	\$11,081	\$11,042	\$0	1	858	186	1,044
Long Term Care	\$247,849	(\$143,695)	\$0	0	81	0	81
Medicare Supplement	\$37,754	\$65,270	\$0	5	26	0	26
<b>TOTAL</b>	<b>\$684,829</b>	<b>\$516,441</b>	<b>\$22,825</b>	<b>96</b>	<b>11,728</b>	<b>0</b>	<b>12,810</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNION NATIONAL LIFE INSURANCE COMPANY

NAIC Company Code

69779

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accidental Death & Dismemberment	\$76	\$0	\$0	0	3	0	3
Disability Income	\$327	\$0	\$0	0	3	0	3
Hospital Indemnity	\$687	\$0	\$0	0	3	0	3
Limited Benefit	\$213	\$0	\$0	0	2	0	2
<b>TOTAL</b>	<b>\$1,303</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>11</b>	<b>0</b>	<b>11</b>

## UNION SECURITY INSURANCE COMPANY

NAIC Company Code

70408

	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
Accident Only	\$40,279	\$14,217	\$57,440	10	561	123	684
Accidental Death & Dismemberment	\$650,501	(\$11,911)	\$128,154	30	3,458	2,578	6,036
Conversion	\$1,344	\$6,258	\$0	0	1	0	1
Dental	\$35,046,590	\$22,339,866	\$2,477,068	2,149	88,054	82,551	170,605
Disability Income	\$13,615,802	\$7,582,872	\$1,425,858	964	43,678	0	43,678
Hospital Indemnity	\$1,033	\$356	\$0	0	1	0	1
Limited Benefit	\$47,726	\$749	\$54,536	15	521	109	630
Long Term Care	\$9,448,855	\$14,060,716	\$0	0	6,082	0	6,082
Out-of-State Individually Underwritten	\$0	\$4,200	\$0	0	0	0	0
Vision	\$905,223	\$420,036	\$406,441	266	7,389	6,650	14,039
<b>TOTAL</b>	<b>\$59,757,353</b>	<b>\$44,417,359</b>	<b>\$4,549,497</b>	<b>3,434</b>	<b>149,745</b>	<b>123</b>	<b>241,756</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNITED AMERICAN INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
92916							
Disability Income	\$916	\$0	\$0	0	7	0	7
Guarantee Issue	\$27,529	\$2,004	\$0	0	6	0	6
Hospital Indemnity	\$54,779	\$68,493	\$3,542	0	68	15	83
Individually Underwritten	\$9,791,386	\$6,529,252	\$288,985	0	4,983	1,236	6,219
Limited Benefit	\$1,190,728	\$676,775	\$60,321	0	3,419	1,256	4,675
Long Term Care	\$278,789	\$98,822	\$0	0	214	0	214
Medicare Supplement	\$65,904,220	\$43,409,465	\$5,422,133	0	23,688	0	23,688
<b>TOTAL</b>	<b>\$77,248,347</b>	<b>\$50,784,811</b>	<b>\$5,774,981</b>	<b>0</b>	<b>32,385</b>	<b>0</b>	<b>34,892</b>

## UNITED CONCORDIA INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
85766							
Dental	\$16,194,974	\$12,508,714	\$1,772,583	322	31,361	30,020	61,381
Vision	\$1,899	\$1,351	\$1,899	4	23	25	48
<b>TOTAL</b>	<b>\$16,196,873</b>	<b>\$12,510,065</b>	<b>\$1,774,482</b>	<b>326</b>	<b>31,384</b>	<b>30,020</b>	<b>61,429</b>

## UNITED HOME LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
69922							
Limited Benefit	\$130	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$130</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### UNITED INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69930							
Accidental Death & Dismemberment	\$509,390	\$38,066	\$29,189	0	5,981	278	6,259
Disability Income	\$66,015	\$19,738	\$0	0	811	0	811
Hospital Indemnity	\$311,461	\$86,607	\$0	0	2,803	0	2,803
Limited Benefit	\$413,492	\$82,120	\$42,943	0	2,471	1,866	4,337
<b>TOTAL</b>	<b>\$1,300,358</b>	<b>\$226,531</b>	<b>\$72,132</b>	<b>0</b>	<b>12,066</b>	<b>278</b>	<b>14,210</b>

### UNITED OF OMAHA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69868							
Accident Only	\$20,788	\$11,370	\$0	4	10,610	0	10,610
Accidental Death & Dismemberment	\$1,305,551	\$657,468	\$309,062	983	88,982	14,185	103,167
Administrative Services Only (ASO)	\$44,178	\$0	\$10,858	0	0	0	0
Dental	\$4,629,990	\$3,545,596	\$1,081,077	138	7,924	6,945	14,869
Disability Income	\$19,856,426	\$12,521,599	\$3,866,722	1,256	87,597	0	87,597
Excess/Stop Loss	\$0	(\$3,676)	\$0	0	0	0	0
Hospital Indemnity	\$47,590	\$121,703	\$0	0	4	0	4
Limited Benefit	\$971	\$0	\$0	0	60	0	60
Long Term Care	\$1,314,290	\$80,597	\$693,013	0	826	0	826
Medicare Supplement	\$2,939,565	\$2,010,946	\$0	0	1,616	0	1,616
<b>TOTAL</b>	<b>\$30,159,349</b>	<b>\$18,945,603</b>	<b>\$5,960,732</b>	<b>2,381</b>	<b>197,619</b>	<b>0</b>	<b>218,749</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment

## List of Companies and all Health Business

### UNITED SECURITY ASSURANCE COMPANY OF PENNSYLVANIA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
42129							
Hospital Indemnity	\$37,374	\$0	\$0	0	13	0	13
Long Term Care	\$3,262,850	\$1,323,545	\$287,981	0	1,259	0	1,259
Short Term Care	\$148,083	\$33,928	\$0	0	187	0	187
<b>TOTAL</b>	<b>\$3,448,307</b>	<b>\$1,357,473</b>	<b>\$287,981</b>	<b>0</b>	<b>1,459</b>	<b>0</b>	<b>1,459</b>

### UNITED STATES FIRE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
21113							
Accident Only	\$1,511,625	\$1,378,801	\$990,265	0	62,641	0	62,641
Dental	\$18,821	\$11,355	\$0	3	386	0	386
Excess/Stop Loss	\$120,026	\$211,285	\$0	3	3,805	0	3,805
Hospital Indemnity	\$6,684,048	\$4,963,384	\$5,289,087	0	84,346	0	84,346
<b>TOTAL</b>	<b>\$8,334,520</b>	<b>\$6,564,825</b>	<b>\$6,279,352</b>	<b>6</b>	<b>151,178</b>	<b>0</b>	<b>151,178</b>

### UNITED STATES LETTER CARRIERS MUTUAL BENEFIT ASSOCIATION

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
56456							
Disability Income	\$140,397	\$67,058	\$0	0	274	0	274
Hospital Indemnity	\$41,722	\$19,271	\$0	0	341	184	525
<b>TOTAL</b>	<b>\$182,119</b>	<b>\$86,329</b>	<b>\$0</b>	<b>0</b>	<b>615</b>	<b>0</b>	<b>799</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNITED STATES LIFE INSURANCE COMPANY IN THE CITY OF NEW YORK

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
70106							
Accident Only	\$878	\$0	\$0	6	6	0	6
Accidental Death & Dismemberment	\$2,793,927	\$1,719,247	\$0	98	15	52,913	52,928
Dental	\$738,921	\$857,090	\$0	26	2,192	2,004	4,196
Disability Income	\$6,591,335	\$5,532,024	\$0	76	9,311	21	9,332
Hospital Indemnity	\$1,743,998	\$577,071	\$0	17	17,958	16,151	34,109
Limited Benefit	(\$9)	\$0	\$0	1	0	0	0
Long Term Care	\$66,046	\$183,469	\$0	24	28	0	28
Out-of-State 51+ Member Groups	\$7,788,612	\$7,353,611	\$0	35	9,306	5,563	14,869
<b>TOTAL</b>	<b>\$19,723,708</b>	<b>\$16,222,512</b>	<b>\$0</b>	<b>283</b>	<b>38,816</b>	<b>0</b>	<b>115,468</b>

## UNITED TEACHER ASSOCIATES INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
63479							
Accident Only	\$613	\$0	\$0	0	5	3	8
Dental	\$2,398	\$0	\$0	0	1	0	1
Disability Income	\$136,320	\$240,047	\$0	0	351	0	351
Hospital Indemnity	\$64,205	\$59,241	\$53,457	0	94	45	139
Individually Underwritten	\$80,936	\$411,967	\$0	0	107	17	124
Limited Benefit	\$367,015	\$344,492	\$181,033	0	1,310	460	1,770
Long Term Care	\$3,388,147	\$1,484,675	\$0	0	1,857	0	1,857
Medicare Supplement	\$7,715,934	\$6,535,692	\$0	0	2,396	0	2,396
<b>TOTAL</b>	<b>\$11,755,568</b>	<b>\$9,076,114</b>	<b>\$234,490</b>	<b>0</b>	<b>6,121</b>	<b>3</b>	<b>6,646</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNITED WORLD LIFE INSURANCE COMPANY

### NAIC Company Code

72850	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
Hospital Indemnity	\$80	\$0	\$0	0	1	0	1
Medicare Supplement	\$13,305,267	\$8,991,665	\$0	0	4,456	0	4,456
<b>TOTAL</b>	<b>\$13,305,347</b>	<b>\$8,991,665</b>	<b>\$0</b>	<b>0</b>	<b>4,457</b>	<b>0</b>	<b>4,457</b>

## UNITEDHEALTHCARE INSURANCE COMPANY

### NAIC Company Code

79413	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
2 - 5 Member Groups	\$295,764,618	\$209,407,800	\$3,483,559	5,413	37,226	24,669	61,895
51+ Member Groups	\$942,068,837	\$858,358,108	\$31,832,419	11,696	117,346	81,802	199,148
6 - 50 Member Groups	\$521,580,560	\$324,397,097	\$12,284,778	2,059	70,945	43,311	114,256
Conversion	\$15,680,835	\$27,308,849	\$0	0	1,839	0	1,839
Dental	\$61,990,623	\$46,858,220	\$1,146,088	65,589	735,434	575,138	1,310,572
Disability Income	\$4,791,929	\$2,547,209	\$0	724	21,568	0	21,568
Hospital Indemnity	\$13,900,344	\$11,815,292	\$0	1	47,981	0	47,981
Medicare Supplement	\$819,944,994	\$682,304,676	\$12,443,297	1	346,212	0	346,212
Self-Employed or Sole Proprietor	\$38,907,862	\$37,765,020	\$617,133	3,676	3,676	3,130	6,806
Student	\$25,364,997	\$17,759,998	\$918,659	3,567	21,200	0	21,200
Vision	\$18,167,513	\$9,536,263	\$463,059	39,094	179,761	137,481	317,242
<b>TOTAL</b>	<b>\$2,758,163,112</b>	<b>\$2,228,058,532</b>	<b>\$63,188,992</b>	<b>131,820</b>	<b>1,583,188</b>	<b>24,669</b>	<b>2,448,719</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNITEDHEALTHCARE LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
97179							
Dental	\$19,040	\$9,296	\$0	19	19	6	25
Disability Income	\$1,497	\$0	\$0	1	1	0	1
Excess/Stop Loss	\$0	(\$5,228)	\$0	0	0	0	0
Out-of-State Conversion	\$6,736	\$672,647	\$0	0	1	0	1
Out-of-State Guarantee Issue	\$22,050	\$176,649	\$0	0	0	0	0
Out-of-State Individually Underwritten	\$12,970,711	\$8,461,057	\$0	1	1,278	762	2,040
<b>TOTAL</b>	<b>\$13,020,034</b>	<b>\$9,314,421</b>	<b>\$0</b>	<b>21</b>	<b>1,299</b>	<b>6</b>	<b>2,067</b>

## UNITEDHEALTHCARE OF FLORIDA, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
95264							
2 - 5 Member Groups	\$14,099,975	\$11,288,151	\$2,071,858	1,368	3,234	843	4,077
51+ Member Groups	\$232,076,255	\$184,064,636	\$5,200,190	257	29,812	14,954	44,766
6 - 50 Member Groups	\$134,000,049	\$107,277,693	\$39,423,439	2,548	28,728	16,319	45,047
Conversion	\$5,808,791	\$9,013,344	\$0	0	502	0	502
<b>TOTAL</b>	<b>\$385,985,070</b>	<b>\$311,643,824</b>	<b>\$46,695,487</b>	<b>4,173</b>	<b>62,276</b>	<b>843</b>	<b>94,392</b>

## UNIVERSAL HEALTH CARE, INC.

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
11574							
Individually Underwritten	\$2,184	\$373	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$2,184</b>	<b>\$373</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## UNUM LIFE INSURANCE COMPANY OF AMERICA

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
62235							
Accidental Death & Dismemberment	\$3,850,877	\$1,835,398	\$389,540	4,281	194,077	24,431	218,508
Disability Income	\$94,749,381	\$114,189,622	\$9,060,381	3,459	342,178	0	342,178
Limited Benefit	\$3,430	\$819	\$0	0	16	0	16
Long Term Care	\$22,631,912	\$18,831,546	\$0	461	43,866	2,882	46,748
<b>TOTAL</b>	<b>\$121,235,600</b>	<b>\$134,857,385</b>	<b>\$9,449,921</b>	<b>8,201</b>	<b>580,137</b>	<b>24,431</b>	<b>607,450</b>

## USAA LIFE INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
69663							
Accident Only	\$16,201	\$0	\$0	1	77	0	77
Disability Income	\$329,725	\$355,583	\$0	0	306	0	306
Hospital Indemnity	\$18,418	\$8,225	\$0	0	39	1	40
Medicare Supplement	\$19,837,832	\$18,247,608	\$1,328,005	0	8,468	0	8,468
<b>TOTAL</b>	<b>\$20,202,176</b>	<b>\$18,611,416</b>	<b>\$1,328,005</b>	<b>1</b>	<b>8,890</b>	<b>0</b>	<b>8,891</b>

## USABLE LIFE

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSURED	(F) COVERED DEPENDENTS	(H) COVERED LIVES
94358							
Accident Only	\$278,866	\$45,692	\$278,866	0	0	0	0
Disability Income	\$5,426	\$0	\$5,426	5,426	29	0	29
Hospital Indemnity	\$48,563	\$1,388	\$48,563	0	0	0	0
Limited Benefit	\$176,629	\$25,650	\$176,629	0	0	0	0
<b>TOTAL</b>	<b>\$509,484</b>	<b>\$72,730</b>	<b>\$509,484</b>	<b>5,426</b>	<b>29</b>	<b>0</b>	<b>29</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## VISION SERVICE PLAN INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
32395							
Vision	\$40,911,493	\$33,218,859	\$1,196,542	626	498,784	468,600	967,384
<b>TOTAL</b>	<b>\$40,911,493</b>	<b>\$33,218,859</b>	<b>\$1,196,542</b>	<b>626</b>	<b>498,784</b>	<b>468,600</b>	<b>967,384</b>

## WASHINGTON NATIONAL INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70319							
Accident Only	\$4,381,890	\$1,136,248	\$298,412	3	14,260	2,376	16,636
Champus/Tricare Supplement	\$79,518	\$145,474	\$0	1	66	14	80
Disability Income	\$27,406	\$26,936	\$3,999	1	90	0	90
Hospital Indemnity	\$88,360	(\$742)	\$2,329	2	698	62	760
Individually Underwritten	\$66,828	\$63,971	\$0	0	19	0	19
Limited Benefit	\$16,555,184	\$11,407,976	\$924,087	5	37,953	16,662	54,615
Long Term Care	\$3,592,055	\$17,383,664	\$0	10	2,432	0	2,432
Medicare Supplement	\$4,221,841	\$4,111,262	\$285	0	1,575	14	1,589
<b>TOTAL</b>	<b>\$29,013,082</b>	<b>\$34,274,789</b>	<b>\$1,229,112</b>	<b>22</b>	<b>57,093</b>	<b>2,376</b>	<b>76,221</b>

## WEST COAST LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70335							
Limited Benefit	\$173	\$0	\$0	0	1	0	1
<b>TOTAL</b>	<b>\$173</b>	<b>\$0</b>	<b>\$0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## WESTERN AND SOUTHERN LIFE INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
70483							
Accident Only	\$133,080	\$0	\$7,232	0	1,447	1,291	2,738
Limited Benefit	\$1,801,585	\$2,154,969	\$58,135	0	3,225	1,228	4,453
<b>TOTAL</b>	<b>\$1,934,665</b>	<b>\$2,154,969</b>	<b>\$65,367</b>	<b>0</b>	<b>4,672</b>	<b>1,291</b>	<b>7,191</b>

## WESTERN RESERVE LIFE ASSURANCE COMPANY OF OHIO

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
91413							
Excess/Stop Loss	\$150,608	\$1,231,413	\$150,608	0	0	0	0
<b>TOTAL</b>	<b>\$150,608</b>	<b>\$1,231,413</b>	<b>\$150,608</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

## WESTPORT INSURANCE CORPORATION

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
39845							
Excess/Stop Loss	\$148,479	\$73,602	\$69,785	2	11,967	14,839	26,806
<b>TOTAL</b>	<b>\$148,479</b>	<b>\$73,602</b>	<b>\$69,785</b>	<b>2</b>	<b>11,967</b>	<b>14,839</b>	<b>26,806</b>

## WILLIAM PENN LIFE INSURANCE COMPANY OF NEW YORK

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSURED</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
66230							
Disability Income	\$160	\$0	\$0	0	3	0	3
Guarantee Issue	\$829	\$5,200	\$0	0	6	0	6
<b>TOTAL</b>	<b>\$989</b>	<b>\$5,200</b>	<b>\$0</b>	<b>0</b>	<b>9</b>	<b>0</b>	<b>9</b>

## CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

### WILTON REASSURANCE LIFE COMPANY OF NEW YORK

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
60704							
Accident Only	\$57	\$0	\$0	1	1	0	1
Accidental Death & Dismemberment	\$169	\$0	\$0	3	3	1	4
Hospital Indemnity	\$831	\$38	\$0	5	5	0	5
Travel	\$3,730	\$20,789	\$0	9	9	0	9
<b>TOTAL</b>	<b>\$4,787</b>	<b>\$20,827</b>	<b>\$0</b>	<b>18</b>	<b>18</b>	<b>0</b>	<b>19</b>

### WOODMEN OF THE WORLD/ASSURED LIFE ASSOCIATION

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
56499							
Medicare Supplement	\$185,617	\$138,423	\$0	0	76	0	76
<b>TOTAL</b>	<b>\$185,617</b>	<b>\$138,423</b>	<b>\$0</b>	<b>0</b>	<b>76</b>	<b>0</b>	<b>76</b>

### WORLD CORP INSURANCE COMPANY

<i>NAIC Company Code</i>	<i>(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS</i>	<i>(B) DIRECT LOSSES INCURRED</i>	<i>(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</i>	<i>(D) EMPLOYER or GROUPS</i>	<i>(E) PRIMARY INSUREDS</i>	<i>(F) COVERED DEPENDENTS</i>	<i>(H) COVERED LIVES</i>
79987							
Limited Benefit	\$242	\$0	\$0	0	2	0	2
Medicare Supplement	\$5,347	\$6,540	\$0	0	3	0	3
<b>TOTAL</b>	<b>\$5,589</b>	<b>\$6,540</b>	<b>\$0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>5</b>

# CY2012 Accident and Health Report of Gross Annual Premium and Enrollment List of Companies and all Health Business

## WORLD INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
70629							
Accidental Death & Dismemberment	\$15	\$0	\$0	0	0	0	0
Dental	\$22,328	\$23,009	\$0	0	50	0	50
Hospital Indemnity	\$3,627	\$3,729	\$0	0	46	0	46
Individually Underwritten	\$146,339	\$647,745	\$0	0	11	3	14
Limited Benefit	\$6,274	\$12,377	\$0	0	18	0	18
Medicare Supplement	\$496,904	\$382,577	\$0	0	207	0	207
Out-of-State 6 - 50 Member Groups	\$39,015	\$22,367	\$0	1	4	0	4
Out-of-State Individually Underwritten	\$380,655	\$367,144	\$0	1	46	23	69
<b>TOTAL</b>	<b>\$1,095,157</b>	<b>\$1,458,948</b>	<b>\$0</b>	<b>2</b>	<b>382</b>	<b>0</b>	<b>408</b>

## ZURICH AMERICAN INSURANCE COMPANY

NAIC Company Code	(A) DIRECT PREMIUMS EARNED FOR NEW AND RENEWAL BUSINESS	(B) DIRECT LOSSES INCURRED	(C) DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	(D) EMPLOYER or GROUPS	(E) PRIMARY INSUREDS	(F) COVERED DEPENDENTS	(H) COVERED LIVES
16535							
Accident Only	\$6,041,164	\$1,440,930	\$1,073,760	100	218,061	100,429	318,490
Accidental Death & Dismemberment	\$6,113	\$0	\$1,240	75	121	0	121
Disability Income	\$39,239	(\$202,380)	\$0	14	1,823	0	1,823
Excess/Stop Loss	\$4,535,246	\$4,199,795	\$1,242,178	13	14,077	25,240	39,317
<b>TOTAL</b>	<b>\$10,621,762</b>	<b>\$5,438,345</b>	<b>\$2,317,178</b>	<b>202</b>	<b>234,082</b>	<b>100,429</b>	<b>359,751</b>

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

1	ACCENDO INSURANCE COMPANY	63444
2	ACE FIRE UNDERWRITERS INSURANCE COMPANY	20702
3	ACE LIFE INSURANCE COMPANY	60348
4	AETNA BETTER HEALTH, INC.	14409
5	AETNA HEALTH INSURANCE COMPANY	72052
6	AETNA INSURANCE COMPANY OF CONNECTICUT	36153
7	AHF MCO OF FLORIDA, INC.	12973
8	ALFA LIFE INSURANCE CORPORATION	79049
9	ALL SAVERS INSURANCE COMPANY	82406
10	ALLSTATE INSURANCE COMPANY	19232
11	ALTERRA AMERICA INSURANCE COMPANY	21296
12	AMERICAN CAPITOL INSURANCE COMPANY	60291
13	AMERICAN COMMERCE INSURANCE COMPANY	19941
14	AMERICAN FIDELITY LIFE INSURANCE COMPANY	60429
15	AMERICAN GENERAL ASSURANCE COMPANY	68373
16	AMERICAN GENERAL LIFE & ACCIDENT INSURANCE COMPANY	66672
17	AMERICAN GENERAL LIFE INSURANCE COMPANY OF DELAWARE	66842
18	AMERICAN GUARANTEE AND LIABILITY INSURANCE COMPANY	26247
19	AMERICAN INSURANCE COMPANY (THE)	21857
20	AMERICAN MATURITY LIFE INSURANCE COMPANY	81213
21	AMERICAN RELIABLE INSURANCE COMPANY	19615
22	AMERICAN RETIREMENT LIFE INSURANCE COMPANY	88366
23	AMERICAN SECURITY INSURANCE COMPANY	42978
24	AMERICAN SENTINEL INSURANCE COMPANY	17965
25	AMERICAN SOUTHERN HOME INSURANCE COMPANY	41998
26	AMERICAN SOUTHERN INSURANCE COMPANY	10235
27	AMERICAN SPECIALTY HEALTH INSURANCE COMPANY	84697
28	AMERICAN ZURICH INSURANCE COMPANY	40142
29	AMERICO FINANCIAL LIFE AND ANNUITY INSURANCE COMPANY	61999
30	ASSOCIATED INDEMNITY CORPORATION	21865
31	ATLANTIC COAST LIFE INSURANCE COMPANY	61115
32	AURORA NATIONAL LIFE ASSURANCE COMPANY	61182
33	AUTOMOBILE INSURANCE COMPANY OF HARTFORD, CT	19062
34	AVEMCO INSURANCE COMPANY	10367
35	AXIS REINSURANCE COMPANY	20370
36	AXIS SPECIALTY INSURANCE COMPANY	15610
37	BALBOA INSURANCE COMPANY	24813

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

38	BANKERS STANDARD INSURANCE COMPANY	18279
39	BAPTIST LIFE ASSOCIATION	57223
40	BEAZLEY INSURANCE COMPANY, INC.	37540
41	BERKLEY INSURANCE COMPANY	32603
42	BEST MERIDIAN INSURANCE COMPANY	63886
43	BROTHERHOOD MUTUAL INSURANCE COMPANY	13528
44	BUPA INSURANCE COMPANY	81647
45	BUPA INSURANCE LIMITED COMPANY	13596
46	CAREPLUS HEALTH PLANS, INC.	95092
47	CAROLINA CASUALTY INSURANCE COMPANY	10510
48	CATAMARAN INSURANCE OF OHIO INC	69647
49	CATHOLIC HOLY FAMILY SOCIETY	57770
50	CENTRE INSURANCE COMPANY	34649
51	CHARTER NATIONAL LIFE INSURANCE COMPANY	61808
52	CHARTIS PROPERTY CASUALTY COMPANY	19402
53	CHEROKEE INSURANCE COMPANY	10642
54	CHURCH LIFE INSURANCE CORPORATION	61875
55	CINCINNATI INDEMNITY COMPANY	23280
56	CINCINNATI INSURANCE COMPANY	10677
57	CLARENDON SELECT INSURANCE COMPANY	22560
58	CONTINENTAL INSURANCE COMPANY	35289
59	CORVESTA LIFE INSURANCE COMPANY	78301
60	COTTON STATES LIFE INSURANCE COMPANY	62537
61	COVENTRY SUMMIT HEALTH PLAN, INC.	10771
62	CROWN LIFE INSURANCE COMPANY	80675
63	CSA FRATERNAL LIFE	56138
64	CSI LIFE INSURANCE COMPANY	82880
65	CUMIS INSURANCE SOCIETY, INC.	10847
66	DAILY UNDERWRITERS OF AMERICA	35483
67	DELAWARE AMERICAN LIFE INSURANCE COMPANY	62634
68	DENTEGRA INSURANCE COMPANY	73474
69	DIRECT GENERAL INSURANCE COMPANY	42781
70	DISCOVER PROPERTY & CASUALTY INSURANCE COMPANY	36463
71	EDUCATORS LIFE INSURANCE COMPANY OF AMERICA	62790
72	ELCO MUTUAL LIFE AND ANNUITY COMPANY	84174
73	EMPLOYERS FIRE INSURANCE COMPANY	20648
74	EMPLOYERS REASSURANCE CORPORATION	68276

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

75	ENVISION INSURANCE COMPANY	12747
76	EPIC LIFE INSURANCE COMPANY	64149
77	EVEREST REINSURANCE COMPANY	26921
78	FAIRMONT PREMIER INSURANCE COMPANY	25518
79	FAIRMONT SPECIALTY INSURANCE COMPANY	24384
80	FEDERATED MUTUAL INSURANCE COMPANY	13935
81	FIDELITY AND GUARANTY INSURANCE UNDERWRITERS INC.	25879
82	FIRST CONTINENTAL LIFE & ACCIDENT INSURANCE CO	64696
83	FIRST LIBERTY INSURANCE CORPORATION (THE)	33588
84	FIRST PENN-PACIFIC LIFE INSURANCE COMPANY	67652
85	FLORIDA COMBINED LIFE INSURANCE COMPANY	76031
86	FLORIDA HEALTH PARTNERS, INC.	
87	FLORIDA HEALTHCARE PLUS, INC.	14050
88	FLORIDA MHS, INC	14447
89	FLORIDA TRUE HEALTH, INC.	14378
90	FREEDOM HEALTH, INC.	10119
91	GENERAL FIDELITY INSURANCE COMPANY	30007
92	GENERAL FIDELITY LIFE INSURANCE COMPANY	93521
93	GENERATION LIFE INSURANCE COMPANY	73504
94	GRANITE STATE INSURANCE COMPANY	23809
95	GREAT DIVIDE INSURANCE COMPANY	25224
96	GUIDEONE MUTUAL INSURANCE COMPANY	15032
97	HARLEYSVILLE-ATLANTIC INSURANCE COMPANY	13382
98	HARTFORD ACCIDENT AND INDEMNITY COMPANY	22357
99	HARTFORD CASUALTY INSURANCE COMPANY	29424
100	HARTFORD UNDERWRITERS INSURANCE COMPANY	30104
101	HCSC INSURANCE SERVICES COMPANY	78611
102	HEALTHEASE OF FLORIDA, INC.	52631
103	HEALTHMARKETS INSURANCE COMPANY	92908
104	HEALTHPLEX DENTAL SERVICES, INC.	
105	HEALTHSUN HEALTH PLANS, INC.	10122
106	HEALTHY PALM BEACHES, INC.	95827
107	HISCOX INSURANCE COMPANY INC.	10200
108	HORACE MANN INSURANCE COMPANY	22578
109	HUMANA ADVANTAGECARE PLAN, INC.	10126
110	INDEPENDENCE LIFE AND ANNUITY COMPANY	64602
111	INDIVIDUAL ASSURANCE CO., LIFE, HEALTH & ACCIDENT	81779

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

112	INSURANCE COMPANY OF THE WEST	27847
113	INTEGRITY LIFE INSURANCE COMPANY	74780
114	INVESTORS INSURANCE CORPORATION	64939
115	JOHN DEERE INSURANCE COMPANY	36781
116	LIBERTY BANKERS LIFE INSURANCE COMPANY	68543
117	LITTLE HAVANA ACTIVITIES & NUTRITION CENTERS OF DADE COUNTY, INC.	14239
118	LM INSURANCE CORPORATION	33600
119	LONGEVITY INSURANCE COMPANY	68446
120	LYNDON SOUTHERN INSURANCE COMPANY	10051
121	MAGELLAN BEHAVIORAL HEALTH OF FLORIDA, INC.	
122	MAGNA INSURANCE COMPANY	61018
123	MARKEL AMERICAN INSURANCE COMPANY	28932
124	MARYLAND CASUALTY COMPANY	19356
125	MEDCO CONTAINMENT LIFE INSURANCE COMPANY	63762
126	MEDICA HEALTHCARE PLANS, INC.	12155
127	METLIFE INVESTORS INSURANCE COMPANY	93513
128	METLIFE INVESTORS USA INSURANCE COMPANY	61050
129	MIDWESTERN UNITED LIFE INSURANCE COMPANY	66109
130	MML BAY STATE LIFE INSURANCE COMPANY	70416
131	MOLINA HEALTHCARE OF FLORIDA, INC.	13128
132	MONY LIFE INSURANCE COMPANY OF AMERICA	78077
133	NATIONAL FIRE INSURANCE COMPANY OF HARTFORD	20478
134	NATIONAL INDEMNITY COMPANY	20087
135	NATIONAL SECURITY INSURANCE COMPANY	66788
136	NATIONAL SPECIALTY INSURANCE COMPANY	22608
137	NATIONAL SURETY CORPORATION	21881
138	NATIONWIDE AFFINITY INSURANCE COMPANY OF AMERICA	26093
139	NATIONWIDE MUTUAL INSURANCE COMPANY	23787
140	NEW ERA LIFE INSURANCE COMPANY OF THE MIDWEST	69698
141	NEW HAMPSHIRE INSURANCE COMPANY	23841
142	NIPPON LIFE INSURANCE COMPANY OF AMERICA	81264
143	NORTH FLORIDA BEHAVIORAL HEALTH PARTNERS, INC.	
144	NORTH RIVER INSURANCE COMPANY	21105
145	NORTHERN ASSURANCE COMPANY OF AMERICA	38369
146	NORTHERN INSURANCE COMPANY OF NEW YORK	19372
147	NYLIFE INSURANCE COMPANY OF ARIZONA	81353
148	OHIO CASUALTY INSURANCE COMPANY	24074

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

149	ONENATION INSURANCE COMPANY	85286
150	OPTIMUM HEALTHCARE, INC.	12259
151	PACIFIC INDEMNITY COMPANY	20346
152	PACIFIC LIFE INSURANCE COMPANY	67466
153	PARK AVENUE LIFE INSURANCE COMPANY	60003
154	PARKER CENTENNIAL ASSURANCE COMPANY	71099
155	PARTNERRE AMERICA INSURANCE COMPANY	11835
156	PAUL REVERE VARIABLE ANNUITY INSURANCE COMPANY	67601
157	PENNSYLVANIA MANUFACTURERS' ASSOCIATION INS. CO.	12262
158	PENNSYLVANIA NATIONAL MUTUAL CASUALTY INSURANCE CO	14990
159	PHILADELPHIA FINANCIAL LIFE ASSURANCE COMPANY	60232
160	PHL VARIABLE INSURANCE COMPANY	93548
161	PHOENIX LIFE AND ANNUITY COMPANY	93734
162	PIONEER AMERICAN INSURANCE COMPANY	67873
163	PREFERRED CARE PARTNERS, INC.	11176
164	PREMIER ACCESS INSURANCE COMPANY	60237
165	PROTECTIVE INSURANCE COMPANY	12416
166	PRUDENTIAL ANNUITIES LIFE ASSURANCE CORPORATION	86630
167	PRUDENTIAL RETIREMENT INSURANCE AND ANNUITY COMPANY	93629
168	QBE REINSURANCE CORPORATION	10219
169	R.V.I. NATIONAL INSURANCE COMPANY	23132
170	REASSURE AMERICA LIFE INSURANCE COMPANY	70211
171	REGENT INSURANCE COMPANY	24449
172	RESOURCE LIFE INSURANCE COMPANY	61506
173	RIVERPORT INSURANCE COMPANY	36684
174	RLI INSURANCE COMPANY	13056
175	SCOR GLOBAL LIFE AMERICAS REINSURANCE COMPANY	64688
176	SEABRIGHT INSURANCE COMPANY	15563
177	SECURITY BENEFIT LIFE INSURANCE COMPANY	68675
178	SEECHANG HEALTH INSURANCE COMPANY	63541
179	SENIORDENT DENTAL PLAN, INC.	13211
180	SENTRY CASUALTY COMPANY	28460
181	SENTRY SELECT INSURANCE COMPANY	21180
182	SILVERSCRIPT INSURANCE COMPANY	12575
183	SIMPLY HEALTHCARE PLANS, INC.	13726
184	SIRIUS AMERICA INSURANCE COMPANY	38776
185	SMART INSURANCE COMPANY	80055

***CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity***

*NAIC Company Code*

186	SOUTHERN LIFE AND HEALTH INSURANCE COMPANY	88323
187	SOUTHLAND NATIONAL INSURANCE CORPORATION	79057
188	SPARTA INSURANCE COMPANY	20613
189	ST. PAUL MERCURY INSURANCE COMPANY	24791
190	STANDARD FIRE INSURANCE COMPANY	19070
191	STAR INSURANCE COMPANY	18023
192	SUNAMERICA ANNUITY AND LIFE ASSURANCE COMPANY	60941
193	SUNAMERICA LIFE INSURANCE COMPANY	69256
194	SUNSET LIFE INSURANCE COMPANY OF AMERICA	69272
195	SWISS RE LIFE & HEALTH AMERICA INC.	82627
196	THE TRAVELERS CASUALTY COMPANY	41769
197	TRANSPORTATION INSURANCE COMPANY	20494
198	TRAVELERS CASUALTY AND SURETY COMPANY	19038
199	TRAVELERS CASUALTY COMPANY OF CONNECTICUT	36170
200	TRAVELERS COMMERCIAL CASUALTY COMPANY	40282
201	TRAVELERS COMMERCIAL INSURANCE COMPANY	36137
202	TRUASSURE INSURANCE COMPANY	92525
203	U.S. FINANCIAL LIFE INSURANCE COMPANY	84530
204	UBS LIFE INSURANCE COMPANY USA	67423
205	ULLICO LIFE INSURANCE COMPANY	86371
206	ULTIMATE HEALTH PLANS, INC.	14243
207	UNITED CONCORDIA DENTAL PLANS OF FLORIDA, INC.	52020
208	UNITED HERITAGE LIFE INSURANCE COMPANY	63983
209	UNITED INVESTORS LIFE INSURANCE COMPANY	94099
210	UNITED LIFE INSURANCE COMPANY	69973
211	UNITED NATIONAL SPECIALTY INSURANCE COMPANY	41335
212	UNITED STATES FIDELITY AND GUARANTY COMPANY	25887
213	UNITY FINANCIAL LIFE INSURANCE COMPANY	63819
214	UNIVERSAL HEALTH CARE INSURANCE COMPANY, INC.	12577
215	UNIVERSAL UNDERWRITERS LIFE INSURANCE COMPANY	70173
216	USAA DIRECT LIFE INSURANCE COMPANY	72613
217	VALIANT INSURANCE COMPANY	26611
218	VALLEY FORGE INSURANCE COMPANY	20508
219	VIGILANT INSURANCE COMPANY	20397
220	VIRGINIA SURETY COMPANY, INC.	40827
221	WELLCARE HEALTH INSURANCE OF ARIZONA, INC.	83445
222	WELLCARE PRESCRIPTION INSURANCE, INC.	10155

*CY2012 Accident and Health Report of Gross Annual Premium and Enrollment  
Carriers Reporting No Activity*

*NAIC Company Code*

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223	WESCO INSURANCE COMPANY	25011
224	WESTERN NATIONAL LIFE INSURANCE COMPANY	70432
225	WESTERN-SOUTHERN LIFE ASSURANCE COMPANY	92622
226	ZALE LIFE INSURANCE COMPANY	71323
227	ZENITH INSURANCE COMPANY	13269
228	ZURICH AMERICAN LIFE INSURANCE COMPANY	90557

**Florida Office of Insurance Regulation**  
**Accident and Health Premium and Enrollment Annual Data Filing Requirements**

*If you have any questions during your submission process, please contact*

**Data Collection and Statistical Reporting Unit**

Via email: [AnnualA&HReporting\\_1094-1386@fldfs.com](mailto:AnnualA&HReporting_1094-1386@fldfs.com)

**Required Filers and General Reporting Definitions**

Section 627.9175, F.S., reads, in part, “Each health insurer, prepaid limited health services organization, and health maintenance organization shall submit, no later than April 1 of each year, to the office information concerning health and accident insurance coverage and medical plans being marketed and currently in force in this state.”

This includes the following Florida Certification of Authority Categories:

- (1) FRATERNAL BENEFIT SOCIETY
- (2) PROPERTY AND CASUALTY INSURER
- (3) HEALTH MAINTENANCE ORGANIZATION (HMO)
- (4) PRE-PAID LIMITED HEALTH SERVICE ORGANIZATION
- (5) LIFE AND HEALTH INSURER

having one or more of the following Florida Lines of Business active during the calendar reporting year:

- a. FRATERNAL HEALTH
- b. ACCIDENT AND HEALTH
- c. DENTAL SERVICE PLAN CORPORATION (PREPAID DENTAL)
- d. AMBULANCE SERVICE
- e. OPTOMETRIC SERVICES
- f. PHARMACEUTICAL SERVICES
- g. HEALTH MAINTENANCE ORGANIZATIONS
- h. PREPAID LIMITED HEALTH SERVICE ORGANIZATION
- i. MENTAL HEALTH SERVICES
- j. SUBSTANCE ABUSE SERVICES
- k. CHIROPRACTIC SERVICES
- l. PODIATRIC CARE SERVICES
- m. MISC. - PLHSO

The electronic filing via the Industry Portal (<https://iportal.fldfs.com>) of this information is required pursuant to Rules 690-137.004 and 690-154.112(3), Florida Administrative Code.

Specific instructions on the use of the Industry Portal’s Data Reporting module are available upon request from [AnnualA&HReporting\\_1094-1386@fldfs.com](mailto:AnnualA&HReporting_1094-1386@fldfs.com)

“**NO DATA FILING**” is to be used if the reporting entity had

- **no** direct Florida premiums (written or earned) during the calendar reporting year  
**AND**
- **no** direct Florida losses incurred during the calendar reporting year  
**AND**
- **no** enrolled Florida resident groups or primary insureds as of December 31<sup>st</sup> of the calendar reporting year.

“**DATA FILING**” is to be used by all other reporting entities. The data template contained in this category includes:

- (1) *Report of Gross Annual Premiums and Enrollment Data for Health Benefit Plans Issued to Florida Residents, OIR-B2-1094*
- (2) *Individual Health Coverage Policy Forms Issued/Renewed in Florida, OIR-B2-1386*

The following accident and health coverage types (as defined by the *National Association of Insurance Commissioners Uniform Product Coding Matrix for Life, Accident/Health, Annuity, Credit Products* unless otherwise specified) are included:

Row Definitions:

TYPE OF INSURANCE DESCRIPTION	TOI or Sub-TOI Code per NAIC Uniform Coding Matrix (Revised 1/1/05)
<p><b>Major Medical</b> - A hospital/surgical/medical expense contract that provides comprehensive benefits as defined in the state in which the contract will be delivered. In Florida this means insurance that is designed to cover expenses of serious illness, chronic care (excluding long-term care) and/or hospitalization. The term does NOT include accident-only, specified disease, individual hospital indemnity, credit, dental-only, vision-only, prepaid products, Medicare supplement, long-term care, or disability income insurance; similar supplemental plans provided under a separate policy, certificate, or contract of insurance, which do not duplicate coverage under an underlying health plan and are specifically designed to fill gaps in the underlying health plan, coinsurance, or deductibles; coverage issued as a supplement to liability insurance; workers' compensation or similar insurance; or automobile medical-payment insurance. Please note that short-term major medical coverages are to be reported on Line 16.</p> <p><b>Hospital/Surgical/Medical Expense</b> - An insurance contract that provides coverage to or reimburses the covered person for hospital, surgical, and/or medical expense incurred as a result of injury, sickness, and/or medical condition.</p> <p>These definitions include the following subcategories:</p> <ul style="list-style-type: none"> <li>• <i>Guarantee Issue (HIPAA, FS 627.6487(3))</i></li> <li>• <i>Individually Underwritten</i></li> <li>• <i>Self-Employed or Sole Proprietor (FS 627.6699)</i></li> <li>• <i>2 - 5 Member Groups (FS 627.6699)</i></li> <li>• <i>6 - 50 Member Groups (FS 627.6699)</i></li> <li>• <i>51+ Member Groups</i></li> </ul>	<p>H16G</p> <p>H16I</p> <p>H15G</p> <p>H15I</p>
<p><b>Short Term Major Medical</b> - A major medical policy or plan designed to provide coverage during a "gap" in coverage. Short term policies generally have pre-existing condition exclusions and are not renewable.</p>	<p>H16G.004</p> <p>H16I.004</p>
<p><b>Conversion</b> - Guarantees an insured whose coverage is ending for specified reasons a right to purchase a policy without presenting evidence of insurability.</p>	<p>H06</p>
<p><b>Other Prepaid Health Services not listed below:</b> Pursuant to Section 636.003(5), F.S., "Limited health service" also includes ambulance services, mental health services, substance abuse services, chiropractic services, podiatric care services, and pharmaceutical services. "Limited health service" does not include inpatient, hospital surgical services, or emergency services except as such services are provided incident to the limited health services.</p>	
<p><b>Discount Medical Plan</b> - Pursuant to Section 636.202(1), FS, is a business arrangement or contract in which a person, in exchange for fees, dues, charges, or other consideration, provides access for plan members to providers of medical services and the right to receive medical services from those providers at a discount. The term "discount medical plan" does not include any product regulated under chapter 627, chapter 641, or part 1 of chapter 636.</p>	
<p><b>Administrative Services Only (ASO)</b> - ASO describes the contractual arrangement utilized by a self-funded employer, whereby a separate company processes claims and other administrative needs pertinent to the employer's health care plans. (Please report fees in "Total Direct Premiums Earned" and "Direct Premiums Earned for New Business Only")</p>	
<p><b>Accident Only</b> - An insurance contract that provides coverage, singly or in combination, for death, dismemberment, disability, or hospital and medical care caused by or necessitated as a result of accident or specified kinds of accident.</p>	<p>H02G</p> <p>H02I</p>
<p><b>Accidental Death &amp; Dismemberment</b> - An insurance contract that pays a stated benefit in the event of death and/or dismemberment caused by accident or specified kinds of accidents.</p>	<p>H03G</p> <p>H03I</p>
<p><b>Blanket Accident/Sickness</b> - A health insurance contract that covers all of a class of persons not individually identified in the contract.</p>	<p>H04</p>
<p><b>Dental</b> - Insurance that provides benefits for routine dental examinations, preventive dental work and dental procedures needed to treat tooth decay and diseases of the teeth and jaw.</p>	<p>H10G</p> <p>H10I</p>

TYPE OF INSURANCE DESCRIPTION	TOI or Sub-TOI Code per NAIC Uniform Coding Matrix (Revised 1/1/05)
Disability Income (includes Business Overhead Expense; Short Term; Long Term; and Combined Short Term and Long Term) - A policy designed to compensate insureds for a portion of the income they lose because of a disabling injury or illness.	H11G H11I
Excess/Stop Loss (includes Accident & Sickness; Managed Care; Provider; and Self-Funded Health Plan) - This type of insurance may be extended to either a health plan or a self-insured employer plan. Its purpose is to insure against the risk that any one claim will exceed a specific dollar amount or that an entire plan's losses will exceed a specific amount. As defined in Section 627.6482 (14), F.S., "Stop-loss coverage" means an arrangement whereby a self-insurance plan insures against the risk that any one claim will exceed a specific dollar amount or that an entire self-insurance plan's losses will exceed a specific amount.	H12
Hospital Indemnity - An insurance contract that pays a fixed dollar amount without regard to the actual expense incurred for each day the covered person is confined to the hospital as a result of injury, sickness, and/or medical condition.	H14G H14I
<p>Limited Benefit (includes Specified Disease; Critical Illness; Dread Disease; Dread Disease - Cancer Only; HIV Indemnity; Intensive Care; and Organ &amp; Tissue Transplant)-</p> <p>(a) Pays benefits for the diagnosis and treatment of a specifically named disease or diseases. Benefits can be paid as expense incurred, per diem, or a principle sum.</p> <p>(b) Provides a daily benefit for confinement in a qualified intensive care unit of a certified hospital. Benefits are specific to services delivered by the staff of a hospital intensive care unit. Benefits not to exceed a stated dollar amount per day.</p> <p>(c) Provides benefits for services incurred as a result of human and/or non-human organ transplant. Benefits are specific to the delivery of care associated with the covered organ or tissue transplant. Benefits not to exceed a stated dollar amount per day.</p>	H07G H07I H08G H08I H09G H09I
Long Term Care - Coverage that includes long term care, nursing home, and home care contracts that provide reimbursement for these services.	LTC02G LTC02I LTC03G LTC03I LTC04G LTC04I LTC05G LTC05I LTC05.1G LTC05.1I LTC05.2G LTC05.2I LTC06
Short Term Care (includes Home Health Care; Nursing Home; and Adult Day Care) - Coverage that provides medical and other services to insured's who need constant care in their own home or in a nursing facility for periods of less than one year.	H13G H13I

TYPE OF INSURANCE DESCRIPTION	TOI or Sub-TOI Code per NAIC Uniform Coding Matrix (Revised 1/1/05)
<p>Medicare Supplement Insurance coverage sold on a individual or group basis to help fill the "gaps" in the protections granted by the federal Medicare program. This is strictly supplemental coverage and cannot duplicate any benefits provided by Medicare. It is structured to pay part or all of Medicare's deductibles and co-payments. It may also cover some services and expenses not covered by Medicare. Also known as "Medigap" insurance.</p>	<p>MS02G MS02I MS03G MS03I MS04G MS04I MS05G MS05I MS06</p>
<p>Champus/Tricare Supplement - Civilian Health and Medical Program of the Uniformed Services (Champus). A private health plan that provides beneficiaries eligible for Champus with supplemental health care coverage.</p>	<p>H05</p>
<p>Prescription Drug - Prescription drug plan that covers the cost of drugs (except those dispensed in a hospital or in an extended care facility) that are required by either state or federal law to be dispensed by prescription. Drugs for which prescriptions are not required by law may be covered.</p>	<p>H17G H17I</p>
<p>Sickness - Limited benefit expense policies. Provides benefits for sickness only. Benefits not to exceed a stated dollar amount per day.</p>	<p>H18G H18I</p>
<p>Student - A health insurance contract that covers a class of students not individually identified in the contract.</p>	<p>H04.001</p>
<p>Travel - Limited benefit expense policies. Provides benefits for loss incurred while traveling generally outside a 100-mile radius of the US borders. *May extend to domestic as well as foreign travel. May provide both sickness and injury benefits. May include loss of baggage benefits. May include air transportation services for emergencies. Benefits not to exceed a stated dollar amount per day, per month or trip duration. (*Subject to applicable state limitations.)</p>	<p>H19I H19G</p>
<p>Vision - Limited benefit expense policies. Provides benefits for eye care and eye care accessories. Generally provides a stated dollar amount per annual eye examination. Benefits often include a stated dollar amount for glasses and contacts. May include surgical benefits for injury or sickness associated with the eye.</p>	<p>H20G H20I</p>
<p><b>Other</b> - <b>NOT</b> to include the following: Medicare (All Titles), Medicare + Choice, HCPP, Medicaid (All Titles), SCHIP, FEHBP, Florida Healthy Kids, Florida Health Flex Plans, self-insured business, credit (group and individual), or credit A&amp;H (group and individual)</p>	<p>H21</p>

*Please note that as defined in Section 627.6482(12), premium means the entire cost of an insurance plan, including the administrative fee, the risk assumption charge, and, in the instance of a minimum premium plan or stop-loss coverage, the incurred claims whether or not such claims are paid directly by the insurer.*

For each of the health coverage types listed above, the following information is required:

**Column Definitions:**

<p><b>TOTAL DIRECT PREMIUMS EARNED</b></p>	<p>Requested data is your company’s direct premium earned from January 01 through December 31, inclusive, for the calendar reporting year. Provide only earned premium specific to covered Florida residents.</p>
	<p>This cell should contain a whole number or zero.</p>
<p><b>DIRECT LOSSES INCURRED</b></p>	<p>Requested data is your company’s direct losses incurred from January 01 through December 31, inclusive, for the calendar reporting year. Provide only losses specific to covered Florida residents.</p>
<p><b>RATIO OF DIRECT LOSSES INCURRED TO DIRECT PREMIUMS EARNED</b></p>	<p>This is an auto-calculation field. It divides [DIRECT LOSSES INCURRED] by [TOTAL DIRECT PREMIUMS EARNED].</p>
<p><b>WAS THIS COVERAGE ACTIVELY TRANSACTED DURING THE REPORTING PERIOD?</b></p>	<p>This cell is used to indicate whether or not your company is conducting active insurance transaction in the associated coverage in each row.</p> <p>Section 624.10, FS, defines an insurance transaction as:</p> <ul style="list-style-type: none"> <li>• Solicitation or inducement.</li> <li>• Preliminary negotiations.</li> <li>• Effectuation of a contract of insurance.</li> <li>• Transaction of matters subsequent to effectuation of a contract of insurance and arising out of it.</li> </ul> <p>Responding “YES” means active transactions did occur during the calendar reporting year.</p> <p>Responding “NO” means no active transaction occurred during the calendar reporting year.</p>
<p><b>DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY</b></p>	<p>Requested data is your company’s direct premium earned for new business only from January 01 through December 31, inclusive, for the calendar reporting year. Provide earned premium specific to covered Florida residents.</p> <p>The data contained in this cell should be included in the total reported for “TOTAL DIRECT PREMIUMS EARNED (E).”</p> <p>This cell should contain a whole number or zero.</p> <p>If the coverage associated with this cell was actively transacted during the calendar reporting year, this cell should be entered as a whole number or zero. Otherwise, please enter zero.</p>
<p><b>PERCENTAGE OF NEW BUSINESS PREMIUMS TO TOTAL PREMIUMS</b></p>	<p>This is an auto-calculation field. It divides [DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY] by [TOTAL DIRECT PREMIUMS EARNED]. Then multiplies the result by 100 to convert it to a percentage.</p>
<p><b>EMPLOYERS/GROUPS, IF GROUP COVERAGE, AT END OF REPORTING CY</b></p>	<p>For all group categories, provide the number of employers who covered Florida resident employees, as of December 31 for the calendar reporting year.</p> <p>This cell should contain a positive, whole number or zero.</p>

PRIMARY ENROLLEES AT END OF REPORTING CY	<p>Provide the total number of resident individual policyholders or resident group employee/member certificateholders, as of December 31 for the calendar reporting year.</p> <p>This cell should contain a positive, whole number or zero.</p>
COVERED ENROLLEE DEPENDENTS AT END OF REPORTING CY	<p>Provide the total number of individuals who are covered by the primary insured's plan and who receive coverage due to his/her dependent relationship to the primary insured, as of December 31 for the calendar reporting year</p> <p>This cell should contain a positive, whole number or zero.</p>
COVERED LIVES AT END OF REPORTING CY	<p>This is an auto-calculation field. It adds [PRIMARY ENROLLEES AT END OF REPORTING CY] and [COVERED ENROLLEE DEPENDENTS AT END OF REPORTING CY]</p>
AVERAGE NUMBER OF DAYS TAKEN TO PAY CLAIMS	<p>Provide a simple average ([the total number of days from the date of receipt to the date of payment for each claim received] divided by [the total of number of claims received]). The data provided should specific to covered Florida residents and only include claims where there is a date of payment between January 01 through December 31, inclusive, for the calendar reporting year.</p> <p style="padding-left: 40px;">Where claim is defined by Section 627.6131(2) and 641.3155(1), F.S. Where date of receipt is defined by Section 627.6131(3)(a) and 641.3155(2)(a), F.S. Where date of payment is defined by Section 627.6131(7) and 641.3155 (6), F.S</p> <p>This cell should contain a positive, whole number or zero.</p>

**Additional Filing Requirements for All Insurers Marketing Guaranteed Issue Health Insurance to Eligible Individuals as defined by Section 627.6487(3), F.S.**

Please note that "insurer" means any entity that provides health insurance in this state. This includes an insurance company with a valid certificate in accordance with chapter 624, a health maintenance organization with a valid certificate of authority in accordance with part I or part III of chapter 641, a prepaid health clinic authorized to transact business in this state pursuant to part II of chapter 641, multiple employer welfare arrangements authorized to transact business in this state pursuant to ss. 624.436- 624.45, or a fraternal benefit society providing health benefits to its members as authorized pursuant to chapter 632.

Florida law defines "individual health insurance" as health insurance offered to an individual. This definition includes certificates of coverage offered to individuals in Florida as part of a group policy issued to an association outside this state. "Health insurance" means any hospital or medical expense incurred policy, health maintenance organization subscriber contract pursuant to chapter 627 or chapter 641, or any other health care plan or arrangement that pays for or furnishes medical or health care services, whether by insurance or otherwise. The term does not include short term, accident, dental-only, vision-only, fixed indemnity, limited benefit, or credit insurance, coverage issued as a supplement to liability insurance, insurance arising out of a workers' compensation or similar law, automobile medical payment insurance, or insurance under which benefits are payable with or without regard to fault and which is statutorily required to be contained in any liability insurance policy or equivalent self insurance.

The companies defined above are required to complete and submit the reporting form OIR-B2-1386, *Individual Health Coverage Policy Forms Issued/Renewed in Florida* portion of the data template. Associated additional documentation to be submitted includes the following information:

1. Listing of plan name, corresponding form number(s) and a brief description of benefits for each individual major medical and/or hospital, surgical, medical expense policy issued and/or enforce with the company.
2. The two ACTIVELY TRANSACTED individual major medical and/or hospital, medical and surgical expense policy forms which generate the largest and next to largest direct premium earned volume for the company. If either of these forms is made available with co-payment options, riders, endorsements, etc., the company is to specify the most popular option combination based on direct premiums earned volume. Please note: the top two forms identified may consist of any combination of basic policy form and/or policy form combination based on direct premium earned volume.

3. For the two policy forms identified above:
  - a. The date this Office approved each form, if applicable, is to be provided.
  - b. The Office's file log number under which each form was approved, if applicable, is to be provided.
  - c. A description of the benefits provided is to be included.
  - d. A copy of each form (and any options, riders, endorsements, etc.) is to be uploaded.
  - e. All marketing materials provided to eligible individuals (HIPAA-eligible) are to be uploaded.
  - f. An explanation of how these eligible individuals are to be informed of the availability of the company's applicable individual coverages is to be uploaded.

## Data Submission Validation Process

### Computerized Validations:

There are two stages of data validation performed on your data template before it can be received by the Office.

The first of these are built into the data template itself. As you navigate the template, you will be given various "Validation Assistance" alerts. For example, if a type of coverage is defined as GROUP coverage, you will receive an alert as you begin to enter data in the [EMPLOYERS/GROUPS, IF GROUP COVERAGE, AT END OF REPORTING CY] cell that reads: "If the number of Employers/Groups reported is zero, then the number of Primary Enrollees and the number of Covered Enrollee Dependents must also be zero." If you enter zero in the cell, the data template will not allow you to enter anything but zero in the [PRIMARY ENROLLEES AT END OF REPORTING CY] and [COVERED ENROLLEE DEPENDENTS AT END OF REPORTING CY] cells.

The second stage of computerized validations is performed at the time you submit your data template. These validations are performed "behind the scenes" by the Office's computer system. These checks notify you by email if you have missed a required cell or made a similar type of data entry error on the data template. At the time your email notification is sent, your data template is returned to your Industry Portal workbench area so that corrections can be made. If you feel you need assistance with the corrections, please contact the Office via email at:

[AnnualA&HReporting\\_1094-1386@fldfs.com](mailto:AnnualA&HReporting_1094-1386@fldfs.com)

### Reviewer Validations:

Once your data submission reaches the Office, a staff member rechecks your data for reasonability. This can include comparing your submitted data to other sources and previous data submission received from your company.

If the reviewer has a question or needs clarification, he/she will contact you by email or phone. This clarification letter will reference the "file log number" assigned to your data submission by the Office. This tracking number will be used on all communication from the Office about your data.

Once the reviewer is satisfied with your data submission, you will receive a final disposition letter by email which closes your data submission filing. Final disposition you will see in these letters include:

1. **FILING NOT REQUIRED:** This means your company is not required to report this data. No further action will be needed on your part.
2. **SUBMISSION ERROR:** This means your submission does not meet the filings standards for this specific reporting requirement. Depending on the type of error your submission contained, you may or may not need to resubmit your data under another Office tracking number.
3. **EXEMPT:** This final disposition means your submission of "NO DATA" meets the reporting requirement for this reporting period. No further action will be needed on your part for the reporting period covered by your data submission. Please note: Receiving an exemption letter does not preclude the necessity of filing additional data or no data filings in the future. In most cases, your company will need to continue to file each reporting period.
4. **WITHDRAWN:** This means your company requested your submission under the assigned file log number be closed by the Office. In most cases, this is done so that you can "start from scratch" and re-file your data under a new file log number.
5. **ACCEPTED:** A final disposition letter of acceptance means that the reviewer has completed his/her reasonability checks and feels your data submission is valid. No further action is required at this time.
6. **REFERRED:** This type of letter means that based on the data submitted and any additional information provided, your data submission will be referred to the Office's Market Investigation Unit for additional follow up.

Line	Section 8: To be completed by all carriers	TOTAL DIRECT PREMIUMS EARNED	DIRECT LOSSES INCURRED	RATIO OF DIRECT LOSSES INCURRED TO DIRECT PREMIUMS EARNED AUTO-CALCULATION	WAS THIS COVERAGE ACTIVELY TRANSACTED DURING THE REPORTING PERIOD?	DIRECT PREMIUMS EARNED FOR NEW BUSINESS ONLY	PERCENTAGE OF NEW BUSINESS PREMIUMS TO TOTAL PREMIUMS AUTO-CALCULATION	EMPLOYERS/GROUPS, IF GROUP COVERAGE, AT END OF REPORTING CY	PRIMARY ENROLLEES AT END OF REPORTING CY	COVERED ENROLLEE DEPENDENTS AT END OF REPORTING CY	COVERED LIVES AT END OF REPORTING CY AUTO-CALCULATION	AVERAGE NUMBER OF DAYS TAKEN TO PAY CLAIMS
<b>Major Medical and/or Hospital/Surgical/Medical Expense</b>												
1	Guarantee Issue (HIPAA, FS 627.6487(3))											
2	Individually Underwritten											
3	Self-Employed or Sole Proprietor (FS 627.6699)											
4	2 - 5 Member Groups (FS 627.6699)											
5	6 - 50 Member Groups (FS 627.6699)											
6	51+ Member Groups (FS 627.652)											
7	Short Term Major Medical											
8	Conversion											
<b>Major Medical and/or Hospital/Surgical/Medical Expense</b>												
9	Guarantee Issue (HIPAA, FS 627.6487(3))											
10	Individually Underwritten											
11	Self-Employed or Sole Proprietor (FS 627.6699)											
12	2 - 5 Member Groups (FS 627.6699)											
13	6 - 50 Member Groups (FS 627.6699)											
14	51+ Member Groups (FS 627.652)											
15	Short Term Major Medical											
16	Conversion											
<b>OTHER ACCIDENT and HEALTH COVERAGES</b>												
17	Other Prepaid Health Services not listed below: (Includes ambulance services, mental health services, substance abuse services, chiropractic services, podiatric care services, and pharmaceutical services)											
18	Discount Medical Plan											
19	Administrative Services Only (ASO) (Please report fees in "Total Direct Premiums Earned" and "Direct Premiums Earned for New Business Only")											
20	Accident Only											
21	Accidental Death & Dismemberment											
22	Blanket Accident/Sickness											
23	Dental											
24	Disability Income (includes Business Overhead Expense; Short Term; Long Term; and Combined Short Term and Long Term)											
25	Excess/Stop Loss (includes Accident & Sickness; Managed Care; Provider; and Self-Funded Health Plan)											
26	Hospital Indemnity											
27	Limited Benefit (includes Specified Disease; Critical Illness; Dread Disease; Dread Disease - Cancer Only; HIV Indemnity; Intensive Care; and Organ & Tissue Transplant)											
28	Long Term Care (includes long term care, nursing home, and home care contracts that provide reimbursement)											
29	Short Term Care (includes Home Health Care; Nursing Home; and Adult Day Care)											
30	Medicare Supplement											
31	Champus/ Tricare Supplement											
32	Prescription Drug											
33	Sickness											
34	Student											
35	Travel											
36	Vision											
37	Other - NOT to include the following: Medicare (All Titles), Medicare + Choice, HCPP, Medicaid (All Titles), SCHIP, FEHBP, Florida Healthy Kids, Florida Health Flex Plans, self-insured business, credit (group and individual), or credit A&H (group and individual)											
<b>RECONCILIATION</b>												
38	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees as reported to the Office in Annual Financial Statement			0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
39	Auto Calculation of the Total of lines 1-37, "Total Direct Premiums Earned" above (If different from line 38, address this issue by uploading an explanatory letter addressed to the Office via the "Supplementary Information" function in "Filing Component List" section of the IPortal.)	\$0										

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