



**DEPARTMENT OF FINANCIAL SERVICES**

*Office of Insurance Regulation – Bureau of Life and Health Insurer Solvency*

**ANNUAL REPORT**

**MANAGED**

**CARE**

**COMPANY:** \_\_\_\_\_

**YEAR ENDING:** \_\_\_\_\_

**Number of health contracts issued and outstanding and number terminated.**

**[HMOs-641.26(1)(d), F.S.; PHCs-641.41(1)(c), F.S.; PLHSOs-636.043(2)(c), F.S.]**

**Group subscriber contracts issued and outstanding**

\_\_\_\_\_

**Individual subscriber contracts issued and outstanding**

\_\_\_\_\_

**Group subscriber contracts terminated**

\_\_\_\_\_

**Individual subscriber contracts terminated**

\_\_\_\_\_