



# HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2013  
OF THE CONDITION AND AFFAIRS OF THE

## SilverScript Insurance Company

NAIC Group Code 4667 4667 NAIC Company Code 12575 Employer's ID Number 20-2833904  
(Current) (Prior)

Organized under the Laws of Tennessee, State of Domicile or Port of Entry Tennessee

Country of Domicile United States of America

Licensed as business type: Life, Accident & Health

Is HMO Federally Qualified? Yes [ ] No [ X ]

Incorporated/Organized 05/11/2005 Commenced Business 01/01/2006

Statutory Home Office 445 Great Circle Road, Nashville, TN, US 37228  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 445 Great Circle Road  
(Street and Number)  
Nashville, TN, US 37228, 615-743-6600  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 445 Great Circle Road, Nashville, TN, US 37228  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 445 Great Circle Road  
(Street and Number)  
Nashville, TN, US 37228, 615-743-6600  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address http://www.silverscript.com

Statutory Statement Contact Anthony Graham Strong, 401-770-7699  
(Name) (Area Code) (Telephone Number)  
Anthony.Strong@CVSCaremark.com, 401-733-0551  
(E-mail Address) (FAX Number)

### OFFICERS

President Todd Dean Meek # Treasurer Anthony Graham Strong  
Vice President Michael Anthony McNelis Secretary Michele Wugalter Buchanan

### OTHER

Rebecca Conway Justice Actuary

### DIRECTORS OR TRUSTEES

Joseph Craig LaPine Harold Neil Lund Todd Dean Meek  
Melanie Christine Merlino # Mary Kristina Meyer # David Scott Azzolina #

State of \_\_\_\_\_ SS:  
County of \_\_\_\_\_

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Todd Dean Meek  
President

Michele Wugalter Buchanan  
Secretary

Anthony Graham Strong  
Treasurer

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

- a. Is this an original filing? ..... Yes [ X ] No [ ]  
b. If no,  
1. State the amendment number.....  
2. Date filed.....  
3. Number of pages attached.....

**EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....	3,233,464	125,698	4,803,774	60,836,242	68,845,836	153,342
Group Subscribers:						
0299998. Premiums due and unpaid not individually listed	6,213,322	(3,095,531)	1,951,220	11,366,966	11,358,537	5,077,440
0299999. Total group	6,213,322	(3,095,531)	1,951,220	11,366,966	11,358,537	5,077,440
0399999. Premiums due and unpaid from Medicare entities	11,658,435				50,307	11,608,128
0499999. Premiums due and unpaid from Medicaid entities						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	21,105,221	(2,969,833)	6,754,994	72,203,208	80,254,680	16,838,910

Exhibit 3 - Health Care Receivables

**N O N E**

Exhibit 3A - Health Care Receivables Collected and Accrued

**N O N E**

**EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)**

**Aging Analysis of Unpaid Claims**

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
CVS Caremark Part D Services, L.L.C. ....	179,951,890					179,951,890
0199999. Individually listed claims unpaid	179,951,890	0	0	0	0	179,951,890
0299999. Aggregate accounts not individually listed- uncovered						0
0399999. Aggregate accounts not individually listed-covered	39,149					39,149
0499999. Subtotals	179,991,039	0	0	0	0	179,991,039
0599999. Unreported claims and other claim reserves						73,643,448
0699999. Total amounts withheld						
0799999. Total claims unpaid						253,634,487
0899999. Accrued medical incentive pool and bonus amounts						200,000

**EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES**

1 Name of Affiliate	2 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
0399999 Total gross amounts receivable							

**NONE**

**EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES**

1 Affiliate	2 Description	3 Amount	4 Current	5 Non-Current
Caremark Rx, L.L.C. ....	Amounts payable to reimburse payroll and other administrative expenses, net of funding .....	72,947,614	72,947,614	
CVS Caremark Part D Services, L.L.C. ....	Amounts payable for unpaid fees .....	23,446,805	23,446,805	
CVS Caremark Part D Services, L.L.C. ....	Amounts payable for uninsured plan expenses .....	711,821,477	711,821,477	
CVS Caremark Part D Services, L.L.C. ....	Payable for pharmacy claims processed .....	179,951,890	179,951,890	
CVS Caremark Part D Services, L.L.C. ....	Payable to affiliate included in unpaid claims .....	(179,951,890)	(179,951,890)	
0199999. Individually listed payables		808,215,896	808,215,896	0
0299999. Payables not individually listed		0		
0399999 Total gross payables		808,215,896	808,215,896	0

**EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS**

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	0	0.0		0.0		
2. Intermediaries .....	0	0.0		0.0		
3. All other providers .....	0	0.0		0.0		
4. Total capitation payments .....	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service .....	0	0.0	XXX	XXX		
6. Contractual fee payments .....	0	0.0	XXX	XXX		
7. Bonus/withhold arrangements - fee-for-service .....	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments .....	0	0.0	XXX	XXX		
9. Non-contingent salaries .....	0	0.0	XXX	XXX		
10. Aggregate cost arrangements .....	0	0.0	XXX	XXX		
11. All other payments .....	2,926,978,868	100.0	XXX	XXX	2,926,220,639	758,229
12. Total other payments .....	2,926,978,868	100.0	XXX	XXX	2,926,220,639	758,229
13. TOTAL (Line 4 plus Line 12)	2,926,978,868	100%	XXX	XXX	2,926,220,639	758,229

**EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

1 NAIC Code	Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
<b>NONE</b>					
9999999 Totals			XXX	XXX	XXX

Exhibit 8 - Furniture and Equipment Owned

**N O N E**



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Alabama		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	11,736									11,736		
2. First Quarter .....	59,735	0	0	0	0	0	0	0	0	59,735		
3. Second Quarter .....	58,326	0	0	0	0	0	0	0	0	58,326		
4. Third Quarter .....	57,079	0	0	0	0	0	0	0	0	57,079		
5. Current Year .....	55,775	0	0	0	0	0	0	0	0	55,775		
6. Current Year Member Months	686,305	0	0	0	0	0	0	0	0	686,305		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	65,555,691	0	0	0	0	0	0	0	0	65,555,691		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	62,232,417	0	0	0	0	0	0	0	0	62,232,417		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	44,328,014	0	0	0	0	0	0	0	0	44,328,014		
18. Amount Incurred for Provision of Health Care Services	47,669,698	0	0	0	0	0	0	0	0	47,669,698		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....65,555,691

30.AL



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Alaska		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	670									670		
2. First Quarter .....	1,638	0	0	0	0	0	0	0	0	1,638		
3. Second Quarter .....	1,605	0	0	0	0	0	0	0	0	1,605		
4. Third Quarter .....	1,559	0	0	0	0	0	0	0	0	1,559		
5. Current Year .....	1,519	0	0	0	0	0	0	0	0	1,519		
6. Current Year Member Months	18,991	0	0	0	0	0	0	0	0	18,991		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	1,900,236	0	0	0	0	0	0	0	0	1,900,236		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	1,828,966	0	0	0	0	0	0	0	0	1,828,966		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	1,271,593	0	0	0	0	0	0	0	0	1,271,593		
18. Amount Incurred for Provision of Health Care Services	1,367,452	0	0	0	0	0	0	0	0	1,367,452		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....1,900,236

30.AK



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arizona		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	3,332									3,332		
2. First Quarter .....	41,770	0	0	0	0	0	0	0	0	41,770		
3. Second Quarter .....	40,131	0	0	0	0	0	0	0	0	40,131		
4. Third Quarter .....	38,838	0	0	0	0	0	0	0	0	38,838		
5. Current Year .....	37,595	0	0	0	0	0	0	0	0	37,595		
6. Current Year Member Months	470,702	0	0	0	0	0	0	0	0	470,702		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	36,449,257	0	0	0	0	0	0	0	0	36,449,257		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	34,493,819	0	0	0	0	0	0	0	0	34,493,819		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	23,658,409	0	0	0	0	0	0	0	0	23,658,409		
18. Amount Incurred for Provision of Health Care Services	25,441,907	0	0	0	0	0	0	0	0	25,441,907		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....36,449,257

30.AZ



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Arkansas		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	5,008									5,008		
2. First Quarter .....	50,727	0	0	0	0	0	0	0	0	50,727		
3. Second Quarter .....	49,227	0	0	0	0	0	0	0	0	49,227		
4. Third Quarter .....	47,744	0	0	0	0	0	0	0	0	47,744		
5. Current Year .....	46,551	0	0	0	0	0	0	0	0	46,551		
6. Current Year Member Months	583,025	0	0	0	0	0	0	0	0	583,025		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	54,925,660	0	0	0	0	0	0	0	0	54,925,660		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	51,889,514	0	0	0	0	0	0	0	0	51,889,514		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	36,446,192	0	0	0	0	0	0	0	0	36,446,192		
18. Amount Incurred for Provision of Health Care Services	39,193,702	0	0	0	0	0	0	0	0	39,193,702		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....54,925,660

30 AR



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		California		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	293,070									293,070		
2. First Quarter .....	477,014	0	0	0	0	0	0	0	0	477,014		
3. Second Quarter .....	463,712	0	0	0	0	0	0	0	0	463,712		
4. Third Quarter .....	452,497	0	0	0	0	0	0	0	0	452,497		
5. Current Year .....	441,270	0	0	0	0	0	0	0	0	441,270		
6. Current Year Member Months	5,450,939	0	0	0	0	0	0	0	0	5,450,939		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	477,565,479	0	0	0	0	0	0	0	0	477,565,479		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	462,020,799	0	0	0	0	0	0	0	0	462,020,799		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	404,170,238	0	0	0	0	0	0	0	0	404,170,238		
18. Amount Incurred for Provision of Health Care Services	434,638,766	0	0	0	0	0	0	0	0	434,638,766		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....477,565,479

30.CA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Colorado	DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	3,899													3,899
2. First Quarter .....	18,638	0	0	0	0	0	0	0	0	0	0	0	0	18,638
3. Second Quarter .....	18,144	0	0	0	0	0	0	0	0	0	0	0	0	18,144
4. Third Quarter .....	17,735	0	0	0	0	0	0	0	0	0	0	0	0	17,735
5. Current Year .....	17,250	0	0	0	0	0	0	0	0	0	0	0	0	17,250
6. Current Year Member Months	213,996	0	0	0	0	0	0	0	0	0	0	0	0	213,996
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	19,142,747	0	0	0	0	0	0	0	0	0	0	0	0	19,142,747
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	18,290,633	0	0	0	0	0	0	0	0	0	0	0	0	18,290,633
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	15,382,587	0	0	0	0	0	0	0	0	0	0	0	0	15,382,587
18. Amount Incurred for Provision of Health Care Services	16,542,209	0	0	0	0	0	0	0	0	0	0	0	0	16,542,209

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....19,142,747

30.00



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Connecticut		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	27,199									27,199		
2. First Quarter .....	53,507	0	0	0	0	0	0	0	0	53,507		
3. Second Quarter .....	51,793	0	0	0	0	0	0	0	0	51,793		
4. Third Quarter .....	50,424	0	0	0	0	0	0	0	0	50,424		
5. Current Year .....	49,055	0	0	0	0	0	0	0	0	49,055		
6. Current Year Member Months	612,106	0	0	0	0	0	0	0	0	612,106		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	57,873,893	0	0	0	0	0	0	0	0	57,873,893		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	55,957,382	0	0	0	0	0	0	0	0	55,957,382		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	45,599,624	0	0	0	0	0	0	0	0	45,599,624		
18. Amount Incurred for Provision of Health Care Services	49,037,169	0	0	0	0	0	0	0	0	49,037,169		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....57,873,893

30.CT



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Delaware		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	2,008									2,008		
2. First Quarter .....	9,449	0	0	0	0	0	0	0	0	9,449		
3. Second Quarter .....	9,378	0	0	0	0	0	0	0	0	9,378		
4. Third Quarter .....	9,246	0	0	0	0	0	0	0	0	9,246		
5. Current Year .....	9,078	0	0	0	0	0	0	0	0	9,078		
6. Current Year Member Months	109,988	0	0	0	0	0	0	0	0	109,988		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	10,178,694	0	0	0	0	0	0	0	0	10,178,694		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	9,684,271	0	0	0	0	0	0	0	0	9,684,271		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	8,772,717	0	0	0	0	0	0	0	0	8,772,717		
18. Amount Incurred for Provision of Health Care Services	9,434,051	0	0	0	0	0	0	0	0	9,434,051		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....10,178,694

30 DE



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							12575
		District of Columbia		2013							
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	1	2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
<b>Total Members at end of:</b>											
1. Prior Year .....	1,931									1,931	
2. First Quarter .....	5,740	0	0	0	0	0	0	0	0	5,740	
3. Second Quarter .....	5,601	0	0	0	0	0	0	0	0	5,601	
4. Third Quarter .....	5,447	0	0	0	0	0	0	0	0	5,447	
5. Current Year .....	5,349	0	0	0	0	0	0	0	0	5,349	
6. Current Year Member Months	66,793	0	0	0	0	0	0	0	0	66,793	
<b>Total Member Ambulatory Encounters for Year:</b>											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b) .....	6,946,101	0	0	0	0	0	0	0	0	6,946,101	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written .....	0										
15. Health Premiums Earned .....	6,634,845	0	0	0	0	0	0	0	0	6,634,845	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	4,954,575	0	0	0	0	0	0	0	0	4,954,575	
18. Amount Incurred for Provision of Health Care Services	5,328,078	0	0	0	0	0	0	0	0	5,328,078	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....6,946,101

30.DC



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF	Florida		DURING THE YEAR					2013		NAIC Company Code		12575
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
				2	3								Medicare Supplement	Vision Only
Total	Individual	Group												
<b>Total Members at end of:</b>														
1. Prior Year .....	190,915													190,915
2. First Quarter .....	115,952	0	0	0	0	0	0	0	0	0	0	0	0	115,952
3. Second Quarter .....	110,923	0	0	0	0	0	0	0	0	0	0	0	0	110,923
4. Third Quarter .....	105,695	0	0	0	0	0	0	0	0	0	0	0	0	105,695
5. Current Year .....	101,543	0	0	0	0	0	0	0	0	0	0	0	0	101,543
6. Current Year Member Months	1,296,286	0	0	0	0	0	0	0	0	0	0	0	0	1,296,286
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	120,428,125	0	0	0	0	0	0	0	0	0	0	0	0	120,428,125
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	122,410,270	0	0	0	0	0	0	0	0	0	0	0	0	122,410,270
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	112,515,055	0	0	0	0	0	0	0	0	0	0	0	0	112,515,055
18. Amount Incurred for Provision of Health Care Services	120,997,045	0	0	0	0	0	0	0	0	0	0	0	0	120,997,045

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 120,428,125



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Georgia		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year	16,463									16,463		
2. First Quarter	112,625	0	0	0	0	0	0	0	0	112,625		
3. Second Quarter	108,720	0	0	0	0	0	0	0	0	108,720		
4. Third Quarter	104,953	0	0	0	0	0	0	0	0	104,953		
5. Current Year	101,577	0	0	0	0	0	0	0	0	101,577		
6. Current Year Member Months	1,283,742	0	0	0	0	0	0	0	0	1,283,742		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	127,056,790	0	0	0	0	0	0	0	0	127,056,790		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	120,310,165	0	0	0	0	0	0	0	0	120,310,165		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	89,915,377	0	0	0	0	0	0	0	0	89,915,377		
18. Amount Incurred for Provision of Health Care Services	96,693,681	0	0	0	0	0	0	0	0	96,693,681		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 127,056,790

30.GA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Hawaii		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	2,890									2,890		
2. First Quarter .....	4,416	0	0	0	0	0	0	0	0	4,416		
3. Second Quarter .....	4,321	0	0	0	0	0	0	0	0	4,321		
4. Third Quarter .....	4,096	0	0	0	0	0	0	0	0	4,096		
5. Current Year .....	3,479	0	0	0	0	0	0	0	0	3,479		
6. Current Year Member Months	48,184	0	0	0	0	0	0	0	0	48,184		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	4,043,830	0	0	0	0	0	0	0	0	4,043,830		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	3,942,658	0	0	0	0	0	0	0	0	3,942,658		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	2,809,978	0	0	0	0	0	0	0	0	2,809,978		
18. Amount Incurred for Provision of Health Care Services	3,021,809	0	0	0	0	0	0	0	0	3,021,809		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....4,043,830

30.HI



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Idaho		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	6,928									6,928		
2. First Quarter .....	15,980	0	0	0	0	0	0	0	0	15,980		
3. Second Quarter .....	15,618	0	0	0	0	0	0	0	0	15,618		
4. Third Quarter .....	15,356	0	0	0	0	0	0	0	0	15,356		
5. Current Year .....	15,050	0	0	0	0	0	0	0	0	15,050		
6. Current Year Member Months	183,828	0	0	0	0	0	0	0	0	183,828		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	17,151,958	0	0	0	0	0	0	0	0	17,151,958		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	16,503,981	0	0	0	0	0	0	0	0	16,503,981		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	11,691,563	0	0	0	0	0	0	0	0	11,691,563		
18. Amount Incurred for Provision of Health Care Services	12,572,936	0	0	0	0	0	0	0	0	12,572,936		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....17,151,958

30.ID



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF	Illinois		DURING THE YEAR					2013		NAIC Company Code		12575
			Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10			
			2	3								Medicare Supplement	Vision Only	Dental Only
	Total	Individual	Group											
<b>Total Members at end of:</b>														
1. Prior Year .....	41,463													41,463
2. First Quarter .....	119,897	0	0	0	0	0	0	0	0	0	0	0	0	119,897
3. Second Quarter .....	117,441	0	0	0	0	0	0	0	0	0	0	0	0	117,441
4. Third Quarter .....	115,141	0	0	0	0	0	0	0	0	0	0	0	0	115,141
5. Current Year .....	112,816	0	0	0	0	0	0	0	0	0	0	0	0	112,816
6. Current Year Member Months	1,381,479	0	0	0	0	0	0	0	0	0	0	0	0	1,381,479
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	129,038,033	0	0	0	0	0	0	0	0	0	0	0	0	129,038,033
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	123,865,992	0	0	0	0	0	0	0	0	0	0	0	0	123,865,992
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	92,546,095	0	0	0	0	0	0	0	0	0	0	0	0	92,546,095
18. Amount Incurred for Provision of Health Care Services	99,522,717	0	0	0	0	0	0	0	0	0	0	0	0	99,522,717

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....129,038,033

30.LL



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Indiana	DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	15,250													15,250
2. First Quarter .....	69,328	0	0	0	0	0	0	0	0	0				69,328
3. Second Quarter .....	67,366	0	0	0	0	0	0	0	0	0				67,366
4. Third Quarter .....	65,902	0	0	0	0	0	0	0	0	0				65,902
5. Current Year .....	64,389	0	0	0	0	0	0	0	0	0				64,389
6. Current Year Member Months	793,183	0	0	0	0	0	0	0	0	0				793,183
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0				0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	78,218,293	0	0	0	0	0	0	0	0	0				78,218,293
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	74,417,061	0	0	0	0	0	0	0	0	0				74,417,061
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	58,229,724	0	0	0	0	0	0	0	0	0				58,229,724
18. Amount Incurred for Provision of Health Care Services	62,619,394	0	0	0	0	0	0	0	0	0				62,619,394

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....78,218,293

30 IN



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF Iowa		DURING THE YEAR 2013							NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	13,308									13,308		
2. First Quarter .....	51,451	0	0	0	0	0	0	0	0	51,451		
3. Second Quarter .....	50,502	0	0	0	0	0	0	0	0	50,502		
4. Third Quarter .....	49,765	0	0	0	0	0	0	0	0	49,765		
5. Current Year .....	48,928	0	0	0	0	0	0	0	0	48,928		
6. Current Year Member Months	602,534	0	0	0	0	0	0	0	0	602,534		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	56,592,580	0	0	0	0	0	0	0	0	56,592,580		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	54,207,035	0	0	0	0	0	0	0	0	54,207,035		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	39,510,576	0	0	0	0	0	0	0	0	39,510,576		
18. Amount Incurred for Provision of Health Care Services	42,489,095	0	0	0	0	0	0	0	0	42,489,095		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....56,592,580

30.1A



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							2013	(LOCATION)	
		Kansas									NAIC Company Code	12575	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10			
		2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other			
		Total	Individual	Group									
<b>Total Members at end of:</b>													
1.	Prior Year .....	2,805								2,805			
2.	First Quarter .....	39,493	0	0	0	0	0	0	0	39,493			
3.	Second Quarter .....	38,712	0	0	0	0	0	0	0	38,712			
4.	Third Quarter .....	38,025	0	0	0	0	0	0	0	38,025			
5.	Current Year .....	37,366	0	0	0	0	0	0	0	37,366			
6.	Current Year Member Months	456,212	0	0	0	0	0	0	0	456,212			
<b>Total Member Ambulatory Encounters for Year:</b>													
7.	Physician .....	0											
8.	Non-Physician .....	0											
9.	Total	0	0	0	0	0	0	0	0	0			
10.	Hospital Patient Days Incurred	0											
11.	Number of Inpatient Admissions	0											
12.	Health Premiums Written (b) .....	45,720,575	0	0	0	0	0	0	0	45,720,575			
13.	Life Premiums Direct	0											
14.	Property/Casualty Premiums Written .....	0											
15.	Health Premiums Earned .....	43,588,820	0	0	0	0	0	0	0	43,588,820			
16.	Property/Casualty Premiums Earned	0											
17.	Amount Paid for Provision of Health Care Services.....	32,580,202	0	0	0	0	0	0	0	32,580,202			
18.	Amount Incurred for Provision of Health Care Services	35,036,273	0	0	0	0	0	0	0	35,036,273			

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....45,720,575

30 KS



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Kentucky							DURING THE YEAR		2013	(LOCATION)		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10						
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other						
<b>Total Members at end of:</b>																
1. Prior Year .....	12,002															12,002
2. First Quarter .....	66,068	0	0	0	0	0	0	0	0	0	0	0	0	0	0	66,068
3. Second Quarter .....	63,994	0	0	0	0	0	0	0	0	0	0	0	0	0	0	63,994
4. Third Quarter .....	62,670	0	0	0	0	0	0	0	0	0	0	0	0	0	0	62,670
5. Current Year .....	61,324	0	0	0	0	0	0	0	0	0	0	0	0	0	0	61,324
6. Current Year Member Months	761,562	0	0	0	0	0	0	0	0	0	0	0	0	0	0	761,562
<b>Total Member Ambulatory Encounters for Year:</b>																
7. Physician .....	0															
8. Non-Physician .....	0															
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0															
11. Number of Inpatient Admissions	0															
12. Health Premiums Written (b) .....	73,660,989	0	0	0	0	0	0	0	0	0	0	0	0	0	0	73,660,989
13. Life Premiums Direct	0															
14. Property/Casualty Premiums Written .....	0															
15. Health Premiums Earned .....	69,940,611	0	0	0	0	0	0	0	0	0	0	0	0	0	0	69,940,611
16. Property/Casualty Premiums Earned	0															
17. Amount Paid for Provision of Health Care Services.....	49,912,466	0	0	0	0	0	0	0	0	0	0	0	0	0	0	49,912,466
18. Amount Incurred for Provision of Health Care Services	53,675,137	0	0	0	0	0	0	0	0	0	0	0	0	0	0	53,675,137

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....73,660,989

30.KY



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Louisiana		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	43,051									43,051		
2. First Quarter .....	91,975	0	0	0	0	0	0	0	0	91,975		
3. Second Quarter .....	90,232	0	0	0	0	0	0	0	0	90,232		
4. Third Quarter .....	88,135	0	0	0	0	0	0	0	0	88,135		
5. Current Year .....	85,943	0	0	0	0	0	0	0	0	85,943		
6. Current Year Member Months	1,070,044	0	0	0	0	0	0	0	0	1,070,044		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	101,349,070	0	0	0	0	0	0	0	0	101,349,070		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	97,491,370	0	0	0	0	0	0	0	0	97,491,370		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	74,176,837	0	0	0	0	0	0	0	0	74,176,837		
18. Amount Incurred for Provision of Health Care Services	79,768,686	0	0	0	0	0	0	0	0	79,768,686		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 101,349,070

30.LA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maine		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	1,007									1,007		
2. First Quarter .....	6,146	0	0	0	0	0	0	0	0	6,146		
3. Second Quarter .....	6,015	0	0	0	0	0	0	0	0	6,015		
4. Third Quarter .....	5,910	0	0	0	0	0	0	0	0	5,910		
5. Current Year .....	5,827	0	0	0	0	0	0	0	0	5,827		
6. Current Year Member Months	70,936	0	0	0	0	0	0	0	0	70,936		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	6,152,751	0	0	0	0	0	0	0	0	6,152,751		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	5,861,136	0	0	0	0	0	0	0	0	5,861,136		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	4,548,263	0	0	0	0	0	0	0	0	4,548,263		
18. Amount Incurred for Provision of Health Care Services	4,891,135	0	0	0	0	0	0	0	0	4,891,135		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....6,152,751

30 ME



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maryland		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	11,845									11,845		
2. First Quarter .....	37,533	0	0	0	0	0	0	0	0	37,533		
3. Second Quarter .....	36,988	0	0	0	0	0	0	0	0	36,988		
4. Third Quarter .....	36,215	0	0	0	0	0	0	0	0	36,215		
5. Current Year .....	35,395	0	0	0	0	0	0	0	0	35,395		
6. Current Year Member Months	436,998	0	0	0	0	0	0	0	0	436,998		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	44,145,817	0	0	0	0	0	0	0	0	44,145,817		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	42,192,694	0	0	0	0	0	0	0	0	42,192,694		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	34,691,032	0	0	0	0	0	0	0	0	34,691,032		
18. Amount Incurred for Provision of Health Care Services	37,306,229	0	0	0	0	0	0	0	0	37,306,229		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....44,145,817

30.MD



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Massachusetts	DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	75,076													75,076
2. First Quarter .....	140,103	0	0	0	0	0	0	0	0	0				140,103
3. Second Quarter .....	136,789	0	0	0	0	0	0	0	0	0				136,789
4. Third Quarter .....	133,946	0	0	0	0	0	0	0	0	0				133,946
5. Current Year .....	128,863	0	0	0	0	0	0	0	0	0				128,863
6. Current Year Member Months	1,626,760	0	0	0	0	0	0	0	0	0				1,626,760
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0				0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	152,191,531	0	0	0	0	0	0	0	0	0				152,191,531
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	147,483,792	0	0	0	0	0	0	0	0	0				147,483,792
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	99,629,272	0	0	0	0	0	0	0	0	0				99,629,272
18. Amount Incurred for Provision of Health Care Services	107,139,863	0	0	0	0	0	0	0	0	0				107,139,863

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 152,191,531

30.MA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Michigan		DURING THE YEAR					2013	NAIC Company Code		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	23,982												23,982	
2. First Quarter .....	84,018	0	0	0	0	0	0	0	0	0			84,018	
3. Second Quarter .....	82,006	0	0	0	0	0	0	0	0	0			82,006	
4. Third Quarter .....	80,058	0	0	0	0	0	0	0	0	0			80,058	
5. Current Year .....	78,164	0	0	0	0	0	0	0	0	0			78,164	
6. Current Year Member Months	962,691	0	0	0	0	0	0	0	0	0			962,691	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0			0	
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	95,577,047	0	0	0	0	0	0	0	0	0			95,577,047	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	91,206,698	0	0	0	0	0	0	0	0	0			91,206,698	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	68,723,691	0	0	0	0	0	0	0	0	0			68,723,691	
18. Amount Incurred for Provision of Health Care Services	73,904,452	0	0	0	0	0	0	0	0	0			73,904,452	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....95,577,047

30.MI



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Minnesota		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year	18,530									18,530		
2. First Quarter	47,226	0	0	0	0	0	0	0	0	47,226		
3. Second Quarter	46,256	0	0	0	0	0	0	0	0	46,256		
4. Third Quarter	45,441	0	0	0	0	0	0	0	0	45,441		
5. Current Year	44,535	0	0	0	0	0	0	0	0	44,535		
6. Current Year Member Months	551,060	0	0	0	0	0	0	0	0	551,060		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician	0											
8. Non-Physician	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b)	50,655,229	0	0	0	0	0	0	0	0	50,655,229		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	48,654,147	0	0	0	0	0	0	0	0	48,654,147		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services	36,968,004	0	0	0	0	0	0	0	0	36,968,004		
18. Amount Incurred for Provision of Health Care Services	39,754,851	0	0	0	0	0	0	0	0	39,754,851		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....50,655,229

30 MN



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							2013	(LOCATION)	
		Mississippi									NAIC Company Code	12575	
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10			
		1	2	3									
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>													
1.	Prior Year .....	12,462										12,462	
2.	First Quarter .....	60,434	0	0	0	0	0	0	0	0		60,434	
3.	Second Quarter .....	58,892	0	0	0	0	0	0	0	0		58,892	
4.	Third Quarter .....	57,601	0	0	0	0	0	0	0	0		57,601	
5.	Current Year .....	56,365	0	0	0	0	0	0	0	0		56,365	
6.	Current Year Member Months	700,119	0	0	0	0	0	0	0	0		700,119	
<b>Total Member Ambulatory Encounters for Year:</b>													
7.	Physician .....	0											
8.	Non-Physician .....	0											
9.	Total	0	0	0	0	0	0	0	0	0		0	
10.	Hospital Patient Days Incurred	0											
11.	Number of Inpatient Admissions	0											
12.	Health Premiums Written (b) .....	65,663,475	0	0	0	0	0	0	0	0		65,663,475	
13.	Life Premiums Direct	0											
14.	Property/Casualty Premiums Written .....	0											
15.	Health Premiums Earned .....	62,379,192	0	0	0	0	0	0	0	0		62,379,192	
16.	Property/Casualty Premiums Earned	0											
17.	Amount Paid for Provision of Health Care Services.....	48,455,937	0	0	0	0	0	0	0	0		48,455,937	
18.	Amount Incurred for Provision of Health Care Services	52,108,807	0	0	0	0	0	0	0	0		52,108,807	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....65,663,475

SW 00



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Missouri	DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	22,464													22,464
2. First Quarter .....	114,221	0	0	0	0	0	0	0	0	0				114,221
3. Second Quarter .....	110,909	0	0	0	0	0	0	0	0	0				110,909
4. Third Quarter .....	108,091	0	0	0	0	0	0	0	0	0				108,091
5. Current Year .....	105,142	0	0	0	0	0	0	0	0	0				105,142
6. Current Year Member Months	1,313,787	0	0	0	0	0	0	0	0	0				1,313,787
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0				0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	130,528,482	0	0	0	0	0	0	0	0	0				130,528,482
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	123,947,141	0	0	0	0	0	0	0	0	0				123,947,141
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	90,738,535	0	0	0	0	0	0	0	0	0				90,738,535
18. Amount Incurred for Provision of Health Care Services	97,578,894	0	0	0	0	0	0	0	0	0				97,578,894

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 130,528,482

30.MO



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Montana		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	5,236									5,236		
2. First Quarter .....	14,330	0	0	0	0	0	0	0	0	14,330		
3. Second Quarter .....	13,990	0	0	0	0	0	0	0	0	13,990		
4. Third Quarter .....	13,729	0	0	0	0	0	0	0	0	13,729		
5. Current Year .....	13,466	0	0	0	0	0	0	0	0	13,466		
6. Current Year Member Months	166,220	0	0	0	0	0	0	0	0	166,220		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	14,571,825	0	0	0	0	0	0	0	0	14,571,825		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	13,994,549	0	0	0	0	0	0	0	0	13,994,549		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	9,678,081	0	0	0	0	0	0	0	0	9,678,081		
18. Amount Incurred for Provision of Health Care Services	10,407,667	0	0	0	0	0	0	0	0	10,407,667		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....14,571,825

30.MT



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Nebraska		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	7,556									7,556		
2. First Quarter .....	26,981	0	0	0	0	0	0	0	0	26,981		
3. Second Quarter .....	26,352	0	0	0	0	0	0	0	0	26,352		
4. Third Quarter .....	25,843	0	0	0	0	0	0	0	0	25,843		
5. Current Year .....	25,317	0	0	0	0	0	0	0	0	25,317		
6. Current Year Member Months	312,358	0	0	0	0	0	0	0	0	312,358		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	27,958,401	0	0	0	0	0	0	0	0	27,958,401		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	26,709,678	0	0	0	0	0	0	0	0	26,709,678		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	21,182,411	0	0	0	0	0	0	0	0	21,182,411		
18. Amount Incurred for Provision of Health Care Services	22,779,255	0	0	0	0	0	0	0	0	22,779,255		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....27,958,401

30.NE



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Nevada		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	3,766									3,766		
2. First Quarter .....	14,130	0	0	0	0	0	0	0	0	14,130		
3. Second Quarter .....	13,832	0	0	0	0	0	0	0	0	13,832		
4. Third Quarter .....	13,577	0	0	0	0	0	0	0	0	13,577		
5. Current Year .....	13,205	0	0	0	0	0	0	0	0	13,205		
6. Current Year Member Months	159,033	0	0	0	0	0	0	0	0	159,033		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	13,974,750	0	0	0	0	0	0	0	0	13,974,750		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	13,344,807	0	0	0	0	0	0	0	0	13,344,807		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	9,791,195	0	0	0	0	0	0	0	0	9,791,195		
18. Amount Incurred for Provision of Health Care Services	10,529,308	0	0	0	0	0	0	0	0	10,529,308		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....13,974,750

30 NV



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)		
		New Hampshire		2013							NAIC Company Code		12575
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other			
<b>Total Members at end of:</b>													
1. Prior Year .....	2,382									2,382			
2. First Quarter .....	10,692	0	0	0	0	0	0	0	0	10,692			
3. Second Quarter .....	10,430	0	0	0	0	0	0	0	0	10,430			
4. Third Quarter .....	10,324	0	0	0	0	0	0	0	0	10,324			
5. Current Year .....	10,093	0	0	0	0	0	0	0	0	10,093			
6. Current Year Member Months	122,819	0	0	0	0	0	0	0	0	122,819			
<b>Total Member Ambulatory Encounters for Year:</b>													
7. Physician .....	0												
8. Non-Physician .....	0												
9. Total	0	0	0	0	0	0	0	0	0	0			
10. Hospital Patient Days Incurred	0												
11. Number of Inpatient Admissions	0												
12. Health Premiums Written (b) .....	11,263,573	0	0	0	0	0	0	0	0	11,263,573			
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written .....	0												
15. Health Premiums Earned .....	10,745,612	0	0	0	0	0	0	0	0	10,745,612			
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services.....	8,375,729	0	0	0	0	0	0	0	0	8,375,729			
18. Amount Incurred for Provision of Health Care Services	9,007,137	0	0	0	0	0	0	0	0	9,007,137			

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....11,263,573

HN'03



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New Jersey		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	115,174									115,174		
2. First Quarter .....	113,688	0	0	0	0	0	0	0	0	113,688		
3. Second Quarter .....	109,726	0	0	0	0	0	0	0	0	109,726		
4. Third Quarter .....	106,414	0	0	0	0	0	0	0	0	106,414		
5. Current Year .....	103,456	0	0	0	0	0	0	0	0	103,456		
6. Current Year Member Months	1,303,001	0	0	0	0	0	0	0	0	1,303,001		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	118,637,019	0	0	0	0	0	0	0	0	118,637,019		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	117,888,753	0	0	0	0	0	0	0	0	117,888,753		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	105,142,618	0	0	0	0	0	0	0	0	105,142,618		
18. Amount Incurred for Provision of Health Care Services	113,068,834	0	0	0	0	0	0	0	0	113,068,834		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ ..... 118,637,019



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							12575
		New Mexico		2013							
		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	1	2	3								
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
<b>Total Members at end of:</b>											
1. Prior Year .....	20,379									20,379	
2. First Quarter .....	35,354	0	0	0	0	0	0	0	0	35,354	
3. Second Quarter .....	34,257	0	0	0	0	0	0	0	0	34,257	
4. Third Quarter .....	33,282	0	0	0	0	0	0	0	0	33,282	
5. Current Year .....	32,325	0	0	0	0	0	0	0	0	32,325	
6. Current Year Member Months	408,128	0	0	0	0	0	0	0	0	408,128	
<b>Total Member Ambulatory Encounters for Year:</b>											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b) .....	28,149,118	0	0	0	0	0	0	0	0	28,149,118	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written .....	0										
15. Health Premiums Earned .....	27,244,207	0	0	0	0	0	0	0	0	27,244,207	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	16,739,712	0	0	0	0	0	0	0	0	16,739,712	
18. Amount Incurred for Provision of Health Care Services	18,001,642	0	0	0	0	0	0	0	0	18,001,642	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....28,149,118

30 NM



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		New York		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	134,325									134,325		
2. First Quarter .....	229,272	0	0	0	0	0	0	0	0	229,272		
3. Second Quarter .....	221,124	0	0	0	0	0	0	0	0	221,124		
4. Third Quarter .....	214,728	0	0	0	0	0	0	0	0	214,728		
5. Current Year .....	208,106	0	0	0	0	0	0	0	0	208,106		
6. Current Year Member Months	2,620,289	0	0	0	0	0	0	0	0	2,620,289		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	263,851,781	0	0	0	0	0	0	0	0	263,851,781		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	262,162,935	0	0	0	0	0	0	0	0	262,162,935		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	211,188,082	0	0	0	0	0	0	0	0	211,188,082		
18. Amount Incurred for Provision of Health Care Services	227,108,576	0	0	0	0	0	0	0	0	227,108,576		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....263,851,781

30.NY



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		North Carolina		DURING THE YEAR					2013	NAIC Company Code		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	35,946												35,946	
2. First Quarter .....	140,151	0	0	0	0	0	0	0	0	0			140,151	
3. Second Quarter .....	137,472	0	0	0	0	0	0	0	0	0			137,472	
4. Third Quarter .....	134,583	0	0	0	0	0	0	0	0	0			134,583	
5. Current Year .....	131,580	0	0	0	0	0	0	0	0	0			131,580	
6. Current Year Member Months	1,625,902	0	0	0	0	0	0	0	0	0			1,625,902	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0			0	
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	153,782,217	0	0	0	0	0	0	0	0	0			153,782,217	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	146,694,313	0	0	0	0	0	0	0	0	0			146,694,313	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	115,754,770	0	0	0	0	0	0	0	0	0			115,754,770	
18. Amount Incurred for Provision of Health Care Services	124,480,987	0	0	0	0	0	0	0	0	0			124,480,987	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....153,782,217

30.NC



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		North Dakota		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	2,221									2,221		
2. First Quarter .....	15,917	0	0	0	0	0	0	0	0	15,917		
3. Second Quarter .....	15,560	0	0	0	0	0	0	0	0	15,560		
4. Third Quarter .....	15,274	0	0	0	0	0	0	0	0	15,274		
5. Current Year .....	14,972	0	0	0	0	0	0	0	0	14,972		
6. Current Year Member Months	185,635	0	0	0	0	0	0	0	0	185,635		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	16,426,089	0	0	0	0	0	0	0	0	16,426,089		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	15,560,188	0	0	0	0	0	0	0	0	15,560,188		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	11,874,843	0	0	0	0	0	0	0	0	11,874,843		
18. Amount Incurred for Provision of Health Care Services	12,770,032	0	0	0	0	0	0	0	0	12,770,032		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....16,426,089

30 IN



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Ohio		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	47,057									47,057		
2. First Quarter .....	149,644	0	0	0	0	0	0	0	0	149,644		
3. Second Quarter .....	146,425	0	0	0	0	0	0	0	0	146,425		
4. Third Quarter .....	143,244	0	0	0	0	0	0	0	0	143,244		
5. Current Year .....	139,874	0	0	0	0	0	0	0	0	139,874		
6. Current Year Member Months	1,732,251	0	0	0	0	0	0	0	0	1,732,251		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	167,776,753	0	0	0	0	0	0	0	0	167,776,753		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	160,311,272	0	0	0	0	0	0	0	0	160,311,272		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	118,815,869	0	0	0	0	0	0	0	0	118,815,869		
18. Amount Incurred for Provision of Health Care Services	127,772,848	0	0	0	0	0	0	0	0	127,772,848		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....167,776,753

HO 00



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Oklahoma	DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	27,048													27,048
2. First Quarter .....	72,008	0	0	0	0	0	0	0	0	0				72,008
3. Second Quarter .....	70,284	0	0	0	0	0	0	0	0	0				70,284
4. Third Quarter .....	68,813	0	0	0	0	0	0	0	0	0				68,813
5. Current Year .....	67,284	0	0	0	0	0	0	0	0	0				67,284
6. Current Year Member Months	833,775	0	0	0	0	0	0	0	0	0				833,775
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0				0
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	77,442,794	0	0	0	0	0	0	0	0	0				77,442,794
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	74,119,212	0	0	0	0	0	0	0	0	0				74,119,212
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	54,067,113	0	0	0	0	0	0	0	0	0				54,067,113
18. Amount Incurred for Provision of Health Care Services	58,142,983	0	0	0	0	0	0	0	0	0				58,142,983

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....77,442,794

30.OK



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							12575
		Oregon		2013							
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	10	
		Individual	Group							Other	
<b>Total Members at end of:</b>											
1.	Prior Year .....	14,725								14,725	
2.	First Quarter .....	31,641	0	0	0	0	0	0	0	31,641	
3.	Second Quarter .....	30,826	0	0	0	0	0	0	0	30,826	
4.	Third Quarter .....	30,206	0	0	0	0	0	0	0	30,206	
5.	Current Year .....	29,475	0	0	0	0	0	0	0	29,475	
6.	Current Year Member Months	363,444	0	0	0	0	0	0	0	363,444	
<b>Total Member Ambulatory Encounters for Year:</b>											
7.	Physician .....	0									
8.	Non-Physician .....	0									
9.	Total	0	0	0	0	0	0	0	0	0	
10.	Hospital Patient Days Incurred	0									
11.	Number of Inpatient Admissions	0									
12.	Health Premiums Written (b) .....	32,222,579	0	0	0	0	0	0	0	32,222,579	
13.	Life Premiums Direct	0									
14.	Property/Casualty Premiums Written .....	0									
15.	Health Premiums Earned .....	31,016,556	0	0	0	0	0	0	0	31,016,556	
16.	Property/Casualty Premiums Earned	0									
17.	Amount Paid for Provision of Health Care Services.....	20,389,408	0	0	0	0	0	0	0	20,389,408	
18.	Amount Incurred for Provision of Health Care Services	21,926,471	0	0	0	0	0	0	0	21,926,471	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....32,222,579

30. OR



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Pennsylvania		DURING THE YEAR					2013	NAIC Company Code		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	57,049												57,049	
2. First Quarter .....	218,052	0	0	0	0	0	0	0	0	0	0	0	218,052	
3. Second Quarter .....	212,441	0	0	0	0	0	0	0	0	0	0	0	212,441	
4. Third Quarter .....	207,217	0	0	0	0	0	0	0	0	0	0	0	207,217	
5. Current Year .....	201,855	0	0	0	0	0	0	0	0	0	0	0	201,855	
6. Current Year Member Months	2,526,405	0	0	0	0	0	0	0	0	0	0	0	2,526,405	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	227,844,896	0	0	0	0	0	0	0	0	0	0	0	227,844,896	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	217,336,134	0	0	0	0	0	0	0	0	0	0	0	217,336,134	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	158,515,328	0	0	0	0	0	0	0	0	0	0	0	158,515,328	
18. Amount Incurred for Provision of Health Care Services	170,465,066	0	0	0	0	0	0	0	0	0	0	0	170,465,066	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....227,844,896



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Rhode Island		DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10					
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other					
<b>Total Members at end of:</b>															
1. Prior Year .....	10,056														10,056
2. First Quarter .....	19,168	0	0	0	0	0	0	0	0	0	0	0	0	0	19,168
3. Second Quarter .....	18,722	0	0	0	0	0	0	0	0	0	0	0	0	0	18,722
4. Third Quarter .....	18,405	0	0	0	0	0	0	0	0	0	0	0	0	0	18,405
5. Current Year .....	17,986	0	0	0	0	0	0	0	0	0	0	0	0	0	17,986
6. Current Year Member Months	222,665	0	0	0	0	0	0	0	0	0	0	0	0	0	222,665
<b>Total Member Ambulatory Encounters for Year:</b>															
7. Physician .....	0														
8. Non-Physician .....	0														
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0														
11. Number of Inpatient Admissions	0														
12. Health Premiums Written (b) .....	20,337,750	0	0	0	0	0	0	0	0	0	0	0	0	0	20,337,750
13. Life Premiums Direct	0														
14. Property/Casualty Premiums Written .....	0														
15. Health Premiums Earned .....	19,659,336	0	0	0	0	0	0	0	0	0	0	0	0	0	19,659,336
16. Property/Casualty Premiums Earned	0														
17. Amount Paid for Provision of Health Care Services.....	13,235,668	0	0	0	0	0	0	0	0	0	0	0	0	0	13,235,668
18. Amount Incurred for Provision of Health Care Services	14,233,444	0	0	0	0	0	0	0	0	0	0	0	0	0	14,233,444

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....20,337,750

30.RI



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		South Carolina		DURING THE YEAR					2013	NAIC Company Code		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	11,976												11,976	
2. First Quarter .....	51,795	0	0	0	0	0	0	0	0	0	0	0	51,795	
3. Second Quarter .....	49,940	0	0	0	0	0	0	0	0	0	0	0	49,940	
4. Third Quarter .....	48,387	0	0	0	0	0	0	0	0	0	0	0	48,387	
5. Current Year .....	46,987	0	0	0	0	0	0	0	0	0	0	0	46,987	
6. Current Year Member Months	588,389	0	0	0	0	0	0	0	0	0	0	0	588,389	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	57,906,359	0	0	0	0	0	0	0	0	0	0	0	57,906,359	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	55,142,824	0	0	0	0	0	0	0	0	0	0	0	55,142,824	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	44,164,217	0	0	0	0	0	0	0	0	0	0	0	44,164,217	
18. Amount Incurred for Provision of Health Care Services	47,493,553	0	0	0	0	0	0	0	0	0	0	0	47,493,553	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....57,906,359

30.SC



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		South Dakota		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	3,125									3,125		
2. First Quarter .....	13,371	0	0	0	0	0	0	0	0	13,371		
3. Second Quarter .....	13,102	0	0	0	0	0	0	0	0	13,102		
4. Third Quarter .....	12,885	0	0	0	0	0	0	0	0	12,885		
5. Current Year .....	12,654	0	0	0	0	0	0	0	0	12,654		
6. Current Year Member Months	156,251	0	0	0	0	0	0	0	0	156,251		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	13,716,377	0	0	0	0	0	0	0	0	13,716,377		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	13,054,983	0	0	0	0	0	0	0	0	13,054,983		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	9,072,880	0	0	0	0	0	0	0	0	9,072,880		
18. Amount Incurred for Provision of Health Care Services	9,756,842	0	0	0	0	0	0	0	0	9,756,842		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....13,716,377

30.SD



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Tennessee		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	15,277									15,277		
2. First Quarter .....	70,843	0	0	0	0	0	0	0	0	70,843		
3. Second Quarter .....	68,238	0	0	0	0	0	0	0	0	68,238		
4. Third Quarter .....	66,396	0	0	0	0	0	0	0	0	66,396		
5. Current Year .....	64,472	0	0	0	0	0	0	0	0	64,472		
6. Current Year Member Months	806,210	0	0	0	0	0	0	0	0	806,210		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	78,752,870	0	0	0	0	0	0	0	0	78,752,870		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	74,864,314	0	0	0	0	0	0	0	0	74,864,314		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	54,277,528	0	0	0	0	0	0	0	0	54,277,528		
18. Amount Incurred for Provision of Health Care Services	58,369,260	0	0	0	0	0	0	0	0	58,369,260		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....78,752,870

30.TN



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Texas		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	41,888									41,888		
2. First Quarter .....	210,193	0	0	0	0	0	0	0	0	210,193		
3. Second Quarter .....	202,429	0	0	0	0	0	0	0	0	202,429		
4. Third Quarter .....	195,847	0	0	0	0	0	0	0	0	195,847		
5. Current Year .....	189,223	0	0	0	0	0	0	0	0	189,223		
6. Current Year Member Months	2,378,360	0	0	0	0	0	0	0	0	2,378,360		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	235,420,028	0	0	0	0	0	0	0	0	235,420,028		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	223,657,375	0	0	0	0	0	0	0	0	223,657,375		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	190,118,894	0	0	0	0	0	0	0	0	190,118,894		
18. Amount Incurred for Provision of Health Care Services	204,451,079	0	0	0	0	0	0	0	0	204,451,079		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....235,420,028

30.TX



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Utah		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	5,749									5,749		
2. First Quarter .....	12,313	0	0	0	0	0	0	0	0	12,313		
3. Second Quarter .....	12,019	0	0	0	0	0	0	0	0	12,019		
4. Third Quarter .....	11,622	0	0	0	0	0	0	0	0	11,622		
5. Current Year .....	11,342	0	0	0	0	0	0	0	0	11,342		
6. Current Year Member Months	141,140	0	0	0	0	0	0	0	0	141,140		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	13,347,166	0	0	0	0	0	0	0	0	13,347,166		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	12,867,761	0	0	0	0	0	0	0	0	12,867,761		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	9,481,630	0	0	0	0	0	0	0	0	9,481,630		
18. Amount Incurred for Provision of Health Care Services	10,196,406	0	0	0	0	0	0	0	0	10,196,406		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....13,347,166

30.JT



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Vermont		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	10,326									10,326		
2. First Quarter .....	17,068	0	0	0	0	0	0	0	0	17,068		
3. Second Quarter .....	16,668	0	0	0	0	0	0	0	0	16,668		
4. Third Quarter .....	16,387	0	0	0	0	0	0	0	0	16,387		
5. Current Year .....	16,027	0	0	0	0	0	0	0	0	16,027		
6. Current Year Member Months	198,865	0	0	0	0	0	0	0	0	198,865		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	16,267,461	0	0	0	0	0	0	0	0	16,267,461		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	15,797,837	0	0	0	0	0	0	0	0	15,797,837		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	12,976,666	0	0	0	0	0	0	0	0	12,976,666		
18. Amount Incurred for Provision of Health Care Services	13,954,917	0	0	0	0	0	0	0	0	13,954,917		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....16,267,461



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Virginia		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	17,848									17,848		
2. First Quarter .....	78,100	0	0	0	0	0	0	0	0	78,100		
3. Second Quarter .....	76,278	0	0	0	0	0	0	0	0	76,278		
4. Third Quarter .....	74,834	0	0	0	0	0	0	0	0	74,834		
5. Current Year .....	73,191	0	0	0	0	0	0	0	0	73,191		
6. Current Year Member Months	905,541	0	0	0	0	0	0	0	0	905,541		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	80,948,539	0	0	0	0	0	0	0	0	80,948,539		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	77,168,044	0	0	0	0	0	0	0	0	77,168,044		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	60,281,004	0	0	0	0	0	0	0	0	60,281,004		
18. Amount Incurred for Provision of Health Care Services	64,825,310	0	0	0	0	0	0	0	0	64,825,310		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....80,948,539

30.VA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		WASHINGTON							12575
		Washington		DURING THE YEAR 2013							NAIC Company Code
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other	
		Individual	Group								
<b>Total Members at end of:</b>											
1. Prior Year .....	33,148									33,148	
2. First Quarter .....	74,818	0	0	0	0	0	0	0	0	74,818	
3. Second Quarter .....	72,801	0	0	0	0	0	0	0	0	72,801	
4. Third Quarter .....	71,187	0	0	0	0	0	0	0	0	71,187	
5. Current Year .....	69,501	0	0	0	0	0	0	0	0	69,501	
6. Current Year Member Months	867,033	0	0	0	0	0	0	0	0	867,033	
<b>Total Member Ambulatory Encounters for Year:</b>											
7. Physician .....	0										
8. Non-Physician .....	0										
9. Total	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0										
11. Number of Inpatient Admissions	0										
12. Health Premiums Written (b) .....	75,296,105	0	0	0	0	0	0	0	0	75,296,105	
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written .....	0										
15. Health Premiums Earned .....	72,454,573	0	0	0	0	0	0	0	0	72,454,573	
16. Property/Casualty Premiums Earned	0										
17. Amount Paid for Provision of Health Care Services.....	48,067,965	0	0	0	0	0	0	0	0	48,067,965	
18. Amount Incurred for Provision of Health Care Services	51,691,587	0	0	0	0	0	0	0	0	51,691,587	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....75,296,105

30.WA



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		West Virginia		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	17,366									17,366		
2. First Quarter .....	43,884	0	0	0	0	0	0	0	0	43,884		
3. Second Quarter .....	43,453	0	0	0	0	0	0	0	0	43,453		
4. Third Quarter .....	42,253	0	0	0	0	0	0	0	0	42,253		
5. Current Year .....	41,393	0	0	0	0	0	0	0	0	41,393		
6. Current Year Member Months	514,543	0	0	0	0	0	0	0	0	514,543		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	47,720,225	0	0	0	0	0	0	0	0	47,720,225		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	46,023,818	0	0	0	0	0	0	0	0	46,023,818		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	33,550,072	0	0	0	0	0	0	0	0	33,550,072		
18. Amount Incurred for Provision of Health Care Services	36,079,256	0	0	0	0	0	0	0	0	36,079,256		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....47,720,225

30 MW



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Wisconsin		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	25,531									25,531		
2. First Quarter .....	69,231	0	0	0	0	0	0	0	0	69,231		
3. Second Quarter .....	67,534	0	0	0	0	0	0	0	0	67,534		
4. Third Quarter .....	66,124	0	0	0	0	0	0	0	0	66,124		
5. Current Year .....	64,714	0	0	0	0	0	0	0	0	64,714		
6. Current Year Member Months	798,988	0	0	0	0	0	0	0	0	798,988		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	77,117,439	0	0	0	0	0	0	0	0	77,117,439		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	73,931,446	0	0	0	0	0	0	0	0	73,931,446		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	53,494,521	0	0	0	0	0	0	0	0	53,494,521		
18. Amount Incurred for Provision of Health Care Services	57,527,226	0	0	0	0	0	0	0	0	57,527,226		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....77,117,439

30.W1



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Wyoming		2013							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
<b>Total Members at end of:</b>												
1. Prior Year .....	2,063									2,063		
2. First Quarter .....	5,895	0	0	0	0	0	0	0	0	5,895		
3. Second Quarter .....	5,789	0	0	0	0	0	0	0	0	5,789		
4. Third Quarter .....	5,714	0	0	0	0	0	0	0	0	5,714		
5. Current Year .....	5,575	0	0	0	0	0	0	0	0	5,575		
6. Current Year Member Months	68,779	0	0	0	0	0	0	0	0	68,779		
<b>Total Member Ambulatory Encounters for Year:</b>												
7. Physician .....	0											
8. Non-Physician .....	0											
9. Total	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	0											
11. Number of Inpatient Admissions	0											
12. Health Premiums Written (b) .....	5,982,211	0	0	0	0	0	0	0	0	5,982,211		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written .....	0											
15. Health Premiums Earned .....	5,730,639	0	0	0	0	0	0	0	0	5,730,639		
16. Property/Casualty Premiums Earned	0											
17. Amount Paid for Provision of Health Care Services.....	4,431,697	0	0	0	0	0	0	0	0	4,431,697		
18. Amount Incurred for Provision of Health Care Services	4,765,782	0	0	0	0	0	0	0	0	4,765,782		

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....5,982,211

30.WY



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		Puerto Rico		DURING THE YEAR					2013	(LOCATION)		NAIC Company Code	12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10					
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other					
		Individual	Group												
<b>Total Members at end of:</b>															
1. Prior Year .....	449														449
2. First Quarter .....	620	0	0	0	0	0	0	0	0	0	0	0	0	0	620
3. Second Quarter .....	599	0	0	0	0	0	0	0	0	0	0	0	0	0	599
4. Third Quarter .....	536	0	0	0	0	0	0	0	0	0	0	0	0	0	536
5. Current Year .....	496	0	0	0	0	0	0	0	0	0	0	0	0	0	496
6. Current Year Member Months	6,882	0	0	0	0	0	0	0	0	0	0	0	0	0	6,882
<b>Total Member Ambulatory Encounters for Year:</b>															
7. Physician .....	0														
8. Non-Physician .....	0														
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0														
11. Number of Inpatient Admissions	0														
12. Health Premiums Written (b) .....	489,315	0	0	0	0	0	0	0	0	0	0	0	0	0	489,315
13. Life Premiums Direct	0														
14. Property/Casualty Premiums Written .....	0														
15. Health Premiums Earned .....	476,293	0	0	0	0	0	0	0	0	0	0	0	0	0	476,293
16. Property/Casualty Premiums Earned	0														
17. Amount Paid for Provision of Health Care Services.....	78,900	0	0	0	0	0	0	0	0	0	0	0	0	0	78,900
18. Amount Incurred for Provision of Health Care Services	84,848	0	0	0	0	0	0	0	0	0	0	0	0	0	84,848

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....489,315

30.PR



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF		U.S. Virgin Islands		DURING THE YEAR					2013	NAIC Company Code		12575
	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10				
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
<b>Total Members at end of:</b>														
1. Prior Year .....	21												21	
2. First Quarter .....	35	0	0	0	0	0	0	0	0	0			35	
3. Second Quarter .....	34	0	0	0	0	0	0	0	0	0			34	
4. Third Quarter .....	32	0	0	0	0	0	0	0	0	0			32	
5. Current Year .....	31	0	0	0	0	0	0	0	0	0			31	
6. Current Year Member Months	387	0	0	0	0	0	0	0	0	0			387	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0													
8. Non-Physician .....	0													
9. Total	0	0	0	0	0	0	0	0	0	0			0	
10. Hospital Patient Days Incurred	0													
11. Number of Inpatient Admissions	0													
12. Health Premiums Written (b) .....	33,738	0	0	0	0	0	0	0	0	0			33,738	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	32,623	0	0	0	0	0	0	0	0	0			32,623	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	5,511	0	0	0	0	0	0	0	0	0			5,511	
18. Amount Incurred for Provision of Health Care Services	5,927	0	0	0	0	0	0	0	0	0			5,927	

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....33,738



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)**

REPORT FOR: 1. CORPORATION

SilverScript Insurance Company

2. Nashville, TN

(LOCATION)

NAIC Group Code	4667	BUSINESS IN THE STATE OF	Grand Total		DURING THE YEAR					2013		(LOCATION)		12575
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10		
				2	3								Medicare Supplement	
Total	Individual	Group												
<b>Total Members at end of:</b>														
1. Prior Year .....	1,526,981	0	0	0	0	0	0	0	0	0	0	0	1,526,981	
2. First Quarter .....	3,634,278	0	0	0	0	0	0	0	0	0	0	0	3,634,278	
3. Second Quarter .....	3,533,926	0	0	0	0	0	0	0	0	0	0	0	3,533,926	
4. Third Quarter .....	3,445,412	0	0	0	0	0	0	0	0	0	0	0	3,445,412	
5. Current Year	3,354,748	0	0	0	0	0	0	0	0	0	0	0	3,354,748	
6. Current Year Member Months	41,765,543	0	0	0	0	0	0	0	0	0	0	0	41,765,543	
<b>Total Member Ambulatory Encounters for Year:</b>														
7. Physician .....	0	0	0	0	0	0	0	0	0	0	0	0	0	
8. Non-Physician .....	0	0	0	0	0	0	0	0	0	0	0	0	0	
9. Total	0	0	0	0	0	0	0	0	0	0	0	0	0	
10. Hospital Patient Days Incurred	0	0	0	0	0	0	0	0	0	0	0	0	0	
11. Number of Inpatient Admissions	0	0	0	0	0	0	0	0	0	0	0	0	0	
12. Health Premiums Written (b) .....	3,905,949,711	0	0	0	0	0	0	0	0	0	0	0	3,905,949,711	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written .....	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned .....	3,759,425,491	0	0	0	0	0	0	0	0	0	0	0	3,759,425,491	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services.....	2,926,978,868	0	0	0	0	0	0	0	0	0	0	0	2,926,978,868	
18. Amount Incurred for Provision of Health Care Services	3,147,630,279	0	0	0	0	0	0	0	0	0	0	0	3,147,630,279	

(a) For health business: number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....3,905,949,711

30.GT

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 1 - SECTION 2**

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Home State Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
<b>NONE</b>											
9999999 - Totals											

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 2**

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
0399999			Total Life and Annuity - U.S. Affiliates		0	0
0699999			Total Life and Annuity - Non-U.S. Affiliates		0	0
0799999			Total Life and Annuity - Affiliates		0	0
1099999			Total Life and Annuity - Non-Affiliates		0	0
1199999			Total Life and Annuity		0	0
1499999			Total Accident and Health - U.S. Affiliates		0	0
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	BMU		50,012,023
1699999			Accident and Health - Non-U.S. Affiliates - Other		0	50,012,023
1799999			Total Accident and Health - Non-U.S. Affiliates		0	50,012,023
1899999			Total Accident and Health - Affiliates		0	50,012,023
2199999			Total Accident and Health - Non-Affiliates		0	0
2299999			Total Accident and Health		0	50,012,023
2399999			Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)		0	0
2499999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)		0	50,012,023
9999999			Totals - Life, Annuity and Accident and Health		0	50,012,023

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 3 - SECTION 2**

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (Estimated)	9 Reserve Credit Taken Other than for Unearned Premiums	10 Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
70815	06-0838648	01/01/2009	Hartford Life & Accident Ins Co	CT	OTH/A/G	3,691,403						
0199999. General Account - Authorized U.S. Affiliates - Captive						3,691,403	0	0	0	0	0	0
0399999. Total General Account - Authorized U.S. Affiliates						3,691,403	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates						3,691,403	0	0	0	0	0	0
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	BM	OTH/A/G	767,633,834	1,402,317					
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.	BM	OTH/A/G	22,782,240						
0999999. General Account - Authorized Non-U.S. Non-Affiliates						790,416,074	1,402,317	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates						790,416,074	1,402,317	0	0	0	0	0
1199999. Total General Account Authorized						794,107,477	1,402,317	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates						0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates						0	0	0	0	0	0	0
2299999. Total General Account Unauthorized						0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates						0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates						0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates						0	0	0	0	0	0	0
3399999. Total General Account Certified						0	0	0	0	0	0	0
3499999. Total General Account Authorized, Unauthorized and Certified						794,107,477	1,402,317	0	0	0	0	0
3799999. Total Separate Accounts - Authorized U.S. Affiliates						0	0	0	0	0	0	0
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates						0	0	0	0	0	0	0
4199999. Total Separate Accounts - Authorized Affiliates						0	0	0	0	0	0	0
4499999. Total Separate Accounts - Authorized Non-Affiliates						0	0	0	0	0	0	0
4599999. Total Separate Accounts Authorized						0	0	0	0	0	0	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates						0	0	0	0	0	0	0
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates						0	0	0	0	0	0	0
5299999. Total Separate Accounts - Unauthorized Affiliates						0	0	0	0	0	0	0
5599999. Total Separate Accounts - Unauthorized Non-Affiliates						0	0	0	0	0	0	0
5699999. Total Separate Accounts Unauthorized						0	0	0	0	0	0	0
5999999. Total Separate Accounts - Certified U.S. Affiliates						0	0	0	0	0	0	0
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates						0	0	0	0	0	0	0
6399999. Total Separate Accounts - Certified Affiliates						0	0	0	0	0	0	0
6699999. Total Separate Accounts - Certified Non-Affiliates						0	0	0	0	0	0	0
6799999. Total Separate Accounts Certified						0	0	0	0	0	0	0
6899999. Total Separate Accounts Authorized, Unauthorized and Certified						0	0	0	0	0	0	0
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)						3,691,403	0	0	0	0	0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)						790,416,074	1,402,317	0	0	0	0	0
9999999 - Totals						794,107,477	1,402,317	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 4**

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols.5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8
0399999			Total General Account - Life and Annuity U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0699999			Total General Account - Life and Annuity Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
0799999			Total General Account - Life and Annuity Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
00000	AA-3190173	01/01/2011	CVS Caremark Indemnity, Ltd.				0				154,473,225			0
0999999			General Account - Life and Annuity Non-U.S. Non-Affiliates	0	0	0	0	0	XXX	0	154,473,225	0	0	0
1099999			Total General Account - Life and Annuity Non-Affiliates	0	0	0	0	0	XXX	0	154,473,225	0	0	0
1199999			Total General Account Life and Annuity	0	0	0	0	0	XXX	0	154,473,225	0	0	0
1499999			Total General Account - Accident and Health U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1799999			Total General Account - Accident and Health Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
1899999			Total General Account - Accident and Health Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2199999			Total General Account - Accident and Health Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2299999			Total General Account Accident and Health	0	0	0	0	0	XXX	0	0	0	0	0
2399999			Total General Account	0	0	0	0	0	XXX	0	154,473,225	0	0	0
2699999			Total Separate Accounts - U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
2999999			Total Separate Accounts - Non-U.S. Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3099999			Total Separate Accounts - Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3399999			Total Separate Accounts - Non-Affiliates	0	0	0	0	0	XXX	0	0	0	0	0
3499999			Total Separate Accounts	0	0	0	0	0	XXX	0	0	0	0	0
3599999			Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)	0	0	0	0	0	XXX	0	0	0	0	0
3699999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)	0	0	0	0	0	XXX	0	154,473,225	0	0	0
9999999			Totals	0	0	0	0	0	XXX	0	154,473,225	0	0	0

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
<b>NONE</b>				

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 6**

Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)

	1 2013	2 2012	3 2011	4 2010	5 2009
<b>A. OPERATIONS ITEMS</b>					
1. Premiums .....	794,107	370,355	200,335	3,605	3,895
2. Title XVIII - Medicare .....	0	0	0	0	0
3. Title XIX - Medicaid .....	0	0	0	0	0
4. Commissions and reinsurance expense allowance .....	82,595	43,520	24,102	480	469
5. Total hospital and medical expenses .....	621,507	270,884	160,327	2,546	3,313
<b>B. BALANCE SHEET ITEMS</b>					
6. Premiums receivable .....	51,999	12,285	4,577	447	231
7. Claims payable .....	50,012	8,096	7,243	239	245
8. Reinsurance recoverable on paid losses .....	0	0	0	0	0
9. Experience rating refunds due or unpaid .....	45,600		0	0	0
10. Commissions and reinsurance expense allowances due .....			0	0	0
11. Unauthorized reinsurance offset .....	154,473	58,149	0	0	83
12. Offset for reinsurance with Certified Reinsurers .....			XXX	XXX	XXX
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
13. Funds deposited by and withheld from (F) .....	154,473	58,149	0	0	83
14. Letters of credit (L) .....	0	0	0	0	0
15. Trust agreements (T) .....	0	0	0	0	0
16. Other (O) .....	0	0	0	0	0
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
17. Multiple Beneficiary Trust .....		0	XXX	XXX	XXX
18. Funds deposited by and withheld from (F) .....		0	XXX	XXX	XXX
19. Letters of credit (L) .....		0	XXX	XXX	XXX
20. Trust agreements (T) .....		0	XXX	XXX	XXX
21. Other (O) .....		0	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	51,784,513		51,784,513
2. Accident and health premiums due and unpaid (Line 15) .....	16,842,729	51,998,753	68,841,482
3. Amounts recoverable from reinsurers (Line 16.1) .....	0		0
4. Net credit for ceded reinsurance .....	XXX	(584,413)	(584,413)
5. All other admitted assets (Balance) .....	2,412,967,476		2,412,967,476
6. Total assets (Line 28)	2,481,594,718	51,414,340	2,533,009,058
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	203,622,464	50,012,023	253,634,487
8. Accrued medical incentive pool and bonus payments (Line 2) .....	200,000		200,000
9. Premiums received in advance (Line 8) .....	5,609,269	1,402,317	7,011,586
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount) .....	156,633,836		156,633,836
11. Reinsurance in unauthorized companies (Line 20 minus inset amount) .....	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount) .....			0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount) .....	0		0
14. All other liabilities (Balance) .....	1,765,600,981		1,765,600,981
15. Total liabilities (Line 24) .....	2,131,666,550	51,414,340	2,183,080,890
16. Total capital and surplus (Line 33) .....	349,928,168	XXX	349,928,168
17. Total liabilities, capital and surplus (Line 34)	2,481,594,718	51,414,340	2,533,009,058
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
18. Claims unpaid .....	50,012,023		
19. Accrued medical incentive pool .....	0		
20. Premiums received in advance .....	1,402,317		
21. Reinsurance recoverable on paid losses .....	0		
22. Other ceded reinsurance recoverables .....	0		
23. Total ceded reinsurance recoverables .....	51,414,340		
24. Premiums receivable .....	51,998,753		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers .....	0		
26. Unauthorized reinsurance .....	0		
27. Reinsurance with Certified Reinsurers .....	0		
28. Funds held under reinsurance treaties with Certified Reinsurers .....	0		
29. Other ceded reinsurance payables/offsets .....	0		
30. Total ceded reinsurance payables/offsets .....	51,998,753		
31. Total net credit for ceded reinsurance	(584,413)		

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Other Alien	OT					
59. Total						

NONE

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
4667	CVS CAREMARK GRP	00000	05-0494040			NYSE	CVS Caremark Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	05-0340626				CVS Pharmacy, Inc	RI	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	20-8404182				Caremark Rx, L.L.C.	DE	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	61-1715010				Part D Holding Company, L.L.C.	DE	UDP	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	33-1113587				CVS Caremark Part D Services, L.L.C.	DE	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	87-0548860				RxAmerica, L.L.C.	DE	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	11-2580136				Caremark Ulysses Holding Corporation	NY	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	87-0804047				MemberHealth, L.L.C.	DE	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	05-0500188				CVS Caremark Indemnity, Ltd.	BMJ	IA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	12575	20-2833904				SilverScript Insurance Company	TN	IA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	63444	06-1566092				Accendo Insurance Company	UT	IA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	67660	23-1305366				Pennsylvania Life Insurance Co.	PA	IA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	
4667	CVS CAREMARK GRP	00000	27-1298765				UAC Holding, Inc.	DE	NIA	CVS Caremark Corporation	Management	100.000	CVS Caremark Corporation	

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

**SCHEDULE Y**

**PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES**

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
12575	20-2833904	SilverScript Ins Co					(368,377,683)				(368,377,683)	
00000	33-1113587	CVS Caremark Part D Services, L.L.C.					368,377,683				368,377,683	
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	Responses
<b>MARCH FILING</b>	
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2. Will an actuarial opinion be filed by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?.....	YES
<b>APRIL FILING</b>	
5. Will Management's Discussion and Analysis be filed by April 1? .....	YES
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	YES
<b>JUNE FILING</b>	
8. Will an audited financial report be filed by June 1? .....	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES
<b>AUGUST FILING</b>	
10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1? .....	YES

The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

<b>MARCH FILING</b>	
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC? .....	YES
13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?.....	NO
14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	YES
18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
<b>APRIL FILING</b>	
21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC? .....	YES
23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC? .....	NO
24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	NO
25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	NO
<b>AUGUST FILING</b>	
26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	YES

- Explanations:
- 11.
  - 13.
  - 14.
  - 15.
  - 16.
  - 18.
  - 19.
  - 20.
  - 21.
  - 23.
  - 24.
  - 25.

Bar Codes:

11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
13. Property/Casualty Supplement [Document Identifier 207]	
14. SIS Stockholder Information Supplement [Document Identifier 420]	
15. Participating Opinion for Exhibit 5 [Document Identifier 371]	
16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	
18. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	
19. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	
20. Relief from the Requirements for Audit Committees [Document Identifier 226]	
21. Long-Term Care Experience Reporting Forms [Document Identifier 306]	
23. Property/Casualty Supplement Insurance Expense Exhibit [Document Identifier 213]	

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

24. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



25. Supplemental Health Care Exhibit's Expense Allocation Report  
[Document Identifier 217]





SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company  
**MEDICARE PART D COVERAGE SUPPLEMENT**  
 (Net of Reinsurance)

NAIC Group Code 4667

(To Be Filed by March 1)

NAIC Company Code 12575

	Individual Coverage		Group Coverage		5 Total Cash
	1 Insured	2 Uninsured	3 Insured	4 Uninsured	
1. Premiums Collected					
1.1 Standard Coverage					
1.11 With Reinsurance Coverage	2,905,069,921	XXX		XXX	2,905,069,921
1.12 Without Reinsurance Coverage		XXX	77,212,861	XXX	77,212,861
1.13 Risk-Corridor Payment Adjustments	(74,803,745)	XXX		XXX	(74,803,745)
1.2 Supplemental Benefits	129,812,924	XXX		XXX	129,812,924
2. Premiums Due and Uncollected-change					
2.1 Standard Coverage					
2.11 With Reinsurance Coverage	54,987,788	XXX		XXX	XXX
2.12 Without Reinsurance Coverage		XXX	16,878,314	XXX	XXX
2.2 Supplemental Benefits	2,380,940	XXX		XXX	XXX
3. Unearned Premium and Advance Premium-change					
3.1 Standard Coverage					
3.11 With Reinsurance Coverage	(303,232)	XXX		XXX	XXX
3.12 Without Reinsurance Coverage		XXX		XXX	XXX
3.2 Supplemental Benefits		XXX		XXX	XXX
4. Risk-Corridor Payment Adjustments-change					
4.1 Receivable	3,819	XXX		XXX	XXX
4.2 Payable	(117,529,448)	XXX		XXX	XXX
5. Earned Premiums					
5.1 Standard Coverage					
5.11 With Reinsurance Coverage	2,960,360,941	XXX	0	XXX	XXX
5.12 Without Reinsurance Coverage	0	XXX	94,091,175	XXX	XXX
5.13 Risk-Corridor Payment Adjustments	(192,329,374)	XXX	0	XXX	XXX
5.2 Supplemental Benefits	132,193,864	XXX	0	XXX	XXX
6. Total Premiums	2,900,225,431	XXX	94,091,175	XXX	3,037,291,961
7. Claims Paid					
7.1 Standard Coverage					
7.11 With Reinsurance Coverage	2,134,081,708	XXX		XXX	2,134,081,708
7.12 Without Reinsurance Coverage		XXX	75,630,496	XXX	75,630,496
7.2 Supplemental Benefits	137,674,710	XXX		XXX	137,674,710
8. Claim Reserves and Liabilities-change					
8.1 Standard Coverage					
8.11 With Reinsurance Coverage	146,263,185	XXX		XXX	XXX
8.12 Without Reinsurance Coverage		XXX	3,549,499	XXX	XXX
8.2 Supplemental Benefits	9,422,885	XXX		XXX	XXX
9. Health Care Receivables-change					
9.1 Standard Coverage					
9.11 With Reinsurance Coverage	(17,777,357)	XXX		XXX	XXX
9.12 Without Reinsurance Coverage		XXX	(575,770)	XXX	XXX
9.2 Supplemental Benefits	(1,146,860)	XXX		XXX	XXX
10. Claims Incurred					
10.1 Standard Coverage					
10.11 With Reinsurance Coverage	2,298,122,250	XXX	0	XXX	XXX
10.12 Without Reinsurance Coverage	0	XXX	79,755,765	XXX	XXX
10.2 Supplemental Benefits	148,244,455	XXX	0	XXX	XXX
11. Total Claims	2,446,366,705	XXX	79,755,765	XXX	2,347,386,914
12. Reinsurance Coverage and Low Income Cost Sharing					
12.1 Claims Paid - Net of Reimbursements Applied	XXX	612,233,705	XXX	611,753,887	1,223,987,592
12.2 Reimbursements Received but Not Applied-change	XXX		XXX		0
12.3 Reimbursements Receivable-change	XXX	612,233,705	XXX	611,753,887	XXX
12.4 Health Care Receivables-change	XXX		XXX		XXX
13. Aggregate Policy Reserves-change					XXX
14. Expenses Paid	257,126,602	XXX	8,341,884	XXX	265,468,486
15. Expenses Incurred	300,246,623	XXX	9,740,814	XXX	XXX
16. Underwriting Gain/Loss	153,612,103	XXX	4,594,596	XXX	XXX
17. Cash Flow Results	XXX	XXX	XXX	XXX	(799,551,031)



# LIFE SUPPLEMENTS

For The Year Ended December 31, 2013

(To Be Filed By March 1)

Of The SilverScript Insurance Company.....

ADDRESS (City, State and Zip Code) Nashville , TN 37228 .....

NAIC Group Code 4667 ..... NAIC Company Code 12575 ..... Employer's ID Number 20-2833904 .....

**EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS**

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
9999999. Totals (Net)					

**NONE**

**EXHIBIT 5 - INTERROGATORIES**

- 1.1 Has the reporting entity ever issued both participating and non-participating contracts?..... Yes [ ] No [ ]
- 1.2 If not, state which kind is issued.  
.....
- 2.1 Does the reporting entity at present issue both participating and non-participating contracts?..... Yes [ ] No [ ]
- 2.2 If not, state which kind is issued.  
.....
- 3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?..... Yes [ ] No [ ]  
If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.
- 4. Has the reporting entity any assessment or stipulated premium contracts in force? Yes [ ] No [ ]  
If so, state:
  - 4.1 Amount of insurance? ..... \$
  - 4.2 Amount of reserve? ..... \$
  - 4.3 Basis of reserve  
.....
  - 4.4 Basis of regular assessments  
.....
  - 4.5 Basis of special assessments  
.....
  - 4.6 Assessments collected during the year: ..... \$
- 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.  
.....
- 6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? ..... Yes [ ] No [ ]
  - 6.1 If so, state the amount of reserve on such contracts on the basis actually held: ..... \$
  - 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: ..... \$

Attach statement of methods employed in their valuation.
- 7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ ]
  - 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements ..... \$
  - 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount  
.....
  - 7.3 State the amount of reserves established for this business: ..... \$
  - 7.4 Identify where the reserves are reported in the blank  
.....
- 8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year? ..... Yes [ ] No [ ]
  - 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: ..... \$
  - 8.2 State the amount of reserves established for this business: ..... \$
  - 8.3 Identify where the reserves are reported in the blank:  
.....
- 9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? ..... Yes [ ] No [ ]
  - 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: ..... \$
  - 9.2 State the amount of reserves established for this business: ..... \$
  - 9.3 Identify where the reserves are reported in the blank:  
.....

Life Supplement - Exhibit 7 - Deposit-Type Contracts

**N O N E**

Life Supplement - Schedule S - Part 1 - Section 1

**N O N E**

Life Supplement - Schedule S - Part 3 - Section 1

**N O N E**



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (sum of Line 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year			(a)		No. of Policies					
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

NONE

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees	10,178,694	9,684,271		8,772,717	9,434,051
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	10,178,694	9,684,271	0	8,772,717	9,434,051

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (sum of Line 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

NONE

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees	6,946,101	6,634,845		4,954,575	5,328,078
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,946,101	6,634,845	0	4,954,575	5,328,078

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders, Direct Claims and Benefits Paid, and Details of Write-ins.

NONE

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

NONE

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders, Direct Claims and Benefits Paid, and Details of Write-Ins. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Plan premium (b), Credit (Group and Individual), Collectively renewable policies (b), Medicare Title XVIII exempt from state taxes or fees, and Other Individual Policies.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (sum of Line 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

NONE

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees	6,152,751	5,861,136		4,548,263	4,891,135
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,152,751	5,861,136	0	4,548,263	4,891,135

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24. Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... 0 and number of persons insured under indemnity only products ... 0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24. Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders, Direct Claims and Benefits Paid, and Details of Write-ins.

NONE

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

NONE

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Federal Employees Health Benefits Plan, Medicare Title XVIII, and various other policies.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX		XXX	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (sum of Line 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

NONE

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

NONE

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees	20,337,750	19,659,336		13,235,668	14,233,444
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	20,337,750	19,659,336	0	13,235,668	14,233,444

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....0 and number of persons insured under indemnity only products .....0



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders, Direct Claims and Benefits Paid, and Details of Write-ins.

NONE

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

NONE

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b), Medicare Title XVIII, and various other policies.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24. Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ... and number of persons insured under indemnity only products ...



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, DETAILS OF WRITE-INS. Large 'NONE' watermark is present.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, POLICY EXHIBIT. Large 'NONE' watermark is present.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is present across the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is present across the table.

(a) Includes Individual Credit Life Insurance prior year \$ ..., current year \$ ... Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ ..., current year \$ ... Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ ..., current year \$ ...

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products ...0 and number of persons insured under indemnity only products ...0 .



**SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company**

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					.0
2. Annuity considerations					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					.0
6.2 Applied to pay renewal premiums					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					.0
6.4 Other					.0
6.5 Totals (sum of Line 6.1 to 6.4)	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit					.0
7.2 Applied to provide paid-up annuities					.0
7.3 Other					.0
7.4 Totals (sum of Lines 7.1 to 7.3)	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					.0
10. Matured endowments					.0
11. Annuity benefits					.0
12. Surrender values and withdrawals for life contracts					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.0	.0	.0	.0	.0
14. All other benefits, except accident and health					.0
15. Totals	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	.0	.0	.0	.0	.0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year									.0	.0
17. Incurred during current year									.0	.0
Settled during current year:										
18.1 By payment in full									.0	.0
18.2 By payment on compromised claims									.0	.0
18.3 Totals paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise									.0	.0
18.5 Amount rejected									.0	.0
18.6 Total settlements	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year			(a)		No. of Policies				.0	.0
21. Issued during year									.0	.0
22. Other changes to in force (Net)									.0	.0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:	489,315	476,293		78,900	84,848
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	489,315	476,293	0	78,900	84,848

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons  
 insured under indemnity only products \_\_\_\_\_.



**SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company**

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2013

NAIC Group Code 4667

**LIFE INSURANCE**

NAIC Company Code 12575

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance					0
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (sum of Line 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year									0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year			(a)		No. of Policies				0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0 (a)	0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:	33,738	32,623		5,511	5,927
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	33,738	32,623	0	5,511	5,927

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons  
 insured under indemnity only products \_\_\_\_\_.



SUPPLEMENT FOR THE YEAR 2013 OF THE SilverScript Insurance Company

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2013

NAIC Group Code 4667

LIFE INSURANCE

NAIC Company Code 12575

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include: DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS, DIRECT DIVIDENDS TO POLICYHOLDERS, DIRECT CLAIMS AND BENEFITS PAID, and DETAILS OF WRITE-INS. A large 'NONE' watermark is overlaid on the table.

Table with 10 columns: 1 No., 2 Amount, 3 No. of Ind. Pols. & Gr. Certifs., 4 Amount, 5 No. of Certifs., 6 Amount, 7 No., 8 Amount, 9 No., 10 Amount. Rows include: DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED, and POLICY EXHIBIT. A large 'NONE' watermark is overlaid on the table.

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

ACCIDENT AND HEALTH INSURANCE

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Dividends Paid Or Credited On Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include: 24 Group Policies (b), 24.1 Federal Employees Health Benefits Plan premium (b), 24.2 Credit (Group and Individual), 24.3 Collectively renewable policies (b), 24.4 Medicare Title XVIII exempt from state taxes or fees, 24.5 Other Individual Policies, 25.1 Non-cancelable (b), 25.2 Guaranteed renewable (b), 25.3 Non-renewable for stated reasons only (b), 25.4 Other accident only, 25.5 All other (b), 25.6 Totals (sum of Lines 25.1 to 25.5), 26 Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products \_\_\_\_\_ and number of persons insured under indemnity only products \_\_\_\_\_.

## ALPHABETICAL INDEX

### ANNUAL STATEMENT BLANK

Analysis of Operations By Lines of Business .....	7
Assets .....	2
Cash Flow .....	6
Exhibit 1 - Enrollment By Product Type for Health Business Only .....	17
Exhibit 2 - Accident and Health Premiums Due and Unpaid .....	18
Exhibit 3 - Health Care Receivables .....	19
Exhibit 3A - Analysis of Health Care Receivables Collected and Accrued .....	20
Exhibit 4 - Claims Unpaid and Incentive Pool, Withhold and Bonus .....	21
Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates .....	22
Exhibit 6 - Amounts Due To Parent, Subsidiaries and Affiliates .....	23
Exhibit 7 - Part 1 - Summary of Transactions With Providers .....	24
Exhibit 7 - Part 2 - Summary of Transactions With Intermediaries .....	24
Exhibit 8 - Furniture, Equipment and Supplies Owned .....	25
Exhibit of Capital Gains (Losses) .....	15
Exhibit of Net Investment Income .....	15
Exhibit of Nonadmitted Assets .....	16
Exhibit of Premiums, Enrollment and Utilization (State Page) .....	30
Five-Year Historical Data .....	29
General Interrogatories .....	27
Jurat Page .....	1
Liabilities, Capital and Surplus .....	3
Notes To Financial Statements .....	26
Overflow Page For Write-ins .....	44
Schedule A - Part 1 .....	E01
Schedule A - Part 2 .....	E02
Schedule A - Part 3 .....	E03
Schedule A - Verification Between Years .....	SI02
Schedule B - Part 1 .....	E04
Schedule B - Part 2 .....	E05
Schedule B - Part 3 .....	E06
Schedule B - Verification Between Years .....	SI02
Schedule BA - Part 1 .....	E07
Schedule BA - Part 2 .....	E08
Schedule BA - Part 3 .....	E09
Schedule BA - Verification Between Years .....	SI03
Schedule D - Part 1 .....	E10
Schedule D - Part 1A - Section 1 .....	SI05
Schedule D - Part 1A - Section 2 .....	SI08
Schedule D - Part 2 - Section 1 .....	E11
Schedule D - Part 2 - Section 2 .....	E12
Schedule D - Part 3 .....	E13
Schedule D - Part 4 .....	E14
Schedule D - Part 5 .....	E15
Schedule D - Part 6 - Section 1 .....	E16
Schedule D - Part 6 - Section 2 .....	E16
Schedule D - Summary By Country .....	SI04
Schedule D - Verification Between Years .....	SI03
Schedule DA - Part 1 .....	E17
Schedule DA - Verification Between Years .....	SI10
Schedule DB - Part A - Section 1 .....	E18
Schedule DB - Part A - Section 2 .....	E19
Schedule DB - Part A - Verification Between Years .....	SI11
Schedule DB - Part B - Section 1 .....	E20
Schedule DB - Part B - Section 2 .....	E21
Schedule DB - Part B - Verification Between Years .....	SI11
Schedule DB - Part C - Section 1 .....	SI12
Schedule DB - Part C - Section 2 .....	SI13
Schedule DB - Part D - Section 1 .....	E22
Schedule DB - Part D - Section 2 .....	E23
Schedule DB - Verification .....	SI14
Schedule DL - Part 1 .....	E24
Schedule DL - Part 2 .....	E25
Schedule E - Part 1 - Cash .....	E26
Schedule E - Part 2 - Cash Equivalents .....	E27
Schedule E - Part 3 - Special Deposits .....	E28
Schedule E - Verification Between Years .....	SI15

**ANNUAL STATEMENT BLANK (Continued)**

Schedule S - Part 1 - Section 2 .....	31
Schedule S - Part 2 .....	32
Schedule S - Part 3 - Section 2 .....	33
Schedule S - Part 4 .....	34
Schedule S - Part 5 .....	35
Schedule S - Part 6.....	36
Schedule S - Part 7.....	37
Schedule T - Part 2 - Interstate Compact .....	39
Schedule T - Premiums and Other Considerations .....	38
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group .....	40
Schedule Y - Part 1A - Detail of Insurance Holding Company System .....	41
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates .....	42
Statement of Revenue and Expenses .....	4
Summary Investment Schedule .....	SI01
Supplemental Exhibits and Schedules Interrogatories .....	43
Underwriting and Investment Exhibit - Part 1 .....	8
Underwriting and Investment Exhibit - Part 2 .....	9
Underwriting and Investment Exhibit - Part 2A .....	10
Underwriting and Investment Exhibit - Part 2B .....	11
Underwriting and Investment Exhibit - Part 2C .....	12
Underwriting and Investment Exhibit - Part 2D .....	13
Underwriting and Investment Exhibit - Part 3 .....	14