

### AMENDED FILING COVER SHEET

Amended File Title	Amended Explanation
Five-Year Historical Data	Authorized control level risk-based capital should be \$3,513,793, not \$3,501,137. All hard copies are correct, however



47155200720100105

ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2007
OF THE CONDITION AND AFFAIRS OF THE
Delta Dental Plan of Arkansas, Inc.

NAIC Group Code 0000 (Current Period) 0000 (Prior Period) NAIC Company Code 47155 Employer's ID Number 71-0561140

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

Country of Domicile

Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [X]
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [ ]
Other [ ] Is HMO Federally Qualified? YES [ ] NO [ ]

Incorporated/Organized: March 15, 1982 Commenced Business: August 1, 1982

Statutory Home Office: 1513 Country Club Road Sherwood, AR 72120
(Street and Number) (City, State and Zip Code)

Main Administrative Office: 1513 Country Club Road Sherwood, AR 72120 501-835-3400
(Street and Number) (City, State and Zip Code) (Area Code)(Telephone Number)

Mail Address: 1513 Country Club Road Sherwood, AR 72120
(Street and Number) (City, State and Zip Code)

Primary Location of Books and Records: 1513 Country Club Road Sherwood, AR 72120 501-835-3400
(Street and Number) (City, State and Zip Code) (Area Code)(Telephone Number)

Internet Website Address: www.deltadentalar.com

Statutory Statement Contact: Phyllis L Rogers 501-835-3400 1616
(Name) (Area Code)(Telephone Number)(Extension)
progers@deltadentalar.com 501-992-1617
(E-Mail Address) (Fax Number)

OFFICERS

Table with 2 columns: Name, Title. Rows include Eddie Allen Choate (President and CEO), Robert Joe Matlock (Secretary), Ebb Weldon Johnson (Treasurer).

Vice-Presidents

Table with 4 columns: Name, Title, Name, Title. Lists Ina Lynn Harbert, Herman Eldon Hurd, Timothy Wayne Carney, Phyllis Lynn Rogers, Allen Dale Moore, James Durette Johnson.

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Title, Name, Title. Lists Ronald Paul Ownbey, Ebb Weldon Johnson, Paul David Fitzgerald, Harold Wayne Perrin, James Talbert Johnston, Susan Jane Fletcher Smith, Robert Joe Matlock, Daniel Austin Lieblong, Robert Howard Gladden, Byron Scott Southern.

State of Arkansas
County of Pulaski ss

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.

(Signature) Eddie Allen Choate 1. President and CEO
(Signature) Robert Joe Matlock 2. Secretary
(Signature) Ebb Weldon Johnson 3. Treasurer

Subscribed and sworn to before me this 22nd day of February, 2008

a. Is this an original filing? YES [ ] NO [X]
b. If no: 1. State the amendment number 1
2. Date filed 02/29/2008
3. Number of pages attached 2

## FIVE-YEAR HISTORICAL DATA

	1	2	3	4	5
	2007	2006	2005	2004	2003
<b>BALANCE SHEET</b> (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 26)	50,152,131	44,701,865	40,081,581	36,101,630	30,291,766
2. Total liabilities (Page 3, Line 22)	8,028,396	7,928,954	8,721,265	9,454,721	9,944,000
3. Statutory surplus					50,000
4. Total capital and surplus (Page 3, Line 31)	42,123,735	36,772,911	31,360,782	26,646,909	20,347,766
<b>INCOME STATEMENT</b> (Page 4)					
5. Total revenues (Line 8)	65,194,439	59,110,682	56,904,348	53,075,795	48,844,265
6. Total medical and hospital expenses (Line 18)	47,862,962	45,079,351	44,743,106	43,430,187	41,318,009
7. Claims adjustment expenses (Line 20)	2,655,009	1,074,879	3,861,694	1,412,907	
8. Total administrative expenses (Line 21)	8,121,714	7,281,644	5,389,557	4,650,186	3,870,421
9. Net underwriting gain (loss) (Line 24)	6,554,754	5,674,808	2,909,991	3,582,515	2,056,065
10. Net investment gain (loss) (Line 27)	1,475,370	1,017,965	1,145,126	719,345	524,684
11. Total other income (Lines 28 plus 29)					215,747
12. Net income or (loss) (Line 32)	8,030,124	6,692,773	4,055,117	4,301,860	2,796,496
<b>CASH FLOW</b> (Page 6)					
13. Net cash from operations (Line 11)	8,729,817	5,695,517	2,779,739	3,239,862	3,532,173
<b>RISK-BASED CAPITAL ANALYSIS</b>					
14. Total adjusted capital	42,123,735	36,772,911	31,360,316	26,646,909	20,347,766
15. Authorized control level risk-based capital	3,513,793	3,156,471	2,386,801	1,906,948	1,732,052
<b>ENROLLMENT</b> (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	132,689	122,776	120,280	118,331	114,202
17. Total members months (Column 6, Line 7)	1,537,199	1,460,891	1,421,260	1,384,797	1,331,574
<b>OPERATING PERCENTAGE</b> (Page 4) (Item divided by Page 4, sum of Lines 2, 3, and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19)	73.2	76.3	78.9	82.0	84.6
20. Cost containment expenses				2.7	X X X
21. Other claims adjustment expenses	4.1	1.8	6.8	8.8	
22. Total underwriting deductions (Line 23)	89.6	90.5	95.2	93.4	95.8
23. Total underwriting gain (loss) (Line 24)	10.4	9.5	5.1	6.6	4.2
<b>UNPAID CLAIMS ANALYSIS</b> (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Col. 5)	1,882,685	2,241,028	2,250,585	2,752,050	2,310,193
25. Estimated liability of unpaid claims - [prior year (Line 13, Col. 6)]	2,076,800	2,463,000	2,505,000	2,900,000	2,127,000
<b>INVESTMENTS IN PARENT, SUBSIDIARIES AND AFFILIATES</b>					
26. Affiliated bonds (Sch. D Summary, Line 25, Col. 1)					
27. Affiliated preferred stocks (Sch. D Summary, Line 39, Col. 1)					
28. Affiliated common stocks (Sch. D Summary, Line 53, Col. 1)	918,880	1,908,387	243,304	49,208	(3,265)
29. Affiliated short-term investments (subtotal included in Sch. DA, Part 2, Col. 5, Line 7)					
30. Affiliated mortgage loans on real estate					
31. All other affiliated					
32. Total of above Lines 26 to 31	918,880	1,908,387	243,304	49,208	(3,265)