ANNUAL STATEMENT FOR THE YEAR 2011
UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.
STATEMENT OF ACTUARIAL OPINION

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This Opinion is:	☑ Unqualified	☐ Qualified	☐ Adverse	☐ Inconclusive
Identification Section	☑ Prescribed Wording Only	☐ Prescribed Wording with Additional Wording	☐ Revised Wording	
Scope Section	☑ Prescribed Wording Only	☐ Prescribed Wording with Additional Wording	☐ Revised Wording	
Reliance Section	☑ Prescribed Wording Only	☐ Prescribed Wording with Additional Wording	☐ Revised Wording	
Opinion Section	☐ Prescribed Wording Only	☐ Prescribed Wording with Additional Wording	☑ Revised Wording	
Relevant Comments			☐ Revised Wording	
☐ The Actuarial Memorandum include "Deviation from Standard" wording regarding conformity with an Actuarial Standard of Practice				

I, Timothy J. Feeser, Vice President, Actuarial Consulting, am associated with the firm of OptumInsight. I am a member of the American Academy of Actuaries and have been retained by UnitedHealthcare Plan of the River Valley, Inc. to render an opinion with regard to loss reserves, actuarial liabilities and related items. I was appointed on November 16, 2009 in accordance with the requirements of the annual statement instructions. I meet the Academy qualification standards for rendering the opinion.

I have examined the assumptions and methods used in determining loss reserves, actuarial liabilities and related items listed below, as shown in the annual statement of the organization as prepared for filing with state regulatory officials, as of December 31, 2011.

A.	Claims unpaid (Page 3, Line 1);	$392,842,705
B.	Accrued medical incentive pool and bonus payments (Page 3, Line 2);	$1,294,235
C.	Unpaid claims adjustment expenses (Page 3, Line 3);	$9,035,304
D.	Aggregate health policy reserves (Page 3, Line 4) including unearned premium reserves, premium deficiency reserves, and additional policy reserves from the Underwriting and Investment Exhibit – Part 2D;	$6,527,052
E.	Aggregate life policy reserves (Page 3, Line 5);	$0
F.	Property/casualty unearned premium reserves (Page 3, Line 6);	$0
G.	Aggregate health claim reserves (Page 3, Line 7); and	$9,701
H.	Any other loss reserves, actuarial liabilities, or related items presented as liabilities in the annual statement; and	Not applicable
I.	Specified actuarial items presented as assets in the annual statement, as follows:	
	1. Uncollected premiums (subset of Page 2, Line 15.1)	$18,907,126

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ANNUAL STATEMENT FOR THE YEAR 2011
UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.
STATEMENT OF ACTUARIAL OPINION

2. Accrued retrospective premiums (Page 2, Line 15.3) $2,077,951
3. Healthcare and other amounts receivable (subset of Page 2, Line 24) $14,992,635

In forming my opinion on items A through I above, I relied upon data prepared by Nyle Brent Cottington, Vice President and Regulatory Controller, UnitedHealthcare Services, Inc., as certified in the attached statements. I evaluated that data for reasonableness and consistency. I also reconciled that data to the Underwriting and Investment Exhibit - Part 2B of the company's current annual statement. In other respects, my examination included review of the actuarial assumptions and actuarial methods used and tests of the calculations I considered necessary.

In my opinion, the amounts carried in the balance sheet on account of the items identified above:

A. Are in accordance with accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles,

B. Are based on actuarial assumptions relevant to contract provisions and appropriate to the purpose for which the statement was prepared,

C. Meet the requirements of the Insurance Laws and regulations of the state of Illinois; and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed,

D. Make good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization under the terms of its contracts and agreements,

E. Are computed on the basis of assumptions and methods consistent with those used in computing the corresponding items in the annual statement of the preceding year end,

F. Include appropriate provision for all actuarial items that ought to be established.

The Underwriting and Investment Exhibit – Part 2B was reviewed for reasonableness and consistency with the applicable Actuarial Standards of Practice.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the relevant Standards of Practice as promulgated from time to time by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

Timothy J. Feeser, FSA, MAAA

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February 27, 2012

UnitedHealthcare®

A UnitedHealth Group Company

Nyle Brent Cottington
Vice President & Regulatory Controller
MN008-W345
9900 Bren Road East
Minnetonka, MN 55343
952-936-3214 phone
952-936-7147 fax

February 13, 2012

I, Nyle Brent Cottington, am employed by United HealthCare Services, Inc. as Vice President and Regulatory Controller. Listings and summaries reconciling the annual statement as of December 31, 2011, for UnitedHealthcare Plan of the River Valley, Inc., to the company's general ledger were prepared under my direction and submitted to Timothy J. Feeser in support of his statement of actuarial opinion for that company as of December 31, 2011. I hereby affirm that those listings and summaries, to the best of my knowledge and belief, are substantially accurate and complete and are the same as, or derived from, the records and other data that form the basis for the company's annual statement for the year ended December 31, 2011.

Nyle Brent Cottington
United HealthCare Services, Inc.

UnitedHealthcare Community Plan - East Tennessee
Report 2A - TennCare Income Statement
CRA 2.30.14.3.3 and 2.30.14.3.4

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	Current Qtr	YTD Total	Prior Year
Member Months	584,884	2,319,567	2,210,913
Revenues:			
TennCare Capitation	215,374,038	876,253,140	647,971,693
Investment	-	-	
Other Revenues	68,009	68,009	
Total Revenues	215,442,046	876,321,149	647,971,693
Estimated Expenses:			
Hospital and Medical (w/o Mental Health)			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	33,013,344	137,837,103	122,054,327
Inpatient Hospital Services	21,941,818	117,475,266	96,011,726
Outpatient Hospital Services	12,072,020	48,852,459	46,302,839
Emergency Room Services	12,090,511	56,377,598	50,356,538
Dental Services	-	-	-
Vision Services	443,460	1,868,328	1,682,141
Pharmacy Services	-	-	-
Home Health Services	2,378,866	10,600,148	9,229,529
Chiropractic Services	-	-	-
Radiology Services	5,038,952	29,940,038	29,023,173
Laboratory Services	3,842,810	16,076,815	12,847,823
Durable Medical Equipment Services	2,361,020	9,461,072	7,618,011
Transportation Services	3,184,704	12,839,591	12,158,959
Outside Referrals	-	-	-
Medical Incentive Pool and Withhold Adj	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Nursing Facility Care	47,535,528	206,374,626	90,962,899
HCBS Services	7,214,428	25,262,887	7,586,161
Other Medical and Hospital Services - Write-Ins	891,347	246,553	614,110
Subtotal Medical and Hospital	152,008,807	673,212,484	486,448,235
Mental Health and Substance Abuse Services			
Inpatient Psychiatric Facility Services	2,095,276	8,087,054	8,846,332
Inpatient Substance Abuse Treatment and Detox	472,854	1,699,592	1,589,646
Outpatient Mental Health Services	1,318,580	5,254,374	4,996,999
Outpatient Substance Abuse Treatment and Detox	57,890	286,530	357,263
Housing/Residential Treatment	1,289,116	5,560,498	7,014,624
Specialized Crisis Services	766,835	2,861,688	2,712,621
Psychiatric Rehab and Support Services	1,159,958	4,592,793	5,021,197
Case Management	4,001,589	16,730,630	15,416,907
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	371,072	1,445,559	1,363,888
Medical Incentive Pool and Withhold Adjustments	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	314,451	1,398,831	1,361,603
PCP and Specialist Servcies	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
Subtotal MH&SAS	11,847,619	47,917,549	48,681,080
Subtotal Hospital, Medical, MH&SAS, CHOICES	163,856,426	721,130,033	535,129,315
LESS:			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Corrdination of Benefits	-	-	-
Subtotal Reinsurance, Copay, Subrogation	-	-	-
Total Hospital, Medical, MHS&S	163,856,426	721,130,033	535,129,315
Administation:			
Compensation	-	-	-
Direct and Allocated Admin expenses	-	-	-
Marketing	-	-	-
Interest Expense	-	-	-
Premium Tax Expense	12,510,674	44,279,729	40,184,087
Occupancy, Depreciation, and Amortization	-	-	-
Other Administration - Write-Ins	20,626,461	79,048,810	59,202,262
Total Administration Expenses	33,137,135	123,328,539	99,386,349
Total Expenses	196,993,562	844,458,572	634,515,664
Extraordinary Item	-	-	-
Provision for Income Tax	6,456,970	11,151,902	4,709,610
Net Income (Loss)	11,991,515	20,710,675	8,746,419
Write-Ins for Other Revenues:			
Total Other Revenues	-	-	-
Write-Ins for Other Medical and Hospital:			
Other Miscellaneous	538,394	(1,127,342)	(1,040,234)
Other Capitated Services	352,952	1,373,895	1,654,344
Total Other Medical and Hospital	891,346.63	246,553	614,110
Detail of Other MH and SAS:			
Total Other MH and SAS	-	-	-
Write-Ins for Other Administration:			
Administrative Services Fee	18,380,653	70,100,251	51,837,735
Behaviorial Healthcare Services	1,380,027	5,475,516	5,237,587
Spectera Administration Fees	126,498	539,693	475,060
Other Miscellaneous	739,284	2,933,350	1,651,879
Total Other Administration	20,626,461	79,048,810	59,202,262

UnitedHealthcare Community Plan - Middle Tennessee
Report 2A - TennCare Income Statement
CRA 2.30.14.3.3 and 2.30.14.3.4

	Current Qtr	YTD Total	Prior Year
Member Months	**606,313**	**2,419,816**	**2,371,033**
Revenues:			
TennCare Capitation	232,116,554	942,991,556	899,356,215
Investment	-	-	-
Other Revenues	1,258,047	1,863,647	-
Total Revenues	233,374,601	944,855,202	899,356,215
Estimated Expenses:			
Hospital and Medical (w/o Mental Health)			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	35,464,215	149,302,501	136,960,238
Inpatient Hospital Services	30,057,839	134,767,254	129,923,011
Outpatient Hospital Services	8,898,123	42,335,880	39,488,678
Emergency Room Services	10,189,771	43,441,637	41,943,775
Dental Services	-	-	-
Vision Services	656,478	2,704,227	2,286,023
Pharmacy Services	-	-	-
Home Health Services	4,046,678	16,889,677	19,739,697
Chiropractic Services	-	-	-
Radiology Services	5,113,576	27,575,620	28,852,508
Laboratory Services	4,018,635	17,709,914	13,738,769
Durable Medical Equipment Services	2,541,800	10,407,468	9,097,424
Transportation Services	4,622,892	19,903,549	17,284,702
Outside Referrals	-	-	-
Medical Incentive Pool and Withhold Adj	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Nursing Facility Care	38,084,875	166,663,361	151,673,917
HCBS Services	8,007,703	29,079,152	15,871,744
Other Medical and Hospital Services - Write-Ins	1,540,396	2,810,605	141,930
Subtotal Medical and Hospital	153,242,982	663,590,846	607,002,415
Mental Health and Substance Abuse Services			
Inpatient Psychiatric Facility Services	2,718,491	10,566,015	8,555,589
Inpatient Substance Abuse Treatment and Detox	457,187	2,158,535	1,777,952
Outpatient Mental Health Services	1,859,741	9,246,813	9,503,322
Outpatient Substance Abuse Treatment and Detox	11,023	377,271	1,083,494
Housing/Residential Treatment	1,498,606	6,698,310	10,433,186
Specialized Crisis Services	983,482	4,358,985	4,283,858
Psychiatric Rehab and Support Services	1,845,969	7,881,109	7,589,812
Case Management	6,770,814	29,752,552	27,220,993
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	355,583	1,593,978	1,544,412
Medical Incentive Pool and Withhold Adjustments	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	390,476	2,186,302	2,585,832
PCP and Specialist Servcies	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
Subtotal MH&SAS	16,891,371	74,819,869	74,578,450
Subtotal Hospital, Medical, MH&SAS, CHOICES	170,134,353	738,410,715	681,580,865
LESS:			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Corrdination of Benefits	-	-	-
Subtotal Reinsurance, Copay, Subrogation	-	-	-
Total Hospital, Medical, MHS&S	170,134,353	738,410,715	681,580,865
Administation:			
Compensation	-	-	-
Direct and Allocated Admin expenses	-	-	-
Marketing	-	-	-
Interest Expense	-	-	-
Premium Tax Expense	12,638,860	46,849,063	55,155,915
Occupancy, Depreciation, and Amortization	-	-	-
Other Administration - Write-Ins	20,978,291	85,331,081	80,189,212
Total Administration Expenses	33,617,151	132,180,144	135,345,127
Total Expenses	203,751,504	870,590,859	816,925,992
Extraordinary Item	-	-	-
Provision for Income Tax	10,368,084	25,992,520	28,850,578
Net Income (Loss)	19,255,013	48,271,823	53,579,645
Write-Ins for Other Revenues:			
Total Other Revenues	-	-	-
Write-Ins for Other Medical and Hospital:			
Other Miscellaneous	901,514	978,035	(1,526,771)
Other Capitated Services	638,881	1,832,569	1,668,701
Total Other Medical and Hospital	1,540,396	2,810,605	141,930
Detail of Other MH and SAS:			
Total Other MH and SAS	-	-	-
Write-Ins for Other Administration:			
Administrative Services Fee	19,667,789	74,496,333	71,714,604
Behaviorial Healthcare Services	1,752,508	6,997,048	6,836,067
Spectera Administration Fees	116,724	426,383	495,463
Other Miscellaneous	(558,730)	3,411,317	1,143,078
Total Other Administration	20,978,291	85,331,081	80,189,212

UnitedHealthcare Community Plan - West Tennessee
Report 2A - TennCare Income Statement
West Tennessee CRA 2.30.14.3.3 and 2.30.14.3.4

	Current Qtr	YTD Total	Prior Year
Member Months	**523,305**	**2,075,390**	**2,012,096**
Revenues:			
TennCare Capitation	184,520,125	734,068,106	578,180,578
Investment	-	-	-
Other Revenues	122,276	122,276	-
Total Revenues	184,642,401	734,190,382	578,180,578
Estimated Expenses:			
Hospital and Medical (w/o Mental Health)			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	24,919,560	96,191,465	91,595,924
Inpatient Hospital Services	28,997,693	123,175,859	112,480,484
Outpatient Hospital Services	6,539,719	25,312,923	24,321,944
Emergency Room Services	7,512,807	32,723,179	33,934,016
Dental Services	-	-	-
Vision Services	471,054	1,940,916	1,888,031
Pharmacy Services	-	-	-
Home Health Services	2,715,282	11,511,184	9,565,248
Chiropractic Services	-	-	-
Radiology Services	3,195,538	17,781,256	18,725,501
Laboratory Services	2,109,523	9,146,039	8,295,116
Durable Medical Equipment Services	1,598,943	5,967,215	5,589,777
Transportation Services	3,852,006	14,421,699	13,408,838
Outside Referrals	-	-	-
Medical Incentive Pool and Withhold Adj	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Nursing Facility Care	38,412,873	153,832,875	71,309,845
HCBS Services	6,694,201	22,660,462	6,647,703
Other Medical and Hospital Services - Write-Ins	2,390,757	5,104,657	4,014,011
Subtotal Medical and Hospital	129,409,956	519,769,729	401,776,438
Mental Health and Substance Abuse Services			
Inpatient Psychiatric Facility Services	2,575,623	11,360,260	12,662,584
Inpatient Substance Abuse Treatment and Detox	224,258	624,637	346,586
Outpatient Mental Health Services	658,322	2,823,138	2,714,147
Outpatient Substance Abuse Treatment and Detox	23,563	90,627	108,956
Housing/Residential Treatment	1,293,330	4,918,715	6,888,721
Specialized Crisis Services	503,637	2,102,687	1,921,878
Psychiatric Rehab and Support Services	1,346,025	6,107,487	5,851,322
Case Management	4,200,576	16,462,660	15,137,608
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	307,476	1,313,908	1,307,183
Medical Incentive Pool and Withhold Adjustments	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	143,364	933,201	1,114,730
PCP and Specialist Servcies	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
Subtotal MH&SAS	11,276,175	46,737,319	48,053,716
Subtotal Hospital, Medical, MH&SAS, CHOICES	140,686,131	566,507,048	449,830,154
LESS:			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Corrdination of Benefits	-	-	-
Subtotal Reinsurance, Copay, Subrogation	-	-	-
Total Hospital, Medical, MHS&S	140,686,131	566,507,048	449,830,154
Administation:			
Compensation	-	-	-
Direct and Allocated Admin expenses	-	-	-
Marketing	-	-	-
Interest Expense	-	-	-
Premium Tax Expense	10,448,793	37,259,256	35,639,182
Occupancy, Depreciation, and Amortization	-	-	-
Other Administration - Write-Ins	16,959,926	66,665,908	53,136,297
Total Administration Expenses	27,408,719	103,925,164	88,775,479
Total Expenses	168,094,849	670,432,212	538,605,633
Extraordinary Item	-	-	-
Provision for Income Tax	5,791,643	22,315,360	13,851,231
Net Income (Loss)	10,755,909	41,442,811	25,723,715
Write-Ins for Other Revenues:			
Total Other Revenues	-	-	-
Write-Ins for Other Medical and Hospital:			
Other Miscellaneous	1,102,783	(779,495)	(680,222)
Other Capitated Services	1,287,975	5,884,152	4,694,234
Total Other Medical and Hospital	2,390,757	5,104,657	4,014,011
Detail of Other MH and SAS:			
Total Other MH and SAS	-	-	-
Write-Ins for Other Administration:			
Administrative Services Fee	15,928,978	60,193,585	47,410,807
Behaviorial Healthcare Services	910,577	3,609,198	3,503,776
Spectera Administration Fees	111,064	438,948	440,447
Other Miscellaneous	9,307	2,424,176	1,781,267
Total Other Administration	16,959,926	66,665,908	53,136,297

UnitedHealthcare Community Plan - East Tennessee
Reconciliation Between 2A and MLR Report
As of December 31, 2011

Capitation Revenue	Revenue
Revenue reported per MLR report	850,965,216
STAT Adjustment	0
	850,965,216
TennCare Capitation per 2A	**876,321,149**
Less: Restated revenue for prior months	(25,355,933)
	850,965,216
Difference	**0**

Claims & Reserve	Claims
Total 2A Paid Claims and Change in Reserves	**721,130,033**
Incurred Claims per the MLR for the reporting period	719,982,325
Restated prior year incurred claims	1,147,708
Adjusted MLR	**721,130,033**
Difference (rounding)	**0**

UnitedHealthcare Community Plan - Middle Tennessee
Reconciliation Between 2A and MLR Report
As of December 31, 2011

Capitation Revenue	Revenue
Revenue reported per MLR report	919,322,916
STAT Adjustment	0
	919,322,916
TennCare Capitation per 2A	**944,855,202**
Less: Restated revenue for prior months	(25,532,287)
	919,322,916
Difference	**0**

Claims & Reserve	Claims
Total 2A Paid Claims and Change in Reserves	738,410,715
	738,410,715
Incurred Claims per the MLR for the reporting period	756,313,078
Restated prior year incurred claims	(17,902,363)
Adjusted MLR	**738,410,715**
Difference (rounding)	**0**

UnitedHealthcare Community Plan - West Tennessee
Reconciliation Between 2A and MLR Report
As of December 31, 2011

Capitation Revenue	Revenue
Revenue reported per MLR report	722,446,484
STAT Adjustment	0
	722,446,484
TennCare Capitation per 2A	**734,190,382**
Less: Restated revenue for prior months	(11,743,899)
	722,446,484
Difference	**0**

Claims & Reserve	Claims
Total 2A Paid Claims and Change in Reserves	**566,507,048**
Incurred Claims per the MLR for the reporting period	576,209,136
Restated prior year incurred claims	(9,702,088)
Adjusted MLR	**566,507,048**
Difference (rounding)	**0**

UnitedHealthcare
COMMUNITY & STATE

Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Eastern Tennessee – Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $25,266,321 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 6,000 members.

Jed L. Linfield

Jed L. Linfield, FSA, MAAA
Director of Actuarial Reserving Services
United HealthCare Community and State
12018 Sunrise Valley Drive
Reston, VA 20191
(571) 262-8922

UHCEW500507-000

UnitedHealthcare
COMMUNITY & STATE

Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Eastern Tennessee – Excluding Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $64,230,147 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 189,000 members.

Jed L. Linfield

Jed L. Linfield, FSA, MAAA
Director of Actuarial Reserving Services
United HealthCare Community and State
12018 Sunrise Valley Drive
Reston, VA 20191
(571) 262-8922

UHCEW500507-000

UnitedHealthcare®
COMMUNITY & STATE

Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Middle Tennessee – Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $23,658,528 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 5,300 members.

Jed L. Linfield

Jed L. Linfield, FSA, MAAA
Director of Actuarial Reserving Services
United HealthCare Community and State
12018 Sunrise Valley Drive
Reston, VA 20191
(571) 262-8922

UHCEW500507-000

UnitedHealthcare
COMMUNITY & STATE

Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Middle Tennessee – Excluding Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $57,147,330 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 194,000 members.

Jed L. Linfield

Jed L. Linfield, FSA, MAAA
Director of Actuarial Reserving Services
United HealthCare Community and State
12018 Sunrise Valley Drive
Reston, VA 20191
(571) 262-8922

UHCEW500507-000

UnitedHealthcare
COMMUNITY & STATE

Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Western Tennessee – Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $22,350,756 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 4,400 members.

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Actuarial Certification

Carrier:	UnitedHealthcare Plan of the River Valley, Inc.
Date:	January 17, 2012
Valuation Date:	December 2011
Subject:	Tenncare Claim Reserve Estimate (IBNR) as of December 2011 – Risk Business – Western Tennessee – Excluding Long Term Care

I, Jed L. Linfield, am Director of Actuarial Reserving Services for United HealthCare Community and State. I am a member of the American Academy of Actuaries and am qualified to render the actuarial opinion contained herein.

In my opinion, the claim reserve estimate (IBNR) of $50,315,160 provides good and sufficient provision for all unpaid claim liabilities and was computed in accordance with currently accepted actuarial standards.

Note that, as of December 2011, this block of business had approximately 169,000 members.

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January 17, 2012

STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.

Medicaid Risk Business in Eastern Tennessee, Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid Long Term Care risk business in Eastern Tennessee, which had approximately 6,000 members in December 2011. This business became effective August 1, 2010.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $25,266,321.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;

c) Meet the requirements of the laws of the State of Tennessee;

d) Make good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization guaranteed under the terms of its contracts and agreements;

e) Are computed on the basis of actuarial assumptions and methods consistent in all material respects with those used in computing the corresponding items in the annual statement of the preceding year-end; and

f) Include provision, in the aggregate, for all actuarial reserves and related statement items which ought to be established.

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

This statement has been prepared for inclusion with United Healthcare Plan of the River Valley, Inc.'s statutory quarterly statement for filing with regulatory authorities of the State of Tennessee and is intended for no other purpose.

January 17, 2012

Jed L. Linfield

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STATEMENT OF ACTUARIAL OPINION

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Medicaid Risk Business in Eastern Tennessee, Excluding Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actu6arial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Eastern Tennessee, which had approximately 189,000 members in December 2011. This business became effective January 1, 2009.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $64,230,147.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;

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January 17, 2012

STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.

Medicaid Risk Business in Middle Tennessee, Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid Long Term Care risk business in Middle Tennessee, which had approximately 5,300 members in December 2011. This business became effective March 1, 2010.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $23,658,528.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

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The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

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January 17, 2012

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STATEMENT OF ACTUARIAL OPINION

Statutory Quarterly Statement of United Healthcare Plan of the River Valley, Inc.

Medicaid Risk Business in Middle Tennessee, Excluding Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Middle Tennessee, which had approximately 194,000 members in December 2011. This business became effective April 1, 2007.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $57,147,330.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

b) Are based on actuarial assumptions which are in accordance with or stronger than those called for in related contract provisions and are appropriate for the purpose for which the statement was prepared;

c) Meet the requirements of the laws of the State of Tennessee;

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e) Are computed on the basis of actuarial assumptions and methods consistent in all material respects with those used in computing the corresponding items in the annual statement of the preceding year-end; and

f) Include provision, in the aggregate, for all actuarial reserves and related statement items which ought to be established.

The actuarial methods, considerations and analyses used in forming my opinion conform to the appropriate Standards of Practice as promulgated from time to time by the Actuarial Standards Board, whose standards form the basis of this statement of opinion.

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Medicaid Risk Business in Western Tennessee, Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid Long Term Care risk business in Western Tennessee, which had approximately 4,400 members in December 2011. This business became effective August 1, 2010.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $22,350,756.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

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Medicaid Risk Business in Western Tennessee, Excluding Long Term Care

As of and for the Period Ended December 31, 2011

I, Jed L. Linfield, am a Member of the American Academy of Actuaries (Academy) and Director of Actuarial Reserving Services for United Healthcare Plan of the River Valley, Inc.'s Medicaid plans. I meet the Academy qualification standards for rendering this statement of actuarial opinion.

This statement is for United Healthcare Plan of the River Valley, Inc.'s Medicaid risk business in Western Tennessee, which had approximately 169,000 members in December 2011. This business became effective November 1, 2008.

I have examined the actuarial assumptions and methods used in determining the loss reserves listed below, as prepared for filing with regulatory officials as of December 31, 2011.

I have determined that the appropriate level for claims liability for this block of business is $50,315,160.

Note that in the annual statement, both Medicaid and non-Medicaid businesses are combined.

My examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary.

In my opinion the amounts carried in the balance sheet on account of the actuarial items identified above:

a) Are computed in accordance with presently accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;

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STATEMENT AS OF DECEMBER 31 2012 OF THE UNITEDHEALTHCARE PLAN OF THE RIVER VALLEY, INC.

Report #2A: EAST TN TENNCARE OPERATIONS STATEMENT OF REVENUES AND EXPENSES

	2009 and 2010		2008
	2011 PERIOD	2009 & 2010 RUNOUT TOTAL	TOTAL
MEMBER MONTHS	0	0	1,060,314
REVENUES:			
1. TennCare Capitation	1,135,830	$50,850,988	$207,925,863
2. Adverse Selection	0	0	0
3. Total TennCare Revenue (Lines 1 and 2)	1,135,830	50,850,988	207,925,863
4. Investment	0	0	0
5. Other Revenue (Provide detail)	0	0	0
6. TOTAL REVENUES (Lines 3 to 5)	1,135,830	50,850,988	207,925,863
EXPENSES:			
Medical and Hospital Services:			
7. Capitated Physician Services	0	0	0
8. Fee-for Service Physician Services	154,238	7,099,687	51,772,644
9. Inpatient Hospital Services	443,513	20,415,267	42,786,914
10. Outpatient Services	375,625	17,290,346	77,918,599
11. Emergency Room Services	0	0	0
12. Mental Health Services	0	0	0
13. Dental Services	0	0	0
14. Vision Services	0	52,606	786,446
15. Pharmacy Services	0	0	0
16. Home Health Services	78,267	3,602,694	6,762,871
17. Chiropractic Services	0	0	0
18. Radiology Services	12,805	589,439	4,356,809
19. Laboratory Services	12,303	566,324	4,187,462
20. Durable Medical Equipment Services	0	0	0
21. Transportation Services	0	0	1,881,711
22. Outside Referrals	0	0	0
23. Medical Incentive Pool and Withhold Adjustments	0	0	0
24. Occupancy, Depreciation, and Amortization	0	0	0
25. Other Medical and Hospital Services (Provide Detail)	0	0	126,860
26. Subtotal (Lines 7 to 25)	1,076,751	49,616,364	190,580,316
LESS:			
27. Net Reinsurance Recoveries Incurred	0	0	0
28. Copayments	0	0	0
29. Subrogation and Coordination of Benefits	0	0	0
30. Subtotal (Lines 27 to 29)	0	0	0
31 TOTAL MEDICAL AND HOSPITAL (Lines 26 minus line 30)	1,076,751	49,616,364	190,580,316
Administration:			
32. Compensation	0	0	11,302,146
33. Marketing	0	0	1,236,764
34. Interest Expense	0	0	0
35. Premium Tax Expense	59,079	1,234,624	3,971,843
36. Occupancy, Depreciation and Amortization	0	0	834,794
37. Other Administration (Provide detail)	0	0	0
38. TOTAL ADMINISTRATION (Lines 32 to 37)	59,079	1,234,624	17,345,547
39. TOTAL EXPENSES (Lines 31 and 38)	1,135,830	50,850,988	207,925,863
40. Extraordinary Item			
41. Provision for Income Tax	(0)	0	0
42. NET INCOME (LOSS) (Line 6 less Lines 39, 40, and 41)	$0	$0	$0
Write-ins:			
REVENUES:			
Line 5 Contractual Recoveries	0	0	0
Line 5 Deferral of Revenue for Administration fee Risk	0	0	0
EXPENSES:			
Line 25 Reinsurance Expense	0	0	0
Line 25 Nurseline	0	0	126,860
Line 37 Fines & Penalties- Regulatory Authorities	0	0	0

UHC Plan of the River Valley
Reconciliation of Cash to Accrual Basis Accounting
As of Dec 31, 2011

	Middle	East	West	Consolidated	Key
Cash received per premium tax reconciliation	851,791,042	804,009,224	677,376,394	2,333,176,660	
Change in accruals	7,579,891	(4,048,870)	(8,652,907)	(5,122,086)	a
Change in withhold	3,542,905	5,589,651	4,718,107	13,850,663	b
Jan premium paid in advance	79,817,175	70,589,534	60,666,943	211,173,653	c
Member refund not recorded as revenue	(24)			(24)	d
Reimbursement for EVV system included in premium tax calcualtion but not recorded as premium revenue	(805,600)			(805,600)	e
Tenncare bonus paid included in premium tax calculation but not recorde as premium revenue	-	(67,330)	(122,276)	(189,606)	f
Release of an accrual for capitation paid at under 1 year of age rates in error that Tenncare recouped in the October 2011 capitation payment	550,753			550,753	g
Revenue accrual for the variance between premium tax to be paid on the extra contractual payment amounts for service dates prior to July 2009 and the premium tax portion included in the cap rates for service dates prior to July 2009. Tenncare will be invoiced for the variance and the invoice amount is recorded as revenue	315,614	80,932	81,846	478,392	h
Accrual basis	942,991,556	876,253,141	734,068,106	2,553,312,803	
				-	
2A Reported premiums	942,991,556	876,253,141	734,068,106	2,553,312,803	
Difference	0	-	-	0	

Key

(a) Consistent with NAIC guidelines, UPRV records premiums on an accrual basis of accounting. The total accrued premium amount in Dec 2011 was $5.1M less than the premium accrued for at Dec 2010. The change is driven by a Dec 2011 accrual reducing revenue by $12.7M in anticipation of a potential Tenncare recoupment of LTC revenue paid for LTC members not receiving LTC services, and that reduction to revenue is further reduced by the Dec 2011 accrual for future retro membership being is partially offset by the Dec 2011 accrual for future retro membership being $176K less than the Dec 2010 accrual for future retro membership than the Dec 2010 accrual for future retro membership. These amounts are offset by the Dec 2011 RAF accrual that reduces revenue being $7.8M less then by what the Dec 2010 RAF accrual reduced revenue.

(b) This item is created by the Dec 2011 withholds being $13.9M more than the Dec 2010 withholds as a result of the premium withhold percentage being 10% in all three regions Dec 2011 vs the withhold percentage being 2.5% in East and West region, and 5% in Middle region in Dec 2010.

(c) The Jan premium payment was wired to UHC Community & State on Dec 30, 2010. The amount was included in the 4th quarter 2010 prem tax calculation, but the premium revenue was not recorded until Jan 2011.

(d) A refund check was sent by Tenncare to the plan in the amount of 24.30 that Tenncare considers in the prem tax calculation.

(e) Reimbursement for an electronic visit verification system that is premium taxable but not recorded as premium revenue

(f) Tenncare bonus paid to the plan that is premium taxable, but not recorded as premium revenue

(g) Item is created by the release of an accrual for capitation erroneously paid at under 1 year of age rates. Tenncare recouped the overpayment in the Oct 2011 capitation payment and the accrual was released.

(h) Item is a Revenue receivable amount for the variance between premium tax to be paid on the extra contractual payment amounts for service dates prior to July 2009 and the premium tax portion included in the cap rates for service dates prior to July 2009. Tenncare will be invoiced for the variance and the invoice amount is recorded as revenue

Accrual change is calculated as follows:	Middle	East	West	Consolidated
Reversal of December 10 Tenncare RAF accrual		8,862,538	3,734,041	12,596,578
Reversal of December 10 accrual for future retro membership	(5,525,827)	(13,241,152)	(9,274,173)	(28,041,153)
Dec 2011 accrual for future retro membership	6,368,921	13,381,962	8,114,268	27,865,151
Dec 2011 accrual for LTC members not receiving service	(3,118,432)	(4,556,464)	(5,029,649)	(12,704,545)
Dec 2011 accrual for Tenncare RAF	9,855,029	(8,495,754)	(6,197,394)	(4,838,118)
Total change in accrual	7,579,891	(4,048,870)	(8,652,907)	(5,122,086)

12/31/2010 AR balance by component

	Tenncare Medicaid withhold	Tenncare LTC withhold	Tenncare rate change accrual (held in account 55600-03000-20500 on 12/31/2010)	Medicaid (A) Accrual for Future retro premium	LTC (A) Accrual for Future retro premium	
Tenncare withhold	5,051,248	2,160,325				7,211,573
GL Accrual for future retroactive premium				28,041,153	-	28,041,153
GL Accrual for Tenncare rate change			(12,596,578)			(12,596,578)
GL Accrual prem tax payable not in cap payment						-
GL balance 12/31/2010	5,051,248	2,160,325	(12,596,578)	28,041,153	-	22,656,147

2011 Cash receipts related to 2010 service dates	Prior Medicaid withhold paid	Prior LTC withhold paid	Current Medicaid withhold on 2010 service dates	Current LTC withhold on 2010 service dates	Premium to record sent in 820 remittance	Premium to record sent in 820 remittance	Total deposits related to 2010
Jan-11	(5,051,248)	(2,160,325)	458,276	74,444	(13,931,952)	(1,726,978)	(22,337,782)
Feb-11	(458,276)	(74,444)	261,991	72,716	(8,177,728)	(2,322,431)	(10,698,171)
Mar-11	(261,991)	(72,716)	221,482	35,618	(7,046,698)	(1,387,780)	(8,512,085)
Apr-11	(221,482)	(35,618)	(119,420)	61,977	8,123,643	(2,063,285)	5,745,814
May-11	119,420	(61,977)	126,496	25,123	(5,059,851)	(1,004,914)	(5,855,702)
Jun-11	(126,496)	(25,123)	80,064	4,983	(3,202,575)	(199,305)	(3,468,452)
Jul-11	(80,064)	(4,983)	63,888	13,061	(2,555,507)	(522,448)	(3,086,053)
Aug-11	(63,888)	(13,061)	53,885	11,170	(2,155,417)	(446,788)	(2,614,096)
Sep-11	(53,885)	(11,170)	32,736	3,136	(1,329,330)	(126,401)	(1,484,913)
Oct-11	(32,736)	(3,136)	123,501	26,512	(1,235,009)	(265,124)	(1,385,992)
Nov-11	(123,501)	(26,512)	60,693	596	(612,894)	(5,964)	(707,582)
Dec-11	(60,693)	(596)	23,898	1,830	(257,283)	(18,303)	(311,147)
							-
Total 2011 cash deposits for 2010 retro cash					(37,440,598)	(10,089,719)	(54,716,162)

AmeriChoice - Tennessee
Retroactive Accrual
December-11

	Total					
IDB	**Mid TN (Location USATN006)**		**West TN (Location USATN806)**		**East TN (Location USATN024)**	
	Membership	**Revenue**	**Membership**	**Revenue**	**Membership**	**Revenue**
Jan-11	49	110,464.63	87	168,350	195	311,400.67
Feb-11	103	139,813.75	179	198,959	399	360,566.27
Mar-11	160	147,575.92	278	212,557	618	385,097.58
Apr-11	221	159,453.21	381	236,494	846	413,845.77
May-11	294	174,320.99	500	260,236	1,120	447,752.63
Jun-11	369	196,451.67	624	292,197	1,385	504,453.74
Jul-11	461	225,030.09	775	341,959	1,689	600,181.32
Aug-11	573	242,206.55	989	420,991	2,091	698,832.76
Sep-11	736	311,399.89	1,242	552,960	2,513	849,173.23
Oct-11	1,110	489,034.97	1,768	776,288	3,220	1,134,648.10
Nov-11	2,311	935,625.49	3,349	1,382,685	5,230	1,994,908.36
Dec-11	8,539	3,237,544.33	8,978	3,270,593	13,428	5,681,101.21
Total	14,926	6,368,921.49	19,151	8,114,267.94	32,735	13,381,961.63
	-	-	-	-	-	-
Prior Month	15,105	6,546,112.59	19,939	8,332,376.83	34,540	14,270,179.19
	(179)	(177,191.10)	(789)	(218,108.89)	(1,804)	(888,217.56)
Current Total	66,812	27,865,151.07				
Prior Total	69,584	29,148,668.61				
Increase/Decrease in Accrual	(2,772)	(1,283,517.55)				

CONFIDENTIAL

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE UnitedHealthcare Plan of the River Valley, Inc.

SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2011
(To be filed by March 1)

PART 1 - INTERROGATORIES

1. The reporting insurer is a member of a group of insurers or other holding company system: Yes [X] No [ ] If yes, do the amounts below represent 1) total gross compensation paid to each individual by or on behalf of all companies which are part of the group: Yes [ ]; or 2) allocation to each insurer: Yes [X]
2. Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity? Yes [ ] No [X]
3. Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond the period of 12 months from the date of the agreement? Yes [ ] No [X]

PART 2 - OFFICERS AND EMPLOYEES COMPENSATION

1	2	Annual Compensation			
		3	4	5	6
Name and Principal Position	Year	Salary	Bonus	All Other Compensation	Totals
President, Commercial and Director	2011	82,198	35,631	94,127	211,956
Daniel Roger Kueter	2010	96,429	34,286	21,156	151,871
	2009	74,127	21,434	13,099	108,660
1. Scott Andrew Bowers	2011	105,489	57,275	15,870	178,634
President; Medicaid Division and Director	2010	28,856	7,071	12,860	48,787
	2009				0
2. Patrick Caster	2011	80,063	38,014	55,456	173,532
Chief Financial Officer	2010				0
	2009				0
3. Mark Andrew Murr	2011	122,423	36,000	12,113	170,536
General Counsel	2010	111,190	25,000	16,054	152,244
	2009	66,905	12,767	1,765	81,436
4. Bruce Chase Steffens, M.D.	2011	89,026	33,333	21,265	143,624
Chief Medical Officer and Director	2010	86,333	26,667	26,032	139,032
	2009	82,847	18,333	15,592	116,772
5.	2011				0
	2010				0
	2009				0
6.	2011				0
	2010				0
	2009				0
7.	2011				0
	2010				0
	2009				0
8.	2011				0
	2010				0
	2009				0
9.	2011				0
	2010				0
	2009				0

PART 3 - DIRECTOR COMPENSATION

1	2	3	4
Name and Principal Position or Occupation	Compensation Paid or Deferred for Services as Director	All Other Compensation Paid or Deferred	Totals
William Kenneth Appelgate Ph.D. - Consumer Director	3,000		3,000
James Edward Hecker - Consumer Director	0		0
Victoria Jean Kauzlarich - Consumer Director	3,000		3,000
Steven Eugene Meeker - Director		20,234	20,234
Michael Paul Radu - Former Director		59,517	59,517
James Wesley Waters - Director		92,904	92,904
Cathie Sue Whiteside - Consumer Director	0		0
			0
			0
			0
			0
			0
			0
			0
			0
			0
			0