



**HEALTH ANNUAL STATEMENT
FOR THE YEAR ENDING DECEMBER 31, 2006
OF THE CONDITION AND AFFAIRS OF THE**

UnitedHealthcare of New England, Inc.

NAIC Group Code 0707 0707 NAIC Company Code 95149 Employer's ID Number 05-0413469
(Current Period) (Prior Period)

Organized under the Laws of Rhode Island, State of Domicile or Port of Entry Rhode Island

Country of Domicile United States

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

Incorporated/Organized 11/14/1984 Commenced Business 12/27/1984

Statutory Home Office 475 Kilvert Street, Suite 310, Warwick, RI 02886-1392
(Street and Number) (City or Town, State and Zip Code)

Main Administrative Office 48 Monroe Turnpike
Trumbull, CT 06611 203-459-6000
(City or Town, State and Zip Code) (Street and Number) (Area Code) (Telephone Number)

Mail Address 48 Monroe Turnpike, Trumbull, CT 06611
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 48 Monroe Turnpike
Trumbull, CT 06611 860-702-8011
(City or Town, State and Zip Code) (Street and Number) (Area Code) (Telephone Number)

Internet Website Address www.unitedhealthcare.com

Statutory Statement Contact Kevin Michael Ericson 860-702-8011
(Name) (Area Code) (Telephone Number) (Extension)
kericson@oxhp.com 203-452-4690
(E-mail Address) (FAX Number)

Policyowner Relations Contact 475 Kilvert Street, Suite 310
Warwick, RI 02886-1392 401-737-6900
(City or Town, State and Zip Code) (Street and Number) (Area Code) (Telephone Number) (Extension)

OFFICERS

Name	Title	Name	Title
<u>Stephen John Farell</u>	<u>President and Chief Financial Officer</u>	<u>Juanita Valarae Bolland Luis</u>	<u>Assistant Secretary</u>
<u>Donald Alan Powers</u>	<u>VP-Finance and Assistant Treasurer</u>		

OTHER OFFICERS

<u>David Scott Wichmann</u>	<u>Vice President and Assistant Treasurer</u>	<u>Robert Worth Oberrender</u>	<u>Treasurer</u>
<u>Forrest Gregory Burke</u>	<u>Secretary</u>	<u>Timothy Gilbert Caron</u>	<u>Assistant Secretary</u>
<u>Mary Lynn Stanislav</u>	<u>Assistant Secretary</u>		

DIRECTORS OR TRUSTEES

<u>Robert John Sheehy</u>	<u>Michael Anthony Turpin</u>	<u>Stephen John Farell</u>
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State ofRhode Island.....

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County ofKent.....

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.

Stephen John Farell
President and Chief Financial Officer

Juanita Valarae Bolland Luis
Assistant Secretary

Donald Alan Powers
VP-Finance and Assistant Treasurer

Subscribed and sworn to before me this
12 day of February, 2007

- 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 _____

Claudette Levesque
Notary
May, 14, 2007

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

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)						
0199999 Individually listed claims unpaid	0	0	0	0	0	0
0299999 Aggregate accounts not individually listed-uncovered						0
0399999 Aggregate accounts not individually listed-covered	19,205,737	1,428,982	426,587	191,078	410,699	21,663,083
0499999 Subtotals	19,205,737	1,428,982	426,587	191,078	410,699	21,663,083
0599999 Unreported claims and other claim reserves						29,918,843
0699999 Total amounts withheld						
0799999 Total claims unpaid						51,581,926
0899999 Accrued medical incentive pool and bonus amounts						388,604

EXHIBIT 8 – FURNITURE, EQUIPMENT AND SUPPLIES OWNED

Description	1 Cost	2 Improvements	3 Accumulated Depreciation	4 Book Value Less Encumbrances	5 Assets Not Admitted	6 Net Admitted Assets
1. Administrative furniture and equipment	NONE					
2. Medical furniture, equipment and fixtures						
3. Pharmaceuticals and surgical supplies						
4. Durable medical equipment						
5. Other property and equipment						
6. Total	0	0	0	0	0	0



ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

UnitedHealthcare of New England, Inc.

2.

(LOCATION)

NAIC Group Code 0707

BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2006

NAIC Company Code 95149

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Stop Loss	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
Total Members at end of:													
1. Prior Year	20,800	57	20,743										
2. First Quarter	18,216	48	18,168										
3. Second Quarter	16,886	47	16,839										
4. Third Quarter	15,830	41	15,789										
5. Current Year	15,023	33	14,990										
6. Current Year Member Months	200,796	536	200,260										
Total Member Ambulatory Encounters for Year:													
7. Physician	215,703	1,078	214,625										
8. Non-Physician	7,841	39	7,802										
9. Total	223,544	1,117	222,427	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	4,396	24	4,372										
11. Number of Inpatient Admissions	955	5	950										
12. Health Premiums Written	63,110,505	353,001	62,757,504										
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	63,131,692	351,658	62,780,034										
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	49,071,158	126,132	48,945,026										
18. Amount Incurred for Provision of Health Care Services	47,143,518	122,338	47,021,180										

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

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

UnitedHealthcare of New England, Inc.

2.

(LOCATION)

NAIC Group Code 0707

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2006

NAIC Company Code 95149

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Stop Loss	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
Total Members at end of:													
1. Prior Year	110,312	326	56,733					17,251	36,002				
2. First Quarter	103,192	324	51,543					17,835	33,490				
3. Second Quarter	101,904	313	49,528					18,508	33,555				
4. Third Quarter	101,170	309	48,316					18,666	33,879				
5. Current Year	98,723	297	47,627					18,520	32,279				
6. Current Year Member Months	1,227,100	3,764	594,922					220,367	408,047				
Total Member Ambulatory Encounters for Year:													
7. Physician	1,268,889	3,218	640,454					356,993	268,224				
8. Non-Physician	351,293	117	23,282					197,537	130,357				
9. Total	1,620,182	3,335	663,736	0	0	0	0	554,530	398,581	0	0	0	0
10. Hospital Patient Days Incurred	80,497	66	12,268					59,594	8,569				
11. Number of Inpatient Admissions	12,512	15	2,822					7,161	2,514				
12. Health Premiums Written	453,712,307	747,979	187,489,655					175,751,653	89,723,020				
13. Life Premiums Direct	0												
14. Property/Casualty Premiums Written	0												
15. Health Premiums Earned	453,669,881	745,134	187,450,074					175,751,653	89,723,020				
16. Property/Casualty Premiums Earned	0												
17. Amount Paid for Provision of Health Care Services	367,342,070	376,385	146,055,077					143,351,905	77,558,703				
18. Amount Incurred for Provision of Health Care Services	360,909,935	359,065	140,314,199					144,554,812	75,681,859				

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

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

UnitedHealthcare of New England, Inc.

2.

(LOCATION)

NAIC Group Code	0707	BUSINESS IN THE STATE OF Consolidated		DURING THE YEAR 2006									NAIC Company Code		95149
	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Stop Loss	11 Disability Income	12 Long-Term Care	13 Other		
		2 Individual	3 Group												
Total Members at end of:															
1. Prior Year	131,112	383	77,476	0	0	0	0	17,251	36,002	0	0	0	0		
2. First Quarter	121,408	372	69,711	0	0	0	0	17,835	33,490	0	0	0	0		
3. Second Quarter	118,790	360	66,367	0	0	0	0	18,508	33,555	0	0	0	0		
4. Third Quarter	117,000	350	64,105	0	0	0	0	18,666	33,879	0	0	0	0		
5. Current Year	113,746	330	62,617	0	0	0	0	18,520	32,279	0	0	0	0		
6. Current Year Member Months	1,427,896	4,300	795,182	0	0	0	0	220,367	408,047	0	0	0	0		
Total Member Ambulatory Encounters for Year:															
7. Physician	1,484,592	4,296	855,079	0	0	0	0	356,993	268,224	0	0	0	0		
8. Non-Physician	359,134	156	31,084	0	0	0	0	197,537	130,357	0	0	0	0		
9. Total	1,843,726	4,452	886,163	0	0	0	0	554,530	398,581	0	0	0	0		
10. Hospital Patient Days Incurred	84,893	90	16,640	0	0	0	0	59,594	8,569	0	0	0	0		
11. Number of Inpatient Admissions	13,467	20	3,772	0	0	0	0	7,161	2,514	0	0	0	0		
12. Health Premiums Written	516,822,812	1,100,980	250,247,159	0	0	0	0	175,751,653	89,723,020	0	0	0	0		
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	516,801,573	1,096,792	250,230,108	0	0	0	0	175,751,653	89,723,020	0	0	0	0		
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	416,413,228	502,517	195,000,103	0	0	0	0	143,351,905	77,558,703	0	0	0	0		
18. Amount Incurred for Provision of Health Care Services	408,053,453	481,403	187,335,379	0	0	0	0	144,554,812	75,681,859	0	0	0	0		

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

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SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31, prior year.....	0
2. Increase (decrease) by adjustment:	
2.1 Totals, Part 1, Column 11	0
2.2 Totals, Part 3, Column 7	0
3. Cost of acquired, (Totals, Part 2, Column 6, net of encumbrances, Column 7, and net of credit to permanent improvements (Column 9)	0
4. Cost of additions and permanent improvements:	
4.1 Totals, Part 1, Column 14	0
4.2 Totals, Part 3, Column 9	0
5. Total profit (loss) on sales, Part 3, Column 14	0
6. Increase (decrease) by foreign exchange adjustment:	
6.1 Totals, Part 1, Column 12	0
6.2 Totals, Part 3, Column 8	0
7. Amounts received on sales, Part 3, Column 11 and Part 1, Column 13	0
8. Book/adjusted carrying value at end of current period	0
9. Total valuation allowance	0
10. Subtotal (Lines 8 plus 9)	0
11. Total nonadmitted amounts	0
12. Statement value, current period (Page 2, real estate lines, Net Admitted Assets column)	0

SCHEDULE B - VERIFICATION BETWEEN YEARS

Mortgage Loans

1. Book value/recorded investment excluding accrued interest on mortgages owned, December 31, prior year	0
2. Amount loaned during year:	
2.1 Actual cost at time of acquisitions	0
2.2 Additional investment made after acquisitions	0
3. Accrual of discount and mortgage interest points and commitment fees	0
4. Increase (decrease) by adjustment	0
5. Total profit (loss) on sale	0
6. Amounts paid on account or in full during the year	0
7. Amortization of premium	0
8. Increase (decrease) by foreign exchange adjustment	0
9. Book value/recorded investment excluding accrued interest on mortgages owned at end of current period	0
10. Total valuation allowance	0
11. Subtotal (Lines 9 plus 10)	0
12. Total nonadmitted amounts	0
13. Statement value of mortgages owned at end of current period (Page 2, mortgage lines, Net Admitted Assets column).....	0

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Long-Term Invested Assets

1. Book/adjusted carrying value of long-term invested assets owned, December 31 of prior year	0
2. Cost of acquisitions during year:	
2.1 Actual cost at time of acquisitions	0
2.2 Additional investment made after acquisitions	0
3. Accrual of discount	0
4. Increase (decrease) by adjustment	0
5. Total profit (loss) on sale	0
6. Amounts paid on account or in full during the year	0
7. Amortization of premium	0
8. Increase (decrease) by foreign exchange adjustment	0
9. Book/adjusted carrying value of long-term invested assets at end of current period	0
10. Total valuation allowance	0
11. Subtotal (Lines 9 plus 10)	0
12. Total nonadmitted amounts	0
13. Statement value of long-term invested assets at end of current period (Page 2, Line 7, Column 3).....	0

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Class 1	16,001	1,920,993	814,916	0	3,251,521	6,003,431	4.5	6,028,891	7.2	6,003,431	0
1.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
1.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
1.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
1.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
1.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
1.7 Totals	16,001	1,920,993	814,916	0	3,251,521	6,003,431	4.5	6,028,891	7.2	6,003,431	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Class 1	0	0	0	0	0	0	0.0	0	0.0	0	0
2.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
2.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
2.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
2.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
2.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories and Possessions etc., Guaranteed, Schedules D & DA (Group 3)											
3.1 Class 1	1,253,970	3,334,235	0	0	0	4,588,205	3.4	7,135,939	8.5	4,588,205	0
3.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
3.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
3.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
3.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
3.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
3.7 Totals	1,253,970	3,334,235	0	0	0	4,588,205	3.4	7,135,939	8.5	4,588,205	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Class 1	2,518,506	5,669,164	5,555,242	0	0	13,742,912	10.2	14,327,803	17.1	13,742,912	0
4.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
4.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
4.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
4.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
4.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
4.7 Totals	2,518,506	5,669,164	5,555,242	0	0	13,742,912	10.2	14,327,803	17.1	13,742,912	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Class 1	3,941,085	16,489,520	13,071,307	3,031,553	0	36,533,464	27.1	36,022,782	43.0	36,533,464	0
5.2 Class 2	0	0	0	0	0	0	0.0	0	0.0	0	0
5.3 Class 3	0	0	0	0	0	0	0.0	0	0.0	0	0
5.4 Class 4	0	0	0	0	0	0	0.0	0	0.0	0	0
5.5 Class 5	0	0	0	0	0	0	0.0	0	0.0	0	0
5.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
5.7 Totals	3,941,085	16,489,520	13,071,307	3,031,553	0	36,533,464	27.1	36,022,782	43.0	36,533,464	0

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Class 1	.0	.0	399,270	.0	.0	399,270	.3	.0	0.0	399,270	.0
6.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
6.7 Totals	0	0	399,270	0	0	399,270	0.3	0	0.0	399,270	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Class 1	48,858,217	16,195,730	8,349,876	.0	.0	73,403,823	54.5	19,861,412	23.7	73,403,823	.0
7.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	409,630	0.5	.0	.0
7.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
7.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
7.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
7.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
7.7 Totals	48,858,217	16,195,730	8,349,876	0	0	73,403,823	54.5	20,271,042	24.2	73,403,823	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Class 1	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parent, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Class 1	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.6 Class 6	0	0	0	0	0	0	0.0	0	0.0	0	0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
10. Total Bonds Current Year											
10.1 Class 1	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	XXX	XXX	134,671,103	.0
10.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.6 Class 6	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.7 Totals	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	XXX	XXX	134,671,103	.0
10.8 Line 10.7 as a % of Col. 6	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Class 1	15,580,841	34,119,177	26,404,937	3,228,282	4,043,591	XXX	XXX	83,376,828	99.5	83,376,828	.0
11.2 Class 2	.0	.0	409,630	.0	.0	XXX	XXX	409,630	0.5	409,630	.0
11.3 Class 3	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.4 Class 4	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.5 Class 5	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.6 Class 6	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.7 Totals	15,580,841	34,119,177	26,814,567	3,228,282	4,043,591	XXX	XXX	83,786,458	100.0	83,786,458	.0
11.8 Line 11.7 as a % of Col. 8	18.6	40.7	32.0	3.9	4.8	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Class 1	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	83,376,828	99.5	134,671,103	XXX
12.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	409,630	0.5	.0	XXX
12.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	XXX
12.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	XXX
12.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	XXX
12.6 Class 6	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	XXX
12.7 Totals	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	83,786,458	100.0	134,671,103	XXX
12.8 Line 12.7 as a % of Col. 6	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Class 1	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.2 Class 2	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.3 Class 3	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.4 Class 4	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.5 Class 5	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.6 Class 6	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.7 Totals	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.8 Line 13.7 as a % of Col. 6	.0	.0	.0	.0	.0	.0	XXX	XXX	XXX	XXX	.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

(a) Includes \$ freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.
 (b) Includes \$ current year, \$ prior year of bonds with Z designations and \$, current year, \$ prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.
 (c) Includes \$ current year, \$ prior year of bonds with 5* designations and \$, current year, \$ prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments, Schedules D & DA (Group 1)											
1.1 Issuer Obligations	.0	1,867,020	799,863	.0	3,251,521	5,918,405	4.4	5,908,899	7.1	5,918,405	.0
1.2 Single Class Mortgage-Backed/Asset-Backed Securities	16,001	53,973	15,053	0	0	85,026	0.1	119,992	0.1	85,026	0
1.7 Totals	16,001	1,920,993	814,916	0	3,251,521	6,003,431	4.5	6,028,891	7.2	6,003,431	0
2. All Other Governments, Schedules D & DA (Group 2)											
2.1 Issuer Obligations	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
2.2 Single Class Mortgage-Backed/Asset-Backed Securities	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
2.3 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
2.4 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
2.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
2.6 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
2.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
3. States, Territories, and Possessions Guaranteed, Schedules D & DA (Group 3)											
3.1 Issuer Obligations	1,253,970	3,334,235	.0	.0	.0	4,588,205	3.4	7,135,939	8.5	4,588,205	.0
3.2 Single Class Mortgage-Backed/Asset-Backed Securities	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
3.3 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
3.4 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
3.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
3.6 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
3.7 Totals	1,253,970	3,334,235	0	0	0	4,588,205	3.4	7,135,939	8.5	4,588,205	0
4. Political Subdivisions of States, Territories and Possessions, Guaranteed, Schedules D & DA (Group 4)											
4.1 Issuer Obligations	2,518,506	5,669,164	5,555,242	.0	.0	13,742,912	10.2	14,327,803	17.1	13,742,912	.0
4.2 Single Class Mortgage-Backed/Asset-Backed Securities	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
4.3 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
4.4 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
4.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
4.6 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
4.7 Totals	2,518,506	5,669,164	5,555,242	0	0	13,742,912	10.2	14,327,803	17.1	13,742,912	0
5. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed, Schedules D & DA (Group 5)											
5.1 Issuer Obligations	2,130,065	11,054,816	7,214,911	1,678,317	.0	22,078,110	16.4	25,947,474	31.0	22,078,110	.0
5.2 Single Class Mortgage-Backed/Asset-Backed Securities	1,537,578	4,591,399	3,486,024	1,353,236	.0	10,968,237	8.1	9,956,067	11.9	10,968,237	.0
MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES											
5.3 Defined	273,442	843,305	2,370,371	.0	.0	3,487,118	2.6	119,241	0.1	3,487,118	.0
5.4 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET- BACKED SECURITIES											
5.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
5.6 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
5.7 Totals	3,941,085	16,489,520	13,071,307	3,031,553	0	36,533,464	27.1	36,022,782	43.0	36,533,464	0

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total from Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
6. Public Utilities (Unaffiliated), Schedules D & DA (Group 6)											
6.1 Issuer Obligations .....	.0	.0	399,270	.0	.0	399,270	0.3	.0	0.0	399,270	.0
6.2 Single Class Mortgage-Backed/Asset-Based Securities .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
6.3 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.4 Other .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
6.5 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.6 Other .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
6.7 Totals	0	0	399,270	0	0	399,270	0.3	0	0.0	399,270	0
7. Industrial & Miscellaneous (Unaffiliated), Schedules D & DA (Group 7)											
7.1 Issuer Obligations	47,652,344	7,875,910	5,646,859	.0	.0	61,175,113	45.4	13,724,964	16.4	61,175,113	.0
7.2 Single Class Mortgage-Backed/Asset-Based Securities .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
7.3 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
7.4 Other	886,355	6,829,721	2,703,017	.0	.0	10,419,093	7.7	3,444,907	4.1	10,419,093	.0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
7.5 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
7.6 Other	319,518	1,490,098	0	0	0	1,809,616	1.3	3,101,171	3.7	1,809,616	0
7.7 Totals	48,858,217	16,195,730	8,349,876	0	0	73,403,823	54.5	20,271,042	24.2	73,403,823	0
8. Credit Tenant Loans, Schedules D & DA (Group 8)											
8.1 Issuer Obligations .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
8.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0
9. Parents, Subsidiaries and Affiliates, Schedules D & DA (Group 9)											
9.1 Issuer Obligations .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.2 Single Class Mortgage-Backed/Asset-Based Securities .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS RESIDENTIAL MORTGAGE- BACKED SECURITIES											
9.3 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.4 Other .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
MULTI-CLASS COMMERCIAL MORTGAGE- BACKED/ASSET-BACKED SECURITIES											
9.5 Defined .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.6 Other .....	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	.0
9.7 Totals	0	0	0	0	0	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

SCHEDULE D - PART 1A - SECTION 2 (continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Col. 6 as a % of Line 10.7	8 Total From Col. 6 Prior Year	9 % From Col. 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
10. Total Bonds Current Year											
10.1 Issuer Obligations	53,554,884	29,801,146	19,616,145	1,678,317	3,251,521	107,902,013	80.1	XXX	XXX	107,902,013	.0
10.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	1,553,579	4,645,372	3,501,077	1,353,236	.0	11,053,263	8.2	XXX	XXX	11,053,263	.0
10.3 Defined	273,442	843,305	2,370,371	.0	.0	3,487,118	2.6	XXX	XXX	3,487,118	.0
10.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	886,355	6,829,721	2,703,017	.0	.0	10,419,093	7.7	XXX	XXX	10,419,093	.0
10.5 Defined	.0	.0	.0	.0	.0	.0	0.0	XXX	XXX	.0	.0
10.6 Other	319,518	1,490,098	.0	.0	.0	1,809,616	1.3	XXX	XXX	1,809,616	.0
10.7 Totals	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	XXX	XXX	134,671,103	.0
10.8 Line 10.7 as a % of Col. 6	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	0.0
11. Total Bonds Prior Year											
11.1 Issuer Obligations	12,304,960	26,073,538	22,933,888	1,689,103	4,043,591	XXX	XXX	67,045,080	80.0	67,045,080	.0
11.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	1,513,282	4,132,534	2,891,064	1,539,179	.0	XXX	XXX	10,076,058	12.0	10,076,059	.0
11.3 Defined	84,725	34,516	.0	.0	.0	XXX	XXX	119,241	0.1	119,241	.0
11.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	.0	2,455,291	989,616	.0	.0	XXX	XXX	3,444,907	4.1	3,444,907	.0
11.5 Defined	.0	.0	.0	.0	.0	XXX	XXX	.0	0.0	.0	.0
11.6 Other	1,677,872	1,423,299	.0	.0	.0	XXX	XXX	3,101,171	3.7	3,101,171	.0
11.7 Totals	15,580,839	34,119,178	26,814,568	3,228,282	4,043,591	XXX	XXX	83,786,458	100.0	83,786,458	.0
11.8 Line 11.7 as a % of Col. 8	18.6	40.7	32.0	3.9	4.8	XXX	XXX	100.0	XXX	100.0	0.0
12. Total Publicly Traded Bonds											
12.1 Issuer Obligations	53,554,884	29,801,146	19,616,145	1,678,317	3,251,521	107,902,013	80.1	67,045,080	80.0	107,902,013	XXX
12.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	1,553,579	4,645,372	3,501,077	1,353,236	.0	11,053,263	8.2	10,076,058	12.0	11,053,263	XXX
12.3 Defined	273,442	843,305	2,370,371	.0	.0	3,487,118	2.6	119,241	0.1	3,487,118	XXX
12.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	886,355	6,829,721	2,703,017	.0	.0	10,419,093	7.7	3,444,907	4.1	10,419,093	XXX
12.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	.0	XXX
12.6 Other	319,518	1,490,098	.0	.0	.0	1,809,616	1.3	3,101,171	3.7	1,809,616	XXX
12.7 Totals	56,587,777	43,609,641	28,190,611	3,031,553	3,251,521	134,671,103	100.0	83,786,458	100.0	134,671,103	XXX
12.8 Line 12.7 as a % of Col. 6	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	XXX
12.9 Line 12.7 as a % of Line 10.7, Col. 6, Section 10	42.0	32.0	21.0	2.0	2.0	100.0	XXX	XXX	XXX	100.0	XXX
13. Total Privately Placed Bonds											
13.1 Issuer Obligations	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.2 Single Class Mortgage-Backed/Asset-Backed Securities MULTI-CLASS RESIDENTIAL MORTGAGE-BACKED SECURITIES	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.3 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.4 Other MULTI-CLASS COMMERCIAL MORTGAGE-BACKED/ASSET-BACKED SECURITIES	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.5 Defined	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.6 Other	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.7 Totals	.0	.0	.0	.0	.0	.0	0.0	.0	0.0	XXX	.0
13.8 Line 13.7 as a % of Col. 6	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
13.9 Line 13.7 as a % of Line 10.7, Col. 6, Section 10	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

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SCHEDULE DA - PART 2 - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets(a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, prior year	213,203	213,203	0	0	0
2. Cost of short-term investments acquired	99,617,518	99,617,518			
3. Increase (decrease) by adjustment	0				
4. Increase (decrease) by foreign exchange adjustment	0				
5. Total profit (loss) on disposal of short-term investments	0				
6. Consideration received on disposal of short-term investments	52,878,135	52,878,135			
7. Book/adjusted carrying value, current year	46,952,586	46,952,586	0	0	0
8. Total valuation allowance	0				
9. Subtotal (Lines 7 plus 8)	46,952,586	46,952,586	0	0	0
10. Total nonadmitted amounts	0				
11. Statement value (Lines 9 minus 10)	46,952,586	46,952,586	0	0	0
12. Income collected during year	1,864,693	1,864,693			
13. Income earned during year	1,864,693	1,864,693			

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - VBY

NONE

Schedule DB - Part B - VBY

NONE

Schedule DB - Part C - VBY

NONE

Schedule DB - Part D - VBY

NONE

Schedule DB - Part E - VBY

NONE

Schedule DB - Part F - Section 1

NONE

Schedule DB - Part F - Section 2

NONE

Schedule S - Part 1 - Section 2

NONE

SCHEDULE S - PART 4

Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 Federal 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 Trust Agreements	11 Funds Deposited by and Withheld from Reinsurers	12 Other	13 Miscellaneous Balances (Credit)	14 Sum of Cols 9+10+11+12+13 But Not in Excess of Col. 8
NONE													
1199999 Total													

Schedule S-Part 5
Five-Year Exhibit of Reinsurance Ceded Business
(000 Omitted)

	1 2006	2 2005	3 2004	4 2003	5 2002
A. OPERATIONS ITEMS					
1. Premiums.....	151,469	172,517	207,263	403	394
2. Title XVIII-Medicare.....	173	144	174	105	110
3. Title XIX-Medicaid.....	367	367	409	308	314
4. Commissions and reinsurance expense allowance.....		.0	.0	.0	.0
5. Total hospital and medical expenses.....	113,193	132,901	165,939	.0	.0
B. BALANCE SHEET ITEMS					
6. Premiums receivable.....	12,117	14,107	15,257	.0	.0
7. Claims payable.....	12,886	17,057	21,124	.0	.0
8. Reinsurance recoverable on paid losses.....	9,588	12,884	11,948	.0	.0
9. Experience rating refunds due or unpaid.....		.0	.0	.0	.0
10. Commissions and reinsurance expense allowances unpaid.....	1,797	2,399,200	2,251,170	.0	.0
11. Unauthorized reinsurance offset.....	.0	.0	.0	.0	.0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
12. Funds deposited by and withheld from (F).....	.0	.0	.0	.0	.0
13. Letters of credit (L).....	.0	.0	.0	.0	.0
14. Trust agreements (T).....	.0	.0	.0	.0	.0
15. Other (O)	.0	.0	.0	.0	.0

SCHEDULE S-PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1	2	3
	As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 10)	152,861,248		152,861,248
2. Accident and health premiums due and unpaid (Line 13).....	2,080,407		2,080,407
3. Amounts recoverable from reinsurers (Line 14.1).....	9,587,746	(9,146,714)	441,032
4. Net credit for ceded reinsurance.....	XXX	22,474,105	22,474,105
5. All other admitted assets (Balance).....	7,120,439		7,120,439
6. Total assets (Line 26)	171,649,840	13,327,391	184,977,231
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1).....	39,746,389	12,886,359	52,632,748
8. Accrued medical incentive pool and bonus payments (Line 2).....	388,604		388,604
9. Premiums received in advance (Line 8).....	9,671,549		9,671,549
10. Reinsurance in unauthorized companies (Line 18).....	0		0
11. All other liabilities (Balance).....	31,630,642		31,630,642
12. Total liabilities (Line 22).....	81,437,184	12,886,359	94,323,543
13. Total capital and surplus (Line 31).....	90,212,656	XXX	90,212,656
14. Total liabilities, capital and surplus (Line 32)	171,649,840	12,886,359	184,536,199
NET CREDIT FOR CEDED REINSURANCE			
15. Claims unpaid.....	12,886,359		
16. Accrued medical incentive pool.....	0		
17. Premiums received in advance	0		
18. Reinsurance recoverable on paid losses	9,587,746		
19. Other ceded reinsurance recoverables	0		
20. Total ceded reinsurance recoverables	22,474,105		
21. Premiums receivable	0		
22. Unauthorized reinsurance	0		
23. Other ceded reinsurance payables/offsets	0		
24. Total ceded reinsurance payables/offsets	0		
25. Total net credit for ceded reinsurance	22,474,105		

**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					0
2. Alaska	AK					0
3. Arizona	AZ					0
4. Arkansas	AR					0
5. California	CA					0
6. Colorado	CO					0
7. Connecticut	CT					0
8. Delaware	DE					0
9. District of Columbia	DC					0
10. Florida	FL					0
11. Georgia	GA					0
12. Hawaii	HI					0
13. Idaho	ID					0
14. Illinois	IL					0
15. Indiana	IN					0
16. Iowa	IA					0
17. Kansas	KS					0
18. Kentucky	KY					0
19. Louisiana	LA					0
20. Maine	ME					0
21. Maryland	MD					0
22. Massachusetts	MA					0
23. Michigan	MI					0
24. Minnesota	MN					0
25. Mississippi	MS					0
26. Missouri	MO					0
27. Montana	MT					0
28. Nebraska	NE					0
29. Nevada	NV					0
30. New Hampshire	NH					0
31. New Jersey	NJ					0
32. New Mexico	NM					0
33. New York	NY					0
34. North Carolina	NC					0
35. North Dakota	ND					0
36. Ohio	OH					0
37. Oklahoma	OK					0
38. Oregon	OR					0
39. Pennsylvania	PA					0
40. Rhode Island	RI					0
41. South Carolina	SC					0
42. South Dakota	SD					0
43. Tennessee	TN					0
44. Texas	TX					0
45. Utah	UT					0
46. Vermont	VT					0
47. Virginia	VA					0
48. Washington	WA					0
49. West Virginia	WV					0
50. Wisconsin	WI					0
51. Wyoming	WY					0
52. American Samoa	AS					0
53. Guam	GU					0
54. Puerto Rico	PR					0
55. U.S. Virgin Islands	VI					0
56. Northern Mariana Islands	MP					0
57. Canada	CN					0
58. Aggregate Other Alien	OT					0
59. Totals		0	0	0	0	0

NONE

ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

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)
	41-1591944	ACN Group, Inc					22,398,651				22,398,651	
82406	35-1665915	All Savers Insurance Company				(3,048)		(25,147)			(28,195)	(44,769)
97179	86-0207231	American Med Security Life Ins Co				(7,662,727)		4,089,011			(3,573,716)	(3,347,839)
	47-0875734	AmeriChoice Alliance, Inc				(3,915,533)					(3,915,533)	
	54-1743141	AmeriChoice Health Services, Inc				(75,174,517)					(75,174,517)	
95497	22-3368602	AmeriChoice of New Jersey, Inc				43,714,353					43,714,353	
95475	11-3122517	AmeriChoice of New York, Inc				36,999,479					36,999,479	
95033	54-1495918	AmeriChoice of Pennsylvania, Inc				13,108,421					13,108,421	
	86-0813232	Arizona Physicians IPA, Inc		10,000,000		99,667,275					109,667,275	
	52-1452809	Dental Benefit Providers of CA, Inc				(2,783,011)					(2,783,011)	
52053	36-4008355	Dental Benefit Providers of IL, Inc				(71,571)					(71,571)	
47040	52-1500049	Dental Benefit Providers of MD, Inc		2,000,000		(887,392)					1,112,608	
	41-2014834	Dental Benefit Providers, Inc				61,151,437					61,151,437	
		Duncan Printing Services, LLC	(10,906,807)								(10,906,807)	
11141	91-2008361	Evercare of Texas, LLC					(57,487,138)				(57,487,138)	
	47-0858534	Exante Bank, Inc		10,000,000							10,000,000	
	52-1327095	Fidelity Benefit Administrators, Inc				237,757					237,757	
	37-0855360	Golden Rule Financial Corporation				3,363,935					3,363,935	
62286	37-6028756	Golden Rule Insurance Company	(250,000,000)			(18,486,178)		25,147			(268,461,031)	44,769
95467	38-3204052	Great Lakes Health Plan, Inc				31,593,106					31,593,106	
	36-3614992	Illinois Pacific Dental, Inc				(197,128)					(197,128)	
	86-0477097	Information Network Corporation				(24,849,164)					(24,849,164)	
	41-1858498	Ingenix, Inc				163,623					163,623	
64890	91-6034263	Investors Guaranty Life Ins Co				(28,336)					(28,336)	
	36-3338328	Lifemark Corporation				28,396,276					28,396,276	
	52-2129787	MAMSI Insurance Resources, LLC				23,554,452					23,554,452	
60321	52-1803283	MAMSI Life and Health Ins Co	(50,000,000)			(44,092,009)		(41,371)			(94,133,380)	
96310	52-1169135	MD-Individual Practice Assoc, Inc	(50,000,000)			(355,881,015)		(629,195)			(406,510,210)	
	52-1481661	Mid Atlantic Medical Services, LLC				106,024,668					106,024,668	
	39-1653251	Midwest Security Administrators, Inc				(130,626)					(130,626)	
	39-1624025	Midwest Security Care, Inc				425,907					425,907	
79480	35-1279304	Midwest Security Life Insurance Co	(15,000,000)			(387,800)					(15,387,800)	
	41-1485369	National Benefit Resources, Inc				2,816,927					2,816,927	
	76-0196559	National Pacific Dental, Inc	(2,000,000)			(1,587,977)					(3,587,977)	
95123	65-0996107	Neighborhood Health Partnership, Inc				(65,371,105)					(65,371,105)	
95758	88-0228572	Nevada Pacific Dental, Inc	(2,000,000)			(5,499,671)					(7,499,671)	
12225	20-1639614	NPD Insurance Company, Inc	(500,000)								(500,000)	
	52-2129786	OneNet PPO, LLC	(772,548)			2,684,477					1,911,929	
96940	52-1518174	Optimum Choice, Inc	(70,000,000)			(660,827,094)		(1,080,696)			(731,907,790)	
78026	22-2797560	Oxford Health Insurance, Inc				(226,487,993)		4,965,506			(221,522,487)	
	06-1118515	Oxford Health Plans, LLC				553,200,066					553,200,066	
96798	06-1181201	Oxford Health Plans (CT), Inc	(14,000,000)			(18,722,432)					(32,722,432)	
95506	22-2745725	Oxford Health Plans (NJ), Inc	(40,000,000)			(72,510,261)		(4,965,506)			(117,475,767)	
95479	06-1181200	Oxford Health Plans (NY), Inc	(307,000,000)			(218,614,340)					(525,614,340)	
	94-2904953	Pacific Union Dental, Inc	(1,000,000)			(2,848,304)					(3,848,304)	
	95-4166547	PacifiCare Beh Health of CA, Inc				2,294,717					2,294,717	
	33-0538634	PacifiCare Behavioral Health, Inc				(12,506,447)					(12,506,447)	

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ANNUAL STATEMENT FOR THE YEAR 2006 OF THE UnitedHealthcare of New England, Inc.

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)
11189	95-2797931	PacifiCare Dental					4,742,534				4,742,534	
	94-3284628	PacifiCare Dental of Colorado, Inc.					1,790,155				1,790,155	
	35-1508167	PacifiCare Health Plan Admin, Inc.	(850,000,000)				599,838,992				(250,161,008)	
	95-4591529	PacifiCare Health Systems LLC	850,000,000				28,217,879				878,217,879	
12322	20-2596962	PacifiCare Insurance Company		25,000,000			(6,828,480)				18,171,520	
70785	35-1137395	PacifiCare Life and Health Ins Co.		15,000,000			(5,666,503)	(3,756,751)			5,576,746	5,951,890
84506	95-2829463	PacifiCare Life Assurance Co.	(47,800,000)				(160,139,550)	11,017,629			(196,921,921)	(3,452,436)
95617	94-3267522	PacifiCare of Arizona, Inc.	(9,400,000)				(296,923,041)	(2,641,345)			(308,964,386)	
	95-2931460	PacifiCare of California	(158,200,000)				60,125,505	24,662			(98,049,833)	529,591
95434	84-1011378	PacifiCare of Colorado, Inc.	(36,500,000)				(222,514,201)	(956,893)			(259,971,094)	471,338
95685	86-0875231	PacifiCare of Nevada, Inc.					(75,749,027)	223,570			(75,525,457)	
96903	33-0115166	PacifiCare of Oklahoma, Inc.	(3,700,000)				(68,310,606)	(1,149,932)			(73,160,538)	(19,502)
95893	93-0938819	PacifiCare of Oregon, Inc.	(7,300,000)				(74,098,445)	(1,229,463)			(82,627,908)	
95174	33-0115163	PacifiCare of Texas, Inc.					(202,085,208)	(4,806,273)			(206,891,481)	1,893,796
48038	91-1312551	PacifiCare of Washington, Inc.	(9,500,000)				(106,134,557)	(481,954)			(116,116,511)	54,982
	94-3252033	PacificDental Benefits, Inc.					10,133,080				10,133,080	
	52-1162824	Physicians Health Plan of MD, Inc.					866,937,478				866,937,478	
73130	35-1744596	Rooney Life Insurance Company					(2,714)				(2,714)	
	33-0441200	RxSolutions, Inc.					541,609,011				541,609,011	
	98-0361995	Salveo Insurance Company, Ltd.									0	(838,294)
	95-4354052	Spectera Vision Services of CA, Inc.					(1,834,161)				(1,834,161)	
95385	54-1804256	Spectera Vision, Inc.					10,340				10,340	
	52-1260282	Spectera, Inc.					36,104,382				36,104,382	
	94-3077084	U.S. Behavioral Health Plan, CA	(20,000,000)								(20,000,000)	
91529	52-1996029	Unimerica Insurance Company					(5,777,683)				(5,777,683)	
11596	01-0637149	Unimerica Life Ins Co of NY					(519,947)				(519,947)	
	94-2649097	United Behavioral Health	20,000,000				231,221,678	52,982			251,274,660	
	30-0127496	United HealthCare Alliance LLC	(172,949,643)								(172,949,643)	
79413	36-2739571	United HealthCare Ins Co.	(1,108,989,790)				(3,875,725,995)	28,018,634			(4,956,697,151)	(321,740,848)
60318	36-3800349	United HealthCare Ins Co of IL	(36,779,000)				(31,817,451)				(68,596,451)	
60093	11-3283886	United HealthCare Ins Co of NY					(187,133,239)	(19,139,038)			(206,272,277)	297,650,603
73518	31-1169935	United HealthCare Ins Co of Ohio	(27,500,000)				(32,733,564)				(60,233,564)	
95784	63-0899562	United HealthCare of Alabama, Inc.	(13,000,000)				(48,853,223)	(350,459)			(62,203,682)	
96016	86-0507074	United HealthCare of Arizona, Inc.					(16,355,661)	(115,260)			(16,470,921)	
95446	63-1036819	United HealthCare of Arkansas, Inc.	(8,000,000)				(6,459,877)	(30,720)			(14,490,597)	
95090	84-1004639	United HealthCare of Colorado, Inc.					(5,032,246)	(35,634)			(5,067,880)	
95264	59-1293865	United HealthCare of Florida, Inc.	(90,000,000)				(269,760,460)	(1,738,264)			(361,498,724)	
95850	58-1653544	United HealthCare of Georgia, Inc.	(9,500,000)				(23,431,181)	(156,950)			(33,088,131)	
96644	62-1240316	United HealthCare of Kentucky, Ltd.	(17,500,000)				(10,528,616)	(67,672)			(28,096,288)	
95833	72-1074008	United HealthCare of Louisiana, Inc.	(7,500,000)				(4,752,706)	(21,647)			(12,274,353)	
95716	63-1036817	United HealthCare of Mississippi, Inc.					53,862				53,862	
95186	31-1142815	United HealthCare of Ohio, Inc.	(8,500,000)				(129,854,158)	(909,133)			(139,263,291)	
11147	63-1036814	United HealthCare of Tennessee, Inc.	(6,000,000)				(9,424,880)				(15,424,880)	
95765	95-3939697	United HealthCare of Texas, Inc.					(7,035,189)	(52,982)			(7,088,171)	
95591	47-0676824	United HealthCare of the Midlands, Inc.	(6,900,000)				(23,990,925)	(670,669)			(31,561,594)	
96385	43-1361841	United HealthCare of the Midwest, Inc.	(50,000,000)				(84,826,442)	(5,139,466)			(139,965,908)	10,570,131
95501	41-1488563	United HealthCare of Utah					(12,503,479)	(49,649)			(12,553,128)	

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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 filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

Responses

- 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 Risk-based Capital Report be filed with the NAIC by March 1?YES.....
- 4. Will the Risk-based Capital Report be filed with the state of domicile, if required by March 1?YES.....

APRIL FILING

- 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.....

JUNE FILING

- 8. Will an audited financial report be filed by June 1?YES.....

The following supplemental reports are required to be filed as part of your 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 filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

- 9. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?NO.....
- 10. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?NO.....
- 11. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?NO.....
- 12. Will the Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?NO.....
- 13. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?NO.....

APRIL FILING

- 14. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile by April 1?NO.....
- 15. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?NO.....
- 16. 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.....

EXPLANATION:

- 9.
- 10.
- 11.
- 12.
- 13.
- 14.
- 15.
- 16.

BAR CODE:

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13.  9 5 1 4 9 2 0 0 6 3 6 5 5 9 0 0 0

14.  9 5 1 4 9 2 0 0 6 3 3 0 5 9 0 0 0

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