



# QUARTERLY STATEMENT

AS OF MARCH 31, 2010  
OF THE CONDITION AND AFFAIRS OF THE

## Neighborhood Health Plan of Rhode Island

NAIC Group Code 0000 , 0000 NAIC Company Code 95402 Employer's ID Number 05-0477052  
(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 [  ] Hospital, Medical & Dental Service or Indemnity [  ]  
 Dental Service Corporation [  ] Vision Service Corporation [  ] Health Maintenance Organization [  ]  
 Other [  ] Is HMO, Federally Qualified? Yes [  ] No [  ]

Incorporated/Organized 12/09/1993 Commenced Business 12/01/1994

Statutory Home Office 299 Promenade St , Providence, RI 02908  
(Street and Number) (City, State and Zip Code)

Main Administrative Office 299 Promenade St Providence, RI 02908 401-459-6000  
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address 299 Promenade St , Providence, RI 02908  
(Street and Number or P.O. Box) (City or Town, State and Zip Code)

Primary Location of Books and Records 299 Promenade St Providence, RI 02908 401-459-6124  
(Street and Number) (City, State and Zip Code) (Area Code) (Telephone Number)

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### OFFICERS

Name	Title	Name	Title
<u>Mark Reynolds</u>	<u>Chief Executive Officer</u>	<u>Thomas Clark Phillip Jr. CPA</u>	<u>Chief Financial Officer</u>
<u>Leon McTyeire Johnston MD</u>	<u>Chief Medical Officer</u>	<u>Nancy Coburn</u>	<u>Chief Operating Officer</u>

### OTHER OFFICERS

<u>Maria Montanaro #</u>	<u>Chairman</u>	<u>Jane Hayward #</u>	<u>Vice Chairman</u>
<u>Brenda Dowlatshahi</u>	<u>Secretary</u>	<u>Merrill Thomas</u>	<u>Treasurer</u>

### DIRECTORS OR TRUSTEES

<u>Maria Montanaro</u>	<u>Merrill Thomas</u>	<u>James Hooley</u>	<u>Brenda Dowlatshahi</u>
<u>Raymond Joseph Lavoie Jr.</u>	<u>Darrell A. Lee</u>	<u>Mark Reynolds</u>	<u>Pablo Rodriguez MD</u>
<u>M. Lamin Sarr</u>	<u>Jane Hayward</u>	<u>Peter Bancroft CPA</u>	<u>Doris De Los Santos</u>
<u>Stephanie McCaffrey #</u>	<u>Jerald Fingerut MD #</u>		

State of Rhode Island  
 County of ss

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

Mark Reynolds  
 Chief Executive Officer

Thomas Clark Phillip Jr. CPA  
 Chief Financial Officer

Leon McTyeire Johnston MD  
 Chief Medical Officer

a. Is this an original filing? Yes [  ] No [  ]

b. If no,  
 1. State the amendment number \_\_\_\_\_  
 2. Date filed \_\_\_\_\_  
 3. Number of pages attached \_\_\_\_\_

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

STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	33,103,260		33,103,260	32,184,023
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	0		0	1,904,530
3. Mortgage loans on real estate:				
3.1 First liens .....			0	0
3.2 Other than first liens .....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....			0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... encumbrances) .....			0	0
5. Cash (\$ ..... (1,347,838) ), cash equivalents (\$ ..... 9,426,089 ) and short-term investments (\$ ..... 54,747,172 ) .....	62,825,423		62,825,423	63,928,367
6. Contract loans (including \$ ..... premium notes)			0	0
7. Derivatives .....			0	0
8. Other invested assets .....	0		0	0
9. Receivables for securities .....	1,007,646		1,007,646	0
10. Aggregate write-ins for invested assets .....	0	0	0	0
11. Subtotals, cash and invested assets (Lines 1 to 10) .....	96,936,329	0	96,936,329	98,016,920
12. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
13. Investment income due and accrued .....	242,944		242,944	252,060
14. Premiums and considerations:				
14.1 Uncollected premiums and agents' balances in the course of collection .....	2,138,658		2,138,658	2,061,074
14.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....			0	0
14.3 Accrued retrospective premiums .....			0	0
15. Reinsurance:				
15.1 Amounts recoverable from reinsurers .....	276,534		276,534	1,068,456
15.2 Funds held by or deposited with reinsured companies .....			0	0
15.3 Other amounts receivable under reinsurance contracts .....			0	0
16. Amounts receivable relating to uninsured plans .....	14,058		14,058	134,969
17.1 Current federal and foreign income tax recoverable and interest thereon .....			0	0
17.2 Net deferred tax asset .....			0	0
18. Guaranty funds receivable or on deposit .....			0	0
19. Electronic data processing equipment and software .....	497,781	361,573	136,208	146,057
20. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	304,491	304,491	0	0
21. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
22. Receivables from parent, subsidiaries and affiliates .....			0	0
23. Health care (\$ ..... 4,572,750 ) and other amounts receivable .....	5,050,543	477,793	4,572,750	6,628,317
24. Aggregate write-ins for other than invested assets .....	1,697,810	1,663,785	34,025	33,625
25. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 11 to 24) .....	107,159,148	2,807,642	104,351,506	108,341,478
26. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
27. Total (Lines 25 and 26) .....	107,159,148	2,807,642	104,351,506	108,341,478
<b>DETAILS OF WRITE-INS</b>				
1001. Security Deposits .....			0	0
1002. ....				
1003. ....				
1098. Summary of remaining write-ins for Line 10 from overflow page .....	0	0	0	0
1099. Totals (Lines 1001 through 1003 plus 1098)(Line 10 above) .....	0	0	0	0
2401. Other Receivable .....	53,552	19,527	34,025	33,625
2402. Prepaid Expenses .....	1,181,936	1,181,936	0	0
2403. Leasehold Improvements .....	383,310	383,310	0	0
2498. Summary of remaining write-ins for Line 24 from overflow page .....	79,012	79,012	0	0
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above) .....	1,697,810	1,663,785	34,025	33,625

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ .....1,233,057 reinsurance ceded)	41,093,073		41,093,073	37,985,787
2. Accrued medical incentive pool and bonus amounts	3,761,003		3,761,003	4,508,553
3. Unpaid claims adjustment expenses	888,672		888,672	906,649
4. Aggregate health policy reserves	8,290,353		8,290,353	11,400,000
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	27,476,541		27,476,541	27,613,318
9. General expenses due or accrued	3,466,880		3,466,880	3,161,066
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others	1,079,623		1,079,623	1,017,647
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current)			0	0
15. Amounts due to parent, subsidiaries and affiliates			0	0
16. Derivatives			0	0
17. Payable for securities	545,180		545,180	1,611,430
18. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers and \$ ..... unauthorized reinsurers)			0	0
19. Reinsurance in unauthorized companies			0	0
20. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
21. Liability for amounts held under uninsured plans	0		0	1,323,162
22. Aggregate write-ins for other liabilities (including \$ ..... current)	54,497	0	54,497	0
23. Total liabilities (Lines 1 to 22)	86,655,822	0	86,655,822	89,527,612
24. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
25. Common capital stock	XXX	XXX		0
26. Preferred capital stock	XXX	XXX		0
27. Gross paid in and contributed surplus	XXX	XXX		0
28. Surplus notes	XXX	XXX	1,500,000	1,500,000
29. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
30. Unassigned funds (surplus)	XXX	XXX	16,195,684	17,313,866
31. Less treasury stock, at cost:				
31.1 ..... shares common (value included in Line 25) \$ ..... )	XXX	XXX		0
31.2 ..... shares preferred (value included in Line 26) \$ ..... )	XXX	XXX		0
32. Total capital and surplus (Lines 24 to 30 minus Line 31)	XXX	XXX	17,695,684	18,813,866
33. Total liabilities, capital and surplus (Lines 23 and 32)	XXX	XXX	104,351,506	108,341,478
<b>DETAILS OF WRITE-INS</b>				
2201. Unearned Grant Liability			0	0
2202. Premium Overpayment for RHP and Sub Care	54,497		54,497	0
2203. ....				
2298. Summary of remaining write-ins for Line 22 from overflow page	0	0	0	0
2299. Totals (Lines 2201 through 2203 plus 2298) (Line 22 above)	54,497	0	54,497	0
2401. ....	XXX	XXX		
2402. ....	XXX	XXX		
2403. ....	XXX	XXX		
2498. Summary of remaining write-ins for Line 24 from overflow page	XXX	XXX	0	0
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	XXX	XXX	0	0
2901. ....	XXX	XXX		
2902. ....	XXX	XXX		
2903. ....	XXX	XXX		
2998. Summary of remaining write-ins for Line 29 from overflow page	XXX	XXX	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	XXX	XXX	0	0

STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months.....	XXX	240,866	224,099	922,359
2. Net premium income (including \$ ..... non-health premium income).....	XXX	91,143,531	79,033,047	337,045,189
3. Change in unearned premium reserves and reserve for rate credits .....	XXX		0	0
4. Fee-for-service (net of \$ ..... medical expenses) .....	XXX		0	0
5. Risk revenue .....	XXX		0	0
6. Aggregate write-ins for other health care related revenues .....	XXX	89,250	355,732	1,459,519
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	91,232,781	79,388,779	338,504,708
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		38,309,948	31,766,017	133,454,228
10. Other professional services .....		14,919,588	13,852,265	62,150,814
11. Outside referrals .....		12,463,396	10,426,617	47,428,507
12. Emergency room and out-of-area .....		5,745,416	6,832,846	26,382,661
13. Prescription drugs .....		13,869,009	12,019,406	47,573,707
14. Aggregate write-ins for other hospital and medical.....	0	(1,533,656)	0	(6,470,000)
15. Incentive pool, withhold adjustments and bonus amounts.....		2,141,225	1,536,522	5,981,259
16. Subtotal (Lines 9 to 15) .....	0	85,914,926	76,433,673	316,501,176
<b>Less:</b>				
17. Net reinsurance recoveries .....		1,049,207	170,639	2,996,764
18. Total hospital and medical (Lines 16 minus 17) .....	0	84,865,719	76,263,034	313,504,412
19. Non-health claims (net).....			0	0
20. Claims adjustment expenses, including \$ 1,641,343 ..... cost containment expenses.....		2,384,740	2,132,160	8,844,106
21. General administrative expenses.....		7,320,222	6,113,095	25,453,722
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only).....		(3,109,647)	0	11,400,000
23. Total underwriting deductions (Lines 18 through 22) .....	0	91,461,034	84,508,289	359,202,240
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	(228,253)	(5,119,510)	(20,697,532)
25. Net investment income earned .....		170,695	389,875	1,033,346
26. Net realized capital gains (losses) less capital gains tax of \$.....		80,885	6,953	116,179
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	251,580	396,828	1,149,525
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ .....5,361 ..... ) .....		(5,361)	(21,182)	(180,218)
29. Aggregate write-ins for other income or expenses .....	0	11	0	566
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	17,977	(4,743,864)	(19,727,659)
31. Federal and foreign income taxes incurred .....	XXX	0	0	0
32. Net income (loss) (Lines 30 minus 31) .....	XXX	17,977	(4,743,864)	(19,727,659)
<b>DETAILS OF WRITE-INS</b>				
0601. Department of Human Services Incentive Income.....	XXX	0	0	1,099,282
0602. Other Program Revenue.....	XXX	89,100	87,000	336,150
0603. Grant Revenue.....	XXX	150	10,873	24,087
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	257,859	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX	89,250	355,732	1,459,519
0701. ....	XXX			
0702. ....	XXX			
0703. ....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	0	0	0
1401. Stop Loss Recoveries from DHS.....		(326,546)	0	(1,003,574)
1402. Risk Share Recoveries from DHS.....		(1,207,110)	0	(5,466,426)
1403. ....			0	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	0	(1,533,656)	0	(6,470,000)
2901. Miscellaneous income.....		11	0	566
2902. Community Access Program Grant Revenue.....			0	0
2903. Rent Income.....			0	0
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....	0	11	0	566

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year
<b>CAPITAL AND SURPLUS ACCOUNT:</b>			
33. Capital and surplus prior reporting year.....	18,813,867	37,820,924	37,820,924
34. Net income or (loss) from Line 32.....	17,977	(4,743,864)	(19,727,659)
35. Change in valuation basis of aggregate policy and claim reserves.....		0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....	1,458	0	1,690
37. Change in net unrealized foreign exchange capital gain or (loss).....		0	0
38. Change in net deferred income tax.....		0	0
39. Change in nonadmitted assets.....	(1,137,614)	(17,094)	718,912
40. Change in unauthorized reinsurance.....	0	0	0
41. Change in treasury stock.....		0	0
42. Change in surplus notes.....	0	0	0
43. Cumulative effect of changes in accounting principles.....		0	0
44. Capital Changes:			
44.1 Paid in.....		0	0
44.2 Transferred from surplus (Stock Dividend).....		0	0
44.3 Transferred to surplus.....		0	0
45. Surplus adjustments:			
45.1 Paid in.....		0	0
45.2 Transferred to capital (Stock Dividend).....	0	0	0
45.3 Transferred from capital.....		0	0
46. Dividends to stockholders.....		0	0
47. Aggregate write-ins for gains or (losses) in surplus.....	0	0	0
48. Net change in capital and surplus (Lines 34 to 47).....	(1,118,179)	(4,760,958)	(19,007,057)
49. Capital and surplus end of reporting period (Line 33 plus 48)	17,695,688	33,059,966	18,813,867
<b>DETAILS OF WRITE-INS</b>			
4701. ....		0	0
4702. ....			
4703. ....			
4798. Summary of remaining write-ins for Line 47 from overflow page.....	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	0	0	0

## CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance.....	87,819,523	79,442,755	351,318,707
2. Net investment income.....	237,000	424,578	1,465,200
3. Miscellaneous income.....	89,250	355,732	1,459,519
4. Total (Lines 1 to 3).....	88,145,773	80,223,065	354,243,426
5. Benefit and loss related payments.....	76,640,898	73,136,502	320,641,003
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	10,624,729	6,354,840	35,791,912
8. Dividends paid to policyholders.....		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses)	0	0	0
10. Total (Lines 5 through 9).....	87,265,627	79,491,342	356,432,915
11. Net cash from operations (Line 4 minus Line 10).....	880,146	731,723	(2,189,489)
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	4,744,506	10,412,091	36,653,894
12.2 Stocks.....	1,904,530	0	1,556,185
12.3 Mortgage loans.....	0	0	0
12.4 Real estate.....	0	0	0
12.5 Other invested assets.....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	457	3,947
12.7 Miscellaneous proceeds.....	79,362	0	1,611,430
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	6,728,398	10,412,548	39,825,456
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	5,638,589	8,585,612	31,602,179
13.2 Stocks.....	0	2,083,639	3,460,715
13.3 Mortgage loans.....	0	0	0
13.4 Real estate.....	0	0	0
13.5 Other invested assets.....	0	0	0
13.6 Miscellaneous applications.....	2,073,896	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	7,712,485	10,669,251	35,062,894
14. Net increase (or decrease) in contract loans and premium notes.....	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(984,087)	(256,703)	4,762,562
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....	0	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0	0
16.3 Borrowed funds.....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0	0
16.5 Dividends to stockholders.....	0	0	0
16.6 Other cash provided (applied).....	(999,003)	421,119	1,510,261
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(999,003)	421,119	1,510,261
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(1,102,944)	896,139	4,083,334
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	63,928,368	59,845,034	59,845,034
19.2 End of period (Line 18 plus Line 19.1).....	62,825,424	60,741,173	63,928,368

**STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island**

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	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 Other
		2 Individual	3 Group							
<b>Total Members at end of:</b>										
1. Prior Year .....	80,647	.0	.0	.0	.0	.0	.0	.0	80,647	.0
2. First Quarter .....	80,010								80,010	
3. Second Quarter .....	.0									
4. Third Quarter .....	.0									
5. Current Year .....	.0									
6. Current Year Member Months	240,866								240,866	
<b>Total Member Ambulatory Encounters for Period:</b>										
7. Physician .....	20,965								20,965	
8. Non-Physician .....	43,063								43,063	
9. Total .....	64,028	.0	.0	.0	.0	.0	.0	.0	64,028	.0
10. Hospital Patient Days Incurred	5,011								5,011	
11. Number of Inpatient Admissions	1,606								1,606	
12. Health Premiums Written(a) .....	91,443,188								91,443,188	
13. Life Premiums Direct .....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned .....	.0									
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services .....	82,933,608								82,933,608	
18. Amount Incurred for Provision of Health Care Services	85,914,926								85,914,926	

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

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STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

**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
<b>Claims unpaid (Reported)</b>						
RHODE ISLAND HOSPITAL.....	2,897,752	55,805	9,676	501	8,188	2,971,922
WOMEN & INFANTS.....	2,093,514	47,925	20,591	4,222	43,611	2,209,863
ST JOSEPH HOSPITAL.....	1,825,218	31,552	11,786	6,062	11,186	1,885,803
KENT COUNTY MEMORIAL HOSPITAL.....	681,072	5,225	53	169	577	687,096
MIRIAM HOSPITAL.....	651,728	4,955	115	142	115	657,055
MEMORIAL HOSPITAL.....	310,596	69,614	1,664	3,212	34,318	419,404
PEDIATRIC OPHTHALMOLOGY.....	261,468	56,769	10,222	(343)	(2,114)	326,003
NEWPORT HOSPITAL.....	249,621	1,194	1,631	1,885	1,836	256,168
THE WESTERLY HOSPITAL.....	146,058	2,321	139	10	720	149,247
LANDMARK MEDICAL CENTER.....	100,840	1,471	127			102,438
CHILDREN FRIEND AND SERVICE.....	55,357	21,650		257		77,264
PROVIDENCE COMMUNITY HEALTH.....	65,795	4,218			1,616	71,630
CENTRAL REGION EARLY INTERVENTION.....	35,091	6,882	479		140	42,592
UNIVERSITY EMERGENCY MEDICINE.....	33,763	1,048	162		120	35,093
BETH ISRAEL DEACONESS.....	29,017					29,017
WESTMINSTER EYE CARE.....	26,071	1,377	392		(96)	27,744
ANESTHESIOLOGY INC.....	25,151	2,323				27,474
RYAN HEALTH CENTER.....			23,555			23,555
MAXIM HEALTHCARE SERVICES.....		22,718				22,718
EASTSIDE CLINICAL LAB.....	20,743	502	439	37	128	21,848
RHODE ISLAND ENT PHYSICIANS.....	20,192	846	138			21,177
UMASS MEMORIAL.....	19,038					19,038
Critical Care Systems.....	21,674				(2,687)	18,987
FAMILY RESOURCES INC.....	18,618					18,618
UNIVERSITY ORTHOPEDIC.....	16,111	2,261	473		(716)	18,130
ARA PROVIDENCE DIALYSIS.....			17,323			17,323
THUNDERMIST HEALTH CENTER.....	14,624	1,781	374	9	396	17,183
OPEN MRI OF NEW ENGLAND.....	13,998	294				14,291
CARING FOR WOMEN.....	12,809	1,406				14,215
NURSING PLACEMENT INC.....		13,440				13,440
ANESTHESIA INC.....	6,786	5,136			1,013	12,936
CHILDRENS HOSPITAL.....	11,214	1,575				12,789
UNIVERSITY MEDICAL GROUP.....	9,575	2,734			1	12,310
OBGYN ASSOCIATES.....	12,002	51				12,052
DRS PASS AND BERTHERMAN.....	10,644	1,221				11,865
UNIVERSITY SURGICAL INC.....	10,407	867	67			11,341
ASSOCIATES PHYSICIANS.....	10,575	433			(71)	10,938
ELMWOOD HEALTH CENTER.....			10,688			10,688
KL IBANOFF EYE ASSOCIATES.....	10,178	298				10,477
AQUIDNECK MEDICAL ASSOCIATION.....	9,576	642	34			10,252
WOONSOCKET URGENT CARE.....	8,789	753	430	4	122	10,099
SOUTH COAST HOSPITAL GROUPS.....	9,253		792			10,045
<b>0199999 Individually listed claims unpaid</b>	<b>9,754,920</b>	<b>371,289</b>	<b>111,347</b>	<b>16,167</b>	<b>98,402</b>	<b>10,352,125</b>
<b>0299999 Aggregate accounts not individually listed-uncovered</b>						<b>0</b>
<b>0399999 Aggregate accounts not individually listed-covered</b>	<b>525,530</b>	<b>156,304</b>	<b>38,386</b>	<b>9,028</b>	<b>6,706</b>	<b>735,955</b>
<b>0499999 Subtotals</b>	<b>10,280,451</b>	<b>527,593</b>	<b>149,733</b>	<b>25,195</b>	<b>105,109</b>	<b>11,088,080</b>
<b>0599999 Unreported claims and other claim reserves</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>31,238,050</b>
<b>0699999 Total amounts withheld</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	
<b>0799999 Total claims unpaid</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>42,326,130</b>
<b>0899999 Accrued medical incentive pool and bonus amounts</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>3,761,003</b>

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STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

**UNDERWRITING AND INVESTMENT EXHIBIT**  
**ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE**

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) .....					.0	.0
2. Medicare Supplement .....					.0	.0
3. Dental Only .....					.0	.0
4. Vision Only .....					.0	.0
5. Federal Employees Health Benefits Plan .....					.0	.0
6. Title XVIII - Medicare .....					.0	.0
7. Title XIX - Medicaid .....	31,971,841	47,645,364	5,103,000	35,990,077	37,074,841	37,985,787
8. Other health .....					.0	.0
9. Health subtotal (Lines 1 to 8).....	31,971,841	47,645,364	5,103,000	35,990,077	37,074,841	37,985,787
10. Healthcare receivables (a) .....					.0	.0
11. Other non-health .....					.0	.0
12. Medical incentive pools and bonus amounts .....	1,186,104	1,702,670	3,322,449	438,554	4,508,553	4,508,554
13. Totals	33,157,945	49,348,034	8,425,449	36,428,631	41,583,394	42,494,341

(a) Excludes \$ ..... loans or advances to providers not yet expensed.

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## NOTES TO FINANCIAL STATEMENTS

### 1A. Summary of Significant Accounting Policies

This statement has been completed in accordance with the Accounting Practices and Procedures Manual. There are no changes from the footnote #1 of 2009 Annual Statement.

5D. **Loan-Backed Securities:** Not Applicable.

17C **Wash Sales:** Not Applicable.

### 18. Gain or Loss from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

#### A. ASO Plans:

18A0A. Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$0
18A0B Total Net other income or expenses	\$3,982
18A0C Net gain or (loss) from operations	\$3,982
Member Months	-

#### B. ASC Plans:

18B0A Gross reimbursement for medical cost incurred	\$0
18B0B Gross administrative fees accrued	\$0
18B0C Other income or expenses	\$0
18B0D Gross expenses incurred (claims & admin)	\$0
18B0E Total net gain/(loss) from operations	\$0
Member Months	-

### 24. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2009 were \$43.4 million. As of March 31, 2010, \$33.9 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$8.6 million as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$907k favorable prior year development since December 31, 2009 to March 31, 2010. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are decreased, as additional information becomes known regarding individual claims. Included in this decrease, Neighborhood experienced \$0.0 million favorable prior year claim development on retrospectively rated policies. Neighborhood manages Medicaid business for the State, and is not subject to retroactive rate changes.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes  No
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes  No
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes  No
- 2.2 If yes, date of change: .....
3. Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes  No   
If yes, complete the Schedule Y - Part 1 - organizational chart.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes  No
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes  No  NA   
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2005
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2005
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 05/22/2007
- 6.4 By what department or departments?  
RI Dept of Business Regulation, Insurance Division.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes  No  NA
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes  No  NA
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes  No
- 7.2 If yes, give full information:  
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes  No
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes  No
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 OTS	6 FDIC	7 SEC

**GENERAL INTERROGATORIES**

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... Yes [X] No [ ]
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- (c) Compliance with applicable governmental laws, rules and regulations;
- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:  
.....
- 9.2 Has the code of ethics for senior managers been amended?..... Yes [ ] No [X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).  
.....
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?..... Yes [ ] No [X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).  
.....

**FINANCIAL**

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?..... Yes [ ] No [X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ .....

**INVESTMENT**

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [X]
- 11.2 If yes, give full and complete information relating thereto:  
.....
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$ .....0
13. Amount of real estate and mortgages held in short-term investments: ..... \$ .....0
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ ] No [X]
- 14.2 If yes, please complete the following:

	1	2
	Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....	\$ .....
14.22 Preferred Stock .....	\$ .....	\$ .....
14.23 Common Stock .....	\$ .....	\$ .....
14.24 Short-Term Investments .....	\$ .....	\$ .....
14.25 Mortgage Loans on Real Estate .....	\$ .....	\$ .....
14.26 All Other .....	\$ .....	\$ .....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$ .....0	\$ .....0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above ....	\$ .....	\$ .....

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ]  
If no, attach a description with this statement.

**GENERAL INTERROGATORIES**

16. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?.....

Yes [X] No [ ]

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Comerica Bank.....	411 West Lafayette, Detroit, MI 48226.....
RBS Citizens, N.A.....	One Citizens Plaza, Providence, RI 02903.....

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? .....

Yes [ ] No [X]

16.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

16.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
105997.....	Dwight Asset Management Company, LLC.....	100 Bank Street, Burlington, VT 05401.....
	RBS Citizens, N.A.....	One Citizens Plaza, Providence, RI 02903.....

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? .....

Yes [X] No [ ]

17.2 If no, list exceptions:

.....

**GENERAL INTERROGATORIES**  
**PART 2 - HEALTH**

1.		1 Amount
1. Operating Percentages:		
1.1	A&H loss percent.....	91.5%
1.2	A&H cost containment percent.....	1.8%
1.3	A&H expense percent excluding cost containment expenses.....	8.8%
2.1	Do you act as a custodian for health savings accounts?	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$.....
2.3	Do you act as an administrator for health savings accounts?	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]
2.4	If yes, please provide the balance of funds administered as of the reporting date.	\$.....



**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status	Direct Business Only							9 Deposit-Type Contracts	
		2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefit Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7		
1. Alabama	AL	N							.0	
2. Alaska	AK	N							.0	
3. Arizona	AZ	N							.0	
4. Arkansas	AR	N							.0	
5. California	CA	N							.0	
6. Colorado	CO	N							.0	
7. Connecticut	CT	N							.0	
8. Delaware	DE	N							.0	
9. Dist. Columbia	DC	N							.0	
10. Florida	FL	N							.0	
11. Georgia	GA	N							.0	
12. Hawaii	HI	N							.0	
13. Idaho	ID	N							.0	
14. Illinois	IL	N							.0	
15. Indiana	IN	N							.0	
16. Iowa	IA	N							.0	
17. Kansas	KS	N							.0	
18. Kentucky	KY	N							.0	
19. Louisiana	LA	N							.0	
20. Maine	ME	N							.0	
21. Maryland	MD	N							.0	
22. Massachusetts	MA	N							.0	
23. Michigan	MI	N							.0	
24. Minnesota	MN	N							.0	
25. Mississippi	MS	N							.0	
26. Missouri	MO	N							.0	
27. Montana	MT	N							.0	
28. Nebraska	NE	N							.0	
29. Nevada	NV	N							.0	
30. New Hampshire	NH	N							.0	
31. New Jersey	NJ	N							.0	
32. New Mexico	NM	N							.0	
33. New York	NY	N							.0	
34. North Carolina	NC	N							.0	
35. North Dakota	ND	N							.0	
36. Ohio	OH	N							.0	
37. Oklahoma	OK	N							.0	
38. Oregon	OR	N							.0	
39. Pennsylvania	PA	N							.0	
40. Rhode Island	RI	L		91,443,188					91,443,188	
41. South Carolina	SC	N							.0	
42. South Dakota	SD	N							.0	
43. Tennessee	TN	N							.0	
44. Texas	TX	N							.0	
45. Utah	UT	N							.0	
46. Vermont	VT	N							.0	
47. Virginia	VA	N							.0	
48. Washington	WA	N							.0	
49. West Virginia	WV	N							.0	
50. Wisconsin	WI	N							.0	
51. Wyoming	WY	N							.0	
52. American Samoa	AS	N							.0	
53. Guam	GU	N							.0	
54. Puerto Rico	PR	N							.0	
55. U.S. Virgin Islands	VI	N							.0	
56. Northern Mariana Islands	MP	N							.0	
57. Canada	CN	N							.0	
58. Aggregate other alien	OT	XXX	.0	.0	.0	.0	.0	.0	.0	.0
59. Subtotal	XXX	.0	.0	91,443,188	.0	.0	.0	.0	91,443,188	.0
60. Reporting entity contributions for Employee Benefit Plans	XXX								.0	
61. Total (Direct Business)	(a) 1	0	0	91,443,188	0	0	0	0	91,443,188	0
DETAILS OF WRITE-INS										
5801.	XXX									
5802.	XXX									
5803.	XXX									
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	.0	.0	.0	.0	.0	.0	.0	.0	.0
5899. Totals (Lines 5801 through 5803 plus 5898) (Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

(L) Licensed or Chartered – Licensed Insurance Carrier or Domiciled RRG; (R ) Registered – Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible – Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above – Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 - ORGANIZATIONAL CHART**

**NONE**

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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 supplemental is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

.....NO.....

**Explanation:**

1.

**Bar Code:**

1.



**OVERFLOW PAGE FOR WRITE-INS**

MQ002 Additional Aggregate Lines for Page 02 Line 24.

\*ASSETS

	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
2404. Security Deposits.....	79,012	79,012	0	0
2497. Summary of remaining write-ins for Line 24 from Page 02	79,012	79,012	0	0

MQ004 Additional Aggregate Lines for Page 04 Line 6.

\*REVEX1

	1	2	3	
	Current YTD Uncovered	Current YTD Total	Prior YTD Total	Prior Year Ended December 31
0604. Pharmacy Rebates.....	XXX	0	257,859	0
0697. Summary of remaining write-ins for Line 6 from Page 04	XXX	0	257,859	0

**SCHEDULE A - VERIFICATION**

**Real Estate**

	1 Year to Date	2 Prior Year Ended December 31
<b>NONE</b>		
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Current year change in encumbrances	0	0
4. Total gain (loss) on disposals	0	0
5. Deduct amounts received on disposals	0	0
6. Total foreign exchange change in book/adjusted carrying value	0	0
7. Deduct current year's other than temporary impairment recognized	0	0
8. Deduct current year's depreciation	0	0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

**SCHEDULE B – VERIFICATION**

**Mortgage Loans**

	1 Year to Date	2 Prior Year Ended December 31
<b>NONE</b>		
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	0	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest	0	0
10. Deduct current year's other than temporary impairment recognized	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance	0	0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

**SCHEDULE BA – VERIFICATION**

**Other Long-Term Invested Assets**

	1 Year To Date	2 Prior Year Ended December 31
<b>NONE</b>		
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	0	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and depreciation	0	0
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other than temporary impairment recognized	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

**SCHEDULE D – VERIFICATION**

**Bonds and Stocks**

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	34,088,553	37,357,672
2. Cost of bonds and stocks acquired	5,638,589	35,062,893
3. Accrual of discount	6,206	23,223
4. Unrealized valuation increase (decrease)	1,458	1,690
5. Total gain (loss) on disposals	80,885	112,232
6. Deduct consideration for bonds and stocks disposed of	6,649,038	38,210,078
7. Deduct amortization of premium	63,395	259,080
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	33,103,259	34,088,553
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	33,103,259	34,088,553

STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

**SCHEDULE D - PART 1B**

Showing the Acquisitions, Dispositions and Non-Trading Activity  
During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. Class 1 (a).....	101,350,807	210,403,237	220,600,105	(51,750)	91,102,190	0	0	101,350,807
2. Class 2 (a).....	0	0	0	0	0	0	0	0
3. Class 3 (a).....	0	0	0	0	0	0	0	0
4. Class 4 (a).....	0	0	0	0	0	0	0	0
5. Class 5 (a).....	0	0	0	0	0	0	0	0
6. Class 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds	101,350,807	210,403,237	220,600,105	(51,750)	91,102,190	0	0	101,350,807
<b>PREFERRED STOCK</b>								
8. Class 1.....	0	0	0	0	0	0	0	0
9. Class 2.....	0	0	0	0	0	0	0	0
10. Class 3.....	0	0	0	0	0	0	0	0
11. Class 4.....	0	0	0	0	0	0	0	0
12. Class 5.....	0	0	0	0	0	0	0	0
13. Class 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	101,350,807	210,403,237	220,600,105	(51,750)	91,102,190	0	0	101,350,807

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ 31,502,493 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 ; NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

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**SCHEDULE DA - PART 1**

**Short-Term Investments**

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	54,747,172	XXX	54,743,718	5,816	7,815

**SCHEDULE DA - VERIFICATION**

**Short-Term Investments**

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	57,769,032	58,030,055
2. Cost of short-term investments acquired .....	151,030,622	235,535,640
3. Accrual of discount.....	7,059	45,856
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals.....	0	3,947
6. Deduct consideration received on disposals.....	154,055,879	235,797,662
7. Deduct amortization of premium.....	3,662	48,805
8. Total foreign exchange change in book/adjusted carrying value.....	0	0
9. Deduct current year's other than temporary impairment recognized.....	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	54,747,172	57,769,032
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	54,747,172	57,769,032

Schedule DB - Part A - Verification

**NONE**

Schedule DB - Part B- Verification

**NONE**

Schedule DB - Part C - Section 1

**NONE**

Schedule DB - Part C - Section 2

**NONE**

Schedule DB - Verification

**NONE**

**SCHEDULE E-VERIFICATION**

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	11,397,753	7,260,290
2. Cost of cash equivalents acquired.....	152,323,451	356,417,799
3. Accrual of discount.....	.640	.0
4. Unrealized valuation increase (decrease).....	.0	.0
5. Total gain (loss) on disposals.....	(15)	.0
6. Deduct consideration received on disposals.....	154,295,684	352,280,336
7. Deduct amortization of premium.....	.56	.0
8. Total foreign exchange change in book/adjusted carrying value.....	.0	.0
9. Deduct current year's other than temporary impairment recognized.....	.0	.0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	9,426,089	11,397,753
11. Deduct total nonadmitted amounts.....	.0	.0
12. Statement value at end of current period (Line 10 minus Line 11)	9,426,089	11,397,753

Schedule A - Part 2

**NONE**

Schedule A - Part 3

**NONE**

Schedule B - Part 2

**NONE**

Schedule B - Part 3

**NONE**

Schedule BA - Part 2

**NONE**

Schedule BA - Part 3

**NONE**

STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator <sup>(a)</sup>
3133XV-DM-0	Federal Home Loan Bank 0.700% 04/18/11		03/23/2010	Various		250,475	250,000	768	1
912828-KM-1	US Treasury Inflation Index 1.250% 04/		03/26/2010	Deutsche Bank		211,353	200,000	1,160	1
912828-MF-4	US Treasury Inflation Index 1.375% 01/		03/26/2010	CS First Boston		490,134	500,000	1,389	1
912828-MP-2	US Treasury 3.625% 02/15/20		03/10/2010	Jefferies & Co Inc		496,230	500,000	1,202	1
912828-MQ-0	US Treasury 0.875% 02/29/12		03/26/2010	Various		808,155	810,000	498	1
912828-MR-8	US Treasury 2.375% 02/28/15		03/10/2010	Jefferies & Co Inc		499,922	500,000	355	1
912828-MT-4	US Treasury Notes 1.375% 03/15/13		03/31/2010	UBS Warburg		544,832	548,000	348	1
0399999	- Total - Bonds - U.S. Government					3,301,101	3,308,000	5,719	XXX
1099999	- Total - Bonds - All Other Government					0	0	0	XXX
1799999	- Total - Bonds - U.S. States, Territories and Possessions					0	0	0	XXX
2499999	- Total - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					0	0	0	XXX
31371N-V8-5	FNMA Pool No. 257239 5.500% 06/01/28		02/25/2010	CS First Boston		488,983	462,259	706	1
3199999	- Total - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of...					488,983	462,259	706	XXX
05947U-4D-7	Banc of America Comm Mtge Series 2005-6		02/02/2010	Wachovia		258,613	250,000	144	1FE
059512-AA-1	BANC OF AMERICA COMMERCIAL MOR Series 20		01/28/2010	Morgan Stanley Dean Witter		223,586	215,928	34	1FE
07388Y-AA-0	Bear Stearns Commercial Mort Series 2007		02/26/2010	Nomura Securities Intl Inc		205,422	197,700	61	1FE
17275R-AE-2	Cisco Systems 4.950% 02/15/19		03/26/2010	Wachovia		260,295	250,000	1,581	1FE
173067-GM-5	Citigroup Commercial Mortgage Series 200		03/02/2010	Nomura Securities Intl Inc		130,325	130,000	67	1FE
61745M-YY-3	Morgan Stanley Capital I Series 2004-107		02/26/2010	Greenwich Capital		159,114	157,076	44	1FE
06739F-GF-2	Barclays Bank PLC Series 1 5.000% 09/2	F	03/23/2010	Barclays		258,985	250,000	139	1FE
78010X-AC-5	Royal Bank of Scotland 4.875% 03/16/15	F	03/23/2010	Greenwich Capital		251,015	250,000	339	1FE
3899999	- Total - Bonds - Industrial, Misc.					1,747,355	1,700,704	2,409	XXX
4199999	- Total - Bonds - Credit Tenant Loans					0	0	0	XXX
4899999	- Total - Bonds - Hybrid Securities					0	0	0	XXX
5599999	- Total - Bonds - Parent, Subsidiaries, Affiliates					0	0	0	XXX
8399997	- Total - Bonds - Part 3					5,537,440	5,470,963	8,834	XXX
8399999	- Total - Bonds					5,537,440	5,470,963	8,834	XXX
8499999	- Total - Preferred Stocks - Industrial, Misc.					0	XXX	0	XXX
8599999	- Total - Preferred Stocks - Parent, Subsidiaries, Affiliates					0	XXX	0	XXX
8999997	- Total - Preferred Stocks - Part 3					0	XXX	0	XXX
8999999	- Total - Preferred Stocks					0	XXX	0	XXX
9099999	- Total - Common Stocks - Industrial, Misc.					0	XXX	0	XXX
9199999	- Total - Common Stocks - Parent, Subsidiaries, Affiliates					0	XXX	0	XXX
990110-70-2	RBS Citizens NA Money Market		03/01/2010	Various	101,149,540	101,150	0	0	U
9299999	- Total - Common Stocks - Mutual Funds					101,150	XXX	0	XXX
9399999	- Total - Common Stocks - Money Market Mutual Funds					0	XXX	0	XXX
9799997	- Total - Common Stocks - Part 3					101,150	XXX	0	XXX
9799999	- Total - Common Stocks					101,150	XXX	0	XXX
9899999	- Total - Preferred and Common Stocks					101,150	XXX	0	XXX
9999999	- Totals					5,638,589	XXX	8,834	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....1

E04

STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of by the Company During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11 + 12 - 13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)
3128X8-KX-9..	FHLMC 2.375% 02/24/12..		02/24/2010..	Redemption	100.0000..	40,000	40,000	39,990	39,993	.0	.0	.0	.0	.0	39,994	.0	.6	.6	.475	.02/24/2012..	1..
31331G-WH-8..	3.800% 05/18/..		02/11/2010..	Call	100.0000..	100,000	100,000	100,000	100,000	.0	.0	.0	.0	.0	100,000	.0	.0	.0	.876	.05/18/2016..	1..
31331X-JB-9..	Debentures 5.30..		01/08/2010..	Call	100.0000..	50,000	50,000	49,734	49,836	.0	.1	.0	.1	.0	49,836	.0	.164	.164	1,325	.01/08/2014..	1..
3133XP-3C-6..	FHLB 4.000% 01/29/13..		01/29/2010..	Call	100.0000..	75,000	75,000	76,299	75,052	.0	(52)	.0	(52)	.0	75,000	.0	.0	.0	1,500	.01/29/2013..	1..
3133XP-Y5-7..	FHLB 2.750% 03/12/10..		03/12/2010..	Maturity	100.0000..	750,000	750,000	750,390	750,039	.0	(39)	.0	(39)	.0	750,000	.0	.0	.0	10,313	.03/12/2010..	1..
3136F8-M4-4..	FNMA 4.000% 01/28/15..		01/28/2010..	Call	100.0000..	500,000	500,000	501,190	500,046	.0	(46)	.0	(46)	.0	500,000	.0	.0	.0	10,000	.01/28/2015..	1..
912828-LT-5..	US Treasury 1.000% 10/31/11..		03/31/2010..	Deutsche Bank		1,003,447	1,000,000	1,001,133	1,001,045	.0	(141)	.0	(141)	.0	1,000,903	.0	2,544	2,544	4,199	.10/31/2011..	1..
0399999	- Bonds - U.S. Governments					2,518,447	2,515,000	2,518,737	2,516,010	0	(277)	0	(277)	0	2,515,733	0	2,714	2,714	28,688		XXX
1099999	- Bonds - All Other Governments					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
1799999	- Bonds - U.S. States, Territories and Possessions					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
2499999	- Bonds - U.S. Political Subdivisions of States, Territories and Possessions					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
31392J-ZZ-1..	FNMA Series 2003-21 Class NB 5.500% 09..		03/01/2010..	Paydown		19,498	19,498	20,266	20,133	.0	(635)	.0	(635)	.0	19,498	.0	.0	.0	.159	.02/25/2012..	1..
31396E-VY-9..	FHLMC Series 3061 Class HA 5.500% 04/1..		03/01/2010..	Paydown		89,920	89,920	93,109	92,829	.0	(2,909)	.0	(2,909)	.0	89,920	.0	.0	.0	.996	.08/15/2011..	1..
31396J-SK-2..	FHLMC Remic Series R006 Class AK 5.750..		03/01/2010..	Paydown		52,466	52,466	55,089	54,769	.0	(2,302)	.0	(2,302)	.0	52,466	.0	.0	.0	.653	.06/15/2012..	1..
31396N-PP-5..	FHLMC Series R007 Class AL 5.000% 05/1..		03/01/2010..	Paydown		156,443	156,443	160,550	159,701	.0	(3,258)	.0	(3,258)	.0	156,443	.0	.0	.0	1,659	.06/15/2011..	1..
31397A-GU-1..	FHLMC Series 3200 Class DA 5.500% 02/1..		03/01/2010..	Paydown		80,007	80,007	83,745	83,421	.0	(3,413)	.0	(3,413)	.0	80,007	.0	.0	.0	.879	.01/15/2013..	1..
31407J-DQ-2..	FNMA Pool 831811 6.000% 09/01/36..		03/01/2010..	Paydown		20,759	20,759	21,998	21,965	.0	(1,205)	.0	(1,205)	.0	20,759	.0	.0	.0	.188	.09/01/2036..	1..
31412M-RS-9..	FNCI Pool # 929397 4.500% 05/01/23..		03/01/2010..	Paydown		24,351	24,351	25,165	25,170	.0	(819)	.0	(819)	.0	24,351	.0	.0	.0	.152	.05/01/2023..	1..
3199999	- Total - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of...					443,445	443,445	459,923	457,987	0	(14,542)	0	(14,542)	0	443,445	0	0	0	4,687		XXX
059512-AA-1..	BANC OF AMERICA COMMERCIAL MOR Series 20..		03/01/2010..	Paydown		2,017	2,017	2,088	.0	.0	(72)	.0	(72)	.0	2,017	.0	.0	.0	.10	.03/10/2012..	1FE
22541L-AQ-6..	Credit Suisse FB USA Inc 4.125% 01/15/..		01/15/2010..	Maturity		100,000	100,000	101,100	100,043	.0	(43)	.0	(43)	.0	100,000	.0	.0	.0	2,063	.01/15/2010..	1FE
36962G-2S-2..	General Electric Capital Corp MTN 5.00..		03/23/2010..	Various		514,880	500,000	499,510	499,878	.0	31	.0	31	.0	499,909	.0	14,971	14,971	7,986	.12/01/2010..	1FE
36962G-G5-7..	General Electric Capital Corp 4.375% 0..		03/23/2010..	Various		523,565	500,000	495,750	497,730	.0	236	.0	236	.0	497,965	.0	25,600	25,600	12,335	.03/03/2012..	1FE
36962G-VY-4..	General Electric Capital Corp 6.000% 0..		03/26/2010..	Various		541,005	500,000	505,220	503,767	.0	(362)	.0	(362)	.0	503,405	.0	37,600	37,600	8,833	.06/15/2012..	1FE
3899999	- Bonds - Industrial and Miscellaneous					1,681,467	1,602,017	1,603,668	1,601,417	0	(210)	0	(210)	0	1,603,296	0	78,171	78,171	31,227		XXX
4199999	- Bonds - Credit Tenant Loans					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
4899999	- Total - Bonds - Hybrid Securities					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
5599999	- Bonds - Parent, Subsidiaries and Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0		XXX
8399997	- Bonds - Part 4					4,643,359	4,560,462	4,582,328	4,575,414	0	(15,029)	0	(15,029)	0	4,562,474	0	80,885	80,885	64,601		XXX
8399999	- Total - Bonds					4,643,359	4,560,462	4,582,328	4,575,414	0	(15,029)	0	(15,029)	0	4,562,474	0	80,885	80,885	64,601		XXX
8499999	- Preferred Stocks - Industrial and Miscellaneous					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
8599999	- Preferred Stocks - Parent, Subsidiaries and Affiliates					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
8999997	- Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
8999999	- Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
9099999	- Common Stocks - Industrial and Miscellaneous					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
9199999	- Common Stocks - Parent, Subsidiaries and Affiliates					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
990110-70-2..	RBS Citizens NA Money Market		03/10/2010..	Various	2,005,679.440	2,005,679	2,005,679	2,005,679	1,904,530	.0	.0	.0	.0	.0	2,005,679	.0	.0	.0	436		U
9299999	- Common Stocks - Mutual Funds					2,005,679	2,005,679	1,904,530	1,904,530	0	0	0	0	0	2,005,679	0	0	0	436		XXX
9399999	- Common Stocks - Money Market Mutual Funds					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0		XXX
9799997	- Common Stocks - Part 4					2,005,679	2,005,679	1,904,530	1,904,530	0	0	0	0	0	2,005,679	0	0	0	436		XXX
9799999	- Total - Common Stocks					2,005,679	2,005,679	1,904,530	1,904,530	0	0	0	0	0	2,005,679	0	0	0	436		XXX
9899999	- Total - Preferred and Common Stocks					2,005,679	2,005,679	1,904,530	1,904,530	0	0	0	0	0	2,005,679	0	0	0	436		XXX
9999999	Totals					6,649,038	6,588,008	6,479,944	6,479,944	0	(15,029)	0	(15,029)	0	6,568,153	0	80,885	80,885	65,037		XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues

E05

Schedule DB - Part A - Section 1

**NONE**

Sch. DB - Pt. A - Sn. 1 - Footnote (a)

**NONE**

Schedule DB - Part B - Section 1

**NONE**

Sch. DB - Pt. B - Sn. 1 - Footnotes

**NONE**

Schedule DB - Part D

**NONE**



STATEMENT AS OF MARCH 31, 2010 OF THE Neighborhood Health Plan of Rhode Island

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
31315L-VW-5 Farmer Mac Disc Agency Deben.....		.02/18/2010.....	0.155	.04/22/2010.....	199,982		.36
313385-VU-7 FHLB Disc Corp Debentures.....		.03/15/2010.....	0.150	.04/20/2010.....	999,921		.71
313589-VL-4 FNMA Agency Debentures.....		.02/01/2010.....	0.000	.04/12/2010.....	1,099,958		225
313589-WC-3 FNMA Agency Debentures.....		.02/18/2010.....	0.140	.04/28/2010.....	24,997		.4
313589-XE-8 FNMA.....		.03/15/2010.....	0.170	.05/24/2010.....	499,875		.40
0199999 - U.S. Governments - Issuer Obligations					2,824,733	0	376
0299999 - U.S. Governments - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
0399999 - Total - U.S. Government Bonds					2,824,733	0	376
0499999 - All Other Governments - Issuer Obligations					0	0	0
0599999 - All Other Governments - Single Class Mortgage-Backed/ Asset-Backed Securities					0	0	0
0699999 - All Other Governments - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
0799999 - All Other Governments - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
0899999 - All Other Governments - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
0999999 - All Other Governments - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
1099999 - Total - All Other Government Bonds					0	0	0
1199999 - U.S. States, Territories and Possessions - Issuer Obligations					0	0	0
1299999 - U.S. States, Territories and Possessions - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
1399999 - U.S. States, Territories and Possessions - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
1499999 - U.S. States, Territories and Possessions - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
1599999 - U.S. States, Territories and Possessions - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
1699999 - U.S. States, Territories and Possessions - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
1799999 - Total - States, Territories and Possessions Bonds					0	0	0
1899999 - U.S. Political Subdivisions - Issuer Obligations					0	0	0
1999999 - U.S. Political Subdivisions - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
2099999 - U.S. Political Subdivisions - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
2199999 - U.S. Political Subdivisions - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
2299999 - U.S. Political Subdivisions - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
2399999 - U.S. Political Subdivisions - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
2499999 - Total - U.S. Political Subdivisions Bonds					0	0	0
2599999 - U.S. Special Revenue - Issuer Obligations					0	0	0
2699999 - U.S. Special Revenue - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
2799999 - U.S. Special Revenue - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
2899999 - U.S. Special Revenue - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
2999999 - U.S. Special Revenue - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
3099999 - U.S. Special Revenue - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
3199999 - Total - Special Revenue Bonds					0	0	0
0660P1-DU-2 Bank of America Corp.....		.03/15/2010.....	0.000	.04/28/2010.....	149,975		.16
9297M1-DN-3 Wachovia Bank NA BA.....		.02/04/2010.....	0.000	.04/22/2010.....	129,583		.46
9297M1-DV-5 Wachovia Bank NA BA.....		.02/04/2010.....	0.000	.04/29/2010.....	147,471		.53
3299999 - Industrial and Miscellaneous - Issuer Obligations					427,029	0	115
3399999 - Industrial and Miscellaneous - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
3499999 - Industrial and Miscellaneous - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
3599999 - Industrial and Miscellaneous - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
3699999 - Industrial and Miscellaneous - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
3799999 - Industrial and Miscellaneous - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
3899999 - Total - Industrial and Miscellaneous Bonds					427,029	0	115
3999999 - Credit Tenant Loans - Issuer Obligations					0	0	0
4099999 - Credit Tenant Loans - Single Class Mortgage-Backed Securities					0	0	0
4199999 - Total - Credit Tenant Loans					0	0	0
4299999 - Hybrid Securities - Issuer Obligations					0	0	0
4399999 - Hybrid Securities - Single Class Mortgage-Backed/Asset-Backed Securities					0	0	0
4499999 - Hybrid Securities - Defined Multi-Class Residential Mortgage-Backed Securities					0	0	0
4599999 - Hybrid Securities - Other Multi-Class Residential Mortgage-Backed Securities					0	0	0
4699999 - Hybrid Securities - Defined Multi-Class Commercial Mortgage-Backed Securities					0	0	0
4799999 - Hybrid Securities - Other Multi-Class Commercial Mortgage-Backed/Asset-Backed Securities					0	0	0
4899999 - Total - Hybrid Securities					0	0	0
4999999 - Parent, Subsidiaries and Affiliates Bonds - Issuer Obligations					0	0	0

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