Examination Warrant Number 07-HM-362-A

# **Report of Examination of**

Unison Family Health Plan of Pennsylvania, Inc. Pittsburgh, Pennsylvania

As of December 31, 2007

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Harrisburg, Pennsylvania November 13, 2009

Honorable Stephen J. Johnson, CPA Deputy Insurance Commissioner Commonwealth of Pennsylvania Insurance Department Harrisburg, Pennsylvania

Dear Sir:

In accordance with instructions contained in Examination Warrant Number 07-HM-362-A, dated March 16, 2007, an examination was made of

## Unison Family Health Plan of Pennsylvania, Inc.

a Pennsylvania domiciled Health Maintenance Organization ("HMO"), hereinafter referred to as "Company." The examination was conducted at the Company's home office, located at 1001 Brinton Road, Pittsburgh, Pennsylvania 15221.

A report of this examination is hereby respectfully submitted.

## SCOPE OF EXAMINATION

The Company was last examined as of December 31, 2005.

This examination covered the two-year period from January 1, 2006 through December 31, 2007, and consisted of a general survey of the Company's business practices and management, and an evaluation of the Company's financial condition as of the latter date. Material subsequent events were also reviewed.

Work programs employed in the performance of this examination were designed to comply with the standards promulgated by the Pennsylvania Insurance Department ("Department") and the National Association of Insurance Commissioners ("NAIC").

The format of this report is consistent with the current practices of the Department and the examination format prescribed by the NAIC. It is limited to a description of the Company, a discussion of financial items that are of specific regulatory concern, and a factual disclosure of other significant regulatory information.

For each year during the period under examination, the Certified Public Accounting ("CPA") firm of Ernst and Young, LLP, Pittsburgh, Pennsylvania has provided an unqualified opinion based on statutory accounting principles. Relevant work performed by the CPA firm,

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during its annual audit of the Company, was reviewed during the examination and incorporated into the examination workpapers.

#### HISTORY

The Company was incorporated on May 10, 2004, as Three Rivers Children's Health Plan, Inc., and was granted a Certificate of Authority by the Department and the Department of Health on June 25, 2004, to operate as a health maintenance organization.

The Company effected a name change to Unison Family Health Plan of Pennsylvania, Inc., effective November 1, 2005.

The Company is currently authorized to transact those classes of insurance described in the Pennsylvania Insurance Company Law (40 P.S. § 382), Section 202, Subsection 1554 as a Health Maintenance Organization.

## MANAGEMENT AND CONTROL

#### CAPITALIZATION

As of the examination date, December 31, 2007, the Company's total capitalization was \$1,600,000, which consisted of 1,000 shares of issued and outstanding common stock with no par value. Unison Health Plan of Pennsylvania, Inc. ("UHPPA"), formerly Three Rivers Health Plans, Inc., a Pennsylvania HMO, owns all of the shares outstanding. Three Rivers Holdings, Inc. ("Holdings"), a Delaware holding company owns all of the issued and outstanding shares of UHPPA.

The total capitalization required of the Company, to engage in the types of business for which it is licensed, is \$1,000,000 in net worth. The Company meets this requirement.

#### STOCKHOLDERS

During the period covered by this examination, the Company did not pay any dividends to UHPPA.

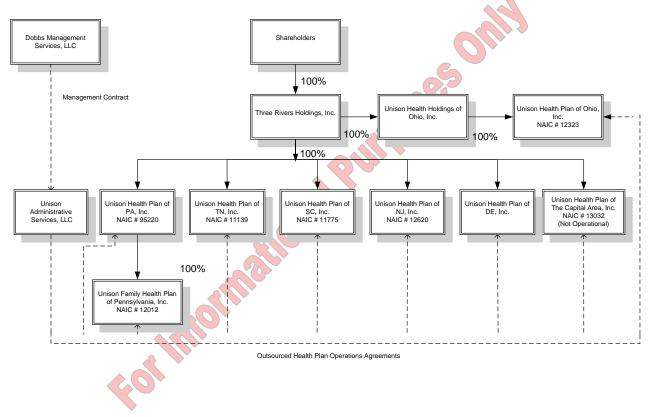
#### **INSURANCE HOLDING COMPANY SYSTEM**

The Company is part of an insurance holding company system and is required by Pennsylvania Insurance Company Law, 40 P.S. § 991.1404 (a)-(d), to register with the Department by March 31 of each year. The following is a summary of stock ownership of Holdings at December 31, 2007, showing owners of more than 10%:

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		<u>Shares</u>	<b>Percentage</b>
•	John Hull Dobbs Revocable Trust	9,130.48147	32.25431%
٠	Caroline Kirby Dobbs 1985 Trust	3,674.95327	12.98213%
٠	John Hull Dobbs Jr. 1985 Trust	3,674.95327	12.98213%
٠	Juliette C. Dobbs 1985 Trust	3,674.95327	12.98213%
•	Edward J. Dobbs Grantor trust	3,674.95327	12.98213%

The Following summarizes the insurance company holding structure on December 31, 2007:



Holdings is a Delaware holding company that owns all outstanding shares of Unison Health Plan of Delaware, Inc. a Delaware domiciled HMO; Unison Health Plan of New Jersey, Inc., a New Jersey domiciled HMO; Unison Health Plan of the Capital Area, Inc., a District of Columbia domiciled HMO Unison Health Plan of Tennessee, Inc., a Tennessee domiciled HMO; Unison Health Plan of South Carolina, Inc., a South Carolina domiciled HMO; and Unison Administrative Services, LLC. ("UAS") UAS provides all of the operational services that the Company needs to operate as an HMO. Holdings also owns all of the outstanding shares of Unison Health Holdings of Ohio, Inc.; which in turn owns all of the shares of Unison Health Plan of Ohio, Inc., an Ohio domiciled HMO. -4-

## **BOARD OF DIRECTORS**

Management of the Company is vested in its Board of Directors ("Board"), which was comprised of the following members as of the examination date, December 31, 2007.

Name and Address	Principal Occupation
John P. Blank, M.D.	Chief Executive Officer
Homestead, Pennsylvania	Unison Family Health Plan of Pennsylvania,
	Inc.
Roberta L. Breninghouse	Subscriber Member of the Board
Lower Burrell, Pennsylvania	Unison Family Health Plan of Pennsylvania,
	Inc.
William H. Lawson, Jr.	Vice President and Assistant Secretary
Memphis, Tennessee	Dobbs Management Services, LLC

The By-laws of the Company provide that directors are to be elected during the annual meeting of the shareholders. The Board is currently composed of three directors, one of which is a subscriber to the Company. The Company has a conflict of interest policy and all directors execute a conflict of interest policy upon election.

The Company complies with the portion of Pennsylvania Insurance Company Law 40 P.S. §991.1405(c)(3) that requires that not less than one-third of the directors of a domestic insurer and not less than one-third of the members of each committee of the board of directors of any domestic insurer to be persons who are not officers or employees of such insurer or of any entity controlling, controlled by or under common control with such insurer and who are not beneficial owners of a controlling interest in the voting stock of such insurer or any such entity.

## AUDIT COMMITTEE

The minutes of the Audit Committee document compliance with Pennsylvania Insurance Company Law 40 P.S. §991.1405(c) (4) that requires such a committee to be responsible for recommending the selection of independent certified public accountants, reviewing the Company's financial condition, the scope and results of the independent audit and any internal audit, nominating candidates for director for election by shareholders, evaluating the performance of principal officers of the Company and recommending to the board of directors the selection and compensation of the principal officers.

The Audit Committee consisted of a single member on December 31, 2007, Roberta L. Breninghouse.

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#### OFFICERS

As of the examination date, December 31, 2007, the following officers were appointed and serving in accordance with the Company's By-laws:

Title

#### Name

John P. Blank, M.D. Jennifer L. Kessler David W. Thomas Leslie A. Gelpi Chief Executive Officer President Secretary Treasurer

# CORPORATE RECORDS

#### MINUTES

During the period covered by this examination, annual meetings of the Company's shareholders were held in compliance with the By-Laws. Directors were elected during the annual shareholders meetings, and officers were subsequently elected during the annual organizational meeting of the Board of Directors. Actions of the directors are ratified by the Company's shareholders.

Quorums were established at all Board and shareholder meetings. The Board transacts much of its business through the use of Unanimous Written Consents. Such consents were used for all Board meetings that were between the date of the previous examination and year-end 2007. Participation of directors in the affairs of the Company as measured by attendance at board meetings or by the execution of Actions by Unanimous Consent has been satisfactory.

## ARTICLES OF AGREEMENT

The Company filed Articles of Amendment with the Department of State Corporation Bureau to change their name from Three Rivers Children's Health Plan, to Unison Family Health Plan of Pennsylvania, Inc. The name change was adopted by the Board of Directors pursuant to 15 PA C.S. § 1914 (c), effective e as of November 1, 2005.

## **BY-LAWS**

The Company amended its By-Laws to reflect the name change as described above.

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## SERVICE AND OPERATING AGREEMENTS

## HEALTH PLAN OPERATIONS OUTSOURCING AGREEMENT

The Company has entered into an operations outsourcing agreement with Unison Administrative Services, LLC("UAS"), a limited liability company which is 100 % owned by Holdings. Under the agreement, UAS performs all health plan operational services necessary for the Company to carry on its HMO business for a fee based on percentage of revenue. The agreement with UAS terminates on December 31, 2007, with automatic renewals for successive one-year terms unless either party to the agreement gives notice of termination. UAS engages in no other activities other than the performance of services for the companies within the holding company system. Total expenses incurred under the agreement were \$4,256,215 and \$4,051,738 in 2007 and 2006, respectively.

It was requested that the Company provide an analysis of how this agreement meets the fairness and reasonable standard as set forth in 40 PS § 991.1405 (a) (1). During the course of the exam the Company could not provide such analysis. It is recommended that the Company comply with 40 PS § 991.1405 (a) (1) and provide proof that this agreement is fair and reasonable.

## TAX ALLOCATION AGREEMENT

There is a Tax Allocation Agreement between the Company and Holdings. The agreement requires Holdings to reimburse the Company for losses that are passed to Holdings. Reimbursements to the Company are equal to the refund of federal and state income taxes that the Company would have received had it elected not to file as a Qualified Subchapter S Subsidiary ("QSSS") of Holdings. Conversely, the Company is required to reimburse Holdings for any federal and state income taxes that the Company would have paid had it not filed as a QSSS.

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## REINSURANCE

## CEDED

The following summarizes the Company's reinsurance contract in effect as of December 31, 2007:

Reinsurer:	HM Life Insurance Company
Type of contract:	Excess of Loss
Effective date:	April 1, 2007
Term:	Twelve months
Business covered:	Inpatient Hospital Services
Applicant's retention:	\$250,000 each member, each contract year
Reinsurance limits:	50% to 90% of Eligible Hospital Services, subject to a maximum
	of \$2,000,000, per member, per contract year

The contract contains appropriate arbitration and insolvency clauses.

## ASSUMED

The Company did not assume any reinsurance during the period under examination.

## TERRITORY AND PLAN OF OPERATIONS

The Company is licensed in Pennsylvania only and currently provides Children's Health Insurance Program ("CHIP") and AdultBasic coverages. The Company has contracts with the Department to provide comprehensive health care to children of working families that cannot afford coverage and to adults that do not have healthcare coverage.

Effective July 1, 2004, UHPPA assigned its contract to provide services under CHIP to the Company. Effective July 1, 2005, the Department awarded the Company a contract to provide services under the AdultBasic program.

Comprehensive (hospital and medical) is the only line of business written by the Company. The following chart summarizes the Company's direct and assumed, ceded and net written premiums for the year 2007:

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Line of Business	ar	Direct nd Assumed Premium	Ceded remium	Net Premium	Percentage of Total
December 31, 2007 Comprehensive (hospital and medical)	\$	30,409,530	\$ 28,492	\$ 30,381,038	100.0 %
Totals	\$	30,409,530	\$ 28,492	\$ 30,381,038	100.0 %

## SIGNIFICANT OPERATING TRENDS

The following indicates the growth of the Company during the period covered by this examination:

	2007	2006
Admitted Assets	\$ 15,983,179	\$ 12,610,828
Liabilities	\$ 4,426,697	\$ 4,851,661
Capital and Surplus Funds	\$ 11,556,482	\$ 7,759,167
Net Premium Income	\$ 30,381,038	\$ 29,118,081
Benefits to Members	\$ 20,530,412	\$ 17,511,630
Net Investment Income	\$ 561,153	\$ 401,148
Net Income	\$ 3,799,471	\$ 4,628,139



## ACCOUNTS AND RECORDS

All of the Company's accounting, investment, policy and claim records are maintained at its home office. The recordkeeping system is fully automated and all applications are on a local area network. The Company's primary financial management information system is Great Plains. The Great Plains system has general ledger, accounts payable, and human resource modules. All of the Company's financial transactions are processed by Great Plains except premium revenue and medical expenses, which are processed by the FACETS Managed Care Enterprise Information System.

## PENDING LITIGATION

The Company is not involved in any pending litigation whose outcome could have a material effect on its financial condition.

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### FINANCIAL STATEMENTS

The financial condition of the Company, as of December 31, 2007, and the results of its operations for the period under examination, are reflected in the following statements:

Comparative Statement of Assets, Liabilities, Surplus and Other Funds; Comparative Statement of Income; Comparative Statement of Capital and Surplus; and Comparative Statement of Cash Flow.

For Intermetional Purposes only

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## Comparative Statement of Assets, Liabilities, Surplus and Other Funds As of December 31,

	2007	2006
Bonds	\$ 100,155	\$ 100,597
Cash, cash equivalents and short-term investments	13,358,690	10,062,434
Subtotal, cash and invested assets	13,458,845	10,163,031
Investment income due and accrued	48,508	44,503
Premiums and considerations	2,446,390	2,342,297
Receivable from parent, subsidiaries and affiliates	16	42,129
Health care and other amounts receivable	29,420	 18,868
Totals	\$ 15,983,179	\$ 12,610,828
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Claims unpaid	\$ 3,318,435	\$ 2,997,406
Unpaid claims adjustment expenses	122,150	89,140
Premiums received in advance	287,322	249,219
General expenses due or accrued	34,806	36,396
Amounts due to parent, subsidiaries and affiliates	663,984	 1,479,500
Total liabilities	4,426,697	 4,851,661
Common capital stock	1,000,000	1,000,000
Gross paid in and contributed surplus	600,000	600,000
Unassigned funds (surplus)	9,956,482	 6,159,167
Total capital and surplus	11,556,482	 7,759,167
Totals	\$ 15,983,179	\$ 12,610,828

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## **Comparative Statement of Income** For the Year Ended December 31,

	2007	2006
Net premium income	\$ 30,381,038	\$ 29,118,081
Total revenues	30,381,038	29,118,081
Hospital/medical benefits	12,472,355	11,325,577
Other professional services	4,250,289	4,377,362
Emergency room and out-of-area	1,040,730	857,287
Prescription drugs	2,990,686	2,537,255
Aggregate write-ins for other hospital and medical	(223,648)	(1,585,851)
Total hospital and medical	20,530,412	17,511,630
Claims adjustment expenses	1,072,386	454,462
General administrative expenses	3,319,370	3,731,532
Total underwriting deductions	24,922,168	21,697,624
Net underwriting gain or (loss)	5,458,870	7,420,457
Net investment income earned	561,153	401,148
Net investment gains or (losses)	561,153	401,148
Aggregate write-ins for other income or expenses	0	5,000
Net income or (loss) before federal income taxes	6,020,023	7,826,605
Federal income taxes incurred	2,220,552	3,198,466
Net income	\$ 3,799,471	\$ 4,628,139

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## Comparative Statement of Capital and Surplus For the Year Ended December 31,

	2007	2006
Capital and surplus, December 31, previous year	\$ 7,759,167	\$ 3,132,675
Net income or (loss)	3,799,471	4,628,139
Change in nonadmitted assets	(2,156)	(1,647)
Net change in capital and surplus	3,797,315	4,626,492
Capital and surplus, December 31, current year	\$ 11,556,482	\$ 7,759,167
Capital and surplus, December 31, current year	see on the	

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## Comparative Statement of Cash Flow For the Year Ended December 31,

	2007	2006
Cash from Operations		
Premiums collected net of reinsurance	\$ 30,326,231	\$ 28,541,194
Net investment income	 557,590	 376,797
Total	 30,883,821	28,917,991
Benefit and loss related payments	20,222,107	17,762,224
Commisions, expenses paid and aggregate write-ins for deductions	4,320,449	 4,059,618
Total deductions	 24,542,556	 21,821,842
Net cash from operations	6,341,265	 7,096,149
Cash from Investments		
Proceeds from investments sold, matured or repaid:		
Bonds	 0	 100,000
Total investment proceeds	0	100,000
Cost of investments acquired (long-term only):		
Bonds	 0	 100,813
Total investments acquired	0	 100,813
Net cash from investments	 0	 (813)
Cash from Financing and Miscellaneous Sources		
Cash provided (applied):		
Other cash provided or (applied)	(3,045,009)	 (2,755,837)
Net cash from financing and miscellaneous sources	 (3,045,009)	 (2,755,837)
Reconciliation of cash and short-term investments:		
Net change in cash, cash equivalents and short-term investments	3,296,256	4,339,499
Cash and short-term investments:		
Beginning of the year	 10,062,434	5,722,935
End of the year	 13,358,690	10,062,434
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#### SUMMARY OF EXAMINATION CHANGES

There have been no changes been made to the Company's financial statements as a result of this examination.

## NOTES TO FINANCIAL STATEMENTS

#### **INVESTMENTS**

As of December 31, 2007, the Company's invested assets were distributed as follows:

	Amount	Percentage
Bonds	\$ 100,15	5 0.7 %
Cash	13,358,69	0 99.3 %
Totals	\$ 13,458,84	5 100.0 %

The Company's bond portfolio had the following quality and maturity profiles:

<b>NAIC Designation</b> 1 - highest quality Totals	\$ \$	Amount 100,155 100,155	Percentage 100.0 % 100.0 %
Years to Maturity		Amount	
1 year or less	\$	100,155	100.0 %
Totals	\$	100,155	100.0 %

The Company has a written investment policy as required by the Pennsylvania Insurance Company Law 40 P.S. § 653 b (b). The investment policy is reviewed and approved on an annual basis by the Board of Directors. The Company, at December 31, 2007, was following its investment policy. However, the investment policy does not have procedures in place to address Other Than Temporary Impairment events ("OTTI"). It is recommended that the Company add procedures to its investment policy that delineate the method or methods by which it evaluates OTTI of their investments. Evaluating OTTI for investments is required by NAIC Statements of Statutory Accounting Principles numbers 26, 30, 32, and 43. -15-

## POLICYHOLDER AND CLAIM RESERVES

The Company reported reserves for unpaid claims and claims adjustment expenses of \$3,318,435 and \$122,150, in its 2007 Annual Statement. These amounts are being accepted for the purposes of this examination.

Barbara V. Scheil, of Barbara V. Scheil and Associates, Ltd., Rockville, Virginia reviewed the Company's reserves for unpaid claims and claims adjustment expenses in 2006 and 2007. Statements of Actuarial Opinion issued by Ms. Scheil during the period covered by this examination did not contain any exceptions.

As part of the review of the Company's provision for unpaid claims and claims adjustment expenses, relevant claims data was tested and reconciled to the annual statement, and to data contained in the actuarial report prepared by Barbara V. Scheil and Associates, Ltd., for the year-ended December 31, 2007.

The Department contracted the services of National Actuarial Network, Inc. ("NAN") for actuarial consulting. NAN evaluated the reasonableness of Claims Unpaid, Unpaid Claims Adjustment Expenses, Aggregate Health Policy Reserves, and Aggregate Health Claim Reserves, as shown in the Company's December 31, 2007 Annual Statutory Statement. In addition, NAN provided assistance in the evaluation of the appropriateness of the Company's reinsurance arrangement on the above actuarial items.

There were no unusual or significant negative findings made as a result of the actuarial review conducted by NAN.

# SUBSEQUENT EVENTS

UnitedHealth Group Inc. ("United"), a Minnesota corporation, and a publicly traded company, through its wholly owned subsidiary AmeriChoice Corporation ("Americhoice"), a Delaware corporation, acquired the Company and its parent and affiliates by the acquisition of 100 % of the issued and outstanding capital stock of Holdings. The acquisition was consummated on May 30, 2008, pursuant to a stock purchase agreement dated as of January 7, 2008. United is now the ultimate controlling entity of the Company.

The acquisition as described was approved and signed by Joel Ario, acting Insurance Commissioner of the Commonwealth of Pennsylvania, on April 15th, 2008, under order number ID-RC-08-01.

Through its subsidiary insurers, health maintenance organizations, third-party administrators and other service providers, United is currently serving approximately 70 million Americans. United's primary focus is on improving health care systems by simplifying the

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administrative components of health care delivery, with revenues derived from premiums on risk-based products, fees from management, administrative, technology, and consulting services, and sales of a wide variety of products and services related to the health industry.

The 2008 Form B registration statement has declared that United has no shareholders holding 10 % or more of any class of stock.

The Company has made major changes to its management team since the exam date of December 31, 2007. Currently, only Jennifer Lee Kessler, Leslie Ann Gelpi and Roberta Breninghouse remain from the 2007 Board of Directors and Officers.

The Company reported did not report any other than temporary impairments ("OTTI") related to investments held as of December 31, 2007.

## RECOMMENDATIONS

## PRIOR EXAMINATION

No recommendations were made as a result of the previous examination.

## **CURRENT EXAMINATION**

- 1. It is recommended that the Company comply with 40 PS § 991.1405 (a) (1) and provide documentation that the operations outsourcing agreement with Unison Administrative Services is fair and reasonable.. (See "Health Plan Operations Outsourcing Agreements", page 6.)
- 2. It is recommended that the Company add procedures to its investment policy that delineate the method or methods by which it evaluates OTTI of their investments. (See "Investments", page 14.)

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## CONCLUSION

As a result of this examination, the financial condition of Unison Family Health Plan of Pennsylvania, Inc., as of December 31, 2005, was determined to be as follows:

	Amount		Percentage
Admitted assets	\$	15,983,179	100.0 %
Liabilities	\$	4,426,697	27.7 %
Captial and Surplus		11,556,482	72.3 %
Total liabilities, capital and surplus	\$	15,983,179	100.0 %

Since the previous examination, made as of December 31, 2004, the Company's assets increased by \$8,366,480, its liabilities decreased by \$57,327, and its surplus increased by \$8,423,807.

This examination was conducted by George Horey, Cornelius McConville, and Mark A. Swearingen, with the latter in charge.

Respectfully,

David G. DelBiondo, CPA Director, Bureau of Financial Examinations

Dennis Mavrich, CFE Examination Manager

Mark A. Swearingen, CFE Examiner-in-Charge

The CFE designation has been conferred by an organization not affiliated with the federal or any state government. However, the CFE designation is the only designations recognized by the NAIC for the purposes of performing statutory examinations of insurance companies.