AMENDED FILING COVER SHEET

Amended File Title	Amended Explanation
Notes to Financial Statements	We are amending our notes schedule of our filing because the original Q2 submission inadvertently included Q1 information. The u

52632202520100107

QUARTERLY STATEMENT

AS OF JUNE 30, 2025

OF THE CONDITION AND AFFAIRS OF THE

ALTUS DENTAL INSURANCE CO., INC.

NAIC Group Code 1571 (Current Period), 1571 (Prior Period) **NAIC Company Code** 52632 **Employer's ID Number** 05-0513223

Organized under the Laws of RHODE ISLAND, **State of Domicile or Port of Entry** RI

Country of Domicile US

Licensed as business type:

Life, Accident and Health	**[X]**	**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 August 1, 2000 **Commenced Business** September 1, 2001

Statutory Home Office 10 CHARLES STREET (Street and Number), PROVIDENCE, RI US 02904 (City or Town, State, Country and Zip Code)

Main Administrative Office 10 CHARLES STREET (Street and Number)
PROVIDENCE, RI US 02904 (City or Town, State, Country and Zip Code) 877-223-0577 (Area Code) (Telephone Number)

Mail Address 10 CHARLES STREET (Street and Number or P.O. Box), PROVIDENCE, RI US 02904 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 10 CHARLES STREET (Street and Number) PROVIDENCE, RI US 02904 (City or Town, State, Country and Zip Code) 877-223-0577 (Area Code) (Telephone Number)

Internet Website Address www.altusdental.com

Statutory Statement Contact DUANE EASTER (Name) 877-223-0577 (Area Code) (Telephone Number) (Extension)
deaster@altusdental.com (E-Mail Address) 401-457-7260 (Fax Number)

OFFICERS

	Name	Title
1.	JOSEPH R PERRONI	PRESIDENT
2.	ELLEN HENDRIX #	ASSISTANT SECRETARY
3.	SEAN NEWTH #	TREASURER

VICE-PRESIDENTS

Name	Title	Name	Title
SEAN NEWTH #	SR VP & CFO	THOMAS CHASE	SR VP - CHIEF OPERATING OFFICER
BLAINE CARROLL	VP - STRATEGIC INITIATIVES	MICHELLE MUSCATELLO	VP - COMMUN ICATIONS & EXTERNAL A
JAMES KINNEY	VP - SALES	ELLEN HENDRIX	VP - UNDERWRITING&INS RISK SERVICE

DIRECTORS OR TRUSTEES

CARRIE BRIDGES #	ELIZABETH CATUCCI	PATRICK CROWLEY #	THOMAS P. ENRIGHT
DIANA M. FRANCHITTO	CHRISTINE GADBOIS	PETER C. HAYES	STEVEN J. ISSA
JUNIOR JABBIE	COLIN P. KANE	HEATHER A. PROVINO	JOHN T. RUGGIERI #
MICHAEL F. SABITONI	EDWIN J. SANTOS	MARK A. SHAW	

State of RHODE ISLAND

County of PROVIDENCE ss

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

(Signature)	(Signature)	(Signature)
JOSEPH R PERRONI	ELLEN HENDRIX	SEAN NEWTH
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
PRESIDENT	ASSISTANT SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me this
9th day of AUGUST , 2025

a. Is this an original filing? [ ] Yes [X] No
b. If no: 1. State the amendment number 1
2. Date filed 10/03/2025
3. Number of pages attached 2

KELLY COTOIA
My commission expires 8/7/29

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

A. Accounting Practices – No significant changes since the December 2024 annual filing.

NET INCOME

			SSAP #	F/S Page	F/S Line #	2025	2024
(1)	ALTUS DENTAL INSURANCE CO., INC. state basis (Page 4, Line 32, Columns 2 & 3)	$	XXX	XXX	XXX	(2,027,129)	1,721,590
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						

Details of Depreciation of Fixed Assets		SSAP #	F/S Page	F/S Line #	2025	2024
Totals (Lines 01A0201 through 01A0225)	$					

(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

Details of Depreciation of Home Office Property		SSAP #	F/S Page	F/S Line #	2025	2024
Totals (Lines 01A0301 through 01A0325)	$					

				SSAP #	F/S Page	F/S Line #	2025	2024
(4)	NAIC SAP	(1 - 2 -3 = 4)	$	XXX	XXX	XXX	(2,027,129)	1,721,590

SURPLUS

			SSAP #	F/S Page	F/S Line #	2025	2024
(5)	ALTUS DENTAL INSURANCE CO., INC. state basis (Page 3, Line 33, Columns 3 & 4)	$	XXX	XXX	XXX	47,523,569	49,550,698
(6)	State Prescribed Practices that are an increase/(decrease)from NAIC SAP:						

e.g., Goodwill, net, Fixed Assets, Net		SSAP #	F/S Page	F/S Line #	2025	2024
Totals (Lines 01A0601 through 01A0625)	$					

(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:

Home Office Property		SSAP #	F/S Page	F/S Line #	2025	2024
Totals (Lines 01A0701 through 01A0725)	$					

				SSAP #	F/S Page	F/S Line #	2025	2024
(8)	NAIC SAP	(5 - 6 - 7 = 8)	$	XXX	XXX	XXX	47,523,569	49,550,698

B. Use of Estimates in the Preparation of the Financial Statements - No significant changes since the December 2024 annual filing.

C. Accounting Policy

1. Short term investments are stated at amortized cost.
2. Bonds are stated at amortized value using the constant yield / scientific method.
3. Common stocks - Not applicable.
4. Preferred stocks - Not applicable.
5. Mortgage loans - Not applicable.
6. Loan-backed securities – Not applicable.
7. Investments in subsidiaries, controlled and affiliated entities – Not applicable.
8. Joint ventures, partnerships and limited liability companies - Not applicable.
9. Derivatives - Not applicable.
10. Investment income as a factor in the premium deficiency calculation – Not applicable.
11. Liabilities for losses and loss/claim adjustment expenses are actuarially derived.
12. Change in capitalization policy – No significant changes since the December 2024 annual filing.
13. Pharmaceutical rebate receivables - Not applicable.

D. Going Concern - Management continually evaluates the Company’s ability to continue as a going concern. After considering management’s plans, potential events and principal conditions, there is no substantial doubt about the Company’s ability to continue as a going concern.

NOTE 2 - - ACCOUNTING CHANGES AND CORRECTION OF ERRORS – Not applicable.

NOTE 3 - - BUSINESS COMBINATIONS AND GOODWILL - Not applicable.

NOTE 4 - - DISCONTINUED OPERATIONS - Not applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 5 - - INVESTMENTS

A. Mortgage Loans, including Mezzanine Real Estate Loans – Not applicable.

B. Debt Restructuring – Not applicable.

C. Reverse Mortgages – Not applicable.

D. Asset-Backed Securities – Not applicable.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions – Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing – Not applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale – Not applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale – Not applicable.

J. Real Estate – No significant changes since the December 2024 annual filing.

K. Investment in Tax Credit Structures – No significant changes since the December 2024 annual filing.

L. Restricted Assets – Not applicable.

M. Working Capital Finance Investments – Not applicable.

N. Offsetting and Netting of Assets and Liabilities – Not applicable.

O. 5GI* Securities – Not applicable.

P. Short Sales – Not applicable.

Q. Prepayment Penalty and Acceleration Fees – The Company did not collect any prepayment penalties or acceleration fees through June 30, 2025.

R. Reporting Entity's Share of Qualified Cash Pool by Asset Type – Not applicable.

S. Aggregate Collateral Loans – Not applicable.

NOTE 6 - - JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES – Not applicable.

NOTE 7 - - INVESTMENT INCOME - No significant changes since the December 2024 annual filing.

NOTE 8 - - DERIVATIVE INSTRUMENTS - Not applicable.

NOTE 9 - - INCOME TAXES - No significant changes since the December 2024 annual filing.

NOTE 10 -- INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES - No significant changes since the December 2024 annual filing.

NOTE 11 - - DEBT– Not applicable.

NOTE 12 - - RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS - Not applicable.

NOTE 13 - - CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS - No significant changes since the December 2024 annual filing.

NOTES TO FINANCIAL STATEMENTS

NOTE 14 - - CONTINGENT LIABILITIES - Not applicable.

NOTE 15 - - LEASES - Not applicable.

NOTE 16 - - INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK - Not applicable.

NOTE 17 - - SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES – Not applicable.

NOTE 18 - - GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE UNINSURED PORTION OF PARTIALLY INSURED PLANS

A. ASO Plans – Not applicable.

B. ASC Plans – The Plan is an ASC Administrator.

The Company's June 30, 2025 financial operations exclude approximately $4,443,479 of revenues from such plans and there are no significant gains or losses related to these transactions.

Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

ASC Plans:

	The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2025: (years as seen in Notes text)		ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a.	Gross reimbursement for medical cost incurred	$	4,125,690		4,125,690
b.	Gross administrative fees accrued	$	317,789		317,789
c.	Other income or expenses (includ interest paid to or received from plans)	$			
d.	Gross expenses incurred (claims and administrative) (a+b+c)	$	4,443,479		4,443,479
e.	Total net gain or loss from operations	$			

C. Medicare – Not applicable.

NOTE 19 - - DIRECT PREMIUM WRITTEN / PRODUCED BY MANAGING GENERAL AGENTS / THIRD PARTY ADMINISTRATORS - Not applicable.

NOTE 20 - - FAIR VALUE MEASUREMENTS

A. Fair Value Measurement

1. Fair Value Measurement at Reporting Date - The Company's financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on a hierarchy defined by FASB ASC 820, *Fair Value Measurements and Disclosures* as follows:

Level 1 – Observable inputs in the form of quoted prices for identical instruments in active markets.

Level 2 – Observable inputs other than Level 1 prices such as quoted prices for similar assets or liabilities, quoted prices in markets that are not active, or other inputs that are observable or can be derived from observable market data.

Level 3 – Little or no market data is available. Fair value is determined using management's best estimates and assumptions.

The following table provides information as of June 30, 2025:

	Description		(Level 1)	(Level 2)	(Level 3)	Net Asset Value	Total
a.	Assets at fair Value						
01.	Cash Equivalent - MMMF (Sch E Part 2)	$	3,598,774				3,598,774
02.	Bonds	$		47,771,454			47,771,454
	Total assets at fair value	$	3,598,774	47,771,454			51,370,228

NOTES TO FINANCIAL STATEMENTS

2. Fair Value Measurements in Level 3 – None.

3. Transfers Between Levels – None.

4. Description of Valuation Techniques – The Company's valuation techniques are based on observable and unobservable pricing inputs. Observable inputs reflect market data obtained from independent sources based on trades of securities while unobservable inputs reflect the Company's market assumptions.

5. Disclosures for Derivative Assets and Liabilities – None.

B. Other Fair Value Disclosures – None.

C. Aggregate Fair Value – See table in A (1) above.

D. Reasons Not Practical to Estimate Fair Value – None.

E. Instruments Measured at Net Asset Value – None.

NOTE 21 - - OTHER ITEMS - No significant changes since the December 2024 annual filing.

NOTE 22 - - EVENTS SUBSEQUENT - Not applicable.

NOTE 23 - - REINSURANCE - Not applicable.

NOTE 24 - - RETROSPECTIVELY RATED CONTRACTS & CONTRACTS SUBJECT TO REDETERMINATION - Not applicable.

NOTE 25 - - CHANGE IN INCURRED CLAIMS AND CLAIMS ADJUSTMENT EXPENSES

Loss Reserves as of December 31, 2024 were $2,210,740.

As of June 30, 2025, $1,956,437 has been paid for claims incurred prior to January 1 of the current year.

Reserves remaining for prior years are now $155,312 as a result of re-estimation of unpaid claims and claim adjustment expenses on the dental line of insurance. Therefore, there has been a $98,991 favorable prior-year development from December 31, 2024 to June 30, 2025.

This change is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company experienced no unfavorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.

NOTE 26 - - INTERCOMPANY POOLING ARRANGEMENTS - Not applicable.

NOTE 27 - - STRUCTURED SETTLEMENTS – Not applicable.

NOTE 28 - - HEALTH CARE RECEIVABLES – Not applicable.

NOTE 29 - - PARTICIPATING POLICIES - Not applicable.

NOTE 30 - - PREMIUM DEFICIENCY RESERVES

The Company performed an analysis for premium deficiency reserves as of June 30, 2025 which resulted in no additional liability for the period.

NOTE 31 - - ANTICIPATED SALVAGE AND SUBROGATION - Not applicable.