Quarterly STATEMENT

of the

HMO Maine, a Line of Business of Anthem Health Plans of Maine, Inc.

of

South Portland

in the State of

Maine

to the

Bureau of Insurance

of the State of

Maine

For the Quarter Ended
March 31, 2016

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2016

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	240,209	231,103	955,543
2.	Net premium income (including $ ..... non-health premium income)	XXX	103,805,953	78,726,783	392,010,891
3.	Change in unearned premium reserves and reserve for rate credits	XXX	4,007,030	15,459,465	7,792,012
4.	Fee-for-service (net of $ ..... medical expenses)	XXX			0
5.	Risk revenue	XXX			0
6.	Aggregate write-ins for other health care related revenues	XXX	0	0	0
7.	Aggregate write-ins for other non-health revenues	XXX	0	0	0
8.	Total revenues (Lines 2 to 7)	XXX	107,812,983	94,186,248	399,802,903
	Hospital and Medical:				
9.	Hospital/medical benefits		70,500,628	62,682,527	281,681,382
10.	Other professional services		90,611	36	36
11.	Outside referrals		0		0
12.	Emergency room and out-of-area		3,773,008	3,362,475	13,336,359
13.	Prescription drugs		15,384,072	13,146,095	59,757,141
14.	Aggregate write-ins for other hospital and medical	0	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts		799,630	893,248	2,096,014
16.	Subtotal (Lines 9 to 15)	0	90,547,949	80,084,381	356,870,932
	Less:				
17.	Net reinsurance recoveries		697,030	314,006	6,692,520
18.	Total hospital and medical (Lines 16 minus 17)	0	89,850,919	79,770,375	350,178,412
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including $ 1,856,440 cost containment expenses		3,616,058	3,341,534	9,267,031
21.	General administrative expenses		10,701,265	11,035,095	27,424,605
22.	Increase in reserves for life and accident and health contracts (including $ ..... increase in reserves for life only)		0	418,727	(991,875)
23.	Total underwriting deductions (Lines 18 through 22)	0	104,168,242	94,565,731	385,878,173
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	3,644,741	(379,483)	13,924,730
25.	Net investment income earned		889,331	839,447	3,104,796
26.	Net realized capital gains (losses) less capital gains tax of $				
27.	Net investment gains (losses) (Lines 25 plus 26)	0	889,331	839,447	3,104,796
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered $ .....) (amount charged off $ .....)]				
29.	Aggregate write-ins for other income or expenses	0	0	0	0
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	4,534,072	459,964	17,029,526
31.	Federal and foreign income taxes incurred	XXX	1,586,925	160,987	5,960,334
32.	Net income (loss) (Lines 30 minus 31)	XXX	2,947,147	298,977	11,069,192
	DETAILS OF WRITE-INS				
0601.		XXX			
0602.		XXX			
0603.		XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
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.					
1402.					
1403					
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	0	0	0
2901.					
2902.					
2903					
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	0	0	0

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	80,098	14,249	51,146	0	0	0	0	1,884	0	12,819
2. First Quarter	81,629	16,930	51,099					1,878		11,722
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	240,209	46,115	153,374					5,370		35,350
Total Member Ambulatory Encounters for Period:										
7 Physician	99,079	14,135	83,877					1,067		
8. Non-Physician	33,877	4,960	26,797					2,120		
9. Total	132,956	19,095	110,674	0	0	0	0	3,187	0	0
10. Hospital Patient Days Incurred	2,083	612	1,401					70		
11. Number of Inpatient Admissions	591	146	429					16		
12. Health Premiums Written (a)	103,899,144	16,729,442	82,093,938					4,505,705		570,059
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	107,906,174	16,729,442	86,100,968					4,505,705		570,059
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	0									
18. Amount Incurred for Provision of Health Care Services	90,547,950	10,135,866	77,222,177					2,755,079		434,828

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $ 4,505,705