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 September 30, 2022

2022

STATEMENT AS OF SEPTEMBER 30, 2022 OF THE Anthem Health Plans of Maine, Inc.

STATEMENT OF REVENUE AND EXPENSES

			ent Year Date	Prior Year To Date	Prior Year Ended December 31	
		1 Uncovered	2 Total	3 Total	4 Total	
1.	Member Months	XXX		776, 192	1,035,444	
2.	Net premium income (including \$ non-health					
	premium income)	XXX	319,859,719	340,139,725	482,422,575	
3.	Change in unearned premium reserves and reserve for rate credits	XXX	88,814,009	42,816,535	24,794,378	
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			0		
7.	Aggregate write-ins for other non-health revenues					
8.	Total revenues (Lines 2 to 7)	XXX	408,673,728	382,956,260	507,216,953	
	Hospital and Medical:					
9.	Hospital/medical benefits				277, 197, 430	
10.	Other professional services			32,378,638	43,711,634	
11.	Outside referrals			6,635,412	9,644,886	
12.	Emergency room and out-of-area			43,067,395	57,962,169	
13.	Prescription drugs			57,574,259	79,121,991	
14.	Aggregate write-ins for other hospital and medical			0	0	
15.	Incentive pool, withhold adjustments and bonus amounts			, ,	3,959,178 471,597,288	
16.			332,291,000	354,535,641	471,397,288	
17.	Less: Net reinsurance recoveries		400 OUE	14, 136, 661	21 421 075	
18.	Total hospital and medical (Lines 16 minus 17)				450 . 175 . 313	
19.	Non-health claims (net)				450, 175,515	
20.	Claims adjustment expenses, including \$					
20.	containment expenses		9 755 483	10 889 782	13 924 767	
21.	General administrative expenses					
22.	Increase in reserves for life and accident and health contracts			,0,000,010		
	(including \$ increase in reserves for life only)				0	
23.	Total underwriting deductions (Lines 18 through 22)					
24.	Net underwriting gain or (loss) (Lines 8 minus 23)			12,361,520		
25.	Net investment income earned			2,026,623	3,455,509	
26.	Net realized capital gains (losses) less capital gains tax of					
27.	\$			2 026 623	3 455 509	
28.	Net gain or (loss) from agents' or premium balances charged off [(amount		1,000,702	2,020,020	, 100,000	
	recovered \$)					
	(amount charged off \$)]					
29.	Aggregate write-ins for other income or expenses		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)			14,388,143	19,644,425	
31.	Federal and foreign income taxes incurred			3,021,510	4,125,329	
32.	Net income (loss) (Lines 30 minus 31)	XXX	25,167,469	11,366,633	15,519,096	
	DETAILS OF WRITE-INS					
0601.		XXX	-			
0602.		XXX				
0603.	ſ.	XXX				
0698.		XXX		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		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	
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	
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0	

STATEMENT AS OF SEPTEMBER 30, 2022 OF THE Anthem Health Plans of Maine, Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	DIT OF PREMION	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	ıal Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	86,252	26,151	51,110	0	0	0	0	0	0	8,991
2. First Quarter	78,483	26,120	51,687	0	0	0	0	0	0	676
3. Second Quarter	77,604	25,075	51,859	0	0	0	0	0	0	670
4. Third Quarter	76,242	24,243	51,225							774
5. Current Year	0									
6. Current Year Member Months	700,881	228,840	465,153							6,888
Total Member Ambulatory Encounters for Period:										
7 Physician	338,765	95,794	242,971							
8. Non-Physician	268,339	69,629	198,710							
9. Total	607,104	165,423	441,681	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	12,127	4,162	7,965							
11. Number of Inpatient Admissions	2,539	772	1,767							
12. Health Premiums Written (a)	321,337,939	99,923,285	220,592,714							821,940
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	410,151,948	107,292,445	302,037,563							821,940
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	352,291,060	77,227,616	274,047,100					263,771		752,573

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