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
June 30, 2014

2014

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	432,850	423,956	840,638
2. Net premium income (including $ ..... non-health premium income)	XXX	163,737,528	165,966,179	339,989,760
3. Change in unearned premium reserves and reserve for rate credits	XXX	2,913,239	(10,091,685)	(27,082,359)
4. Fee-for-service (net of $ ..... medical expenses)	XXX			
5. Risk revenue	XXX			
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	166,650,767	155,874,494	312,907,401
Hospital and Medical:				
9. Hospital/medical benefits		116,386,159	112,898,219	224,909,894
10. Other professional services		571	329	1,612
11. Outside referrals				
12. Emergency room and out-of-area		6,724,669	6,778,718	13,013,376
13. Prescription drugs		27,123,214	21,117,969	43,091,833
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		975,862	5,084	551,564
16. Subtotal (Lines 9 to 15)	0	151,210,475	140,800,319	281,568,279
Less:				
17. Net reinsurance recoveries		1,789,693		
18. Total hospital and medical (Lines 16 minus 17)	0	149,420,782	140,800,319	281,568,279
19. Non-health claims (net)				
20. Claims adjustment expenses, including $ 2,897,833 cost containment expenses		5,067,897	3,430,276	5,997,902
21. General administrative expenses		10,923,218	6,643,679	12,927,727
22. Increase in reserves for life and accident and health contracts (including $ ..... increase in reserves for life only)		107,116		0
23. Total underwriting deductions (Lines 18 through 22)	0	165,519,013	150,874,274	300,493,908
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	1,131,754	5,000,220	12,413,493
25. Net investment income earned		920,963	1,619,739	1,974,113
26. Net realized capital gains (losses) less capital gains tax of $				
27. Net investment gains (losses) (Lines 25 plus 26)	0	920,963	1,619,739	1,974,113
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	2,052,717	6,619,959	14,387,606
31. Federal and foreign income taxes incurred	XXX	718,451	2,316,986	5,035,662
32. Net income (loss) (Lines 30 minus 31)	XXX	1,334,266	4,302,973	9,351,944
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	69,425	12	54,166	0	0	0	0	0	0	15,247
2. First Quarter	71,374	4,331	52,989	0	0	0	0	89	0	13,965
3. Second Quarter	74,130	7,499	52,676					118		13,837
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	432,850	30,528	317,784					575		83,963
Total Member Ambulatory Encounters for Period:										
7 Physician	297,639	1,307	295,867					465		
8. Non-Physician	133,520	860	132,427					233		
9. Total	431,159	2,167	428,294	0	0	0	0	698	0	0
10. Hospital Patient Days Incurred	6,248	154	6,051					43		
11. Number of Inpatient Admissions	1,574	49	1,521					4		
12. Health Premiums Written (a)	163,889,814	12,606,658	149,698,236					333,425		1,251,495
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	166,803,053	12,566,308	152,651,825					333,425		1,251,495
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	151,210,475	12,294,297	137,430,151					336,976		1,149,051

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $ 333,425