



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE
Anthem Health Plans of Maine, Inc.

NAIC Group Code 0671 0671 NAIC Company Code 52618 Employer's ID Number 31-1705652
(Current) (Prior)

Organized under the Laws of Maine, State of Domicile or Port of Entry ME

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 03/10/2000 Commenced Business 06/05/2000

Statutory Home Office 2 Gannett Drive, South Portland, ME, US 04106-6911
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 2 Gannett Drive
(Street and Number)
South Portland, ME, US 04106-6911 866-583-6182
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 2 Gannett Drive, South Portland, ME, US 04106-6911
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 220 Virginia Avenue
(Street and Number)
Indianapolis, IN, US 46204, 800-331-1476
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.elevancehealth.com

Statutory Statement Contact Leigh Barrett, 317-432-6988
(Name) (Area Code) (Telephone Number)
leigh.barrett@elevancehealth.com, 317-488-6200
(E-mail Address) (FAX Number)

OFFICERS

President and Chairperson Denise Finn McDonough Treasurer Vincent Edward Scher
Secretary Kathleen Susan Kiefer Assistant Treasurer Eric Kenneth Noble

OTHER

Kara Dowal #, Assistant Secretary

DIRECTORS OR TRUSTEES

Denise Finn McDonough Patrick James O'Keeffe # Kathleen Susan Kiefer
Ronald William Penczek Vincent Edward Scher David Mark Jaffe
Scott Wayne Anglin

State of Indiana SS
County of Marion

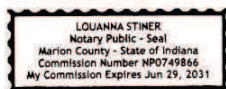
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any 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 s

DocuSigned by: Denise Finn McDonough Signed by: Kathleen Susan Kiefer Signed by: Vincent E. Scher
1FA874CC68104C8... Denise Finn McDonough D85175EE05784B1... Kathleen Susan Kiefer A85A33722D4143E... Vincent Edward Scher
President Secretary Treasurer

Subscribed and sworn to before me this 6th day of February 2026
[Signature]

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

Louanna Stiner
Executive Admin Assistant
06/29/31



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	95,453,269		95,453,269	85,110,581
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$0 encumbrances)	9,541		9,541	9,541
4.2 Properties held for the production of income (less \$0 encumbrances)			0	0
4.3 Properties held for sale (less \$0 encumbrances)			0	0
5. Cash (\$(33,083,806) , Schedule E - Part 1), cash equivalents (\$135,511,894 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	102,428,088		102,428,088	29,955,254
6. Contract loans, (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivables for securities	299,468		299,468	0
10. Securities lending reinvested collateral assets (Schedule DL)	9,216,237		9,216,237	1,700,168
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	207,406,603	0	207,406,603	116,775,544
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	924,554		924,554	389,599
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	16,363,767	960,388	15,403,379	25,568,911
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ 53,497,937 earned but unbilled premiums)	53,497,937		53,497,937	51,753,597
15.3 Accrued retrospective premiums (\$ 746,051) and contracts subject to redetermination (\$ 1,375,229)	2,121,280		2,121,280	1,461,431
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	507		507	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans	94,619,019	14,121,956	80,497,063	66,552,658
18.1 Current federal and foreign income tax recoverable and interest thereon	4,011,610		4,011,610	0
18.2 Net deferred tax asset			0	254,155
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)	590,745	590,745	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	89,322,296		89,322,296	112,986,920
24. Health care (\$ 40,627,534) and other amounts receivable	56,186,939	15,559,405	40,627,534	38,301,309
25. Aggregate write-ins for other-than-invested assets	28,966,331	704,220	28,262,111	19,463,840
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	554,011,588	31,936,714	522,074,874	433,507,964
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	554,011,588	31,936,714	522,074,874	433,507,964
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Federal Employee Program assets held by agent	23,989,526		23,989,526	16,115,258
2502. State income tax receivable	4,025,909		4,025,909	3,095,343
2503. DOI fees recoverable	162,608		162,608	153,392
2598. Summary of remaining write-ins for Line 25 from overflow page	788,288	704,220	84,068	99,847
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	28,966,331	704,220	28,262,111	19,463,840

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 11,902 reinsurance ceded)	167,709,637		167,709,637	148,873,754
2. Accrued medical incentive pool and bonus amounts	1,578,001		1,578,001	1,630,301
3. Unpaid claims adjustment expenses.....	4,509,580		4,509,580	4,040,111
4. Aggregate health policy reserves, including the liability of \$ 400,000 for medical loss ratio rebate per the Public Health Service Act	58,466,969		58,466,969	31,382,128
5. Aggregate life policy reserves.....			0	0
6. Property/casualty unearned premium reserves.....			0	0
7. Aggregate health claim reserves.....			0	0
8. Premiums received in advance.....	34,678,574		34,678,574	31,068,118
9. General expenses due or accrued.....	11,948,285		11,948,285	24,302,286
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses))			0	4,193,316
10.2 Net deferred tax liability.....	6,514,515		6,514,515	0
11. Ceded reinsurance premiums payable.....	9,946		9,946	7,660
12. Amounts withheld or retained for the account of others.....	5,923,842		5,923,842	4,516,194
13. Remittances and items not allocated.....	2,405,242		2,405,242	16,770,609
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current).....			0	0
15. Amounts due to parent, subsidiaries and affiliates.....			0	0
16. Derivatives.....			0	0
17. Payable for securities.....	298,777		298,777	0
18. Payable for securities lending	9,216,237		9,216,237	1,700,168
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans.....	33,329,515		33,329,515	20,311,455
23. Aggregate write-ins for other liabilities (including \$ 3,942,258 current).....	6,176,718	0	6,176,718	3,789,416
24. Total liabilities (Lines 1 to 23).....	342,765,838	0	342,765,838	292,585,516
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	2,037,192	3,326,027
26. Common capital stock.....	XXX	XXX	2,500,000	2,500,000
27. Preferred capital stock.....	XXX	XXX		0
28. Gross paid in and contributed surplus.....	XXX	XXX	120,652,900	120,652,900
29. Surplus notes.....	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	54,118,944	14,443,521
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$).....	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	179,309,036	140,922,448
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	522,074,874	433,507,964
DETAILS OF WRITE-INS				
2301. Other liabilities	2,700,137		2,700,137	733,750
2302. Other premium liability	2,106,471		2,106,471	1,764,323
2303. Escheat liability	1,370,110		1,370,110	1,291,343
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	6,176,718	0	6,176,718	3,789,416
2501. Deferred gain on sale-leaseback transaction	XXX	XXX	2,037,192	3,326,027
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	2,037,192	3,326,027
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member months.....	XXX	4,144,703	4,036,860
2. Net premium income (including \$ non-health premium income)	XXX	1,526,725,160	1,367,203,432
3. Change in unearned premium reserves and reserve for rate credits	XXX	(22,785,368)	70,708,301
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
7. Aggregate write-ins for other non-health revenues	XXX	0	0
8. Total revenues (Lines 2 to 7)	XXX	1,503,939,792	1,437,911,733
Hospital and Medical:			
9. Hospital/medical benefits	44,395,286	893,101,180	844,690,920
10. Other professional services	4,985,158	94,620,635	83,577,283
11. Outside referrals		16,839,954	12,795,923
12. Emergency room and out-of-area	2,975,829	122,394,238	97,288,959
13. Prescription drugs	2,844,431	238,751,894	228,947,403
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		7,939,424	7,070,694
16. Subtotal (Lines 9 to 15)	55,200,704	1,373,647,325	1,274,371,182
Less:			
17. Net reinsurance recoveries		6,656	(4,683)
18. Total hospital and medical (Lines 16 minus 17)	55,200,704	1,373,640,669	1,274,375,865
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$ 19,522,382 cost containment expenses		34,643,844	33,194,420
21. General administrative expenses		81,343,735	80,709,034
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		0	0
23. Total underwriting deductions (Lines 18 through 22).....	55,200,704	1,489,628,248	1,388,279,319
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	14,311,544	49,632,414
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		8,616,168	11,364,043
26. Net realized capital gains (losses) less capital gains tax of \$		1,873,076	(9,388,899)
27. Net investment gains (losses) (Lines 25 plus 26)	0	10,489,244	1,975,144
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ 509,000)]		(509,000)	(361,756)
29. Aggregate write-ins for other income or expenses	0	6,679,639	1,899,701
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	30,971,427	53,145,503
31. Federal and foreign income taxes incurred	XXX	2,556,299	16,133,566
32. Net income (loss) (Lines 30 minus 31)	XXX	28,415,128	37,011,937
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
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	XXX		
0702.	XXX		
0703.	XXX		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0
2901. Regulatory fine		4,874,898	0
2902. FEP interest income		1,572,108	1,585,090
2903. Other income		232,633	314,611
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	6,679,639	1,899,701

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	140,922,448	134,858,090
34. Net income or (loss) from Line 32	28,415,128	37,011,937
35. Change in valuation basis of aggregate policy and claim reserves		
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 20,049	75,422	(184,037)
37. Change in net unrealized foreign exchange capital gain or (loss)		
38. Change in net deferred income tax	(6,768,938)	3,546,190
39. Change in nonadmitted assets	17,953,811	779,103
40. Change in unauthorized and certified reinsurance	0	0
41. Change in treasury stock	0	0
42. Change in surplus notes	0	0
43. Cumulative effect of changes in accounting principles.....		
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (stock dividend).....	0	0
44.3 Transferred to surplus.....		
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (stock dividend)		
45.3 Transferred from capital		
46. Dividends to stockholders		(33,800,000)
47. Aggregate write-ins for gains or (losses) in surplus	(1,288,835)	(1,288,835)
48. Net change in capital and surplus (Lines 34 to 47)	38,386,588	6,064,358
49. Capital and surplus end of reporting period (Line 33 plus 48)	179,309,036	140,922,448
DETAILS OF WRITE-INS		
4701. Deferred gain on sale-leaseback transaction	(1,288,835)	(1,288,835)
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	(1,288,835)	(1,288,835)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	1,534,277,007	1,398,736,975
2. Net investment income	8,390,675	11,855,069
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	1,542,667,682	1,410,592,044
5. Benefit and loss related payments	1,354,857,593	1,267,748,474
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	113,945,507	127,798,152
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	10,761,225	(6,866,535)
10. Total (Lines 5 through 9)	1,479,564,325	1,388,680,091
11. Net cash from operations (Line 4 minus Line 10)	63,103,357	21,911,953
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	44,110,272	250,876,079
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	75	0
12.7 Miscellaneous proceeds	298,777	8,741,798
12.8 Total investment proceeds (Lines 12.1 to 12.7)	44,409,124	259,617,877
13. Cost of investments acquired (long-term only exclude cash equivalents and short-term investments):		
13.1 Bonds	54,097,018	50,173,431
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	7,815,537	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	61,912,554	50,173,431
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(17,503,431)	209,444,446
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	33,800,000
16.6 Other cash provided (applied)	26,872,908	(167,541,306)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	26,872,908	(201,341,306)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	72,472,834	30,015,092
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	29,955,254	(59,839)
19.2 End of year (Line 18 plus Line 19.1)	102,428,088	29,955,254

Note: Supplemental disclosures of cash flow information for non-cash transactions:

--	--	--

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Net premium income	1,526,725,160	277,805,209	848,170,415	57,949,291	5,491,672	8,542,560	306,690,610	(573,339)					22,648,742	
2. Change in unearned premium reserves and reserve for rate credit	(22,785,368)	1,815	(14,914,131)		2,043	7,913	(7,874,267)	2,169					(10,910)	
3. Fee-for-service (net of \$ medical expenses)	0													XXX
4. Risk revenue	0													XXX
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6. Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6)	1,503,939,792	277,807,024	833,256,284	57,949,291	5,493,715	8,550,473	298,816,343	(571,170)	0	0	0	0	22,637,832	0
8. Hospital/medical benefits	893,101,180	168,596,219	479,893,399	46,501,348			180,275,796	(10,722)					17,845,140	XXX
9. Other professional services	94,620,635	12,804,775	48,241,246	8,506,344	3,757,594	2,222,650	19,088,026							XXX
10. Outside referrals	16,839,954	4,268,259	6,166,459		156,566	4,127,778	2,120,892							XXX
11. Emergency room and out-of-area	122,394,238	27,743,681	82,344,829	1,701,269			10,604,459							XXX
12. Prescription drugs	238,751,894	45,777,970	131,332,886	(1,749,703)			65,079,685	(12,896)					(1,676,048)	XXX
13. Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts	7,939,424	2,123,217	5,055,407	26			1,274,094	(513,320)						XXX
15. Subtotal (Lines 8 to 14)	1,373,647,325	261,314,121	753,034,226	54,959,284	3,914,160	6,350,428	278,442,952	(536,938)	0	0	0	0	16,169,092	XXX
16. Net reinsurance recoveries	6,656												6,656	XXX
17. Total medical and hospital (Lines 15 minus 16)	1,373,640,669	261,314,121	753,034,226	54,959,284	3,914,160	6,350,428	278,442,952	(536,938)	0	0	0	0	16,162,436	XXX
18. Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ 19,522,387 cost containment expenses	34,643,844	8,894,285	16,794,480	2,708,105	210,469	478,320	5,706,059	5,182					(153,056)	
20. General administrative expenses	81,343,735	21,763,587	41,094,724	6,626,514	515,002	1,170,410	13,962,261	12,681					(3,801,444)	
21. Increase in reserves for accident and health contracts	0													XXX
22. Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Lines 17 to 22)	1,489,628,248	291,971,993	810,923,430	64,293,903	4,639,631	7,999,158	298,111,272	(519,075)	0	0	0	0	12,207,936	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	14,311,544	(14,164,969)	22,332,854	(6,344,612)	854,084	551,315	705,071	(52,095)	0	0	0	0	10,429,896	0
DETAILS OF WRITE-INS														
0501.														XXX
0502.														XXX
0503.														XXX
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.														XXX
1302.														XXX
1303.														XXX
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
1399. Totals (Lines 1301 through 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

Line of Business	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Ceded	4 Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual	277,805,209			277,805,209
2. Comprehensive (hospital and medical) group	848,170,415			848,170,415
3. Medicare supplement	57,949,291			57,949,291
4. Vision only	5,491,672			5,491,672
5. Dental only	8,542,560			8,542,560
6. Federal employees health benefits plan	306,690,610			306,690,610
7. Title XVIII - Medicare	(573,339)			(573,339)
8. Title XIX - Medicaid	0			0
9. Credit A&H				0
10. Disability income				0
11. Long-term care				0
12. Other health	22,660,168		11,426	22,648,742
13. Health subtotal (Lines 1 through 12)	1,526,736,586	0	11,426	1,526,725,160
14. Life	0			0
15. Property/casualty	0			0
16. Totals (Lines 13 to 15)	1,526,736,586	0	11,426	1,526,725,160

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Payments during the year:														
1.1 Direct	1,343,948,287	249,902,598	739,705,807	51,349,720	3,902,869	6,391,539	276,773,314	(34,761)					15,957,201	
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	543												543	
1.4 Net	1,343,947,744	249,902,598	739,705,807	51,349,720	3,902,869	6,391,539	276,773,314	(34,761)	0	0	0	0	15,956,658	0
2. Paid medical incentive pools and bonuses	7,991,726	2,039,018	5,180,661	6			1,276,685	(513,320)					8,676	
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	167,721,539	30,471,038	72,378,784	8,111,738	258,547	526,894	51,135,336	0	0	0	0	0	4,839,202	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	11,902	0	0	0	0	0	0	0	0	0	0	0	11,902	0
3.4 Net	167,709,637	30,471,038	72,378,784	8,111,738	258,547	526,894	51,135,336	0	0	0	0	0	4,827,300	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	0													
4.2 Reinsurance assumed	0													
4.3 Reinsurance ceded	0													
4.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	1,578,001	454,092	924,240	25			191,914						7,730	
6. Net health care receivables (a)	(2,918,124)	922,837	(2,088,441)	(1,994,520)	(65)	(601)	250,214	(11,144)					3,596	
7. Amounts recoverable from reinsurers December 31, current year	507												507	
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	148,880,050	20,259,895	66,194,214	6,496,720	247,321	568,605	50,489,579	0	0	0	0	0	4,623,716	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	6,296	0	0	0	0	0	0	0	0	0	0	0	6,296	0
8.4 Net	148,873,754	20,259,895	66,194,214	6,496,720	247,321	568,605	50,489,579	0	0	0	0	0	4,617,420	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	0													
9.2 Reinsurance assumed	0													
9.3 Reinsurance ceded	0													
9.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	1,630,301	369,891	1,049,493	6			194,505						16,406	
11. Amounts recoverable from reinsurers December 31, prior year	0													
12. Incurred Benefits:														
12.1 Direct	1,365,707,900	259,190,904	747,978,818	54,959,258	3,914,160	6,350,429	277,168,857	(23,617)	0	0	0	0	16,169,091	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	6,656	0	0	0	0	0	0	0	0	0	0	0	6,656	0
12.4 Net	1,365,701,244	259,190,904	747,978,818	54,959,258	3,914,160	6,350,429	277,168,857	(23,617)	0	0	0	0	16,162,435	0
13. Incurred medical incentive pools and bonuses	7,939,426	2,123,219	5,055,408	25	0	0	1,274,094	(513,320)	0	0	0	0	0	0

(a) Excludes \$ 40,602,354 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health	14 Other Non-Health
		2 Individual	3 Group											
1. Reported in Process of Adjustment:														
1.1 Direct	39,264,366	7,098,116	20,301,734	2,324,364	32,437	263,290	9,244,373	0	0	0	0	0	52	0
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	144												144	
1.4 Net	39,264,222	7,098,116	20,301,734	2,324,364	32,437	263,290	9,244,373	0	0	0	0	0	(92)	0
2. Incurred but Unreported:														
2.1 Direct	128,457,173	23,372,922	52,077,050	5,787,374	226,110	263,604	41,890,963	0	0	0	0	0	4,839,150	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	11,758	0	0	0	0	0	0	0	0	0	0	0	11,758	0
2.4 Net	128,445,415	23,372,922	52,077,050	5,787,374	226,110	263,604	41,890,963	0	0	0	0	0	4,827,392	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0							0	0	0	0	0		
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	167,721,539	30,471,038	72,378,784	8,111,738	258,547	526,894	51,135,336	0	0	0	0	0	4,839,202	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	11,902	0	0	0	0	0	0	0	0	0	0	0	11,902	0
4.4 Net	167,709,637	30,471,038	72,378,784	8,111,738	258,547	526,894	51,135,336	0	0	0	0	0	4,827,300	0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5 Claims Incurred In Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	12,973,159	236,929,440	4,530,091	25,940,947	17,503,250	20,259,895
2. Comprehensive (hospital and medical) group	31,886,193	707,819,613	10,316,985	62,061,799	42,203,178	66,194,215
3. Medicare supplement	2,383,980	48,965,740	2,203,883	5,907,855	4,587,863	6,496,720
4. Vision only	167,565	3,735,304	1,191	257,356	168,756	247,321
5. Dental only	545,286	5,846,253	18,794	508,099	564,080	568,606
6. Federal employees health benefits plan	34,883,889	241,889,425	2,058,684	49,076,652	36,942,573	50,489,579
7. Title XVIII - Medicare	(29,451)	(5,310)	0	0	(29,451)	0
8. Title XIX - Medicaid	0	0	0	0	0	0
9. Credit A&H	0	0	0	0	0	0
10. Disability income	0	0	0	0	0	0
11. Long-term care	0	0	0	0	0	0
12. Other health	2,626,760	13,329,391	182,528	4,644,773	2,809,288	4,617,418
13. Health subtotal (Lines 1 to 12)	85,437,381	1,258,509,856	19,312,156	148,397,481	104,749,537	148,873,754
14. Health care receivables (a)	1,844,652	13,739,933	0	0	1,844,652	18,502,710
15. Other non-health	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts	1,378,626	6,613,098	441,544	1,136,457	1,820,170	1,630,301
17. Totals (Lines 13 - 14 + 15 + 16)	84,971,355	1,251,383,021	19,753,700	149,533,938	104,725,055	132,001,345

(a) Excludes \$ 40,602,354 loans or advances to providers not yet expensed.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	74,437	78,153	77,491	74,136	74,136
2. 2021	609,140	710,466	713,052	712,188	711,613
3. 2022	XXX	649,216	734,452	733,559	734,720
4. 2023	XXX	XXX	708,780	759,150	761,469
5. 2024	XXX	XXX	XXX	843,272	885,782
6. 2025	XXX	XXX	XXX	XXX	936,874

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	79,772	80,768	78,757	77,355	74,136
2. 2021	730,308	716,641	714,868	713,220	715,766
3. 2022	XXX	765,610	739,192	735,820	735,238
4. 2023	XXX	XXX	790,098	763,566	762,614
5. 2024	XXX	XXX	XXX	920,216	895,203
6. 2025	XXX	XXX	XXX	XXX	1,025,865

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	824,542	711,613	30,946	4.3	742,559	90.1	4,153	107	746,819	90.6
2. 2022	866,646	734,720	27,262	3.7	761,982	87.9	518	13	762,513	88.0
3. 2023	889,943	761,469	23,993	3.2	785,462	88.3	1,145	29	786,636	88.4
4. 2024	1,026,095	885,782	24,254	2.7	910,036	88.7	9,421	294	919,751	89.6
5. 2025	1,111,063	936,874	22,251	2.4	959,125	86.3	88,991	2,530	1,050,646	94.6

12.HM

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Medicare Supplement

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	7,081	7,041	7,355	6,687	6,687
2. 2021	41,886	47,039	47,087	46,887	47,063
3. 2022	XXX	42,141	47,533	47,240	47,473
4. 2023	XXX	XXX	41,093	48,974	49,379
5. 2024	XXX	XXX	XXX	43,954	45,527
6. 2025	XXX	XXX	XXX	XXX	48,530

Section B - Incurred Health Claims - Medicare Supplement

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	8,039	7,042	7,354	7,351	6,687
2. 2021	46,679	47,045	47,093	47,090	47,730
3. 2022	XXX	48,237	47,563	47,553	47,551
4. 2023	XXX	XXX	50,339	49,217	49,551
5. 2024	XXX	XXX	XXX	49,028	46,813
6. 2025	XXX	XXX	XXX	XXX	54,438

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	58,747	47,063	3,812	8.1	50,875	86.6	667	15	51,557	87.8
2. 2022	58,566	47,473	3,646	7.7	51,119	87.3	78	2	51,199	87.4
3. 2023	55,692	49,379	3,063	6.2	52,442	94.2	172	4	52,618	94.5
4. 2024	57,688	45,527	2,702	5.9	48,229	83.6	1,286	29	49,544	85.9
5. 2025	57,949	48,530	2,358	4.9	50,888	87.8	5,908	135	56,931	98.2

12.MS

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
 (\$000 Omitted)

Section A - Paid Health Claims - Dental Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	510	520	520	520	520
2. 2021	7,015	7,455	7,470	7,474	7,474
3. 2022	XXX	7,217	7,628	7,640	7,643
4. 2023	XXX	XXX	7,333	7,749	7,766
5. 2024	XXX	XXX	XXX	6,477	7,001
6. 2025	XXX	XXX	XXX	XXX	5,846

Section B - Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	527	522	520	520	520
2. 2021	7,653	7,474	7,470	7,474	7,474
3. 2022	XXX	7,789	7,628	7,641	7,643
4. 2023	XXX	XXX	7,589	7,763	7,767
5. 2024	XXX	XXX	XXX	7,030	7,019
6. 2025	XXX	XXX	XXX	XXX	6,354

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	10,863	7,474	739	9.9	8,213	75.6	0	0	8,213	75.6
2. 2022	10,764	7,643	740	9.7	8,383	77.9	0	0	8,383	77.9
3. 2023	10,661	7,766	644	8.3	8,410	78.9	1	0	8,411	78.9
4. 2024	9,253	7,001	517	7.4	7,518	81.2	18	0	7,536	81.4
5. 2025	8,550	5,846	415	7.1	6,261	73.2	508	10	6,779	79.3

12.D0

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Vision Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	246	240	240	240	240
2. 2021	5,446	5,720	5,720	5,720	5,720
3. 2022	XXX	5,121	5,386	5,386	5,386
4. 2023	XXX	XXX	3,782	3,959	3,959
5. 2024	XXX	XXX	XXX	3,647	3,815
6. 2025	XXX	XXX	XXX	XXX	3,735

Section B - Incurred Health Claims - Vision Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	246	240	240	240	240
2. 2021	5,885	5,720	5,722	5,720	5,720
3. 2022	XXX	5,526	5,407	5,386	5,386
4. 2023	XXX	XXX	4,363	3,959	3,959
5. 2024	XXX	XXX	XXX	3,894	3,816
6. 2025	XXX	XXX	XXX	XXX	3,992

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	8,078	5,720	510	8.9	6,230	77.1	0	0	6,230	77.1
2. 2022	8,089	5,386	400	7.4	5,786	71.5	0	0	5,786	71.5
3. 2023	5,727	3,959	262	6.6	4,221	73.7	0	0	4,221	73.7
4. 2024	5,306	3,815	215	5.6	4,030	76.0	2	0	4,032	76.0
5. 2025	5,494	3,735	186	5.0	3,921	71.4	257	7	4,185	76.2

12 VO

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	22,526	22,580	23,480	23,966	23,966
2.	2021	193,087	230,597	231,073	231,409	231,379
3.	2022	XXX	197,925	231,525	231,920	231,950
4.	2023	XXX	XXX	226,606	263,901	265,667
5.	2024	XXX	XXX	XXX	255,228	287,872
6.	2025	XXX	XXX	XXX	XXX	242,982

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	23,230	22,601	23,521	23,969	23,966
2.	2021	235,025	231,051	231,518	231,430	231,379
3.	2022	XXX	235,125	232,706	232,262	231,950
4.	2023	XXX	XXX	263,321	264,973	265,792
5.	2024	XXX	XXX	XXX	304,474	289,856
6.	2025	XXX	XXX	XXX	XXX	292,199

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	249,576	231,379	5,505	2.4	236,884	94.9	0	0	236,884	94.9
2. 2022	247,801	231,950	5,264	2.3	237,214	95.7	0	0	237,214	95.7
3. 2023	280,264	265,667	5,263	2.0	270,930	96.7	126	3	271,059	96.7
4. 2024	327,218	287,872	5,102	1.8	292,974	89.5	1,984	46	295,004	90.2
5. 2025	298,816	242,982	4,877	2.0	247,859	82.9	49,217	1,167	298,243	99.8

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	933	795	771	853	853
2. 2021	266	267	(676)	(676)	(1,213)
3. 2022	XXX	0	8	8	8
4. 2023	XXX	XXX	(2)	926	926
5. 2024	XXX	XXX	XXX	0	(6)
6. 2025	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Title XVIII

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	930	800	771	853	853
2. 2021	280	267	(676)	(676)	(1,213)
3. 2022	XXX	0	8	8	8
4. 2023	XXX	XXX	(2)	926	926
5. 2024	XXX	XXX	XXX	0	(6)
6. 2025	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	(34)	(1,213)	22	(1.8)	(1,191)	3,502.9			(1,191)	3,502.9
2. 2022	(86)	8	(25)	(312.5)	(17)	19.8			(17)	19.8
3. 2023	12	926	20	2.2	946	7,883.3			946	7,883.3
4. 2024	16	(6)	8	(133.3)	2	12.5			2	12.5
5. 2025	(571)	0	3	0.0	3	(0.5)			3	(0.5)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Other

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	1,145	1,722	1,722	1,647	1,647
2. 2021	9,023	11,287	11,595	11,638	11,561
3. 2022	XXX	7,139	7,757	8,743	8,756
4. 2023	XXX	XXX	6,238	7,584	8,272
5. 2024	XXX	XXX	XXX	7,064	9,031
6. 2025	XXX	XXX	XXX	XXX	13,416

Section B - Incurred Health Claims - Other

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2021	2 2022	3 2023	4 2024	5 2025
1. Prior	1,261	1,989	1,722	1,647	1,647
2. 2021	11,011	11,471	12,834	11,638	11,561
3. 2022	XXX	8,844	8,590	9,363	8,756
4. 2023	XXX	XXX	10,377	8,280	8,282
5. 2024	XXX	XXX	XXX	10,382	9,203
6. 2025	XXX	XXX	XXX	XXX	18,068

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2021	14,653	11,561	161	1.4	11,722	80.0	0	(1)	11,721	80.0
2. 2022	10,234	8,756	(282)	(3.2)	8,474	82.8	0	0	8,474	82.8
3. 2023	7,578	8,272	(445)	(5.4)	7,827	103.3	11	5	7,843	103.5
4. 2024	12,336	9,031	(93)	(1.0)	8,938	72.5	172	15	9,125	74.0
5. 2025	22,638	13,416	(140)	(1.0)	13,276	58.6	4,652	100	18,028	79.6

12.0T

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	106,878	111,051	111,579	108,049	108,049
2.	2021	865,863	1,012,831	1,015,321	1,014,640	1,013,597
3.	2022	XXX	908,759	1,034,289	1,034,496	1,035,936
4.	2023	XXX	XXX	993,830	1,092,243	1,097,438
5.	2024	XXX	XXX	XXX	1,159,642	1,239,022
6.	2025	XXX	XXX	XXX	XXX	1,251,383

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2021	2 2022	3 2023	4 2024	5 2025
1.	Prior	114,005	113,962	112,885	111,935	108,049
2.	2021	1,036,841	1,019,669	1,018,829	1,015,896	1,018,417
3.	2022	XXX	1,071,131	1,041,094	1,038,033	1,036,532
4.	2023	XXX	XXX	1,126,085	1,098,684	1,098,891
5.	2024	XXX	XXX	XXX	1,295,024	1,251,904
6.	2025	XXX	XXX	XXX	XXX	1,400,916

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1. 2021	1,166,425	1,013,597	41,695	4.1	1,055,292	90.5	4,820	121	1,060,233	90.9
2. 2022	1,202,014	1,035,936	37,005	3.6	1,072,941	89.3	596	15	1,073,552	89.3
3. 2023	1,249,877	1,097,438	32,800	3.0	1,130,238	90.4	1,455	41	1,131,734	90.5
4. 2024	1,437,912	1,239,022	32,705	2.6	1,271,727	88.4	12,883	384	1,284,994	89.4
5. 2025	1,503,939	1,251,383	29,950	2.4	1,281,333	85.2	149,533	3,949	1,434,815	95.4

12.GT

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other
		2 Individual	3 Group										
1. Unearned premium reserves	3,310	326	(284)	780	(2,047)	(6,375)							10,910
2. Additional policy reserves (a)	0												
3. Reserve for future contingent benefits	0												
4. Reserve for rate credits or experience rating refunds (including \$ for investment income) ..	43,565,364	400,000	19,175,839				23,989,525						
5. Aggregate write-ins for other policy reserves	14,898,295	6,649,906	8,248,389	0	0	0	0	0	0	0	0	0	0
6. Totals (gross)	58,466,969	7,050,232	27,423,944	780	(2,047)	(6,375)	23,989,525	0	0	0	0	0	10,910
7. Reinsurance ceded	0												
8. Totals (Net)(Page 3, Line 4)	58,466,969	7,050,232	27,423,944	780	(2,047)	(6,375)	23,989,525	0	0	0	0	0	10,910
9. Present value of amounts not yet due on claims	0												
10. Reserve for future contingent benefits	0												
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals (gross)	0	0	0	0	0	0	0	0	0	0	0	0	0
13. Reinsurance ceded	0												
14. Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS													
0501. Risk Adjustment Redetermination	14,898,295	6,649,906	8,248,389										
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	14,898,295	6,649,906	8,248,389	0	0	0	0	0	0	0	0	0	0
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Includes \$ premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3 General Administrative Expenses	4 Investment Expenses	5 Total
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
1. Rent (\$ for occupancy of own building)	178,620	292,404	(134,165)		336,859
2. Salary, wages and other benefits	9,864,255	8,283,471	36,219,185		54,366,911
3. Commissions (less \$ ceded plus \$ assumed)	0		16,550,872		16,550,872
4. Legal fees and expenses	4,146	143,163	583,402		730,711
5. Certifications and accreditation fees	0		0		0
6. Auditing, actuarial and other consulting services ...	727,741	291,674	5,254,582		6,273,997
7. Traveling expenses	15,542	11,638	192,168		219,348
8. Marketing and advertising	59,307	12,748	1,336,613		1,408,668
9. Postage, express and telephone	125,078	130,333	2,074,850		2,330,261
10. Printing and office supplies	39,921	1,129	125,344		166,394
11. Occupancy, depreciation and amortization	0		0		0
12. Equipment	37	188	120,982		121,207
13. Cost or depreciation of EDP equipment and software	616,685	233,120	7,580,557		8,430,362
14. Outsourced services including EDP, claims, and other services	6,947,806	1,511,012	6,326,509		14,785,327
15. Boards, bureaus and association fees	3,595	229	291,678		295,502
16. Insurance, except on real estate	0		243,364		243,364
17. Collection and bank service charges	70		1,379,522		1,379,592
18. Group service and administration fees	0	1,113,287	9,716,246		10,829,533
19. Reimbursements by uninsured plans	0		(36,024,894)		(36,024,894)
20. Reimbursements from fiscal intermediaries	0		0		0
21. Real estate expenses	24	1	599,760		599,785
22. Real estate taxes	0		32,785		32,785
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes	(237,470)	(127,601)	8,864,770		8,499,699
23.2 State premium taxes	0		9,693,284		9,693,284
23.3 Regulatory authority licenses and fees	7,129	767	88,522		96,418
23.4 Payroll taxes	815,168	621,217	1,766,464		3,202,849
23.5 Other (excluding federal income and real estate taxes)	0		8,331,080		8,331,080
24. Investment expenses not included elsewhere	0		0	239,565	239,565
25. Aggregate write-ins for expenses	354,728	2,602,682	130,255	0	3,087,665
26. Total expenses incurred (Lines 1 to 25)	19,522,382	15,121,462	81,343,735	239,565	(a) 116,227,144
27. Less expenses unpaid December 31, current year		4,509,580	11,948,285		16,457,865
28. Add expenses unpaid December 31, prior year	0	4,040,111	24,302,286		28,342,397
29. Amounts receivable relating to uninsured plans, prior year	0	0	89,340,816		89,340,816
30. Amounts receivable relating to uninsured plans, current year	0	0	94,619,019		94,619,019
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	19,522,382	14,651,993	98,975,939	239,565	133,389,879
DETAILS OF WRITE-INS					
2501. Miscellaneous expenses	354,728	2,602,682	130,255		3,087,665
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	354,728	2,602,682	130,255	0	3,087,665

(a) Includes management fees of \$ 93,255,452 to affiliates and \$ to non-affiliates.

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds	(a) (1,684)	16,258
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a) 3,867,221	4,127,154
1.3 Bonds of affiliates	(a) 0	0
2.1 Preferred stocks (unaffiliated)	(b) 0	0
2.11 Preferred stocks of affiliates	(b) 0	0
2.2 Common stocks (unaffiliated)		0
2.21 Common stocks of affiliates		0
3. Mortgage loans	(c) 0	0
4. Real estate	(d) 0	0
5. Contract Loans		0
6. Cash, cash equivalents and short-term investments	(e) 4,305,587	4,574,540
7. Derivative instruments	(f) 0	0
8. Other invested assets		0
9. Aggregate write-ins for investment income	136,154	137,781
10. Total gross investment income	8,307,278	8,855,733
11. Investment expenses		(g) 239,565
12. Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13. Interest expense		(h) 0
14. Depreciation on real estate and other invested assets		(i) 0
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		239,565
17. Net investment income (Line 10 minus Line 16)		8,616,168
DETAILS OF WRITE-INS		
0901. Miscellaneous income	125,575	125,575
0902. Securities lending	10,579	12,206
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	136,154	137,781
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 310,321 accrual of discount less \$ 634,015 amortization of premium and less \$ 16,051 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (d) Includes \$ 0 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.
- (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued interest on purchases.
- (f) Includes \$ 0 accrual of discount less \$ 0 amortization of premium.
- (g) Includes \$ 0 investment expenses and \$ 0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ 0 interest on surplus notes and \$ 0 interest on capital notes.
- (i) Includes \$ 0 depreciation on real estate and \$ 0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds	0	0	0	0	0
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)	584,167	0	584,167	95,471	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	0	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans	0	0	0	0	0
6. Cash, cash equivalents and short-term investments	75	0	75	0	0
7. Derivative instruments	0	0	0	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	1,288,835	0	1,288,835	0	0
10. Total capital gains (losses)	1,873,076	0	1,873,076	95,471	0
DETAILS OF WRITE-INS					
0901. Deferred gain on sale-leaseback transaction	1,288,835		1,288,835		
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)	1,288,835	0	1,288,835	0	0

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities			0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued		1,875	1,875
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	960,388	712,945	(247,443)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			0
16.2 Funds held by or deposited with reinsured companies			0
16.3 Other amounts receivable under reinsurance contracts			0
17. Amounts receivable relating to uninsured plans	14,121,956	22,788,158	8,666,202
18.1 Current federal and foreign income tax recoverable and interest thereon			0
18.2 Net deferred tax asset		20,317	20,317
19. Guaranty funds receivable or on deposit			0
20. Electronic data processing equipment and software			0
21. Furniture and equipment, including health care delivery assets	590,745	755,275	164,530
22. Net adjustment in assets and liabilities due to foreign exchange rates			0
23. Receivable from parent, subsidiaries and affiliates			0
24. Health care and other amounts receivable	15,559,405	24,026,348	8,466,943
25. Aggregate write-ins for other-than-invested assets	704,220	1,585,607	881,387
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	31,936,714	49,890,525	17,953,811
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. Total (Lines 26 and 27)	31,936,714	49,890,525	17,953,811
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0
2501. Prepaid expenses	704,220	1,583,385	879,165
2502. Miscellaneous receivables		2,222	2,222
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	704,220	1,585,607	881,387

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations	31,990	37,010	37,091	37,064	35,946	440,974
2. Provider Service Organizations						
3. Preferred Provider Organizations	220,073	227,661	226,437	228,671	227,265	2,732,562
4. Point of Service	50,246	41,733	41,483	41,348	41,252	497,974
5. Indemnity Only	22,172	22,148	22,015	21,724	21,368	263,144
6. Aggregate write-ins for other lines of business.....	19,174	18,464	18,425	16,805	16,421	210,049
7. Total	343,655	347,016	345,451	345,612	342,252	4,144,703
DETAILS OF WRITE-INS						
0601. Consumer Driven Health Products	17,938	16,941	16,984	15,439	15,103	192,862
0602. Disability and Accident	1,236	1,523	1,441	1,366	1,318	17,187
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	19,174	18,464	18,425	16,805	16,421	210,049

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Anthem Health Plans of Maine, Inc. (the “Company”) have been prepared in conformity with the National Association of Insurance Commissioners’ (“NAIC”) *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* (“NAIC SAP”), subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (“Bureau”).

A reconciliation of the Company’s net income (loss) and capital and surplus between NAIC SAP and practices prescribed and permitted by the Bureau is shown below:

	SSAP #	F/S Page	F/S Line #	2025	2024
<u>Net Income</u>					
(1) Anthem Health Plans of Maine, Inc. state basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 28,415,128	\$ 37,011,937
(2) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(3) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	<u>\$ 28,415,128</u>	<u>\$ 37,011,937</u>
<u>Surplus</u>					
(5) Anthem Health Plans of Maine, Inc. state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$179,309,036	\$140,922,448
(6) State Prescribed Practices that is an increase/(decrease) from NAIC SAP:				—	—
(7) State Permitted Practices that is an increase/(decrease) from NAIC SAP:				—	—
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	<u>\$179,309,036</u>	<u>\$140,922,448</u>

B. Use of Estimates in the Preparation of the Financial Statements

Preparation of financial statements requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policies

Health premiums are earned over the term of the related insurance policies and reinsurance contracts. Premiums written are reported net of excess loss reinsurance ceded and experience rating refunds. Unearned premium reserves are established to cover the unexpired portion of premiums written and are computed by pro rata methods for direct business and based on reports received from ceding companies for reinsurance. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period. Premium rates for certain lines of business are subject to approval by the Bureau. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. All other costs, including underwriting expenses, are charged to operations as incurred.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

The Company provides administrative services to various customers on an uninsured basis. Under these arrangements, the customer retains the risk of funding payments for health benefits provided, and the Company may be subject to credit risk of the customer from the time of the Company's claim payment until the Company receives the claim reimbursement. In accordance with SSAP No. 47, *Uninsured Plans*, these claims payments and subsequent reimbursements are excluded from the Company's statutory statement of revenue and expenses. Administrative fees for administering these arrangements are recognized as administrative services are performed and recorded as a reduction to general administrative expenses.

In addition, the Company uses the following accounting policies:

- (1) Short-term investments include investments, not backed by other loans, with maturities of less than one year and more than three months at the date of acquisition and are reported at amortized cost, which approximates fair value. Non-investment grade short-term investments are stated at the lower of amortized cost or fair value.
- (2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the modified scientific method, using lower of yield to call or yield to maturity. Non-investment grade bonds are stated at the lower of amortized cost or fair value as determined by various third-party pricing sources.
- (3) The Company has no investments in common stocks of unaffiliated companies.
- (4) The Company has no investments in preferred stocks.
- (5) The Company has no investment in residual tranche securities.
- (6) The Company has no mortgage loans - real estate.
- (7) Asset-backed securities are stated at amortized cost. Prepayment assumptions for asset-backed securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all asset-backed securities. Non-investment grade asset-backed securities are stated at the lower of amortized cost or fair value.
- (8) The Company has no investments in subsidiaries, controlled and affiliated companies.
- (9) The Company has no investments in joint ventures, partnerships or limited liability companies.
- (10) The Company has no derivative instruments.
- (11) The Company recognizes losses from other-than-temporary impairments ("OTTI") of investments in accordance with Statements of Standard Accounting Practice ("SSAP") No. 26, *Bonds*; and SSAP No. 30, *Common Stock*; and SSAP No. 32, *Preferred Stock*.
- (12) The Company does not anticipate investment income as a factor in premium deficiency calculations.
- (13) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions and other factors that may materially affect the cost, frequency and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates, and while management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- (14) The Company has not modified its capitalization policy from the prior period.
- (15) An accounting policy election has been made to disregard corporate AMT when evaluating the need for a valuation allowance for its regular tax deferred tax assets.
- (16) Pharmacy rebate receivables are recorded when earned based upon actual rebate receivables billed and an estimate of receivables based upon current utilization of specific pharmaceuticals and provider contract terms.
- (17) Service fees earned from providing administrative services to self-insured customers are deducted from operating expenses, and related claim payments and subsequent reimbursements of those claim payments are excluded from net income.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

- (18) The Company sells policies where premiums vary based on loss experience or premium stabilization programs. Retrospectively rated refunds include minimum medical loss ratio (“MLR”) rebates per the Affordable Care Act (“ACA”). Risk adjustment programs transfer premiums from insurers that enroll members with relatively lower health risks to insurers that enroll members with relatively higher health risks. Reserves for rate credits, risk adjustment programs or policy rating refunds are reported in aggregate policy reserves. Accrued retrospective premiums are reported in premiums receivable.
- (19) Premium under the Federal Employee Program (“FEP”) is earned when chargeable benefit costs, allowable expenses and retentions are incurred. Deferred premiums are recorded to offset the FEP liabilities for incurred claims but not reported and claims adjustment expenses that are due from the Office of Personnel Management (“OPM”) when the claims are ultimately paid.
- (20) A discount rate is applied to guaranty fund liabilities and assets related to assessments from insolvencies of entities that wrote long-term care contracts.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

There were no accounting changes or corrections of errors during the years ended December 31, 2025 and 2024.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

E. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

Not applicable.

4. Discontinued Operations

The Company had no operations that were discontinued during 2025 or 2024.

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

The Company did not have investments in mortgage loans at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at December 31, 2025 or 2024.

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at December 31, 2025 or 2024.

D. Asset-Backed Securities

(1) Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its asset-backed securities.

(2) The Company did not recognize OTTI on its asset-backed securities during the years ended December 31, 2025 and 2024.

(3) The Company did not recognize OTTI on its asset-backed securities at December 31, 2025 and 2024.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a. The aggregate amount of unrealized losses:

1. Less than 12 Months	\$	—
2. 12 Months or Longer	\$	(1,653,953)

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$	—
2. 12 Months or Longer	\$	24,687,861

(5) The Company's bond portfolio is sensitive to interest rate fluctuations, which impact the fair value of individual securities. Unrealized losses on bonds were primarily caused by the effects of the interest rate environment and the widening of credit spreads on certain securities. The Company currently has the ability and intent to hold these securities until their full cost can be recovered. Therefore, the Company does not believe the unrealized losses represent an OTTI at December 31, 2025 or 2024.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) The Company did not enter into repurchase agreements at December 31, 2025 or 2024.

(2) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers based on, among other things, their creditworthiness in exchange for collateral initially equal to at least 102% of the market value of the loaned securities. The Company receives the collateral in cash or securities, and if cash is received the cash collateral is thereafter invested according to guidelines of the Company's Investment Policy.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(3) Collateral Received

a. Aggregate amount collateral received

	<u>Fair Value</u>
1. Securities Lending	
(a) Open	\$ 6,862,035
(b) 30 days or less	—
(c) 31 to 60 days	—
(d) 61 to 90 days	—
(e) Greater than 90 days	—
(f) Sub-total	\$ 6,862,035
(g) Securities received	2,354,202
(h) Total collateral received	\$ 9,216,237

2. Dollar repurchase agreement - Not applicable.

b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged \$ 9,216,237

c. The Company receives cash collateral in an amount in excess of fair value of the securities lent. The Company reinvests the cash collateral according to guidelines of the Company's Investment Policy.

(4) The Company does not have any securities lending transactions administered by an affiliated agent.

(5) Collateral Reinvestment

a. Aggregate amount collateral reinvested

	<u>Amortized Cost</u>	<u>Fair Value</u>
1. Securities Lending		
(a) Open	\$ —	\$ —
(b) 30 days or less	2,643,444	2,644,442
(c) 31 to 60 days	2,155,542	2,157,093
(d) 61 to 90 days	223,723	223,738
(e) 91 to 120 days	1,254,449	1,254,480
(f) 121 to 180 days	457,035	457,091
(g) 181 to 365 days	127,842	127,842
(h) 1 to 2 years	—	—
(i) 2 to 3 years	—	—
(j) Greater than 3 years	—	—
(k) Sub-total	\$ 6,862,035	\$ 6,864,686
(l) Securities received	2,354,202	2,354,202
(m) Total collateral reinvested	\$ 9,216,237	\$ 9,218,888

2. Dollar repurchase agreement - Not applicable.

b. Not applicable.

(6) Not applicable.

(7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as secured borrowing at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) The Company participates in overnight bilateral reverse repurchase agreements, which provide cash in exchange for a U.S. Treasury (or other high-quality collateral) with an initial fair value equal to at least 102% of the amount lent. If the fair value of the collateral falls below 100%, the counterparty is required to provide additional collateral, to bring the fair value back to at least 102%.

(2) Type of Repo Trades Used

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Bilateral (YES/NO)	YES	NO	YES	YES
b. Tri-Party (YES/NO)	NO	NO	NO	NO

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Open - No Maturity	\$ —	\$ —	\$ —	\$ —
2. Overnight	\$ 8,300,000	\$ —	\$ 4,200,000	\$ 6,200,000
3. 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4. >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5. >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6. >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7. >1 Year	\$ —	\$ —	\$ —	\$ —

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
b. Ending Balance				
1. Open - No Maturity	\$ —	\$ —	\$ —	\$ —
2. Overnight	\$ —	\$ —	\$ 3,800,000	\$ —
3. 2 Days to 1 Week	\$ —	\$ —	\$ —	\$ —
4. >1 Week to 1 Month	\$ —	\$ —	\$ —	\$ —
5. >1 Month to 3 Months	\$ —	\$ —	\$ —	\$ —
6. >3 Months to 1 Year	\$ —	\$ —	\$ —	\$ —
7. >1 Year	\$ —	\$ —	\$ —	\$ —

(4) Aggregate Narrative Disclosure of Fair Value of Securities Sold and/or Acquired That Resulted in Default

Not applicable.

(5) Fair Value of Securities Acquired Under Repo-Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount	\$ 8,443,036	\$ —	\$ 4,343,675	\$ 6,253,713
b. Ending Balance	\$ —	\$ —	\$ 3,874,908	\$ —

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(6) Securities Acquired Under Repo - Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	3 NAIC 2	4 NAIC 3
a. ICO - FV	\$ —	\$ —	\$ —	\$ —
b. ABS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ —	\$ —	\$ —

ENDING BALANCE

	5 NAIC 4	6 NAIC 5	7 NAIC 6	8 DOES NOT QUALIFY AS ADMITTED
a. ICO - FV	\$ —	\$ —	\$ —	\$ —
b. ABS - FV	\$ —	\$ —	\$ —	\$ —
c. Preferred Stock - FV	\$ —	\$ —	\$ —	\$ —
d. Common Stock	\$ —	\$ —	\$ —	\$ —
e. Mortgage Loans - FV	\$ —	\$ —	\$ —	\$ —
f. Real Estate - FV	\$ —	\$ —	\$ —	\$ —
g. Derivatives - FV	\$ —	\$ —	\$ —	\$ —
h. Other Invested Assets - FV	\$ —	\$ —	\$ —	\$ —
i. Total Assets - FV (Sum of a through h)	\$ —	\$ —	\$ —	\$ —

(7) Collateral Pledged - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	\$ 8,300,000	\$ —	\$ 4,200,000	\$ 6,200,000
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
3. Securities (BACV)	XXX	XXX	XXX	XXX
4. Nonadmitted Subset (BACV)	XXX	XXX	XXX	XXX
b. Ending Balance				
1. Cash	\$ —	\$ —	\$ 3,800,000	\$ —
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
3. Securities (BACV)	\$ —	\$ —	\$ —	\$ —
4. Nonadmitted Subset (BACV)	\$ —	\$ —	\$ —	\$ —

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

	AMORTIZED COST	FAIR VALUE
a. Overnight and Continuous	\$ —	\$ —
b. 30 Days or Less	\$ —	\$ —
c. 31 to 90 Days	\$ —	\$ —
d. >90 Days	\$ —	\$ —

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(9) Recognized Receivable for Return of Collateral - Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Cash	\$ —	\$ —	\$ —	\$ —
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1. Cash	\$ —	\$ —	\$ —	\$ —
2. Securities (FV)	\$ —	\$ —	\$ —	\$ —

(10) Recognized Liability to Return Collateral - Secured Borrowing (Total)

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
1. Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —
b. Ending Balance				
1. Repo Securities Sold/Acquired with Cash Collateral	\$ —	\$ —	\$ —	\$ —
2. Repo Securities Sold/Acquired with Securities Collateral (FV)	\$ —	\$ —	\$ —	\$ —

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreement transactions accounted for as a sale at December 31, 2025 or 2024.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreement transactions accounted for as a sale at December 31, 2025 or 2024.

J. Real Estate

- (1) At December 31, 2025 and December 31, 2024, the Company recognized an impairment loss on its investment in real estate of \$0 and \$0, respectively.
- (2) On July 30, 2015, the Company sold its real estate investment in its office building located at 2 Gannett Drive in South Portland, Maine to WPME001, LLC, a Maine limited liability company, for \$25,800,000. Concurrently, the Company leased back the 2 Gannett Drive in South Portland, Maine office building under a 12 year year lease agreement with four optional 5-year renewal periods. In accordance with statutory accounting principles, the Company accounted for the transaction as a sale-leaseback settled entirely in cash, and recognized the entire gain directly to special surplus funds. The recognized gain to special surplus funds of \$15,466,022 is being amortized to unassigned surplus on a straight-line basis over the 12 year life of the lease. This amount will be reported as a realized capital gain in each year in the statement of revenue and expenses. The amount of realized gain in the statement of revenue and expenses recognized was \$1,288,835 and \$1,288,835 in 2025 and 2024, respectively.
- (3) Not applicable.
- (4) The Company did not engage in retail land sales operations during 2025 or 2024.
- (5) Not applicable.

K. Investments in Tax Credit Structures (tax credit investments)

The Company did not invest in projects generating tax credits during 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

(1) Restricted assets (including pledged)

Restricted Asset Category	1	2	3	4	5	6	7	8	9	10
	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase/ (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross Admitted and Nonadmitted Restricted to Total Assets (a)	Admitted Restricted to Total Admitted Assets (b)	Amount Reported in General Interrogatories	Difference from Note and GI	GI Ref
a. Subject to contractual obligation for which liability is not shown	\$ —	\$ —	\$ —	\$ —	\$ —	0.00 %	0.00 %	\$ —	\$ —	
b. Collateral held under security lending agreements	9,216,237	1,700,168	7,516,069	—	9,216,237	1.66 %	1.77 %	9,216,237	—	25.04+ 25.05
c. Subject to repurchase agreements	—	—	—	—	—	0.00 %	0.00 %	—	—	26.21
d. Subject to reverse repurchase agreements	—	8,300,000	(8,300,000)	—	—	0.00 %	0.00 %	—	—	26.22
e. Subject to dollar repurchase agreements	—	—	—	—	—	0.00 %	0.00 %	—	—	26.23
f. Subject to dollar reverse repurchase agreements	—	—	—	—	—	0.00 %	0.00 %	—	—	26.24
g. Placed under option contracts	—	—	—	—	—	0.00 %	0.00 %	—	—	26.25
h. Letter stock or securities restricted as to sale-excluding FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %	—	—	26.26
i. FHLB capital stock	—	—	—	—	—	0.00 %	0.00 %	—	—	26.27
j. On deposit with states	782,443	788,385	(5,942)	—	782,443	0.14 %	0.15 %	782,443	—	26.28
k. On deposit with other regulatory bodies	—	—	—	—	—	0.00 %	0.00 %	—	—	26.29
l. Pledged as collateral to FHLB (including assets backing funding agreements)	—	—	—	—	—	0.00 %	0.00 %	—	—	26.31
m. Pledged as collateral not captured in other categories	—	—	—	—	—	0.00 %	0.00 %	—	—	26.30
n. Other restricted assets	—	—	—	—	—	0.00 %	0.00 %	—	—	26.32
o. Collateral assets received and on balance sheet	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
p. Assets held under modco reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
q. Assets held under funds withheld reinsurance agreements	—	—	—	—	—	0.00 %	0.00 %	XXX	XXX	N/A
r. Total restricted assets (Sum of a through q)	\$ 9,998,680	\$ 10,788,553	\$ (789,873)	\$ —	\$ 9,998,680	1.80 %	1.92 %	XXX	XXX	XXX

(a) Column 1 divided by Asset Page, Column 1, Line 28

(b) Column 5 divided by Asset Page, Column 3, Line 28

(2) Not applicable.

(3) Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(4) Not applicable.

(5) Not applicable.

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at December 31, 2025 and 2024.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting or netting of assets and liabilities at December 31, 2025 and 2024.

O. 5GI Securities

The Company has no 5GI Securities as of December 31, 2025 and 2024.

P. Short Sales

The Company did not have any short sales at December 31, 2025 and 2024.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees at December 31, 2025 and 2024.

R. Reporting Entity's Share of Cash Pool by Asset Type

The Company did not participate in a cash pool at December 31, 2025 or 2024.

S. Aggregate Collateral Loans by Qualifying Investment Collateral

The Company did not have any aggregate collateral loans with qualifying investment collateral at December 31, 2025 or 2024.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company has no investments in joint ventures, partnerships, or LLCs.

B. Not applicable.

7. Investment Income

A. All investment income due and accrued with amounts that are over 90 days past due is non-admitted.

B. At December 31, 2025 all accrued investment income was admitted. At December 31, 2024 there was \$1,875 of nonadmitted accrued investment income.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

C. At December 31, 2025 and 2024 the gross, nonadmitted and admitted amounts for interest income due and accrued are as follows:

<u>Interest Income Due and Accrued</u>	<u>2025</u>	<u>2024</u>
1. Gross	\$ 924,554	\$ 391,474
2. Nonadmitted	—	1,875
3. Admitted	924,554	389,599

D. At December 31, 2025 and 2024 the Company had no aggregate deferred interest.

E. At December 31, 2025 and 2024, the Company had no cumulative amounts of paid-in-kind (“PIK”) interest included in the current principal balance.

8. Derivative Instruments

The Company has no derivative instruments.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

A. The components of net deferred tax assets (liabilities):

(1) The components of net deferred tax asset (liabilities) are as follows:

	12/31/2025		
	(1)	(2)	(3)
	Ordinary	Capital	(Col 1+2) Total
(a) Gross Deferred Tax Assets	\$ 8,506,476	\$ 1,576,046	\$ 10,082,522
(b) Statutory Valuation Allowance Adjustments	—	1,514,825	1,514,825
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	8,506,476	61,221	8,567,697
(d) Deferred Tax Assets Nonadmitted	—	—	—
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	8,506,476	61,221	8,567,697
(f) Deferred Tax Liabilities	15,082,212	—	15,082,212
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (6,575,736)	\$ 61,221	\$ (6,514,515)

	12/31/2024		
	(4)	(5)	(6)
	Ordinary	Capital	(Col 4+5) Total
(a) Gross Deferred Tax Assets	\$ 14,548,952	\$ 1,682,493	\$ 16,231,445
(b) Statutory Valuation Allowance Adjustments	—	1,517,013	1,517,013
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	14,548,952	165,480	14,714,432
(d) Deferred Tax Assets Nonadmitted	—	20,317	20,317
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	14,548,952	145,163	14,694,115
(f) Deferred Tax Liabilities	14,355,749	84,211	14,439,960
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 193,203	\$ 60,952	\$ 254,155

	Change		
	(7)	(8)	(9)
	(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
(a) Gross Deferred Tax Assets	\$ (6,042,476)	\$ (106,447)	\$ (6,148,923)
(b) Statutory Valuation Allowance Adjustments	—	(2,188)	(2,188)
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	(6,042,476)	(104,259)	(6,146,735)
(d) Deferred Tax Assets Nonadmitted	—	(20,317)	(20,317)
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	(6,042,476)	(83,942)	(6,126,418)
(f) Deferred Tax Liabilities	726,463	(84,211)	642,252
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ (6,768,939)	\$ 269	\$ (6,768,670)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

- (2) The amount of admitted adjusted gross deferred tax assets under each component of SSAP No. 101, *Income Taxes* (“SSAP No. 101”) are as follows:

		12/31/2025		
		(1)	(2)	(3)
		Ordinary	Capital	(Col 1+2) Total
Admission Calculation Components SSAP No. 101				
(a)	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 7,956,711	\$ —	\$ 7,956,711
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	122,328	45,915	168,243
1.	Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	122,328	45,915	168,243
2.	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	26,896,355
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	427,437	15,306	442,743
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	<u>\$ 8,506,476</u>	<u>\$ 61,221</u>	<u>\$ 8,567,697</u>

		12/31/2024		
		(4)	(5)	(6)
		Ordinary	Capital	(Col 4+5) Total
Admission Calculation Components SSAP No. 101				
(a)	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ 13,606,495	\$ —	\$ 13,606,495
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	173,758	60,952	234,710
1.	Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	173,758	60,952	234,710
2.	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	21,100,244
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	768,699	84,211	852,910
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	<u>\$ 14,548,952</u>	<u>\$ 145,163</u>	<u>\$ 14,694,115</u>

		Change		
		(7)	(8)	(9)
		(Col 1-4) Ordinary	(Col 2-5) Capital	(Col 7+8) Total
Admission Calculation Components SSAP No. 101				
(a)	Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks.	\$ (5,649,784)	\$ —	\$ (5,649,784)
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	(51,430)	(15,037)	(66,467)
1.	Adjusted Gross Deferred Tax Assets Expected To Be Realized Following the Balance Sheet Date.	(51,430)	(15,037)	(66,467)
2.	Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	5,796,111
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	(341,262)	(68,905)	(410,167)
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	<u>\$ (6,042,476)</u>	<u>\$ (83,942)</u>	<u>\$ (6,126,418)</u>

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(3)	2025	2024
(a) Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	415.38 %	345.48 %
(b) Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 179,309,037	\$ 140,668,293

	12/31/2025		12/31/2024		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col 1-3) Ordinary	(6) (Col 2-4) Capital
Impact of Tax-Planning Strategies						
(a) Determination of Adjusted Gross Deferred Tax Assets and Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.						
1. Adjusted Gross DTAs Amount From Note 9A1(c)	\$8,506,476	\$ 61,221	\$14,548,952	\$165,480	\$(6,042,476)	\$(104,259)
2. Percentage of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies	0.00 %	100.00 %	0.00 %	49.11 %	0.00 %	49.11 %
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	\$8,506,476	\$ 61,221	\$14,548,952	\$145,163	\$(6,042,476)	\$(83,942)
4. Percentage of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies	0.00 %	100.00 %	0.00 %	0.00 %	0.00 %	0.00 %

(b) Does the Company's tax-planning strategies include the use of reinsurance? Yes _____ No X

B. The Company has no unrecognized deferred tax liabilities at December 31, 2025 and 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

C. Current income taxes incurred consist of the following major components:

	(1) 12/31/2025	(2) 12/31/2024	(3) (Col 1-2) Change
(1) Current Income Tax			
(a) Federal	\$ 2,581,658	\$ 16,133,566	\$ (13,551,908)
(b) Foreign	—	—	—
(c) Subtotal	2,581,658	16,133,566	(13,551,908)
(d) Federal income tax expense on net capital gains	—	(716,602)	716,602
(e) Utilization of capital loss carry-forwards	(25,359)	—	(25,359)
(f) Other	—	—	—
(g) Federal and foreign income taxes incurred	<u>\$ 2,556,299</u>	<u>\$ 15,416,964</u>	<u>\$ (12,860,665)</u>
(2) Deferred Tax Assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 544,127	\$ 428,139	\$ 115,988
(2) Unearned premium reserve	1,456,639	1,304,101	152,538
(3) Policyholder reserves	502,478	2,073,114	(1,570,636)
(4) Investments	—	—	—
(5) Deferred acquisition costs	—	—	—
(6) Policyholder dividends accrual	—	—	—
(7) Fixed assets	114,749	156,120	(41,371)
(8) Compensation and benefits accrual	—	—	—
(9) Pension accrual	—	—	—
(10) Receivables - nonadmitted	1,966,368	3,774,590	(1,808,222)
(11) Net operating loss carry-forward	—	—	—
(12) Tax credit carry-forward	—	—	—
(13) Other	3,922,115	6,812,888	(2,890,773)
(99) Subtotal (sum of 2a1 through 2a13)	<u>8,506,476</u>	<u>14,548,952</u>	<u>(6,042,476)</u>
(b) Statutory valuation allowance adjustment	—	—	—
(c) Nonadmitted	—	—	—
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	<u>8,506,476</u>	<u>14,548,952</u>	<u>(6,042,476)</u>
(e) Capital			
(1) Investments	1,576,046	1,682,493	(106,447)
(2) Net capital loss carry-forward	—	—	—
(3) Real estate	—	—	—
(4) Other	—	—	—
(99) Subtotal (2e1+2e2+2e3+2e4)	<u>1,576,046</u>	<u>1,682,493</u>	<u>(106,447)</u>
(f) Statutory valuation allowance adjustment	1,514,825	1,517,013	(2,188)
(g) Nonadmitted	—	20,317	(20,317)
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	<u>61,221</u>	<u>145,163</u>	<u>(83,942)</u>
(i) Admitted deferred tax assets (2d + 2h)	<u>\$ 8,567,697</u>	<u>\$ 14,694,115</u>	<u>\$ (6,126,418)</u>
(3) Deferred Tax Liabilities:			
(a) Ordinary			
(1) Investments	\$ 148,654	\$ —	\$ 148,654
(2) Fixed assets	—	—	—
(3) Deferred and uncollected premium	—	—	—
(4) Policyholder reserves	—	—	—
(5) Other	14,933,558	14,355,749	577,809
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	<u>15,082,212</u>	<u>14,355,749</u>	<u>726,463</u>
(b) Capital			
(1) Investments	—	84,211	(84,211)
(2) Real estate	—	—	—
(3) Other	—	—	—
(99) Subtotal (3b1+3b2+3b3)	<u>—</u>	<u>84,211</u>	<u>(84,211)</u>
(c) Deferred tax liabilities (3a99 + 3b99)	<u>15,082,212</u>	<u>14,439,960</u>	<u>642,252</u>
(4) Net deferred tax assets/liabilities (2i - 3c)	<u>\$ (6,514,515)</u>	<u>\$ 254,155</u>	<u>\$ (6,768,670)</u>

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

- D.** The Company’s income tax expense and change in deferred income taxes differs from the amount obtained by applying the federal statutory income tax rate of 21% for the year ended December 31 as follows:

	2025	2024
Tax expense computed using federal statutory rate	\$ 6,504,000	\$ 11,010,069
Change in nonadmitted assets	3,766,034	167,878
Tax exempt income and dividend received deduction net of proration	(41,088)	(69,766)
Prior year true-up and adjustments	202,032	(748,881)
Tax settlements and contingencies	(80,983)	(6,705)
Valuation allowance	(2,186)	1,517,012
Other, net	(1,022,572)	1,167
Total	\$ 9,325,237	\$ 11,870,774
Federal income taxes incurred	\$ 2,556,299	\$ 15,416,964
Change in net deferred income taxes	6,768,938	(3,546,190)
Total statutory income taxes	\$ 9,325,237	\$ 11,870,774

E. Operating loss carryforwards:

- (1) The Company has no operating loss carryforwards and no corporate alternative minimum tax (“AMT”) credit carryforwards as of December 31, 2025 or 2024.
- (2) The following are income taxes incurred in the current and prior year(s) that will be available for recoupment in the event of future net losses:

	Ordinary		Capital		Total
2025	\$ 5,207,253	\$	—	\$	5,207,253
2024	12,729,917		—		12,729,917
2023	—		—		—

- (3) The Company has no protective tax deposits reported as admitted assets under Section 6603 of the Internal Revenue Service Code as of December 31, 2025 and 2024.

- F.** The following companies will be included in the consolidated federal income tax return with their parent Elevance Health, Inc. (“Elevance Health”) as of December 31, 2025 and either are current members of the consolidated tax sharing agreement or are in the process of being added to the consolidated tax sharing agreement. Allocation of federal income taxes, including corporate AMT, with affiliates subject to the tax sharing agreement is based upon separate income tax return calculations, including separate corporate AMT calculations, with credit for net operating losses and capital losses that can be used on a consolidated basis. Pursuant to this agreement, the Company has the enforceable right to recoup federal income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal income taxes. Intercompany income tax balances are settled based on the Internal Revenue Service due dates.

Albion Medical Group of Nevada, P.C.	Community Care Health Plan of Nevada, Inc.
Albion Medical Partners of California, P.C.	Community Insurance Company
Albion Medical Partners of California West, P.C.	CompCare Health Services Insurance Corporation
Albion Medical Partners of Illinois, S.C.	Crossroads Acquisition Corp.
Alliance Care Management, LLC	DeCare Analytics, LLC
Amerigroup Mississippi, Inc.	DeCare Dental Health International, LLC
Amerigroup Pennsylvania, Inc.	DeCare Dental Networks, LLC
AMGP Georgia Managed Care Company, Inc.	DeCare Dental, LLC
Anthem Benefits Agency, Inc.	Designated Agent Company, Inc.
Anthem Blue Cross Life and Health Insurance Company	Elevance Health, Inc
Anthem Financial, Inc.	Elevance Health Information Technology Services, Inc.
Anthem HealthChoice Assurance, Inc.	ELV Holding Company 2, LLC

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

Anthem HealthChoice HMO, Inc.
Anthem Health Plans of Kentucky, Inc.
Anthem Health Plans of Maine, Inc.
Anthem Health Plans of New Hampshire, Inc.
Anthem Health Plans of Virginia, Inc.
Anthem Health Plans, Inc.
Anthem Holding Corp.
Anthem HP, LLC
Anthem Insurance Companies, Inc.
Anthem Kentucky Managed Care Plan, Inc.
Anthem Southeast, Inc.
APR, LLC
Arcus Enterprises, Inc.
Associated Group, Inc.
AUMSI UM Services, Inc.
BioPlus Parent, LLC
BioPlus Specialty Holding Company, LLC
BioPlus Specialty Infusion Holdings, Inc.
BioPlus Specialty Pharmacy Holdings, Inc.
BioPlus Specialty Pharmacy Holdings I, Inc.
BioPlus Specialty Pharmacy Holdings II, Inc.
BioPlus Specialty Pharmacy, Inc.
BioPlus Specialty Pharmacy LA, LLC
Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.
Blue Cross Blue Shield of Wisconsin
Blue Cross of California
Blue Cross of California Partnership Plan, Inc.
Capricorn Holdeco, Inc.
Carebridge Holding Company, LLC
Carelton Behavioral Care, Inc.
Carelton Behavioral Health Holdings, Inc.
Carelton Behavioral Health, Inc.
Carelton Behavioral Health IPA, Inc.
Carelton Behavioral Health of California, Inc.
Carelton Behavioral Health Strategies IPA, LLC
Carelton Digital Platforms, Inc.
Carelton Global Solutions U.S., Inc.
Carelton Health Federal Services, Inc.
Carelton Health, Inc.
Carelton Health IPA of California
Carelton Health IPA of New York, Inc.
CareMore Health of Arizona, Inc.
CareMore Health of California, Inc.
Carelton Health of Nevada, Inc.
Carelton Health of New Jersey, Inc.
Carelton Health of Pennsylvania, Inc.
Carelton Health Solutions, Inc.
Carelton Holdings I, Inc.
Carelton, Inc.
Carelton Insights, Inc.
Carelton Management Services, LLC
Carelton Medical Benefits Management, Inc.
Carelton Medical Partners, P.C.
Carelton Medical Partners of Arizona, P.C.
Carelton Medical Partners of Colorado, P.C.
Carelton Medical Partners of Kansas, P.A.
Carelton Medical Partners of New York, P.C.
Carelton Medical Partners of North Carolina, P.C.
Carelton Medical Partners of Texas, P.A.
Carelton Palliative Care, Inc.
Carelton Research, Inc.
ELV Holding Company 3, LLC
ELV Holding Company 4, LLC
Federal Government Solutions, LLC
Freedom Health, Inc.
Freedom SPV, Inc.
Golden West Health Plan, Inc.
Granular Insurance Company
GranularRe, Inc.
HaloCare Specialty Therapeutics, LLC
Healthkeepers, Inc.
HealthLink Administrators, Inc.
HealthLink, Inc.
HealthSun Health Plan, Inc.
Healthy Alliance Life Insurance Company
HMO Colorado, Inc.
HMO Missouri, Inc.
IEC Group Holdings, Inc.
IEC Group, Inc. d/b/a AmeriBen
Innovative Pharmacy Services, LLC
LDNR Pharmacy, Inc.
Living Complete Technologies, Inc.
Massachusetts Behavioral Health Partnership
Matthew Thornton Health Plan, Inc.
Missouri Care, Incorporated
Nash Holding Company, LLC
National Government Services, Inc.
New England Research Institutes, Inc.
Optimum Healthcare, Inc.
OPTIONS Health Care, Inc.
Paragon Healthcare, Inc.
Paragon Holding Company, LLC
Paragon Infusion Care Inc.
Pathwrite, Inc.
PHI Parent, LLC
RightCHOICE Managed Care, Inc.
Rocky Mountain Hospital and Medical Service, Inc.
RSV QOZB LTSS, Inc.
SellCore, Inc.
Simply Healthcare Plans, Inc.
Southeast Services, Inc.
State Sponsored Services, Inc.
The Elevance Health Companies, Inc.
The Elevance Health Companies of California, Inc.
WellPoint California Services, Inc.
Wellpoint Corporation
Wellpoint Delaware, Inc.
WellPoint Dental Services, Inc.
Wellpoint District of Columbia, Inc.
WellPoint Federal Corporation
WellPoint Health Solutions, Inc.
WellPoint Holding Corporation
Wellpoint Illinois Services, Inc.
Wellpoint Insurance Company
WellPoint Insurance Services, Inc.
Wellpoint Iowa, Inc.
Wellpoint IPA Holding Company, Inc.
Wellpoint Life and Health Insurance Company
Wellpoint Maryland, Inc.
Wellpoint National Services, Inc.
Wellpoint New Jersey, Inc.
Wellpoint New Mexico, Inc.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

CarelonRx, Inc.	Wellpoint Health Plans, Inc.
CarelonRx Pharmacy, Inc.	Wellpoint South Carolina, Inc.
Caremax Pharmacy of Loudon, Inc.	Wellpoint Specialty Services, Inc.
Centers Plan for Healthy Living LLC	Wellpoint Tennessee, Inc.
Cerulean Companies, Inc.	Wellpoint Texas, Inc.
Colorado State Infusion, Inc.	Wellpoint Washington, Inc.
Community Care Health Plan of Kansas, Inc.	Wellpoint West Virginia, Inc.
Community Care Health Plan of Nebraska, Inc.	WestCare, Inc.

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

The corporate alternative minimum tax (“CAMT”) is imposed at a rate of 15% on the adjusted financial statement income (“AFSI”) and is applicable only to corporations with average AFSI exceeding \$1.0 billion over a three year period. The applicability of the CAMT is determined on a tax-controlled group basis.

The Company is a member of a tax-controlled group of corporations. The Company does not expect to be subject to CAMT in 2025.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship

The Company is a Maine domiciled stock insurance company and is a wholly-owned subsidiary of ATH Holding Company, LLC (“ATH Holding”) which is a wholly-owned subsidiary of Elevance Health, a publicly traded company.

B. Significant Transactions for Each Period

The following significant transactions took place between the Company and its affiliates:

The Board of Directors of the Company declared an ordinary dividend in the amount of \$33,800,000 on December 18, 2024. The Company paid the dividend to its parent company, ATH Holding, on December 30, 2024.

C. Transactions with Related Parties who are not Reported on Schedule Y

The Company has no transactions with related parties who are not reported on Schedule Y.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

D. Amounts Due to or from Related Parties

At December 31, 2025 and 2024, the Company reported \$89,322,296 and \$112,986,920 due from affiliates, respectively. At December 31, 2025 and 2024, the Company reported no amounts due to affiliates. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement

Following is a summary of transactions between the Company and various affiliates during the years:

	2025	2024
The Elevance Health Companies, Inc.		
Payroll and Employee Administrative Services	\$ 55,034,085	\$ 51,190,716
Elevance Health, Inc.		
Federal Income Tax Payments	9,832,196	(6,393,579)
Corporate Services	21,014,385	20,404,604
Information Technology Services	9,895,515	9,191,979
Anthem Insurance Companies, Inc.		
Information Technology Services	—	—
Corporate Services	429,302	473,057
WellPoint Information Technology Services, Inc.		
Information Technology Services	4,099,543	3,928,449
Corporate Services	2,052,133	1,504,610
Blue Cross of California		
Corporate Services	74,618	70,661
Information Technology Services	15	1
Anthem Health Plans, Inc.		
Claims Processing	20,707	19,233
Corporate Services	(5,702)	4,483
Anthem Health Plans of New Hampshire, Inc.		
Corporate Services	1,536	1,780
Anthem Health Plans of Virginia, Inc.		
Information Technology Services	851	495
Corporate Services	17,734	(2,198)
Costs allocated from other Elevance Health, Inc. affiliates not listed above	(72,378)	12,394,085
Total Schedule Y, Part 2, Column 8	\$ 102,394,540	\$ 92,788,376

E. Management and Service Contracts and Cost Sharing Arrangements

The Company has entered into administrative services agreements with its affiliated companies. Pursuant to these agreements, various administrative, management and support services are provided to or provided by the Company. The costs and expenses related to these administrative management and support services are allocated to or allocated by the Company in an amount equal to the direct and indirect costs and expenses incurred in providing these services. Costs include expenses such as salaries, employee benefits, information technology, pharmacy benefits administration, dental benefits management services, health care management services, communications, advertising, consulting services, rent, utilities, billing, accounting, underwriting, and product development, which support the Company's operations. In addition, the Company is party to the Fair Market Value ("FMV") Services Attachment to the master administrative services agreement with affiliates, of which the costs and expenses related to certain services, including behavioral health, palliative care, utilization management, payment integrity services, subrogation services, as well as health and wellness programs, are allocated to or allocated by the Company in an amount equal to the fair market value of the services provided. All costs under these agreements are allocated based on various utilization statistics. Net payments to affiliated companies pursuant to the above

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

administrative service agreements were \$92,562,343 and \$99,181,956 in 2025 and 2024, respectively.

The Company is party to a cash concentration agreement with its affiliated companies. Under this agreement, any of the Company's affiliates may be designated as a cash manager to handle the collection and/or payment of funds on behalf of the Company. Conversely, the Company may be designated as a cash manager to handle the collection and/or payment of funds on behalf of its affiliates. Cash services covered under this agreement include the collection of premiums and other revenue, the collection of benefit and administrative expense reimbursements, the payment of policy benefits, payroll expense, general and administrative expense, and accounts payable disbursements.

There were no changes to the intercompany management and service arrangements, and there were no additional arrangements entered into during 2025 or 2024.

F. Guarantees or Contingencies for Related Parties

The Company did not enter into guarantees or undertakings for the benefit of an affiliate which would result in a material contingent exposure of the Company's or any affiliated insurer's assets or liabilities.

G. Nature of Control Relationships that Could Affect Operations or Financial Position

ATH Holding owns all outstanding shares of the Company. The Company's ultimate parent is Elevance Health.

H. Amount Deducted for Investment in Upstream Company

The Company does not own shares of upstream intermediate entities or Elevance Health.

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

At December 31, 2025 and 2024, the Company did not have investments in affiliates.

J. Write-down for Impairments of Investments in Subsidiaries, Controlled or Affiliated ("SCA") Companies

Not applicable.

K. Investment in a Foreign Insurance Subsidiary

The Company does not have investments in foreign insurance subsidiaries.

L. Investment in Downstream Non-insurance Holding Companies

The Company does not have investments in downstream non-insurance holding companies.

M. All SCA Investments

The Company has no SCA Investments.

N. Investment in Insurance SCAs

The Company does not have investments in Insurance SCAs.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

O. SCA or SSAP 48 Entity Loss Tracking

The Company does not have losses on investments in Insurance SCAs and/or joint ventures, partnerships or LLCs.

11. Debt

A. Capital Notes and Other Debt

The Company had no capital notes or other debt outstanding at December 31, 2025 and 2024.

B. FHLB (Federal Home Loan Bank) Agreements

The Company had no FHLB agreements outstanding at December 31, 2025 and 2024.

C. All Other Debt

The Company had no other debt outstanding at December 31, 2025 and 2024.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

Not applicable - See Note 12G.

B. Not applicable - See Note 12G.

C. Not applicable - See Note 12G.

D. Not applicable - See Note 12G.

E. Defined Contribution Plans

Not applicable - See Note 12G.

F. Multiemployer Plans

The Company does not participate in a multiemployer plan.

G. Consolidated/Holding Company Plans

The Company participates in the 401(k) Plan, sponsored by ATH Holding and covering substantially all employees. Voluntary employee contributions are matched by ATH Holding subject to certain limitations. ATH Holding allocates a share of the total accumulated costs of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

The Company participates in a stock incentive compensation plan, sponsored by Elevance Health, providing incentive awards to non-employee directors and employees, consisting of Elevance Health stock options, restricted stock, restricted stock units, stock appreciation rights, performance shares, and performance units. Elevance Health allocates a share of the total share-based compensation expense of this plan to the Company based on the number of allocated employees. The Company has no legal obligation for benefits under this plan.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

During 2025 and 2024, the Company was allocated the following costs or (credits) for these retirement benefits:

		2025		2024
Defined contribution plan	\$	1,335,675	\$	1,387,943
Stock incentive compensation plan		1,538,556		1,446,916

H. Post Employment Benefits and Compensated Absences

Not applicable.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

A. Outstanding Shares

As of December 31, 2025, the Company has 2,500 shares of \$1,000 par value common stock authorized, issued and outstanding.

B. Preferred Stock

The Company has no preferred stock outstanding.

C. Dividend Restrictions

Under Maine law, the Company is limited in the amount of dividends that can be declared without regulatory approval. The Superintendent of Insurance must approve any dividend that, together with all dividends declared during the preceding twelve months, exceeds the greater of the net gain from operations for the twelve-month period ending December 31 of the preceding year or 10% of the Company's surplus to policyholders as of December 31 of the preceding year as long as unassigned surplus is positive. Also, any dividend paid from other than unassigned funds will need the approval of the Superintendent of Insurance.

D. Dividends Paid

See Footnote 10B.

E. Maximum Ordinary Dividend During 2026

Within the limitations of (C) above, the Company may pay \$28,415,128 in ordinary dividends during 2026 without restrictions, other than state notification requirements.

F. Unassigned Surplus Restrictions

Unassigned surplus funds are not restricted at December 31, 2025.

G. Mutual Surplus Advances

Not applicable.

H. Company Stock Held for Special Purpose

There are no shares of stock held for special purposes at December 31, 2025.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

I. Changes in Special Surplus Funds

The change in balances of special surplus funds from the prior year are due to changes in the amounts segregated for the deferred gain on the Company's sale-leaseback transaction.

J. Changes in Unassigned Funds

The portion of unassigned funds represented by cumulative unrealized investment gains and losses was (\$230,306) at December 31, 2025.

K. Surplus Notes

The Company has not issued any surplus notes or debentures or similar obligations.

L. Restatement due to Prior Quasi-reorganizations

The Company had no restatements due to prior quasi-reorganizations.

M. Quasi-reorganizations over Prior 10 Years

The Company has not been involved in a quasi-reorganization during the past 10 years.

14. Liabilities, Contingencies and Assessments

A. Contingent Commitments

The Company had no contingent commitments at December 31, 2025 or 2024.

B. Assessments

(1) The Company is subject to guaranty fund and other assessments by the state(s) in which it writes business. Guaranty fund assessments are accrued at the time of covered insurer insolvencies. Other assessments are accrued at the time the assessment obligation is incurred.

(2) Guaranty Fund Assets Recognized Reconciliation

a. Guaranty fund assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end	\$	—
b. Decreases current year:		
Policy surcharges collected		—
Policy surcharges charged off		—
Premium tax offset applied		—
c. Increases current year:		
Policy surcharges recognized		—
Premium tax offset recognized		—
<hr/>		
d. Guaranty fund assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end	\$	<u>—</u>

(3) Not applicable.

C. Gain Contingencies

The Company has no gain contingencies at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

D. Claims-Related Extra Contractual Obligation and the Bad Faith Losses Stemming From Lawsuits

Not applicable.

E. Joint and Several Liabilities

Not applicable.

F. All Other Contingencies

Guaranty fund assessments

The National Organization of Life & Health Insurance Guaranty Associations, or NOLHGA, is a voluntary organization consisting of the state life and health insurance guaranty associations located throughout the U.S. Such associations, working together with NOLHGA, provide a safety net for their state's policyholders, ensuring that they continue to receive coverage, subject to state maximum limits, even if their insurer is declared insolvent. Under insolvency or guaranty association laws, insurance companies can be assessed for amounts paid by guaranty funds for policyholder losses incurred when an insurance company becomes insolvent. State insolvency or guaranty association laws currently provide for assessments based upon the amount of premiums received on insurance underwritten within such state (with a minimum amount payable even if no premium is received). Under these guaranty association laws, assessments are made retrospectively.

In March 2017, long term care insurance writers Penn Treaty Network America Insurance Company and its subsidiary American Network Insurance Company, (collectively "Penn Treaty"), were ordered to be liquidated by the Pennsylvania state court, which had jurisdiction over the Penn Treaty rehabilitation proceeding. The Company and other insurers have paid state guaranty association assessments and may be obligated to pay additional assessments to cover Penn Treaty policyholder claims. Payment of these assessments are largely recovered through premium tax credits over future years.

Litigation and regulatory proceedings

Blue Cross Blue Shield Antitrust Litigation

Elevance Health, Inc. is a defendant in multiple lawsuits that were initially filed in 2012 against the BCBSA and Blue Cross and/or Blue Shield licensees (the "Blue plans") across the country. These cases were consolidated into a single, multi-district proceeding captioned *In re Blue Cross Blue Shield Antitrust Litigation* that is pending in the U.S. District Court for the Northern District of Alabama (the "Court"). Generally, the suits allege that the BCBSA and the Blue plans have conspired to horizontally allocate geographic markets through license agreements, best efforts rules that limit the percentage of non-Blue revenue of each plan, restrictions on acquisitions, rules governing the BlueCard® and National Accounts programs and other arrangements in violation of the Sherman Antitrust Act and related state laws. The cases were brought by two putative nationwide classes of plaintiffs, health plan subscribers and providers.

The BCBSA and Blue plans approved a settlement agreement and release with the subscriber plaintiffs (the "Subscriber Settlement Agreement"), which received final approval from the Court in September 2022. The ultimate amount paid by Elevance Health under the Subscriber Settlement Agreement was \$604,000,000. The Company's portion of the Subscriber Settlement Agreement was primarily accrued in 2020. The Subscriber Settlement Agreement and the defendants' payment and non-monetary obligations under the Subscriber Settlement Agreement became effective in June 2024, with the request for second Blue plan bid provisions effective in September 2024. The

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

funds held in escrow will be distributed in accordance with the Subscriber Settlement Agreement.

A number of follow-on cases involving entities that opted out of the Subscriber Settlement Agreement have been filed. Those actions are: *Alaska Air Group, Inc., et al. v. Anthem, Inc., et al.*, No. 2:21-cv-01209-AMM (N.D. Ala.); *JetBlue Airways Corp., et al. v. Anthem, Inc., et al.*, No. 2:22-cv-00558-GMB (N.D. Ala.); *Metropolitan Transportation Authority v. Blue Cross and Blue Shield of Alabama et al.*, No. 2:22-cv-00265-RDP (N.D. Ala.) (dismissed without prejudice in June 2023); *Bed Bath & Beyond Inc. v. Anthem, Inc.*, No. 2:22-cv-01256-SGC (N.D. Ala.); *Hoover, et al. v. Blue Cross Blue Shield Association, et al.*, No. 1:21-cv-23448 (S.D. Fla.); and *VHS Liquidating Trust v. Blue Cross of California, et al.*, No. RG21106600 (Cal. Super.). In February 2023, the Court denied the defendants' motion to dismiss based on a statute of limitations defense in *Alaska Air* and *Jet Blue*. In September 2023, the California court presiding over the *VHS* case, upheld its prior order granting in part defendants' motion to strike based on the statute of limitations. On February 14, 2025, the *VHS* plaintiffs amended their complaint to add an additional plaintiff, Children's Hospital of Los Angeles. Elevance Health intends to continue to vigorously defend these follow-on cases, which they believe are without merit; however, their ultimate outcome cannot be presently determined.

In the third quarter of 2024, the BCBSA, along with individually named Blue plans approved a settlement agreement and release (the "Provider Settlement Agreement") with the provider plaintiffs, and in October 2024 the provider plaintiffs filed a motion for preliminary approval with the Court. The Court granted preliminary approval of the provider settlement on December 4, 2024. A Final Fairness Hearing was held in July 2025, and a Final Order of Approval was issued in August 2025. As a result of the Final Order of Approval, the defendants were required to make a monetary settlement payment and certain non-monetary terms including (i) expansion of opportunities to contract with providers in contiguous services areas, (ii) certain prompt pay commitments, and (iii) various technological enhancements to the BlueCard program are not being implanted on a time line set forth in the Provider Settlement Agreement. The effective date of the Provider Settlement Agreement was September 19, 2025. Elevance Health's payment obligation under the Provider Settlement Agreement was \$666,000,000. The Company recorded its portion of the Provider Settlement Agreement in September 2024.

A number of follow-on cases involving entities that opted out of the Provider Settlement Agreement have been filed and centralized in the BCBSA Litigation multi-district proceeding. Those actions are: *Fresno Community Hospital and Medical Center, et al. v. Blue Cross of California, et al.*, No. 25CV114607 (Cal. Super. Ct.); *Orange County Global Medical Center, Inc., et al. v. Blue Cross of California, et al.*, No. 25CV114430 (Cal. Super. Ct.); *Alta Los Angeles Hospitals, Inc., et al. v. Blue Cross of California, et al.*, No. 25CV114144 (Cal. Super. Ct.); *WHC Liquidating Trust v. Blue Cross of California, et al.*, No. 25CV114166 (Cal. Super. Ct.); *Stanford Health Care, et al. v. Blue Cross of California, et al.*, No. 25CV114151 (Cal. Super. Ct.); *John Muir Health v. Blue Cross of California d/b/a Anthem Blue Cross*, No. 25CV114149 (Cal. Super. Ct.); *Cottage Clinical Associates, et al. v. Blue Cross of California, et al.*, No. 25CV114152 (Cal. Super. Ct.); *Chinese Hospital Association v. Blue Cross of California dba Anthem Blue Cross, et al.*, No. 25CV113731 (Cal. Super. Ct.); *Regents of the University of California v. Blue Cross of California, et al.*, No. CGC-25-623019 (Cal. Super. Ct.); *Adventist Health System Sunbelt Healthcare Corporate d/b/a AdventHealth, et al. v. Blue Cross Blue Shield Association, et al.*, No. 1:25-cv-02367 (N.D. Ill.); *AmeriTeam Services, LLC, et al. v. Blue Cross and Blue Shield of Alabama, Inc., et al.*, No. 1:25-cv-02295 (N.D. Ill.); *CommonSpirit Health, et al. v. Blue Cross and Blue Shield of Alabama, et al.*, No. 1:25-cv-02296 (N.D. Ill.); *IES Central Texas PLLC et al. v. Blue Cross and Blue Shield of Alabama et al.*, No. 1:25-cv-02267 (N.D. Ill.); *Bon Secours Mercy Health, Inc., et al. v. Blue Cross Blue Shield Association, et al.*, No. 5:25-cv-02231 (N.D. Cal.); *LHHealth, LLC v. Blue Cross Blue Shield Association, et al.*, No. 5:25-cv-01158 (E.D. Pa.); *Temple University Health System, Inc., et al. v. Blue Cross Blue Shield Association,*

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

et al., No. 5:25-cv-01156 (E.D. Pa.); *Weill Cornell Medicine v. Blue Cross Blue Shield Association et al.*, No. 1:25-cv-02516 (S.D.N.Y.). Elevance Health intends to continue to vigorously defend these provider follow-on cases, which they believe are without merit; however, their ultimate outcome cannot be presently determined.

Medicare Risk Adjustment Litigation

In March 2020, the U.S. Department of Justice (“DOJ”) filed a civil lawsuit against Elevance Health, Inc. in the U.S. District Court for the Southern District of New York (the “District Court”) in a case captioned *United States v. Anthem, Inc.* The DOJ’s suit alleges, among other things, that Elevance Health falsely certified the accuracy of the diagnosis data they submitted to the Centers for Medicare and Medicaid Services (“CMS”) for risk-adjustment purposes under Medicare Part C and knowingly failed to delete inaccurate diagnosis codes. The DOJ further alleges that, as a result of these purported acts, Elevance Health caused CMS to calculate the risk-adjustment payments based on inaccurate diagnosis information, which enabled Elevance Health to obtain unspecified amounts of payments in Medicare funds in violation of the False Claims Act. The DOJ filed an amended complaint in July 2020, alleging the same causes of action but revising some of its factual allegations. In September 2020, Elevance Health filed a motion to transfer the lawsuit to the Southern District of Ohio, a motion to dismiss part of the lawsuit, and a motion to strike certain allegations in the amended complaint, all of which the District Court denied in October 2022. In November 2022, Elevance Health filed an answer. In March 2023, discovery commenced. Fact and expert discovery are ongoing with current completion deadlines of June 30, 2026, and March 8, 2027, respectively. Elevance Health intends to continue to vigorously defend this suit, which they believe is without merit; however, the ultimate outcome cannot be presently determined.

Other Contingencies

From time to time, the Company and certain of its subsidiaries are parties to various legal proceedings, many of which involve claims for coverage encountered in the ordinary course of business. The Company, like Health Maintenance Organizations (“HMOs”) and health insurers generally, exclude certain healthcare and other services from coverage under their HMO, Preferred Provider Organizations and other plans. The Company is, in the ordinary course of business, subject to the claims of their enrollees arising out of decisions to restrict or deny reimbursement for uncovered services. The loss of even one such claim, if it results in a significant punitive damage award, could have a material adverse effect on the Company. In addition, the risk of potential liability under punitive damage theories may increase significantly the difficulty of obtaining reasonable reimbursement of coverage claims.

In addition to the lawsuits described above, the Company is also involved in other pending and threatened litigation of the character incidental to their business and is from time to time involved as a party in various governmental investigations, audits, reviews and administrative proceedings. These investigations, audits, reviews and administrative proceedings include routine and special inquiries by state insurance departments, state attorneys general, the U.S. Attorney General and subcommittees of the U.S. Congress. Such investigations, audits, reviews and administrative proceedings could result in the imposition of civil or criminal fines, penalties, other sanctions and additional rules, regulations or other restrictions on the Company’s business operations. Any liability that may result from any one of these actions, or in the aggregate, could have a material adverse effect on the Company’s consolidated financial position or results of operations.

The Company has no other known material contingencies.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

Provisions for uncollectible amounts

At December 31, 2025 and 2024, the Company reported admitted assets of \$151,519,659 and \$145,336,596, respectively, in premium receivables and receivables due from uninsured plans. Based upon the Company's experience, any uncollectible receivables are not expected to exceed \$15,082,344 that was nonadmitted at December 31, 2025; therefore, no additional provision for uncollectible amounts has been recorded. The potential for any additional loss is not believed to be material to the Company's financial condition.

15. Leases

A. Lessee Operating Lease

- (1) The Company leases office space, office equipment, EDP equipment, and software under various noncancelable operating leases. Certain leases have the right to renew. There are no escalation clauses for any lease. Related lease expense for 2025 and 2024 was \$363,319 and \$434,056, respectively.

The Company reevaluated its future office space needs and determined that it would permanently cease use of space under certain operating leases. At December 31, 2025 and 2024, the Company has lease exit costs liabilities of \$2,741,120 and \$4,472,353, respectively, included in general expenses due or accrued on the balance sheet.

- (2) At December 31, 2025, the minimum aggregate rental commitments are as follows:

	<u>Year Ending December 31</u>	<u>Operating Leases</u>
1.	2026	\$ 1,837,660
2.	2027	1,071,968
3.	2028	—
4.	2029	—
5.	2030	—
6.	Thereafter	—
7.	Total (sum of 1 through 6)	<u>\$ 2,909,628</u>

- (3)
- During 2015, the Company entered into a sale-leaseback transaction with an unaffiliated entity to lease the South Portland, Maine building for 12 years.
 - Not applicable.

B. Lessor Leases

- (1) The Company has not entered into any operating leases as a lessor.
- (2) The Company has not entered into any leveraged leases.

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company has no significant financial instruments with off-balance sheet risk.

Financial instruments that potentially subject the Company to concentrations of credit risk consist primarily of investment securities. All investment securities are managed by professional investment managers within policies authorized by the board of directors. Such policies limit the amounts that may be invested in any one issuer and prescribe certain investee company criteria. As of December 31, 2025, there were no significant concentrations.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

Not applicable at December 31, 2025 and 2024.

B. Transfer and Servicing of Financial Assets

(1) The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At December 31, 2025 the fair value of securities loaned was \$9,027,584 and the carrying value of securities loaned was \$9,599,611.

(2) - (7) Not applicable.

C. Wash Sales

(1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance the yield on the investments.

(2) At December 31, 2025 and 2024, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

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

A. Administrative Services Only ("ASO") Plans

The gain or (loss) from operations from ASO uninsured plans and the uninsured portion of partially insured plans during 2025 was:

	ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASO
a. Net reimbursement for administrative expenses (including administrative fees) in excess of (less than) actual expenses	\$ 96,531	(990,229) \$	(893,698)
b. Total net other income or expenses (including interest paid to or received from plans)	—	—	—
c. Net gain or (loss) from operations	\$ 96,531	(990,229) \$	(893,698)
d. Total claim payment volume	\$ 20,940,018	26,691,501 \$	47,631,519

B. Administrative Services Contract ("ASC") Plans

The gain or (loss) from operations from ASC uninsured plans and the uninsured portion of partially insured plans during 2025 was:

	ASC Uninsured Plans	Uninsured Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred	\$ 517,259,567	\$ —	\$ 517,259,567
b. Gross administrative fees accrued	22,951,139	—	22,951,139
c. Other income or expenses (including interest paid to or received from plans)	—	—	—
d. Gross expenses incurred (claims and administrative)	\$ 540,210,706	\$ —	\$ 540,210,706
e. Total gain or (loss) from operations	\$ 2,384,496	\$ —	\$ 2,384,496

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract

(1) The Company does not record revenue explicitly attributable to the cost share and reinsurance components of administered Medicare.

(2)

Receivable from	Related to	2025	2024
Federal government	ACA and Medicare cost sharing and reinsurance programs	\$ 5,760,267	\$ 2,256,427
State government	ACA cost sharing and reinsurance programs, including Section 1332	\$ 8,940,418	\$ 7,101,449
Uninsured plans	Uninsured business, not including pharmaceutical rebate or provider receivables	\$ 24,627,107	\$ 52,255,105

(3) As no revenue is recorded in connection with the cost share and reinsurance components of the Company's Medicare or similarly structured cost-based reimbursement arrangements, the Company has recorded no allowances and reserves for the adjustment of recorded revenues and receivables.

(4) The Company has made no adjustment to revenue resulting from the audit of cost-reimbursement receivables related to revenues recorded in the prior period.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No premiums were written by managing general agents or third party administrators during the years ended December 31, 2025 and 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds					
Asset-backed securities	\$ —	\$ 1,570,487	\$ —	\$ —	\$ 1,570,487
Total bonds	\$ —	\$ 1,570,487	\$ —	\$ —	\$ 1,570,487
Cash equivalents					
Industrial and miscellaneous money market funds	\$134,015,388	\$ —	\$ —	\$ —	\$ 134,015,388
Total cash equivalents	\$134,015,388	\$ —	\$ —	\$ —	\$ 134,015,388
Total assets at fair value/NAV	\$134,015,388	\$ 1,570,487	\$ —	\$ —	\$ 135,585,875

(2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

There are no investments in Level 3 as of December 31, 2025 and 2024.

(3) The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

(4) Fair values of bonds are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. Level 2 securities primarily include United States government securities, corporate securities, securities from states, municipalities and political subdivisions, mortgage-backed securities and certain other asset-backed securities. For securities not actively traded, the pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds. The Company has controls in place to review the pricing services' qualifications and procedures used to determine fair values. In addition, the Company periodically reviews the pricing services' pricing methodologies, data sources and pricing inputs to ensure the fair values obtained are reasonable.

Certain bonds, primarily corporate debt securities, are designated Level 3. For these securities, the valuation methodologies may incorporate broker quotes or discounted cash flow analyses using assumptions for inputs such as expected cash flows, benchmark yields, credit spreads, default rates and prepayment speeds that are not observable in the markets.

Cash equivalents primarily consist of highly rated money market funds or bonds with original maturities of three months or less. Due to the high ratings and short-term nature, these investments are designated as Level 1. The Company also holds bonds purchased with less than three months to maturity. Fair value of these bonds are based on quoted market prices obtained from third party pricing services which generally use Level 1 or Level 2 inputs.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

There have been no significant changes in the valuation techniques during the current period.

B. Fair Value Measurements Under Other Accounting Pronouncements

Not applicable at December 31, 2025 and 2024.

C. Financial Instruments

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Issuer credit obligations	\$41,242,964	\$43,480,557	\$ —	\$41,242,964	\$ —	\$ —	\$ —
Asset-backed securities	51,048,131	51,972,712	—	51,048,131	—	—	—
Cash equivalents	135,512,035	135,511,894	134,015,388	1,496,647	—	—	—
Securities lending collateral asset	9,218,888	9,216,237	—	9,218,888	—	—	—

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate fair value.

E. Investments Measured at Net Asset Value

The Company has no investments measured at net asset value.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

21. Other Items

A. Unusual or Infrequent Items

Not applicable at December 31, 2025 and 2024.

B. Troubled Debt Restructuring: Debtors

Not applicable at December 31, 2025 and 2024.

C. Other Disclosures

Land is recorded at cost and other real estate is recorded at cost less accumulated depreciation. Depreciation is computed primarily using the straight-line method over the estimated useful lives of the assets. Real estate was not adjusted to market value at the date of purchase.

Assets in the amount of \$767,056 and \$788,385 at December 31, 2025 and 2024, respectively, were on deposit with government authorities or trustees as required by law.

The Company participates in the Federal Employee Health Benefits Program (“FEHBP”) with other Blue Cross Blue Shield Plans. This program includes a fully-insured experience-rated contract, commonly known as the FEP, between the OPM and BCBSA, which acts as an agent for the participating Blue Cross Blue Shield plans. In addition, each participating plan, including the Company, executes a contract with BCBSA which obligates each participating plan to underwrite FEP benefits in its service area.

FEP premium is earned when chargeable benefit costs, allowable expenses or retentions are incurred. Deferred premiums are recorded to offset the FEP liabilities for incurred claims but not reported and claims adjustment expenses that are due from the OPM, when the claims are ultimately paid. Premium rates are developed by BCBSA and negotiated with OPM annually. These rates determine the funds that will be available to the participating Blue Cross Blue Shield plans to provide insurance to Federal employees that enroll with the Blue Cross Blue Shield FEP. The excess of gross premiums for the life of the program over the charges for the life of the program on an accrual basis is accounted for as a rate stabilization reserve (commonly referred to as the special reserve), as required by the contract between OPM and BCBSA. Each year, OPM also allocates a portion of the premiums to a contingency reserve, which may be utilized by the participating plans in the event that annual premiums paid to the insurance carrier are insufficient or the rate stabilization reserve falls below certain levels prescribed by OPM. Premiums paid to the carrier and available to each participating Blue Cross Blue Shield plan, including the special reserve and the contingency reserve, are held at the U.S. Treasury, including amounts unused from prior periods. Any premiums that remain in the rate stabilization reserve upon termination of the BCBSA contract after the claims run-out and reimbursement of allowable administrative expenses would be returned to OPM for the benefit of the FEHBP. The FEP contract renews automatically each year unless written notice of termination is given by either party.

In accordance with the FEP contract, premium funds that exceed daily operating needs are held on behalf of the Company in letter of credit accounts at the U.S. Treasury to provide funding for claims, administrative expenses, and other charges to the contract. The Company, along with other Blue Cross Blue Shield plans who participate in the FEHBP contract, have an unrestricted right to draw funds being held in the U.S. Treasury, other than those allocated to the contingency reserve, for any valid claim or expense. If the balance of the special reserve is exhausted or falls below certain prescribed levels, OPM will transfer funds from the contingency reserve to the special reserve to the extent that funds are available in the contingency reserve. Amounts

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

incurred in excess of the total reserves held at the U.S. Treasury for the FEP would not be reimbursed to the Company.

The Company has recorded its allocable share of the special reserve funds held in the U.S. Treasury as an asset, with an equivalent amount recorded as a rate stabilization reserve. These amounts are \$23,989,525 and \$16,115,258 as of December 31, 2025 and 2024, respectively, and are included in aggregate write-ins for other than invested assets and in health policy reserves in the accompanying balance sheets.

FEP represented approximately 78.8% and 67.3% of premiums receivable as of December 31, 2025 and 2024, respectively. FEP represented approximately 20.1% and 21.3% of net premiums written for the years ended December 31, 2025 and 2024, respectively.

D. Business Interruption Insurance Recoveries

The Company has reported no recoveries for business interruption for the years ended December 31, 2025 and 2024.

E. State and Federal Tax Credits

The Company did not have state or federal tax credits at December 31, 2025 and 2024.

F. Subprime Mortgage-Related Risk Exposure

(1) The Company's investment strategy of providing safety and preservation of capital, sufficient liquidity to meet cash flow requirements and the attainment of a competitive after-tax investment return is supported by a well diversified portfolio consisting of many different types of investments. The portion of the Company's investment portfolio with subprime mortgage-related risk exposure is relatively small in comparison to the overall investment portfolio, and consists mainly of investment grade securities with no exposure to collateralized debt obligations. All mortgage related investments are monitored closely as part of the quarterly investment review performed by the Elevance Health Investment Impairment Review Committee.

(2) The Company did not carry investments in subprime mortgage loans in its portfolio at December 31, 2025 or 2024.

(3) At December 31, 2025, the Company's subprime mortgage-related risk exposure is detailed below:

	Actual Cost	Book/ Adjusted Carrying Value (excluding interest)	Fair Value	Other-Than-Temporary Impairment Losses Recognized
a. Asset-backed securities	\$ 2,287,857	\$ 2,520,749	\$ 2,344,235	\$ —
b. Collateralized loan obligations	—	—	—	—
c. Equity investments in SCAs*	—	—	—	—
d. Other assets	—	—	—	—
e. Total	\$ 2,287,857	\$ 2,520,749	\$ 2,344,235	\$ —

* The Company's subsidiary XXX has investments in subprime mortgages. These investments comprise XX% of the companies invested assets.

(4) The Company did not underwrite Mortgage Guaranty or Financial Guaranty insurance coverage at December 31, 2025 or 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

G. Retained Assets

The Company does not have retained assets at December 31, 2025 and 2024.

H. Insurance-Linked Securities Contracts

Not applicable.

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable.

22. Events Subsequent

Subsequent events have been considered through February 26, 2026 for the statutory statement issued on February 27, 2026. There were no events occurring subsequent to December 31, 2025 requiring recognition or disclosure.

23. Reinsurance

A. Ceded Reinsurance Report

Section 1 - General Interrogatories

- (1) Are any of the reinsurers that are listed in Schedule S as non-affiliated owned in excess of 10% or controlled, either directly or indirectly, by the Company or by any representative, officer, trustee, or director of the Company?

Yes () No (X)

If yes, give full details.

- (2) Have any policies issued by the Company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled, directly or indirectly, by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes () No (X)

If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

- (1) Does the Company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

If yes, give full details.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

- (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the Company may consider the current or anticipated experience of the business reinsured in making this estimate.

(\$2,463)

- (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the Company as of the effective date of the agreement?

Yes () No (X)

If yes, give full details.

B. Uncollectible Reinsurance

The Company has no uncollectible reinsurance at December 31, 2025 and 2024.

C. Commutation of Ceded Reinsurance

The Company has not commuted ceded reinsurance during 2025 and 2024.

D. Certified Reinsurer Rating Downgraded or Status Subject Revocation

The Company has no downgraded certified reinsurer ratings or status subject to revocations during 2025 and 2024.

E. Reinsurance Credit

- (1) The Company has the following reinsurance contracts subject to Life and Health Reinsurance Agreements Model Regulation Appendix A-791 (“A-791”) that includes a provision which limits the reinsurer’s assumption of risks, such as a deductible, a loss ratio corridor, a loss cap, or an aggregate limit, as defined in A-791:

Name of Reinsurer	Number of contracts to which such provisions apply	Was Deposit Accounting Applied (Yes or No)
Maine Guaranteed Access Reinsurance Association	1	No

- (2) Not applicable.

- (3) Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

(4) Not applicable.

(5) Not applicable.

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A.** The Company sells accident and health policies for which the premiums vary based on loss experience. The Company estimates retrospective premium adjustments through the review of each retrospectively rated account, comparing the claim development with that anticipated in the policy contracts.
- B.** The Company records accrued retrospective premium as an adjustment to earned premium.
- C.** The amount of net premiums written by the Company at December 31, 2025 and 2024 that were subject to retrospective rating features was \$1,490,042,185 and \$1,340,307,988, respectively, which represented 97.6% and 98.0%, respectively, of the total net premiums written.
- D.** In accordance with the NAIC SAP, medical loss ratio rebates in accordance with the Federal 2010 Patient Protection and Affordable Care Act and Public Health Service Act (“ACA Act” or “ACA”), are to be reported in accordance with SSAP No. 66 - *Retrospectively Rated Contracts* (“SSAP No. 66”). A retrospectively rated contract is one that has the final policy premium calculated based on the loss experience of the insured during the term of the policy (including loss development after the term of the policy) and the stipulated formula set forth in the policy, or in the case of medical loss ratio rebates, a formula required by law. The Company based the incurred and unpaid liability amounts reported below based on its underwriting experience; actuarial, tax, and accounting estimates and assumptions at the financial statement date; as well as regulations and guidance available that is not final and subject to change prior to settlement. Accordingly, the Company’s use of estimates and assumptions in the preparation of the statutory based financial statements and related footnote disclosures may differ from actual results. Hence, the amounts reported herein are for financial reporting purposes solely and not intended to be used for settlement purposes.

Medical loss ratio rebates accrued pursuant to the ACA Act are as follows:

	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Year Reporting:					
(1) Medical loss ratio rebates incurred	\$ —	\$ —	\$ —	\$ —	\$ —
(2) Medical loss ratio rebates paid	—	—	—	—	—
(3) Medical loss ratio rebates unpaid	400,000	—	—	—	400,000
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	400,000
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ —	\$ —	\$ —	\$ —	\$ —
(8) Medical loss ratio rebates paid	—	—	—	—	—
(9) Medical loss ratio rebates unpaid	400,000	—	—	—	400,000
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	—
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	—
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 400,000

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

E. Risk-Sharing Provisions of the ACA

- (1) Did the reporting entity write accident and health insurance premium that is subject to the Affordable Care Act risk-sharing provisions (YES/NO)? Yes
- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year
- a. Permanent ACA Risk Adjustment Program
- Assets
1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) \$ 1,375,229
- Liabilities
2. Risk adjustment user fees payable for ACA Risk Adjustment \$ 142,381
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premiums) \$ 14,898,294
- Operations (Revenue & Expense)
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment \$ (12,968,165)
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) \$ 149,005
- (3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date	
				Prior Year Accrued Less Payments (Col 1-3)	Prior Year Accrued Less Payments (Col 2-4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
1	2	3	4	5	6	7	8	9	10
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable (Payable)

a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	\$ 944,413	\$ —	\$ 1,280,731	\$ —	\$ (336,318)	\$ —	\$ 337,497	\$ —	A	\$ 1,179	\$ —
2. Premium adjustments (payable) (including high risk pool premiums)	\$ —	\$ 10,793,248	\$ —	\$ 9,119,168	\$ —	\$ 1,674,080	\$ —	\$ (1,674,080)	B	\$ —	\$ —
3. Total ACA Permanent Risk Adjustment Program	\$ 944,413	\$ 10,793,248	\$ 1,280,731	\$ 9,119,168	\$ (336,318)	\$ 1,674,080	\$ 337,497	\$ (1,674,080)		\$ 1,179	\$ —

Explanations of Adjustments

- A Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2024 Benefit Year."
- B Adjustments were made to reflect the ending balance in the Centers for Medicare & Medicaid Services "Summary Report on Permanent Risk Adjustment Transfers for the 2024 Benefit Year."

25. Change in Incurred Claims and Claim Adjustment Expenses

- A.** The estimated cost of claims and claim adjustment expense attributable to insured events of prior years decreased by \$26,558,677 during 2025. This is approximately 19.5% of unpaid claims and claim adjustment expenses, net of healthcare receivables, of \$136,041,457 as of December 31, 2024. The redundancy reflects the decreases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2025. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.
- B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

Not applicable at December 31, 2025 and 2024.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.
NOTES TO FINANCIAL STATEMENTS

27. Structured Settlements

Not applicable at December 31, 2025 and 2024.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2025	\$ 10,648,865	\$ 29,347,832	\$ 18,698,967	\$ —	\$ —
9/30/2025	10,828,731	28,521,545	26,724,784	—	—
6/30/2025	10,009,207	26,500,445	25,055,388	1,445,057	—
3/31/2025	8,592,127	22,659,144	21,365,583	1,293,561	—
12/31/2024	8,884,501	24,016,451	22,585,007	1,431,444	—
9/30/2024	8,243,144	22,558,520	21,307,626	1,250,894	—
6/30/2024	7,748,655	20,994,908	19,556,530	1,438,378	—
3/31/2024	7,087,063	19,603,147	18,119,182	1,483,965	—
12/31/2023	6,973,103	18,095,868	16,994,785	1,101,083	—
9/30/2023	6,853,506	18,389,070	17,315,119	1,073,951	—
6/30/2023	6,424,656	16,835,952	15,859,593	976,358	—
3/31/2023	6,354,349	15,591,917	14,240,920	1,350,997	—

Note: Amounts within column "Estimated pharmacy rebates as reported on financial statements" include \$641,658 of uninsured admitted pharmacy rebate receivables at December 31, 2025 that are reported within Pg 2, Ln 17 "Amounts receivable relating to uninsured plans."

B. Risk Sharing Receivables

Not applicable at December 31, 2025 and 2024.

C. Prescription Payment Plan Receivables

Not applicable at December 31, 2025 and 2024.

29. Participating Policies

Not applicable at December 31, 2025 and 2024.

30. Premium Deficiency Reserves

The Company had no liabilities related to premium deficiency reserves as of December 31, 2025 and 2024.

31. Anticipated Salvage and Subrogation

The Company took into account estimated anticipated subrogation and other recoveries in its determination of the liability for unpaid claims and reduced the liability by \$1,036,000 and \$436,000 at December 31, 2025 and 2024, respectively.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State Regulating? Maine
- 1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [X] No []
- 1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 0001156039
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2022
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2017
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 10/23/2019
- 3.4 By what department or departments?
Maine Bureau of Insurance
- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information
.....
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
7.21 State the percentage of foreign control %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES

- 8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If the response to 8.1 is yes, please identify the name of the DIHC.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

- 8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]
- 8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []
9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Ernst & Young, 835 N College Ave Suite 1125, Indianapolis 46202
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption:
.....
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption:
.....
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the response to 10.5 is no or n/a, please explain.
.....
11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Alexander S. Weldon FSA, MAAA, Associate Actuary 1860 McQuat Place Indianapolis, IN 46202
- 12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]
- 12.11 Name of real estate holding company ...
- 12.12 Number of parcels involved
- 12.13 Total book/adjusted carrying value \$
- 12.2 If yes, provide explanation
.....
- 13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**
- 13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
.....
- 13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []
- 14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is No, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended? Yes [X] No []
- 14.21 If the response to 14.2 is yes, provide information related to amendment(s).
1.Added a new section on mobile devices, stating that Elevance Health has the right to physically access any personal device used for company business to inspect, review, and collect company information.2.Strengthened language on secondary employment, emphasizing its potential to distract from associates' primary responsibilities and misappropriate compensation from Elevance Health. This also includes a reminder about conducting secondary employment/external activities such as freelancing, public speaking, and contributions to external publications.3.Introduced a new section on the Enterprise Firewall policy to ensure the proper use and disclosure of Competitively Sensitive Information within the Elevance Health family of companies 4.Included a Q&A on conference fees and clarified that all cash gifts must be declined. 5.Added language mandating that all Artificial Intelligence, machine learning, and large language models must be developed and/or used in accordance with the Enterprise AI policy. 6.Revised sections of the Code to comply with Section 508 of the Rehabilitation Act, ensuring individuals with disabilities have equal access to electronic information and data comparable to those without disabilities.
- 14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]
- 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).
.....

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]
- 15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []
18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]
- 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.11 To directors or other officers.....\$
 - 20.12 To stockholders not officers.....\$
 - 20.13 Trustees, supreme or grand (Fraternal Only)\$
- 20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 20.21 To directors or other officers.....\$
 - 20.22 To stockholders not officers.....\$
 - 20.23 Trustees, supreme or grand (Fraternal Only)\$
- 21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 21.2 If yes, state the amount thereof at December 31 of the current year:
- 21.21 Rented from others.....\$
 - 21.22 Borrowed from others.....\$
 - 21.23 Leased from others\$
 - 21.24 Other\$
- 22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 22.2 If answer is yes:
- 22.21 Amount paid as losses or risk adjustment \$
 - 22.22 Amount paid as expenses\$
 - 22.23 Other amounts paid\$
- 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No []
- 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$ 89,322,296
- 24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]
- 24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [X] No []

GENERAL INTERROGATORIES

- 25.02 If no, give full and complete information, relating thereto
.....
- 25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided) See Notes 5E and 17.
- 25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$ 9,216,237
- 25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$
- 25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes No N/A
- 25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes No N/A
- 25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes No N/A
- 25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:
- 25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 9,218,888
- 25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 9,216,237
- 25.093 Total payable for securities lending reported on the liability page \$ 9,216,237

- 26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes No
- 26.2 If yes, state the amount thereof at December 31 of the current year:
- 26.21 Subject to repurchase agreements \$
- 26.22 Subject to reverse repurchase agreements \$
- 26.23 Subject to dollar repurchase agreements \$
- 26.24 Subject to reverse dollar repurchase agreements \$
- 26.25 Placed under option agreements \$
- 26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$
- 26.27 FHLB Capital Stock \$
- 26.28 On deposit with states \$ 782,443
- 26.29 On deposit with other regulatory bodies \$
- 26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$
- 26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$
- 26.32 Other \$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

- 27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes No
- 27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes No N/A
If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

- 27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes No
- 27.4 If the response to 27.3 is YES, does the reporting entity utilize:
- 27.41 Special accounting provision of SSAP No. 108 Yes No
- 27.42 Permitted accounting practice Yes No
- 27.43 Other accounting guidance Yes No
- 27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes No
- The reporting entity has obtained explicit approval from the domiciliary state.
 - Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
 - Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
 - Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.
- 28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes No
- 28.2 If yes, state the amount thereof at December 31 of the current year. \$
29. Excluding items in Schedule E, Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes No

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
JP Morgan Chase Bank, N.A	383 Madison Ave, New York, NY 10179

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

GENERAL INTERROGATORIES

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Elevance Health, Inc.	I.....
Loomis, Sayles & Company, LP	U.....
Pacific Investment Management Company	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No [] N/A []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X] N/A []

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Registered With	4 Investment Management Agreement (IMA) Filed
105377	Loomis, Sayles & Company, LP	Securities Exchange Commission	NO.....
104559	Pacific Investment Management Company	Securities Exchange Commission	NO.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Issuer Credit Obligations	44,977,064	42,739,611	(2,237,453)
31.2 Asset-Backed Securities	51,972,712	51,048,131	(924,581)
31.3 Preferred stocks	0		0
31.4 Totals	96,949,776	93,787,742	(3,162,034)

31.5 Describe the sources or methods utilized in determining the fair values:

Fair values were obtained from third-party pricing sources. If a security was not priced by a third-party pricing source, internal analytical systems or broker quotes were utilized.

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

33.2 If no, list exceptions:
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

- a. The security was either:
 - i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 - ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
- b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
- c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
- d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:

- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
- b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
- c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
- d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [X] N/A []

GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]

38.2 If the response to 38.1 is yes, on what schedule are they reported?

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
 39.21 Held directly Yes [] No []
 39.22 Immediately converted to U.S. dollars Yes [] No []

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$258,933

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
Blue Cross Blue Shield Association	258,933

41.1 Amount of payments for legal expenses, if any? \$ 538,140

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? \$ 129,131

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid
Preti Flaherty Beliveau Pachios LLP	59,601
Serlin Haley	56,763
Lobbying expenses disclosed reflect amounts reported in the Lobbyist Disclosure Reports filed with the Secretary of State as well as the cost of external contractors who provided lobbying services to the Company. The amount may include expenses that may have been paid by an affiliate on behalf of the Company and, as a result, may not be included in the Underwriting Gain reported on page 4 of the 2025 Annual Statement.	

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [X] No []

1.2 If yes, indicate premium earned on U.S. business only. \$ 57,949,291

1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$

1.31 Reason for excluding
.....

1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above \$

1.5 Indicate total incurred claims on all Medicare Supplement Insurance. \$ 54,959,283

1.6 Individual policies: Most current three years:

1.61 Total premium earned \$ 11,394,921

1.62 Total incurred claims \$ 12,547,264

1.63 Number of covered lives 4,148

All years prior to most current three years:

1.64 Total premium earned \$ 46,554,370

1.65 Total incurred claims \$ 42,412,019

1.66 Number of covered lives 15,453

1.7 Group policies: Most current three years:

1.71 Total premium earned \$ 0

1.72 Total incurred claims \$ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned \$ 0

1.75 Total incurred claims \$ 0

1.76 Number of covered lives 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	1,503,939,792	1,437,911,733
2.2 Premium Denominator	1,503,939,792	1,437,911,733
2.3 Premium Ratio (2.1/2.2)	1.000	1.000
2.4 Reserve Numerator	227,754,607	181,886,182
2.5 Reserve Denominator	227,754,607	181,886,182
2.6 Reserve Ratio (2.4/2.5)	1.000	1.000

3.1 Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits? Yes [] No [X]

3.2 If yes, give particulars:
.....

4.1 Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency? Yes [X] No []

4.2 If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered? Yes [] No []

5.1 Does the reporting entity have stop-loss reinsurance? Yes [] No [X]

5.2 If no, explain:
.....

5.3 Maximum retained risk (see instructions)

5.31 Comprehensive Medical \$

5.32 Medical Only \$

5.33 Medicare Supplement \$

5.34 Dental & Vision \$

5.35 Other Limited Benefit Plan \$

5.36 Other \$

6. Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:
.....

7.1 Does the reporting entity set up its claim liability for provider services on a service date basis? Yes [X] No []

7.2 If no, give details
.....

8. Provide the following information regarding participating providers:

8.1 Number of providers at start of reporting year 14,703

8.2 Number of providers at end of reporting year 34,685

9.1 Does the reporting entity have business subject to premium rate guarantees? Yes [] No [X]

9.2 If yes, direct premium earned:

9.21 Business with rate guarantees between 15-36 months.. \$.....

9.22 Business with rate guarantees over 36 months \$.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Anthem Health Plans of Maine, Inc.

FIVE-YEAR HISTORICAL DATA

	1 2025	2 2024	3 2023	4 2022	5 2021
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	522,074,874	433,507,964	543,614,331	740,507,952	683,378,987
2. Total liabilities (Page 3, Line 24)	342,765,838	292,585,516	408,756,241	586,880,724	537,089,035
3. Statutory minimum capital and surplus requirement	107,919,313	101,792,585	64,914,968	55,890,893	56,281,085
4. Total capital and surplus (Page 3, Line 33)	179,309,036	140,922,448	134,858,090	153,627,228	146,289,952
Income Statement (Page 4)					
5. Total revenues (Line 8)	1,503,939,792	1,437,911,733	1,249,876,976	1,202,014,061	1,166,425,411
6. Total medical and hospital expenses (Line 18)	1,373,640,669	1,274,375,865	1,106,398,504	1,053,915,609	1,025,317,502
7. Claims adjustment expenses (Line 20)	34,643,844	33,194,420	33,376,055	38,087,644	35,679,930
8. Total administrative expenses (Line 21)	81,343,735	80,709,034	68,860,662	66,656,142	68,667,646
9. Net underwriting gain (loss) (Line 24)	14,311,544	49,632,414	41,241,755	43,354,666	36,760,333
10. Net investment gain (loss) (Line 27)	10,489,244	1,975,144	5,592,518	10,488,147	8,204,822
11. Total other income (Lines 28 plus 29)	6,170,639	1,537,945	(3,162,566)	514,554	(308,918)
12. Net income or (loss) (Line 32)	28,415,128	37,011,937	33,823,861	55,351,002	29,225,123
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	63,103,357	21,911,953	29,560,919	(66,198,638)	115,093,727
Risk-Based Capital Analysis					
14. Total adjusted capital	179,309,036	140,922,448	134,858,090	153,627,228	146,289,952
15. Authorized control level risk-based capital	43,167,725	40,717,034	25,965,987	22,356,357	22,512,434
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	342,252	343,655	310,493	369,894	407,540
17. Total members months (Column 6, Line 7)	4,144,703	4,036,860	3,847,998	4,518,984	4,864,236
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	91.3	88.6	88.5	87.7	87.9
20. Cost containment expenses	1.3	1.2	1.3	1.7	1.6
21. Other claims adjustment expenses	1.0	1.1	1.3	1.5	1.5
22. Total underwriting deductions (Line 23)	99.0	96.5	96.7	96.4	96.8
23. Total underwriting gain (loss) (Line 24)	1.0	3.5	3.3	3.6	3.2
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	104,725,055	109,530,910	140,167,909	160,888,657	114,006,120
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	132,001,345	130,178,426	159,855,632	178,103,948	125,527,599
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 9 + 15, Col. 1)	0	0			
27. Affiliated preferred stocks (Sch. D Summary, Line 22, Col. 1)					0
28. Affiliated common stocks (Sch. D Summary, Line 28, Col. 1)					0
29. Affiliated mortgage loans on real estate					
30. All other affiliated					
31. Total of above Lines 26 to 30	0	0	0	0	0
32. Total investment in parent included in Lines 26 to 30 above					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Corrections of Errors? Yes [] No []
If no, please explain:

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only									
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	N								0	
2. Alaska	AK	N								0	
3. Arizona	AZ	N								0	
4. Arkansas	AR	N								0	
5. California	CA	N								0	
6. Colorado	CO	N								0	
7. Connecticut	CT	N								0	
8. Delaware	DE	N								0	
9. District of Columbia	DC	N								0	
10. Florida	FL	N								0	
11. Georgia	GA	N								0	
12. Hawaii	HI	N								0	
13. Idaho	ID	N								0	
14. Illinois	IL	N								0	
15. Indiana	IN	N								0	
16. Iowa	IA	N								0	
17. Kansas	KS	N								0	
18. Kentucky	KY	N								0	
19. Louisiana	LA	N								0	
20. Maine	ME	L	1,220,619,315	(573,339)		306,690,610				1,526,736,586	
21. Maryland	MD	N								0	
22. Massachusetts	MA	N								0	
23. Michigan	MI	N								0	
24. Minnesota	MN	N								0	
25. Mississippi	MS	N								0	
26. Missouri	MO	N								0	
27. Montana	MT	N								0	
28. Nebraska	NE	N								0	
29. Nevada	NV	N								0	
30. New Hampshire	NH	N								0	
31. New Jersey	NJ	N								0	
32. New Mexico	NM	N								0	
33. New York	NY	N								0	
34. North Carolina	NC	N								0	
35. North Dakota	ND	N								0	
36. Ohio	OH	N								0	
37. Oklahoma	OK	N								0	
38. Oregon	OR	N								0	
39. Pennsylvania	PA	N								0	
40. Rhode Island	RI	N								0	
41. South Carolina	SC	N								0	
42. South Dakota	SD	N								0	
43. Tennessee	TN	N								0	
44. Texas	TX	N								0	
45. Utah	UT	N								0	
46. Vermont	VT	N								0	
47. Virginia	VA	N								0	
48. Washington	WA	N								0	
49. West Virginia	WV	N								0	
50. Wisconsin	WI	N								0	
51. Wyoming	WY	N								0	
52. American Samoa	AS	N								0	
53. Guam	GU	N								0	
54. Puerto Rico	PR	N								0	
55. U.S. Virgin Islands	VI	N								0	
56. Northern Mariana Islands	MP	N								0	
57. Canada	CAN	N								0	
58. Aggregate other aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	1,220,619,315	(573,339)	0	0	306,690,610	0	0	1,526,736,586	0	0
60. Reporting entity contributions for employee benefit plans	XXX								0		
61. Totals (direct business)	XXX	1,220,619,315	(573,339)	0	0	306,690,610	0	0	1,526,736,586	0	0
DETAILS OF WRITE-INS											
58001.	XXX										
58002.	XXX										
58003.	XXX										
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N - None of the above - Not allowed to write business in the state..... 56

(b) Explanation of basis of allocation by states, premiums by state, etc.

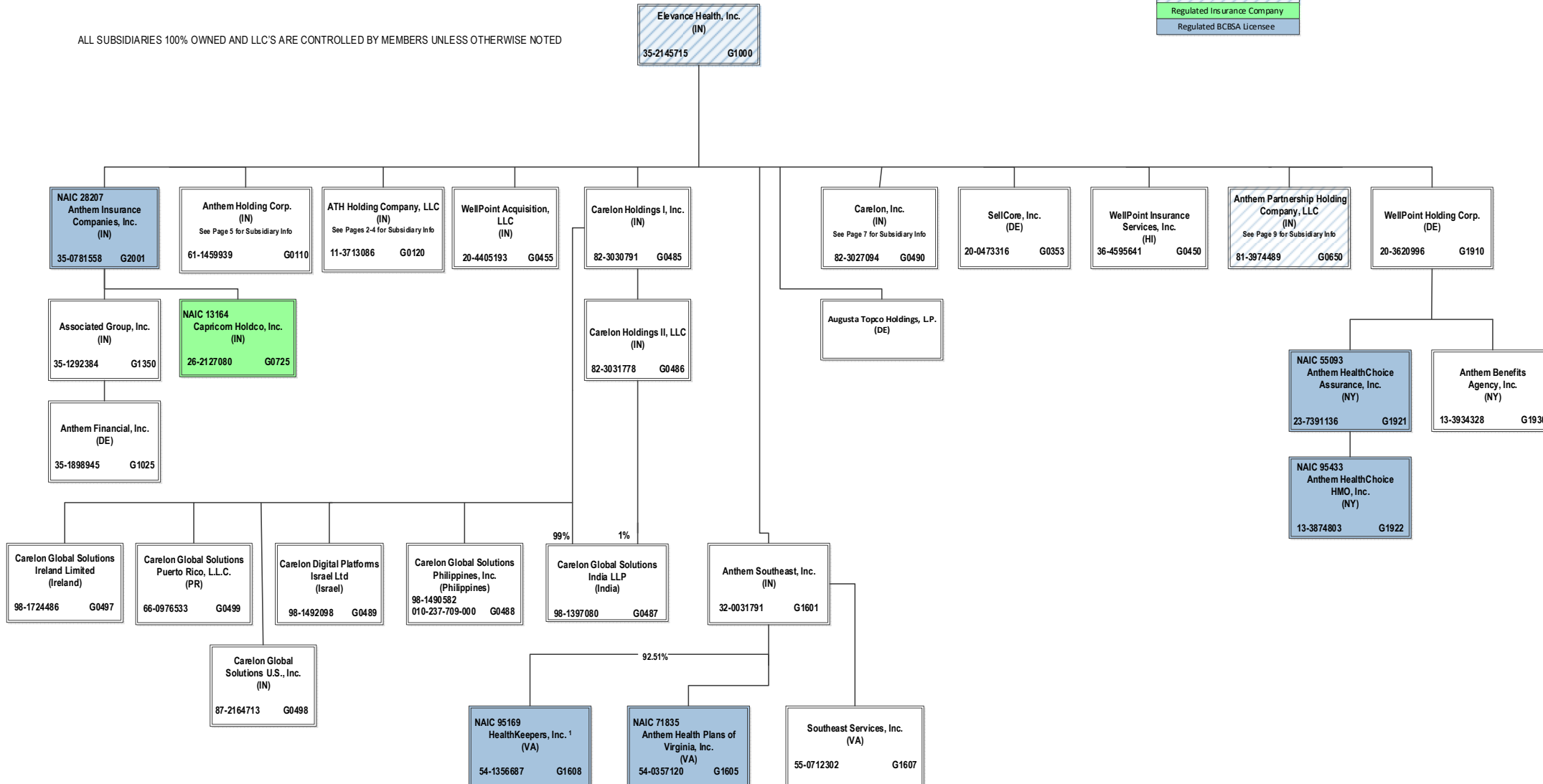
N/A

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



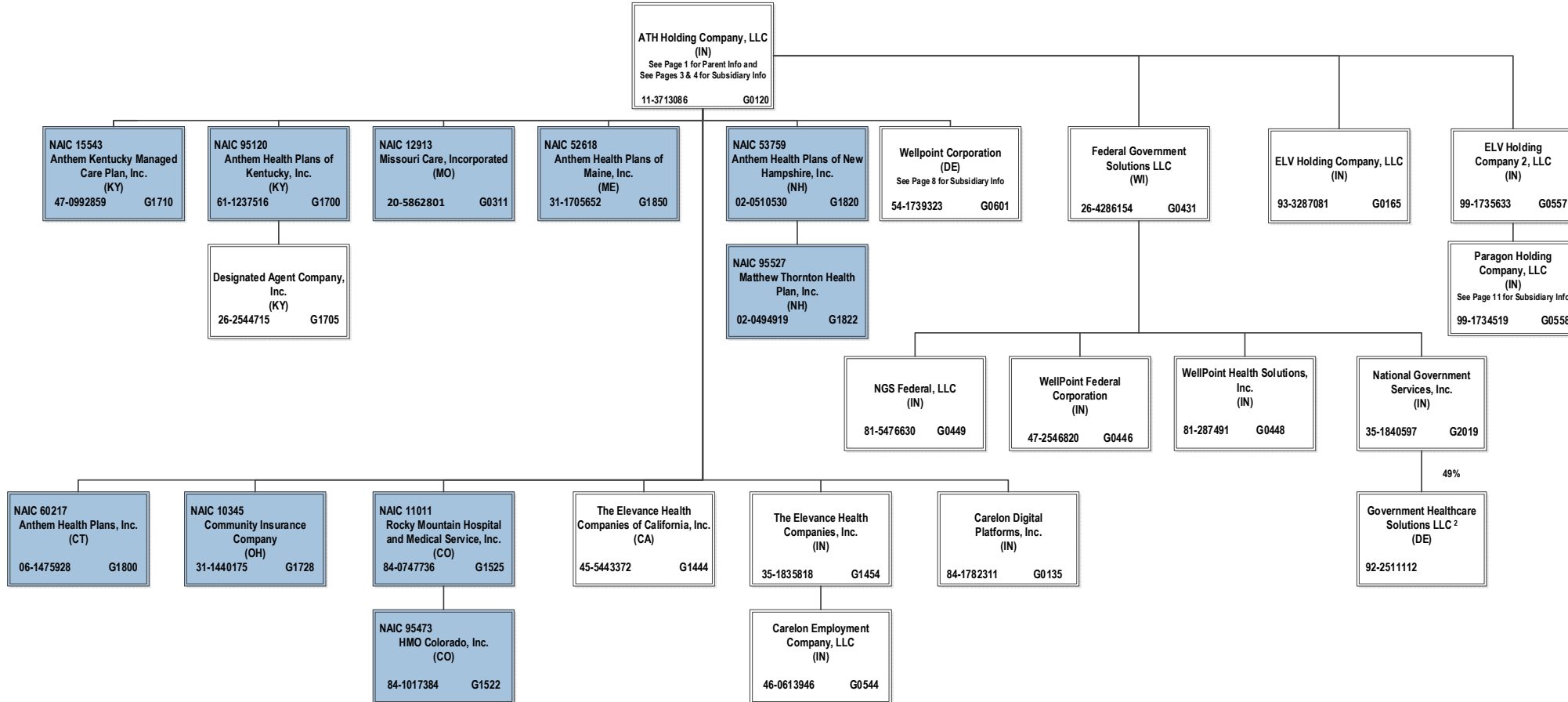
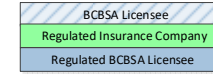
¹ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

Augusta Topco Holdings, L.P. is owned 39.6% by Elevance Health, Inc. and 60.4% by external entities.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



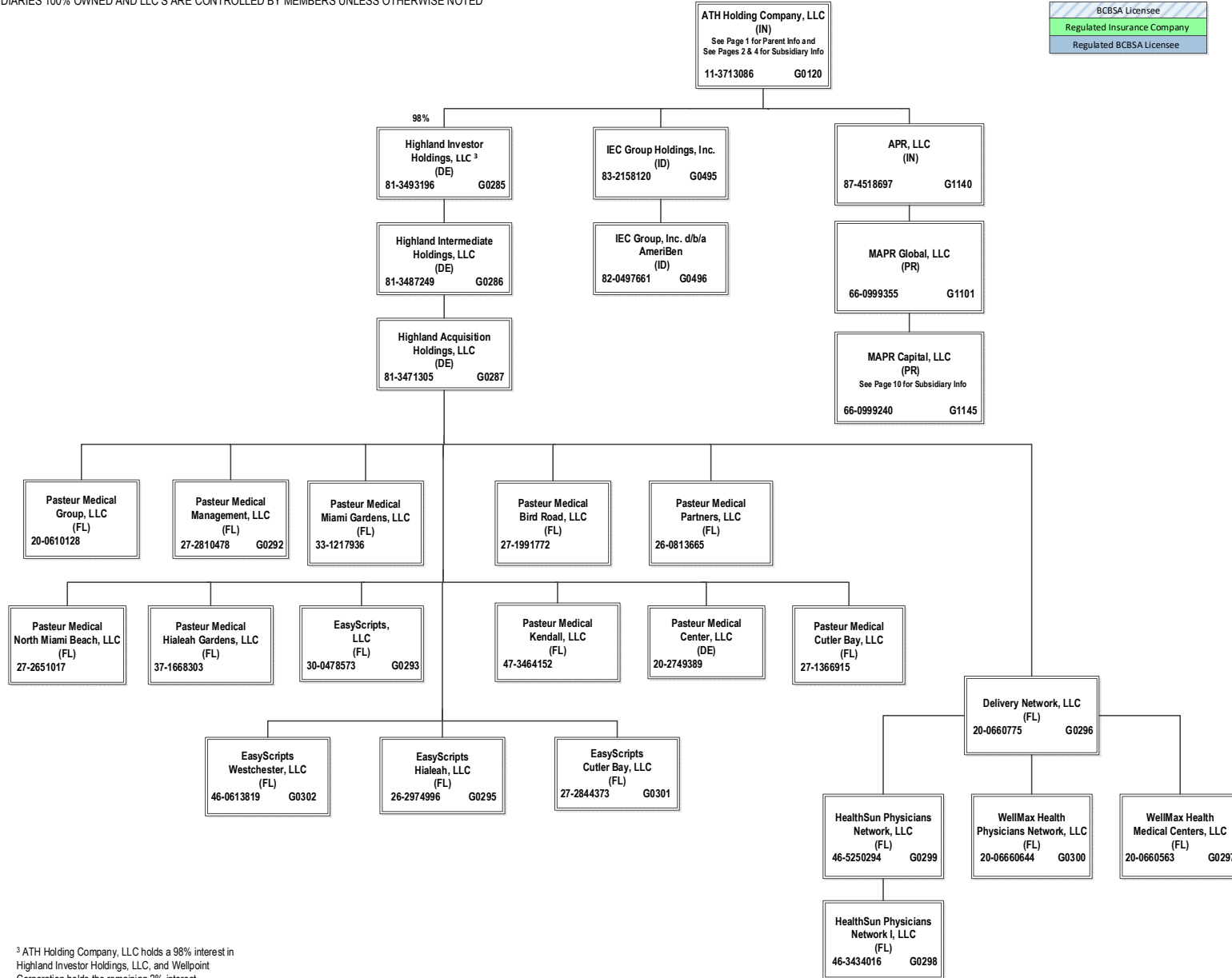
40.1

² Government Healthcare Solutions LLC. is a joint venture 49% owned by National Government Services, Inc. and 51% owned by MKS2 LLC (non-affiliate)

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

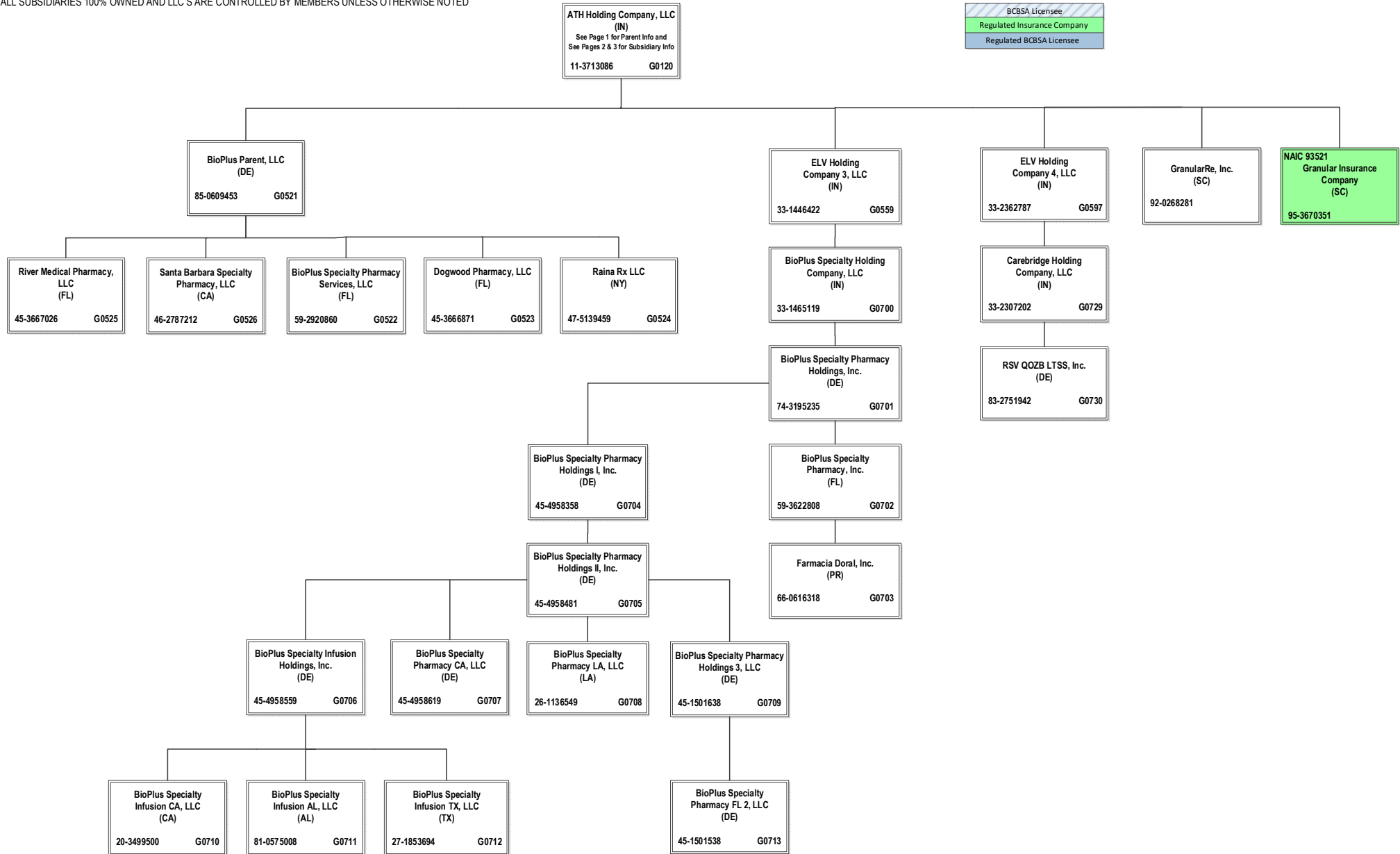


³ ATH Holding Company, LLC holds a 98% interest in Highland Investor Holdings, LLC, and Wellpoint Corporation holds the remaining 2% interest.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

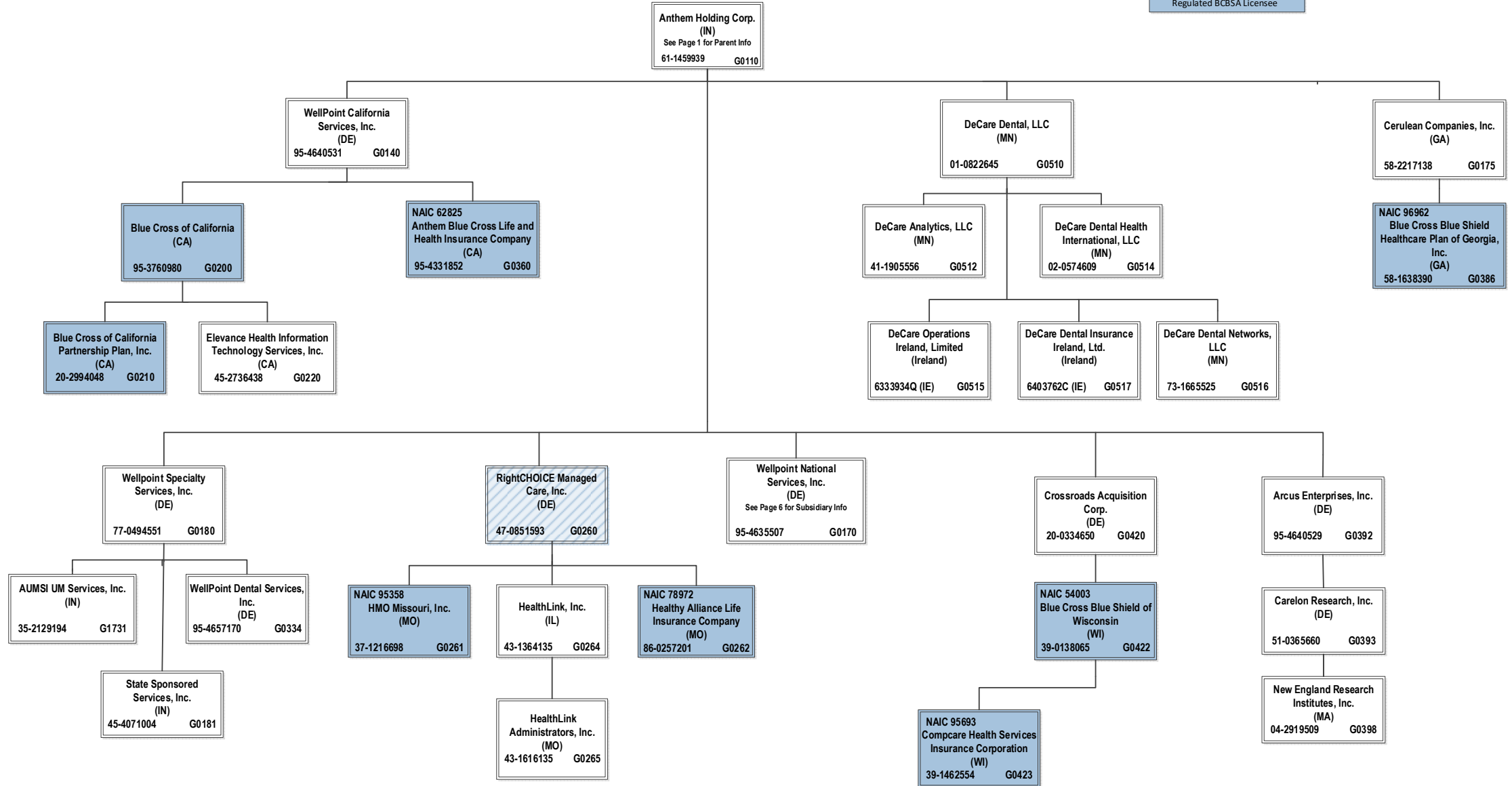


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

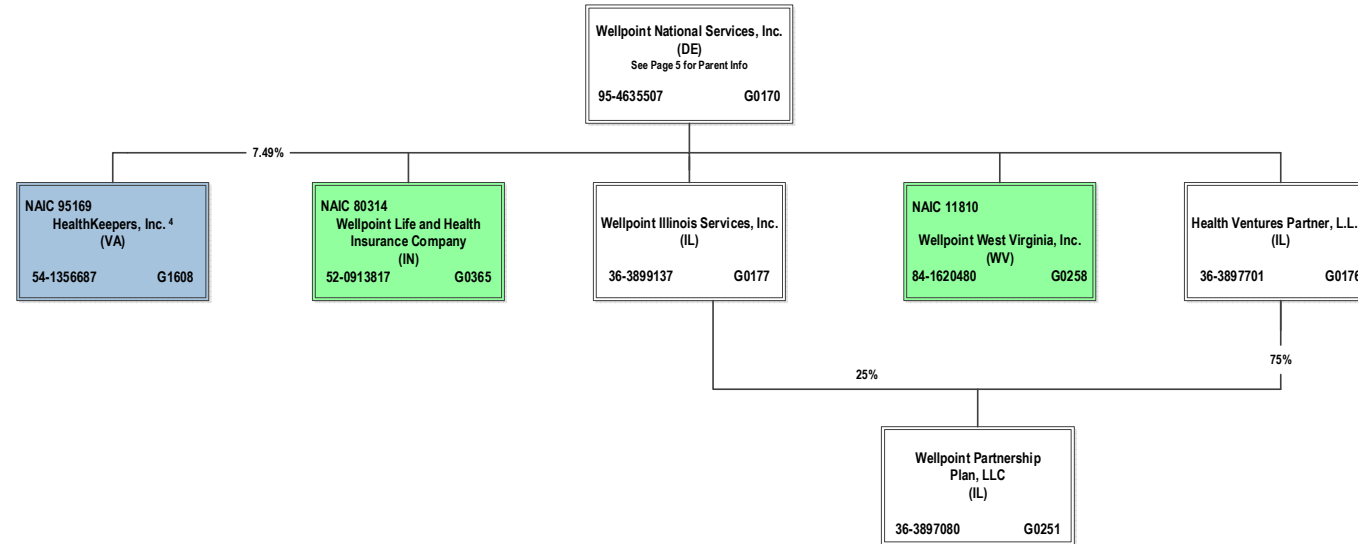


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



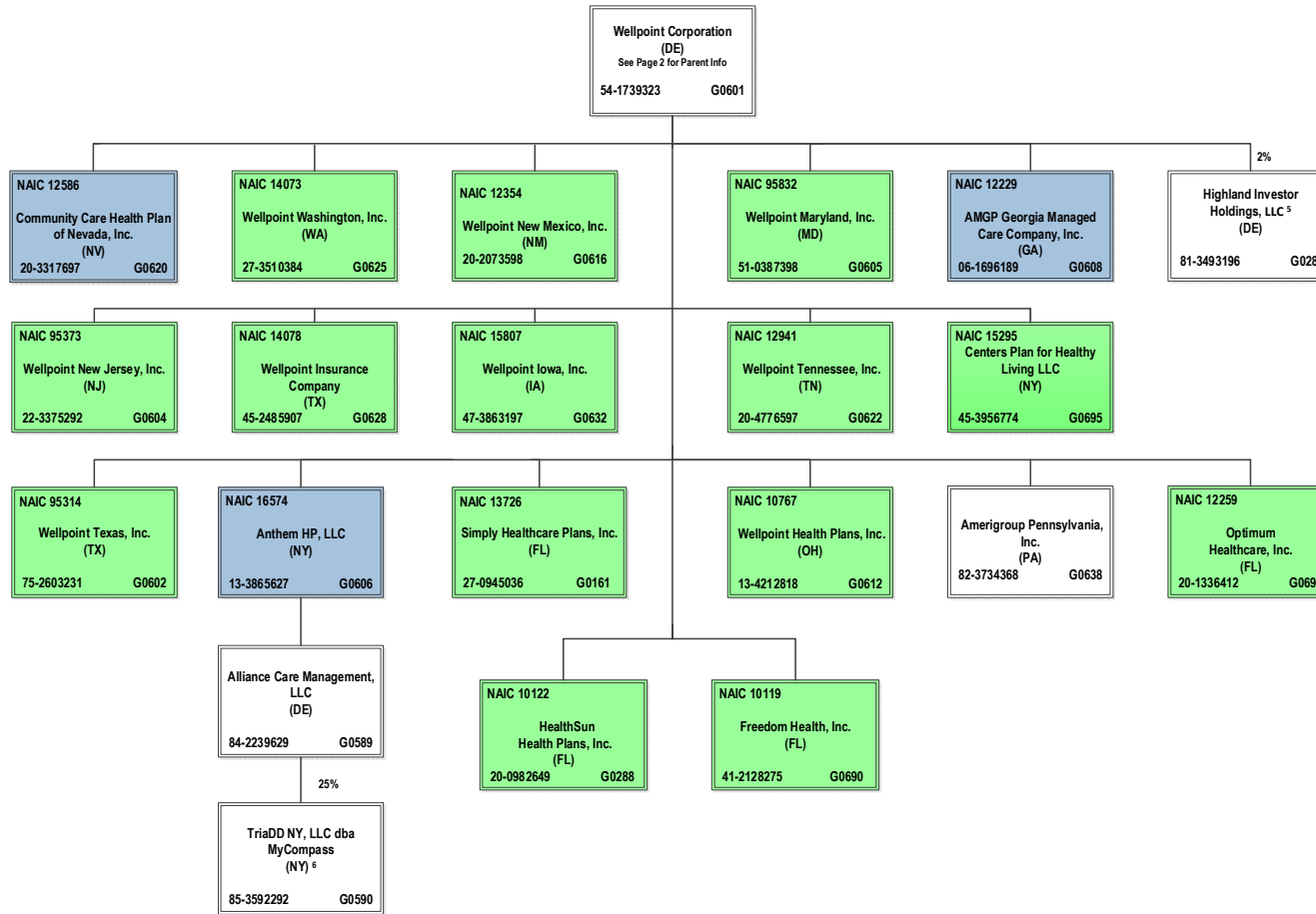
⁴ HealthKeepers, Inc. is owned 92.51% by Anthem Southeast, Inc. and 7.49% by Wellpoint National Services, Inc.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



40.7

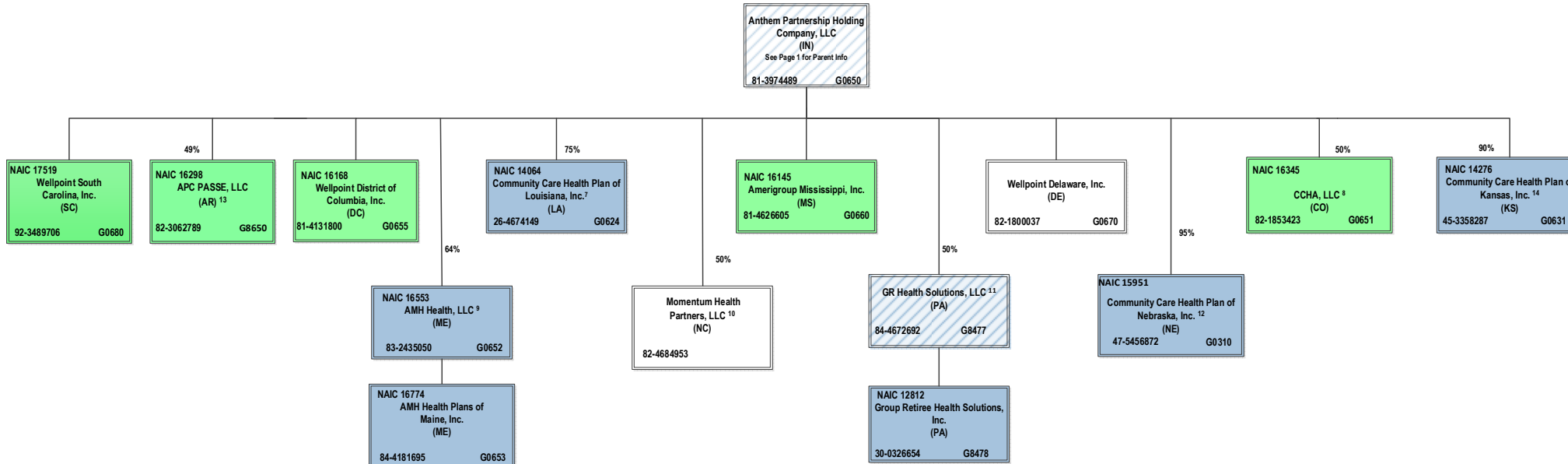
⁵ Wellpoint Corporation holds a 2% interest in Highland Investor Holdings, LLC, and ATH Holding Company, LLC holds the remaining 98% interest.

⁶ TriaDD NY, LLC dba MyCompass is 25% owned by Alliance Care Management, LLC and the remaining 75% interest is owned by unaffiliated investors.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED



⁷ Community Care Health Plan of Louisiana, Inc. is a joint venture 75% owned by Anthem Partnership Holding Company, LLC and 25% owned by Louisiana Health Service & Indemnity Company d/b/a Blue Cross and Blue Shield of Louisiana (non-affiliate)

⁸ CCHA, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Colorado Community Health Alliance, LLC (non-affiliate)

⁹ AMH Health, LLC is a joint venture 36% owned by MaineHealth (non-affiliate) and 64% owned by Anthem Partnership Holding Company, LLC

¹⁰ Momentum Health Partners, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Blue Cross and Blue Shield of North Carolina (non-affiliate)

¹¹ GR Health Solutions, LLC is a joint venture 50% owned by Anthem Partnership Holding Company, LLC and 50% owned by Independence Blue Cross, LLC (non-affiliate)

¹² Community Care Health Plan of Nebraska, Inc. is a joint venture 95% owned by Anthem Partnership Holding Company, LLC and 5% owned by Blue Cross and Blue Shield of Nebraska, Inc. (non-affiliate).

¹³ APC PASSE, LLC (regulated entity) is a joint venture 49% owned by Anthem Partnership Holding Company, LLC and 51% owned by Arkansas Provider Coalition, LLC (non-affiliate).

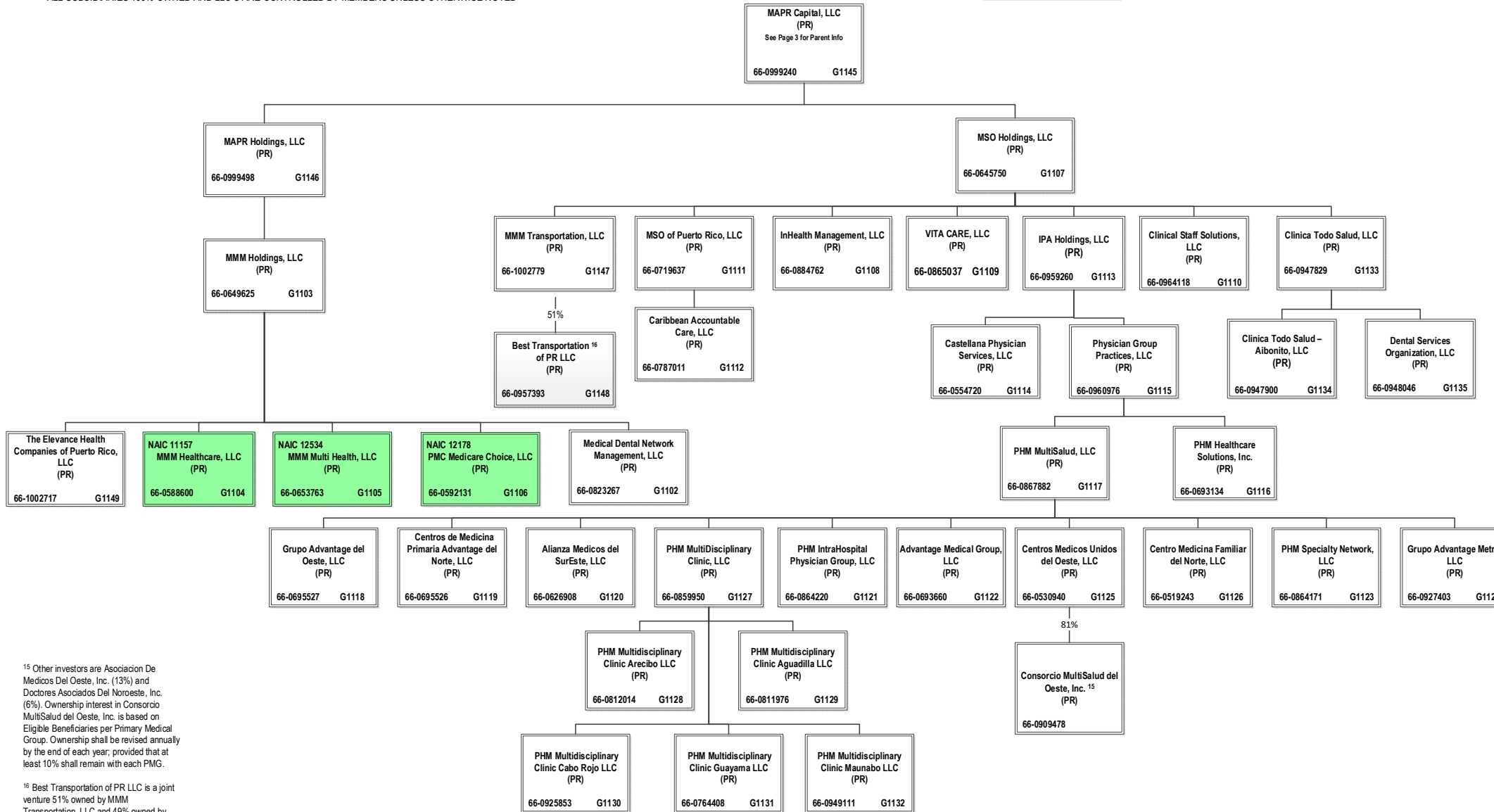
¹⁴ Community Care Health Plan of Kansas, Inc. is a joint venture 90% owned by Anthem Partnership Holding Company, LLC, 5% owned by Blue Cross Blue Shield of Kansas, Inc. (non-affiliate) and 5% owned by Blue Cross and Blue Shield of Kansas City (non-affiliate).

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



40.9

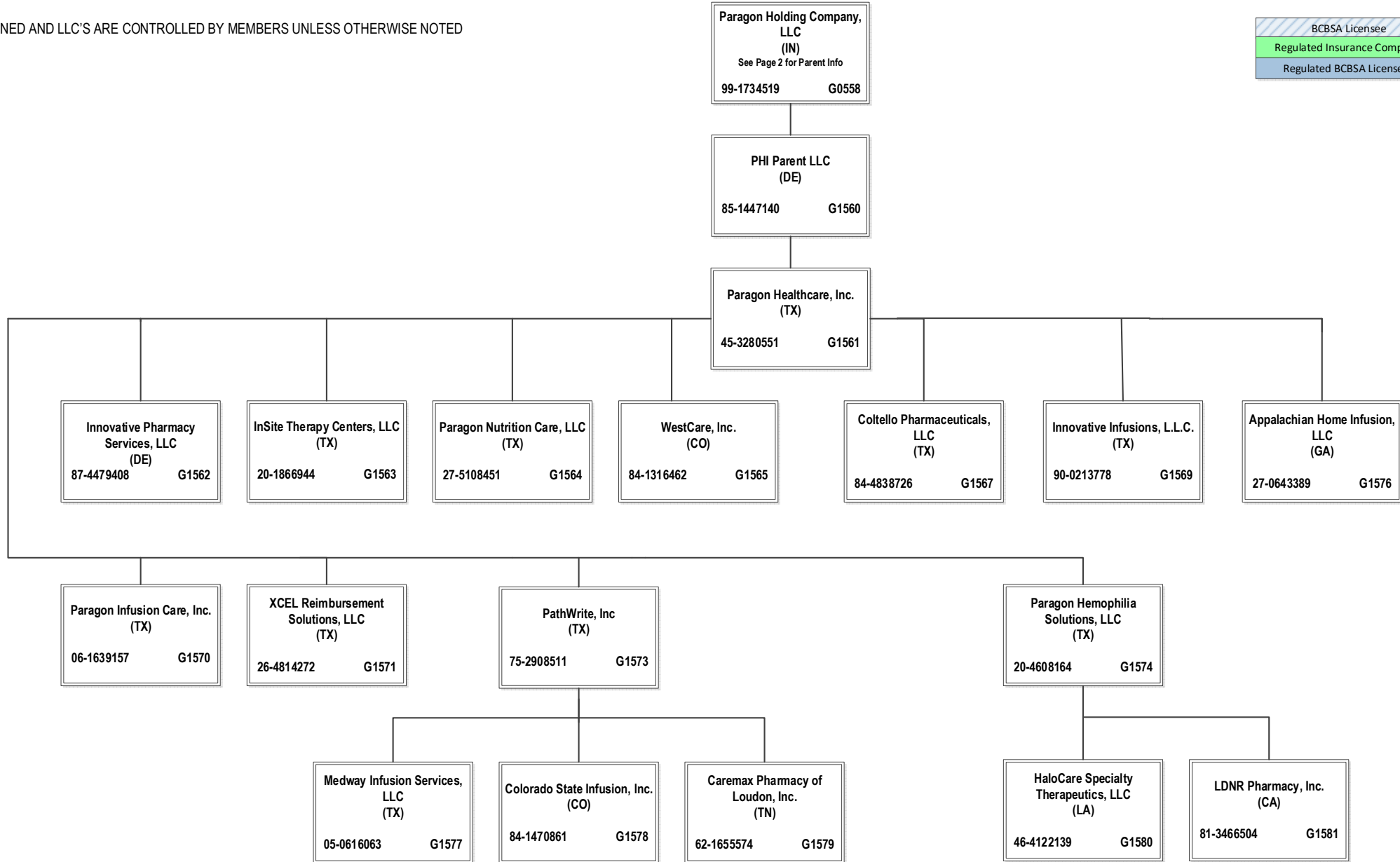
¹⁵ Other investors are Asociacion De Medicos Del Oeste, Inc. (13%) and Doctores Asociados Del Noroeste, Inc. (6%). Ownership interest in Consorcio MultiSalud del Oeste, Inc. is based on Eligible Beneficiaries per Primary Medical Group. Ownership shall be revised annually by the end of each year, provided that at least 10% shall remain with each PMG.

¹⁶ Best Transportation of PR LLC is a joint venture 51% owned by MMM Transportation, LLC and 49% owned by Jossue A. Galguera Vizcaino, individually

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

ALL SUBSIDIARIES 100% OWNED AND LLC'S ARE CONTROLLED BY MEMBERS UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Assets Line 25

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols: 1 - 2)	4 Net Admitted Assets
2504. Miscellaneous receivables	624,338	540,270	84,068	99,847
2505. Prepaid expenses	163,950	163,950	0	0
2597. Summary of remaining write-ins for Line 25 from overflow page	788,288	704,220	84,068	99,847