

# **Quarterly STATEMENT**

of the

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

of

**South Portland**

in the State of

**Maine**

to the

**Bureau of Insurance**

of the State of

**Maine**

For the Quarter Ended  
September 30, 2025

**2025**

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months .....	XXX	706,392	738,963	985,924
2. Net premium income ( including \$ ..... non-health premium income).....	XXX	546,261,804	449,484,359	608,906,243
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(2,922,302)	32,833,999	32,272,132
4. Fee-for-service (net of \$ ..... medical expenses) .....	XXX			
5. Risk revenue .....	XXX			
6. Aggregate write-ins for other health care related revenues .....	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues .....	XXX	0	0	0
8. Total revenues (Lines 2 to 7) .....	XXX	543,339,502	482,318,358	641,178,375
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		394,608,065	248,000,929	333,086,856
10. Other professional services .....			34,954,722	48,098,768
11. Outside referrals .....			5,623,535	7,781,044
12. Emergency room and out-of-area .....		41,700	61,024,202	82,586,780
13. Prescription drugs .....		79,880,779	65,698,446	91,516,336
14. Aggregate write-ins for other hospital and medical .....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....		3,798,839	2,845,507	4,013,830
16. Subtotal (Lines 9 to 15) .....	0	478,329,383	418,147,341	567,083,614
<b>Less:</b>				
17. Net reinsurance recoveries .....				
18. Total hospital and medical (Lines 16 minus 17) .....	0	478,329,383	418,147,341	567,083,614
19. Non-health claims (net) .....				
20. Claims adjustment expenses, including \$ ..... 5,607,926 cost containment expenses .....		9,872,637	8,805,042	12,622,989
21. General administrative expenses .....		23,707,761	22,449,021	30,728,662
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only) .		1,834,858		0
23. Total underwriting deductions (Lines 18 through 22).....	0	513,744,639	449,401,404	610,435,265
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	29,594,863	32,916,954	30,743,110
25. Net investment income earned .....		3,169,728	4,005,954	5,061,161
26. Net realized capital gains (losses) less capital gains tax of \$ .....				
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	3,169,728	4,005,954	5,061,161
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... ) (amount charged off \$ ..... )].....				
29. Aggregate write-ins for other income or expenses .....	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	32,764,591	36,922,908	35,804,271
31. Federal and foreign income taxes incurred .....	XXX	6,880,564	7,753,811	7,518,897
32. Net income (loss) (Lines 30 minus 31) .....	XXX	25,884,027	29,169,097	28,285,374
<b>DETAILS OF WRITE-INS</b>				
0601. ....	XXX			
0602. ....	XXX			
0603. ....	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page .....	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above) .....	XXX	0	0	0
0701. ....	XXX			
0702. ....	XXX			
0703. ....	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page .....	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) .....	XXX	0	0	0
1401. ....				
1402. ....				
1403. ....				
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) .....	0	0	0	0
2901. ....				
2902. ....				
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) .....	0	0	0	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Anthem Health Plans of Maine, Inc.

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	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											
<b>Total Members at end of:</b>														
1. Prior Year .....	82,236	22,945	50,616	0	0	0	0	0	0	0	0	0	8,675	0
2. First Quarter .....	78,743	27,063	51,254	0	0	0	0	0	0	0	0	0	426	0
3. Second Quarter .....	78,574	26,980	51,152	0	0	0	0	0	0	0	0	0	442	0
4. Third Quarter .....	78,412	26,506	51,522										384	
5. Current Year	0													
6. Current Year Member Months	706,392	241,484	461,083										3,825	
<b>Total Member Ambulatory Encounters for Period:</b>														
7. Physician .....	388,204	121,910	266,294											
8. Non-Physician .....	300,279	91,748	208,531											
9. Total	688,483	213,658	474,825	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	13,002	5,422	7,580											
11. Number of Inpatient Admissions	3,405	2,477	928											
12. Health Premiums Written (a) .....	546,261,805	168,356,382	376,659,554										1,245,869	
13. Life Premiums Direct .....	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned.....	543,339,503	168,223,221	373,574,780										1,541,502	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	0													
18. Amount Incurred for Provision of Health Care Services	478,329,381	141,975,084	335,491,573										862,724	

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