

# **Quarterly STATEMENT**

of the

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

of

**South Portland**

in the State of

**Maine**

to the

**Bureau of Insurance**

of the State of

**Maine**

For the Quarter Ended  
March 31, 2024

**2024**

**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	245,512	220,392	865,778
2. Net premium income ( including \$ ..... non-health premium income).....	XXX	134,746,085	109,066,085	564,807,784
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	16,066,154	53,665,193	43,448,358
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	150,812,239	162,731,278	608,256,142
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....		80,118,382	73,544,358	273,113,390
10. Other professional services .....		11,393,736	9,264,500	39,658,117
11. Outside referrals .....		1,905,946	1,653,684	7,207,047
12. Emergency room and out-of-area .....		18,255,809	15,575,157	68,645,629
13. Prescription drugs .....		19,000,058	20,435,071	92,678,071
14. Aggregate write-ins for other hospital and medical .....	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts .....		1,407,578	1,029,259	4,149,924
16. Subtotal (Lines 9 to 15) .....	0	132,081,509	121,502,029	485,452,178
<b>Less:</b>				
17. Net reinsurance recoveries .....			(201,764)	(201,763)
18. Total hospital and medical (Lines 16 minus 17) .....	0	132,081,509	121,703,793	485,653,941
19. Non-health claims (net) .....				
20. Claims adjustment expenses, including \$ ..... 1,990,548 cost containment expenses .....		4,007,077	3,520,489	13,374,174
21. General administrative expenses .....		7,291,825	7,498,976	27,763,214
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only) .....				0
23. Total underwriting deductions (Lines 18 through 22).....	0	143,380,411	132,723,258	526,791,329
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	7,431,828	30,008,020	81,464,813
25. Net investment income earned .....		1,211,206	1,285,926	5,922,868
26. Net realized capital gains (losses) less capital gains tax of \$ .....				
27. Net investment gains (losses) (Lines 25 plus 26) .....	0	1,211,206	1,285,926	5,922,868
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	8,643,034	31,293,946	87,387,681
31. Federal and foreign income taxes incurred .....	XXX	1,815,037	6,571,729	18,351,413
32. Net income (loss) (Lines 30 minus 31) .....	XXX	6,827,997	24,722,217	69,036,268
<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 MARCH 31, 2024 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 .....	71,005	20,832	49,963	0	0	0	0	0	0	0	0	0	210	0
2. First Quarter .....	82,143	23,339	50,272										8,532	
3. Second Quarter .....	0													
4. Third Quarter .....	0													
5. Current Year	0													
6. Current Year Member Months	245,512	69,098	150,773										25,641	
<b>Total Member Ambulatory Encounters for Period:</b>														
7. Physician .....	136,624	36,226	100,398											
8. Non-Physician .....	96,690	24,680	72,010											
9. Total	233,314	60,906	172,408	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	4,062	1,661	2,401											
11. Number of Inpatient Admissions	769	278	491											
12. Health Premiums Written (a) .....	134,746,085	43,144,091	90,993,786										608,208	
13. Life Premiums Direct .....	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned.....	150,812,239	43,054,566	107,126,811										630,862	
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	132,081,509	28,992,840	103,088,669											

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