Quarterly STATEMENT

of the

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

of

South Portland

in the State of

Maine

to the

Bureau of Insurance

of the State of

Maine

For the Quarter Ended
June 30, 2025

2025

HEALTH

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	470,959	492,489	985,924
2.	Net premium income (including $ non-health premium income)	XXX	362,243,399	288,466,714	608,906,243
3.	Change in unearned premium reserves and reserve for rate credits	XXX	(1,839,269)	30,521,051	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	360,404,130	318,987,765	641,178,375
	Hospital and Medical:				
9.	Hospital/medical benefits		258,552,428	166,994,402	333,086,856
10.	Other professional services			22,647,934	48,098,768
11.	Outside referrals			3,428,772	7,781,044
12.	Emergency room and out-of-area		41,700	39,626,541	82,586,780
13.	Prescription drugs		51,319,867	41,623,344	91,516,336
14.	Aggregate write-ins for other hospital and medical	0	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts		2,029,235	1,774,606	4,013,830
16.	Subtotal (Lines 9 to 15)	0	311,943,230	276,095,599	567,083,614
	Less:				
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)	0	311,943,230	276,095,599	567,083,614
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including $ cost containment expenses		6,766,414	7,570,148	12,622,989
21.	General administrative expenses		19,323,958	14,997,015	30,728,662
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	338,033,602	298,662,762	610,435,265
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	22,370,528	20,325,003	30,743,110
25.	Net investment income earned		1,985,694	2,603,960	5,061,161
26.	Net realized capital gains (losses) less capital gains tax of $				
27.	Net investment gains (losses) (Lines 25 plus 26)	0	1,985,694	2,603,960	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	24,356,222	22,928,963	35,804,271
31.	Federal and foreign income taxes incurred	XXX	5,114,807	4,815,082	7,518,897
32.	Net income (loss) (Lines 30 minus 31)	XXX	19,241,415	18,113,881	28,285,374
	DETAILS OF WRITE-INS				
0601.		XXX			
0602.		XXX			
0603.		XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX			
0702.		XXX			
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.					
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:														
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										442	
4. Third Quarter	0													
5. Current Year	0													
6. Current Year Member Months	470,959	161,273	307,105										2,581	
Total Member Ambulatory Encounters for Period:														
7 Physician	270,404	82,846	187,558											
8. Non-Physician	205,551	62,399	143,152											
9. Total	475,955	145,245	330,710	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	10,831	5,226	5,605											
11. Number of Inpatient Admissions	1,764	708	1,056											
12. Health Premiums Written (a)	362,243,400	113,332,117	248,313,322										597,961	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned	360,404,131	113,191,368	246,319,169										893,594	
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	311,943,229	91,912,962	219,440,141										590,126	

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