

ANNUAL 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 Year Ended
December 31, 2020

2020

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX	1,028,964	984,334
2. Net premium income (including \$ non-health premium income)	XXX	536,280,271	513,688,394
3. Change in unearned premium reserves and reserve for rate credits	XXX	(49,890,398)	1,982,858
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	486,389,873	515,671,252
Hospital and Medical:			
9. Hospital/medical benefits		234,052,734	342,504,447
10. Other professional services		49,475,715	
11. Outside referrals		6,583,894	
12. Emergency room and out-of-area		46,501,230	16,023,158
13. Prescription drugs		66,705,650	71,133,279
14. Aggregate write-ins for other hospital and medical	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		5,575,719	4,812,918
16. Subtotal (Lines 9 to 15)	0	408,894,942	434,473,802
Less:			
17. Net reinsurance recoveries		18,932,501	22,472,515
18. Total hospital and medical (Lines 16 minus 17)	0	389,962,441	412,001,287
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$ 6,981,368 cost containment expenses		14,139,085	13,734,299
21. General administrative expenses		37,728,432	27,000,786
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		0	(159,903)
23. Total underwriting deductions (Lines 18 through 22)	0	441,829,958	452,576,469
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	44,559,915	63,094,783
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		5,987,353	6,714,529
26. Net realized capital gains (losses) less capital gains tax of \$			
27. Net investment gains (losses) (Lines 25 plus 26)	0	5,987,353	6,714,529
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
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	50,547,268	69,809,312
31. Federal and foreign income taxes incurred	XXX	10,614,926	14,659,956
32. Net income (loss) (Lines 30 minus 31)	XXX	39,932,342	55,149,356
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 thru 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 thru 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 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0

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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income	536,280,271	534,492,258					65,540		1,722,473	
2. Change in unearned premium reserves and reserve for rate credit	(49,890,398)	(49,890,398)								
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	XXX
6. Aggregate write-ins for other non-health care related revenues	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
7. Total revenues (Lines 1 to 6)	486,389,873	484,601,860	0	0	0	0	65,540	0	1,722,473	0
8. Hospital/medical benefits	234,052,734	233,719,081					268,233		65,420	XXX
9. Other professional services	49,475,715	49,475,715								XXX
10. Outside referrals	6,583,894	6,583,894								XXX
11. Emergency room and out-of-area	46,501,230	46,501,230								XXX
12. Prescription drugs	66,705,650	66,704,050					1,600			XXX
13. Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0	0	0	XXX
14. Incentive pool, withhold adjustments and bonus amounts	5,575,719	5,403,449					172,270			XXX
15. Subtotal (Lines 8 to 14)	408,894,942	408,387,419	0	0	0	0	442,103	0	65,420	XXX
16. Net reinsurance recoveries	18,932,501	18,932,501								XXX
17. Total medical and hospital (Lines 15 minus 16)	389,962,441	389,454,918	0	0	0	0	442,103	0	65,420	XXX
18. Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ 6,981,368 cost containment expenses	14,139,085	14,088,735					22,430		27,920	
20. General administrative expenses	37,728,432	37,594,078					59,851		74,503	
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	
23. Total underwriting deductions (Lines 17 to 22)	441,829,958	441,137,731	0	0	0	0	524,384	0	167,843	0
24. Total underwriting gain or (loss) (Line 7 minus Line 23)	44,559,915	43,464,129	0	0	0	0	(458,844)	0	1,554,630	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	XXX
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0603.		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	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	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	XXX
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)	547,496,834		13,004,576	534,492,258
2. Medicare Supplement				0
3. Dental only				0
4. Vision only				0
5. Federal Employees Health Benefits Plan	0			0
6. Title XVIII - Medicare	65,540			65,540
7. Title XIX - Medicaid	0			0
8. Other health	1,722,473			1,722,473
9. Health subtotal (Lines 1 through 8)	549,284,847	0	13,004,576	536,280,271
10. Life	0			0
11. Property/casualty	0			0
12. Totals (Lines 9 to 11)	549,284,847	0	13,004,576	536,280,271

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	18,488	21,980	21,738	21,631	21,222	261,061
2. Provider Service Organizations						
3. Preferred Provider Organizations						
4. Point of Service	53,749	55,511	55,153	54,738	54,305	660,839
5. Indemnity Only						
6. Aggregate write-ins for other lines of business	8,918	8,762	8,896	8,877	8,922	107,064
7. Total	81,155	86,253	85,787	85,246	84,449	1,028,964
DETAILS OF WRITE-INS						
0601. Stop Loss	8,918	8,762	8,896	8,877	8,922	107,064
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	8,918	8,762	8,896	8,877	8,922	107,064



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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Anthem Health Plans of Maine, Inc.

2. South Portland, ME

NAIC Group Code	0671	BUSINESS IN THE STATE OF		DURING THE YEAR							(LOCATION)	
		Maine		2020							NAIC Company Code	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
	Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other		
		Individual	Group									
Total Members at end of:												
1. Prior Year	81,155	22,150	50,087							8,918		
2. First Quarter	86,253	27,413	50,078							8,762		
3. Second Quarter	85,787	27,008	49,883							8,896		
4. Third Quarter	85,246	26,128	50,241							8,877		
5. Current Year	84,449	25,228	50,299							8,922		
6. Current Year Member Months	1,028,964	320,980	600,920							107,064		
Total Member Ambulatory Encounters for Year:												
7. Physician	336,111	114,573	221,538									
8. Non-Physician	335,013	88,554	246,459									
9. Total	671,124	203,127	467,997	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred	14,249	5,304	8,945									
11. Number of Inpatient Admissions	3,110	995	2,115									
12. Health Premiums Written (b)	549,284,847	178,740,461	368,756,373					65,540		1,722,473		
13. Life Premiums Direct	0											
14. Property/Casualty Premiums Written	0											
15. Health Premiums Earned	499,394,449	171,278,800	326,327,636					65,540		1,722,473		
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	408,894,942	108,227,764	300,159,656					442,102		65,420		

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$65,540

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

Anthem Health Plans of Maine, Inc.

2. South Portland, ME

NAIC Group Code	0671	BUSINESS IN THE STATE OF	(LOCATION)										
			Grand Total			DURING THE YEAR				2020	NAIC Company Code		52618
			1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	
Total	2	3	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other				
Total Members at end of:													
1. Prior Year	81,155	22,150	50,087	0	0	0	0	0	0	8,918			
2. First Quarter	86,253	27,413	50,078	0	0	0	0	0	0	8,762			
3. Second Quarter	85,787	27,008	49,883	0	0	0	0	0	0	8,896			
4. Third Quarter	85,246	26,128	50,241	0	0	0	0	0	0	8,877			
5. Current Year	84,449	25,228	50,299	0	0	0	0	0	0	8,922			
6. Current Year Member Months	1,028,964	320,980	600,920	0	0	0	0	0	0	107,064			
Total Member Ambulatory Encounters for Year:													
7. Physician	336,111	114,573	221,538	0	0	0	0	0	0	0			
8. Non-Physician	335,013	88,554	246,459	0	0	0	0	0	0	0			
9. Total	671,124	203,127	467,997	0	0	0	0	0	0	0			
10. Hospital Patient Days Incurred	14,249	5,304	8,945	0	0	0	0	0	0	0			
11. Number of Inpatient Admissions	3,110	995	2,115	0	0	0	0	0	0	0			
12. Health Premiums Written (b)	549,284,847	178,740,461	368,756,373	0	0	0	0	65,540	0	1,722,473			
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0			
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0			
15. Health Premiums Earned	499,394,449	171,278,800	326,327,636	0	0	0	0	65,540	0	1,722,473			
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0			
17. Amount Paid for Provision of Health Care Services	0	0	0	0	0	0	0	0	0	0			
18. Amount Incurred for Provision of Health Care Services	408,894,942	108,227,764	300,159,656	0	0	0	0	442,102	0	65,420			

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$65,540

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