

**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, 2009

**2009**

**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	695,314	804,362	1,062,134
2. Net premium income (including \$ non-health premium income)	XXX	286,251,186	316,499,325	400,287,880
3. Change in unearned premium reserves and reserve for rate credits	XXX	(8,284,785)	(15,289,396)	(22,688,630)
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	277,966,401	301,209,929	377,599,250
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits	0	209,668,350	213,111,027	283,955,297
10. Other professional services				0
11. Outside referrals				
12. Emergency room and out-of-area	0	12,967,767	12,587,787	16,800,404
13. Prescription drugs	0	32,681,296	36,834,919	48,596,605
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)	0	255,317,413	262,533,733	349,352,306
<b>Less:</b>				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)	0	255,317,413	262,533,733	349,352,306
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 2,003,100 cost containment expenses	0	4,899,516	5,837,936	3,554,097
21. General administrative expenses	0	6,966,591	8,249,747	5,053,548
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	267,183,520	276,621,416	357,959,951
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	10,782,881	24,588,513	19,639,299
25. Net investment income earned	0	3,065,423	3,623,513	4,394,511
26. Net realized capital gains (losses) less capital gains tax of \$ (11,270)	0	(244,352)	(504,714)	(786,055)
27. Net investment gains (losses) (Lines 25 plus 26)	0	2,821,071	3,118,799	3,608,456
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	25,253	0	4,598
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	13,629,205	27,707,312	23,252,353
31. Federal and foreign income taxes incurred	XXX	4,770,222	9,697,559	8,138,324
32. Net income (loss) (Lines 30 minus 31)	XXX	8,858,983	18,009,753	15,114,029
<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. Miscellaneous income		25,253		4,598
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	25,253	0	4,598

**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1		Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	Individual	Group	3							
<b>Total Members at end of:</b>											
1. Prior Year	85,185	24	85,161								
2. First Quarter	79,436	20	79,416								
3. Second Quarter	76,377	15	76,362								
4. Third Quarter	73,875	20	73,855								
5. Current Year	0										
6. Current Year Member Months	695,314	158	695,156								
<b>Total Member Ambulatory Encounters for Period:</b>											
7. Physician	439,256	148	439,108								
8. Non-Physician	292,225	110	292,115								
9. Total	731,481	258	731,223					0	0	0	0
10. Hospital Patient Days Incurred	16,685	8	16,677								
11. Number of Inpatient Admissions	3,633	3	3,630								
12. Health Premiums Written (a)	0										
13. Life Premiums Direct	0										
14. Property/Casualty Premiums Written	0										
15. Health Premiums Earned	277,966,401	178,258	276,889,731								888,412
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	255,317,413	195,457	255,095,830								26,126

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