

QUARTERLY STATEMENT

of the

Maine Community Health Options

of

Lewiston

in the State of

Maine

to the

Bureau of Insurance

of the State of

Maine

**For the Quarter Ended
March 31, 2023**

2023



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

Maine Community Health Options

NAIC Group Code 0000 0000 NAIC Company Code 15077 Employer's ID Number 45-3416923
(Current) (Prior)

Organized under the Laws of Maine, State of Domicile or Port of Entry ME

Country of Domicile United States of America

Licensed as business type: Life, Accident & Health

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 09/26/2011 Commenced Business 01/01/2014

Statutory Home Office 60 Pineland Drive, Auburn Hall, Suite 301, New Gloucester, ME, US 04260
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 60 Pineland Drive, Auburn Hall, Suite 301
(Street and Number)
New Gloucester, ME, US 04260 (Area Code) (Telephone Number)
(City or Town, State, Country and Zip Code)

Mail Address PO Box 1121, Lewiston, ME, US 04243-1121
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 60 Pineland Drive, Auburn Hall, Suite 301
(Street and Number)
New Gloucester, ME, US 04260 (Area Code) (Telephone Number)
(City or Town, State, Country and Zip Code)

Internet Website Address www.healthoptions.org

Statutory Statement Contact Joanne Lauterbach, 207-330-2390
(Name) (Area Code) (Telephone Number)
j.lauterbach@healthoptions.org, 207-402-3318
(E-mail Address) (FAX Number)

OFFICERS

Chief Executive Officer Kevin Lewis Chief Information Officer William Kilbreth
Chief Operating Officer David Stuart Chief Financial Officer Joanne Lauterbach

OTHER

Dr. Lori Tishler #, Chief Medical Officer

DIRECTORS OR TRUSTEES

<u>Paul Andrews</u>	<u>Michelle Betz</u>	<u>Leslie Clark</u>
<u>Jerod Cronkite</u>	<u>Cheryl Greaney #</u>	<u>Jim Harrison #</u>
<u>Ralph Johnson #</u>	<u>Holly Korda</u>	<u>Asher Kramer</u>
<u>Robert Lorenzo</u>	<u>Rocell Marcellino</u>	<u>Cory McKenna</u>
<u>Jeff Norris</u>	<u>Sharon Reishus</u>	<u>Judiann Ferretti Smith</u>
<u>Rebecca Swanson Conrad</u>	<u>Ronnie Weston</u>	

State of Maine SS:
County of Cumberland

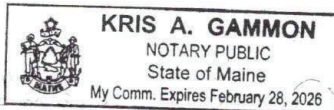
The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Kevin Lewis
Chief Executive Officer

Joanne Lauterbach
Chief Financial Officer

Subscribed and sworn to before me this
21st day of September 2023
Kris A Gammon

- a. Is this an original filing? Yes [] No [X]
b. If no,
1. State the amendment number..... 1
2. Date filed09/22/2023
3. Number of pages attached..... 2



STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	116,432,648		116,432,648	123,429,471
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 11,496,252), cash equivalents (\$ 15,016,571) and short-term investments (\$)	26,512,823		26,512,823	15,926,763
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets	221,500	221,500	0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	143,166,971	221,500	142,945,471	139,356,234
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	659,079		659,079	847,562
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	3,217,659	946,128	2,271,531	1,744,879
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$ 11,598,000)	11,598,000		11,598,000	9,064,000
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	5,595,049		5,595,049	10,379,146
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software	146,979	146,979	0	0
21. Furniture and equipment, including health care delivery assets (\$)	30,610	30,610	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$ 5,138,042) and other amounts receivable	6,193,585	1,055,543	5,138,042	4,590,180
25. Aggregate write-ins for other than invested assets	1,796,731	1,796,731	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	172,404,663	4,197,491	168,207,172	165,982,001
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	172,404,663	4,197,491	168,207,172	165,982,001
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Expenses	1,676,251	1,676,251	0	0
2502. Miscellaneous Receivables	106,684	106,684	0	0
2503. Security Deposits	13,796	13,796	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,796,731	1,796,731	0	0

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 987,994 reinsurance ceded)	21,267,604		21,267,604	15,232,078
2. Accrued medical incentive pool and bonus amounts	467,688		467,688	325,989
3. Unpaid claims adjustment expenses	1,557,892		1,557,892	1,326,995
4. Aggregate health policy reserves, including the liability of \$ 1,434,756 for medical loss ratio rebate per the Public Health Service Act	17,426,236		17,426,236	21,841,996
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	3,990,317		3,990,317	3,955,651
9. General expenses due or accrued	4,347,965		4,347,965	4,137,690
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable	291,276		291,276	173,411
12. Amounts withheld or retained for the account of others.....	285,246		285,246	5,200
13. Remittances and items not allocated			0	0
14. Borrowed money (including \$ 12,395 current) and interest thereon \$ (including \$ current)	12,395		12,395	49,208
15. Amounts due to parent, subsidiaries and affiliates			0	0
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	9,040		9,040	0
23. Aggregate write-ins for other liabilities (including \$ current)	108,219	0	108,219	150,767
24. Total liabilities (Lines 1 to 23)	49,763,878	0	49,763,878	47,198,985
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX		
29. Surplus notes	XXX	XXX	132,316,124	132,316,124
30. Aggregate write-ins for other than special surplus funds	XXX	XXX		0
31. Unassigned funds (surplus)	XXX	XXX	(13,872,830)	(13,533,108)
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	118,443,294	118,783,016
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	168,207,172	165,982,001
DETAILS OF WRITE-INS				
2301. Risk Adjustment User Fee Payable	102,329		102,329	79,294
2302. Deferred Credit	5,890		5,890	71,473
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	108,219	0	108,219	150,767
2501.	XXX	XXX		0
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

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	101,490	86,229	349,740
2. Net premium income (including \$ non-health premium income).....	XXX	62,899,010	49,703,504	205,096,474
3. Change in unearned premium reserves and reserve for rate credits.....	XXX			
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	178	434
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	62,899,010	49,703,682	205,096,908
Hospital and Medical:				
9. Hospital/medical benefits		33,298,518	28,503,745	126,414,248
10. Other professional services		1,475,645	1,325,443	6,315,317
11. Outside referrals		654,408	1,824	11,743
12. Emergency room and out-of-area		12,573,315	9,855,280	42,982,635
13. Prescription drugs		10,062,461	6,533,919	36,848,459
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		160,430		268,553
16. Subtotal (Lines 9 to 15)	0	58,224,777	46,220,211	212,840,955
Less:				
17. Net reinsurance recoveries		2,024,321	2,239,441	32,560,762
18. Total hospital and medical (Lines 16 minus 17)	0	56,200,456	43,980,770	180,280,193
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 2,081,218 cost containment expenses		3,563,753	3,211,951	13,432,586
21. General administrative expenses		8,555,070	6,713,341	29,499,016
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		(5,240,760)	(4,202,380)	(13,900,000)
23. Total underwriting deductions (Lines 18 through 22).....	0	63,078,519	49,703,682	209,311,795
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(179,509)	0	(4,214,887)
25. Net investment income earned		500,973	428,551	1,953,795
26. Net realized capital gains (losses) less capital gains tax of \$		(228,369)	160,146	(242,749)
27. Net investment gains (losses) (Lines 25 plus 26)	0	272,604	588,697	1,711,046
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$ 67,411)].....		(67,411)	(42,543)	(186,597)
29. Aggregate write-ins for other income or expenses	0	0	1,391,524	1,391,524
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	25,684	1,937,678	(1,298,914)
31. Federal and foreign income taxes incurred	XXX			
32. Net income (loss) (Lines 30 minus 31)	XXX	25,684	1,937,678	(1,298,914)
DETAILS OF WRITE-INS				
0601. User Fee Revenue - Contraceptive Claims	XXX		178	434
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	178	434
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. Vendor Settlements			1,391,524	1,391,524
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	1,391,524	1,391,524

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	118,783,016	120,389,917	120,389,917
34. Net income or (loss) from Line 32	25,684	1,937,678	(1,298,914)
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax			
39. Change in nonadmitted assets	(365,406)	5,284	(307,987)
40. Change in unauthorized and certified reinsurance .....	.0	0	.0
41. Change in treasury stock .....	.0	0	.0
42. Change in surplus notes .....	.0	0	.0
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in .....			.0
44.2 Transferred from surplus (Stock Dividend).....	.0	0	.0
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in .....	.0	0	.0
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			
47. Aggregate write-ins for gains or (losses) in surplus .....	.0	0	.0
48. Net change in capital & surplus (Lines 34 to 47)	(339,722)	1,942,962	(1,606,901)
49. Capital and surplus end of reporting period (Line 33 plus 48)	118,443,294	122,332,879	118,783,016
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page .....	.0	0	.0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	60,610,493	41,372,793	192,912,241
2. Net investment income	778,654	926,343	3,672,420
3. Miscellaneous income	0	178	434
4. Total (Lines 1 to 3)	61,389,147	42,299,314	196,585,095
5. Benefit and loss related payments	45,847,890	33,832,553	176,320,608
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	11,527,966	8,677,083	40,912,532
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	0	0	0
10. Total (Lines 5 through 9)	57,375,856	42,509,636	217,233,140
11. Net cash from operations (Line 4 minus Line 10)	4,013,291	(210,322)	(20,648,045)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	6,396,675	2,141,080	17,141,080
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	74,525	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	6,471,200	2,141,080	17,141,080
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	2,014,600	2,014,600
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	0	2,014,600	2,014,600
14. Net increase (or decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	6,471,200	126,480	15,126,480
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	(36,813)	(34,290)	(141,868)
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	0
16.6 Other cash provided (applied)	138,382	(53,156)	(5,418,018)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	101,569	(87,446)	(5,559,886)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) ..	10,586,060	(171,288)	(11,081,451)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	15,926,763	27,008,213	27,008,213
19.2 End of period (Line 18 plus Line 19.1)	26,512,823	26,836,925	15,926,763

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

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											
Total Members at end of:														
1. Prior Year	29,300	17,801	11,499	0	0	0	0	0	0	0	0	0	0	0
2. First Quarter	34,055	22,932	11,123											
3. Second Quarter	0													
4. Third Quarter	0													
5. Current Year	0													
6. Current Year Member Months	101,490	68,231	33,259											
Total Member Ambulatory Encounters for Period:														
7. Physician	42,433	29,106	13,327											
8. Non-Physician	20,642	13,407	7,235											
9. Total	63,075	42,513	20,562	0	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	1,750	1,270	480											
11. Number of Inpatient Admissions	265	165	100											
12. Health Premiums Written (a)	63,190,287	45,080,460	18,109,827											
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Eamed	63,190,287	45,080,460	18,109,827											
16. Property/Casualty Premiums Eamed	0													
17. Amount Paid for Provision of Health Care Services	55,380,059	38,930,146	16,449,913											
18. Amount Incurred for Provision of Health Care Services	58,224,777	43,684,806	14,539,971											

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

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date				Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	
1. Comprehensive (hospital and medical) individual	10,555,248	27,227,171	1,172,307	18,907,040	12,650,010
2. Comprehensive (hospital and medical) group	6,388,403	11,468,503	564,260	623,997	2,582,088
3. Medicare Supplement					
4. Dental Only					
5. Vision Only					
6. Federal Employees Health Benefits Plan					
7. Title XVIII - Medicare					
8. Title XIX - Medicaid					
9. Credit A&H					
10. Disability Income					
11. Long-term care					
12. Other health					
13. Health subtotal (Lines 1 to 12)	16,893,651	38,695,674	1,736,567	19,531,037	15,232,078
14. Health care receivables (a)	2,643,272	2,941,553			2,643,272
15. Other non-health					
16. Medical incentive pools and bonus amounts	18,731		307,259	160,429	325,989
17. Totals (Lines 13 - 14 + 15 + 16)	14,269,110	35,754,121	2,043,826	19,691,466	15,558,067

(a) Excludes \$ loans or advances to providers not yet expensed.

NOTES TO FINANCIAL STATEMENTS

For purposes of the quarterly interim financial information, it is presumed that the users of the interim financial information have read or have access to the Annual Statement as of December 31, 2022. This presentation addresses only significant events occurring since the last Annual Statement.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying financial statements of Maine Community Health Options (the "Company") have been prepared in conformity with the National Association of Insurance Commissioners' ("NAIC") *Annual Statement Instructions* and in accordance with accounting practices prescribed by the NAIC *Accounting Practices and Procedures Manual* ("NAIC SAP"), subject to any deviations prescribed or permitted by the Maine Bureau of Insurance (the "Bureau").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the Bureau is shown below:

		SSAP #	F/S Page	F/S Line	March 31, 2023	December 31, 2022
<u>NET INCOME (LOSS)</u>						
(1)	Company state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$25,684	\$(1,298,914)
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP				—	—
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP				—	—
(4)	NAIC SAP (1-2-3=4)				\$25,684	\$(1,298,914)
<u>SURPLUS</u>						
(5)	Company state basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$118,443,294	\$118,783,016
(6)	State Prescribed Practices that are increase/(decrease) from NAIC SAP				—	—
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP				—	—
(8)	NAIC SAP (5-6-7=8)				\$118,443,294	\$118,783,016

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with NAIC Annual Statement Instructions and NAIC SAP requires management to make estimates and assumptions that affect the amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policy

Health premiums are earned over the term of the related insurance policies and reinsurance contracts. Premiums written are reported net of reinsurance ceded and experience rating refunds. Premiums paid by subscribers prior to the effective date are recorded on the balance sheet as premiums received in advance and are subsequently credited to income as earned during the coverage period. Premium rates are subject to approval by the Bureau. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. All other costs, including underwriting expenses, are charged to operations as incurred.

NOTES TO FINANCIAL STATEMENTS

In addition, the Company uses the following accounting policies:

- 1) Short-term investments include investments with maturities of less than one year at the date of acquisition and are reported at amortized cost, which approximates fair value.
- 2) Investment grade bonds not backed by other loans are stated at amortized cost, with amortization calculated based on the scientific interest method, using yield to maturity.
- 3) The Company has no investments in common stocks of unaffiliated companies.
- 4) The Company has no investments in preferred stocks.
- 5) The Company has no mortgage loans on real estate.
- 6) Loan-backed securities are stated at either amortized cost or fair value. The retrospective adjustment method is used to value all securities.
- 7) The Company owns 100% of Community Options, LLC.
- 8) The Company has an investment in an unaffiliated limited liability company. The Company reports this investment as an other long-term invested asset on Schedule BA. The asset, which is carried at its Generally Accepted Accounting Principles equity, is nonadmitted for statutory reporting purposes.
- 9) The Company has no derivative instruments.
- 10) The Company uses anticipated investment income as a factor in the premium deficiency reserve calculation.
- 11) Unpaid claims and claims adjustment expenses include management's best estimate of amounts based on historical claim development patterns and certain individual case estimates. The established liability considers health benefit provisions, business practices, economic conditions and other factors that may materially affect the cost, frequency and severity of claims. Liabilities for unpaid claims and claim adjustment expenses are based on assumptions and estimates. While management believes such estimates are reasonable, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and changes in estimates are incorporated into current period estimates.
- 12) The Company has not modified its capitalization policy from the prior period.
- 13) Pharmaceutical rebate receivables are recorded when earned based on actual rebate receivables billed and an estimate of receivables based on current utilization of specific pharmaceuticals and provider contract terms.

D. Going Concern

Not applicable.

2. Accounting Changes and Corrections of Errors

There were no accounting changes or corrections of errors during the three months ended March 31, 2023.

3. Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable.

B. Statutory Merger

Not applicable.

C. Assumption Reinsurance

Not applicable.

D. Impairment Loss

Not applicable.

NOTES TO FINANCIAL STATEMENTS

4. Discontinued Operations

Not applicable.

5. Investments**A. Mortgage Loans, Including Mezzanine Real Estate Loans**

The Company did not have investments in mortgage loans at March 31, 2023.

B. Debt Restructuring

The Company did not have invested assets that were restructured debt at March 31, 2023.

C. Reverse Mortgages

The Company did not have investments in reverse mortgages at March 31, 2023.

D. Loan-Backed Securities

- (1) Prepayment assumptions for mortgage-backed securities were obtained from broker-dealer survey values. The Company used various third-party pricing party sources in determining the market value of its loan-backed securities.
- (2) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the three months ended March 31, 2023.
- (3) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the three months ended March 31, 2023.
- (4) The Company did not recognize other-than-temporary impairments on its loan-backed securities during the three months ended March 31, 2023.
- (5) The Company had no impaired loan-backed securities for which an other-than-temporary impairment had not been recognized in earnings for the three months ended March 31, 2023.
- (6) The Company had no impaired loan-backed securities at March 31, 2023.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) There were no significant changes for the three months ended March 31, 2023.
- (2) Not applicable.
- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or re-pledge as of March 31, 2023.
- (4) Not applicable.
- (5) Not applicable.
- (6) Not applicable.
- (7) Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

The Company did not enter into repurchase agreement transactions accounted for as a secured borrowing at March 31, 2023.

G. Reverse Repurchase Agreements Transaction Accounted for as Secured Borrowing

The Company did not enter into reverse repurchase agreement transactions accounted for as a secured borrowing at March 31, 2023.

NOTES TO FINANCIAL STATEMENTS

H. Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into repurchase agreements accounted for as a sale at March 31, 2023.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

The Company did not enter into reverse repurchase agreements accounted for as a sale at March 31, 2023.

J. Real Estate

The Company did not have investments in real estate at March 31, 2023.

K. Low-Income Housing Tax Credits (LIHTC)

The Company did not invest in properties generating low-income housing tax credits during the three months ended March 31, 2023.

L. Restricted Assets

There were no significant changes for the three months ended March 31, 2023.

M. Working Capital Finance Investments

The Company did not have any working capital finance investments at March 31, 2023.

N. Offsetting and Netting of Assets and Liabilities

The Company did not have any offsetting and netting of financial assets or liabilities at March 31, 2023.

O. 5GI Securities

The Company did not have any 5GI securities at March 31, 2023.

P. Short Sales

The Company did not have any short sales at March 31, 2023.

Q. Prepayment Penalty and Acceleration Fees

The Company did not have any prepayment penalty or acceleration fees during the three months ended March 31, 2023.

R. Reporting Entity's Share of Cash Pool by Asset Type

The Company did not participate in any cash pools at March 31, 2023.

6. Joint Ventures, Partnerships and Limited Liability Companies

A. The Company had no investments in joint ventures, partnerships or limited liability companies that exceeded 10% of its admitted assets at March 31, 2023.

B. Not applicable.

NOTES TO FINANCIAL STATEMENTS

7. Investment Income

There were no significant changes for the three months ended March 31, 2023.

8. Derivative Instruments

There were no significant changes for the three months ended March 31, 2023.

9. Income Taxes

The Company is exempt from Federal income taxes under Section 501(c)(29) of the Internal Revenue Code. Accordingly, no provision for income taxes has been made in the accompanying financial statements.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

The Company owns 100% of Community Options, LLC. There were no significant changes for the three months ended March 31, 2023.

11. Debt**A. Debt, including Capital Notes**

At March 31, 2023 and December 31, 2022, the Company had outstanding a note payable, with a face value and a carry value of \$7,071 and \$28,072, respectively, to Mill 3 Storehouse, LLC, for expenses related to leasehold improvements. The note payable was issued May 1, 2014 (the commencement date) and is payable in monthly principal and interest payments of \$7,106 until April 2023. The note is contingent upon the Company remaining in the leased space. If the Company does not renew the lease after the initial five-year term, the note will become due 60 days after cancellation. The note carries interest at 6%. As of March 31, 2023 and December 31, 2022, the Company paid interest of \$316 and \$4,339 on this note. This note is off-set against leasehold improvements in line 21 of the Asset Schedule.

At March 31, 2023 and December 31, 2022, the Company had outstanding a note payable, with a face value and a carry value of \$5,324 and \$21,136, respectively, to Mill 2 Storehouse, LLC, for expenses related to leasehold improvements. The note payable was issued October 1, 2014 (the commencement date) and is payable in monthly principal and interest payments of \$5,350 until April 2023. The note is contingent upon the Company remaining in the leased space. If the Company does not renew the lease after the initial five-year term, the note will become due 60 days after cancellation. The note carries interest at 6%. As of March 31, 2023 and December 31, 2022, the Company paid interest of \$238 and \$3,267 on this note.

B. FHLB (Federal Home Loan Bank) Agreements

The Company had no FHLB Agreements at March 31, 2023.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans**A. Defined Benefit Plan**

Not applicable.

B. Defined Benefit Plan Investment Policies and Strategies

Not applicable.

NOTES TO FINANCIAL STATEMENTS

C. Defined Benefit Plan Fair Value of Assets

Not applicable.

D. Defined Benefit Plan Basis Used to Determine the Overall Expected Rate of Return on Assets Assumption

Not applicable.

E. Defined Contribution Plan

The Company maintains a Section 401(k) plan for its employees. Elective employee deferrals were matched by the Company in an amount equal to 100% of such deferrals up to a maximum match of 3% of compensation plus 50% of such elective deferrals equal to more than 3% but not exceeding 5% of compensation. The Company's contribution to the plan as of March 31, 2023 was \$114,759.

The Company owns a Section 457 (b) Plan for its employees. This Plan limits participation to a select group of management or highly compensated employees (or "top hat" group) and is exempt from most Employee Retirement Income Security Act of 1974 requirements. The value of the Plan funds was \$144,000 and \$144,000 at March 31, 2023 and December 31, 2022, respectively. As of March 31, 2023 and December 31, 2022 the fair market value of the funds is \$223,769 and \$217,701, respectively.

F. Multiemployer Plans

Not applicable.

G. Consolidating/Holding Company Plans

Not applicable.

H. Postemployment Benefits and Compensated Absences

Liabilities for earned not yet taken vacation benefits have been accrued as of March 31, 2023.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

There were no significant changes for the three months ended March 31, 2023.

14. Liabilities, Contingencies and Assessments

There were no significant changes for the three months ended March 31, 2023.

15. Leases

The Company's current office space lease ended on April 30, 2023. The Company entered into a lease for office space at a new facility commencing May 1, 2023.

NOTES TO FINANCIAL STATEMENTS

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company had no financial instruments with off-balance sheet risk at March 31, 2023.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**A. Transfers of Receivables Reported as Sales**

Not applicable at March 31, 2023.

B. Transfer and Servicing of Financial Assets

Not applicable at March 31, 2023.

C. Wash Sales

(1) In the course of the Company's asset management, securities may be sold and reacquired within 30 days of the sale date to enhance yield on the investments.

(2) At March 31, 2023, there were no wash sales involving securities with an NAIC designation of 3 or below or unrated.

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only Plans: There were no significant changes for the three months ended March 31, 2023.

B. Administrative Services Contract Plans: Not applicable.

C. Medicare or Similarly Structured Cost-Based Reimbursement Contract: Not applicable.

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

20. Fair Value Measurements**A. Fair Value Measurements**

The Company had no material assets or liabilities measured and reported at fair value at March 31, 2023.

B. Fair Value Measurements Under Other Accounting Pronouncements

The Company had no material assets or liabilities measured and reported at fair value at March 31, 2023.

NOTES TO FINANCIAL STATEMENTS

C. Financial Instruments

The carrying values and estimated fair values of the Company's financial instruments at March 31, 2023 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$105,587,885	\$116,432,648	\$-----	\$116,432,648	\$-----	\$-----	\$-----
Cash Equivalents	\$15,016,571	\$15,016,571	\$15,016,571	\$-----	\$-----	\$-----	\$-----

D. Not Practicable to Estimate Fair Value

There are no financial instruments that were not practicable to estimate at fair value at March 31, 2023.

E. Investment Measured Using the NAV Practical Expedient

The Company had no investments using the NAV practical expedient at March 31, 2023.

21. Other Items

No significant change.

22. Events Subsequent

Subsequent events have been considered through May 12, 2023 for the statutory statements issued on May 15, 2023. There were no events occurring subsequent to March 31, 2023 requiring disclosure.

23. Reinsurance

Effective January 1, 2023, the Company entered into a new excess loss reinsurance agreement with HM Life Insurance Company.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

- A. No significant change.
- B. No significant change.
- C. No significant change.

NOTES TO FINANCIAL STATEMENTS

D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ 2,930,080	\$ -	\$ -	\$ -	\$ 2,930,080
(2) Medical loss ratio rebates paid	\$ 8,064,904	\$ -	\$ -	\$ -	\$ 8,064,904
(3) Medical loss ratio rebates unpaid	\$ 1,434,756	\$ -	\$ -	\$ -	\$ 1,434,756
(4) Plus reinsurance assumed amounts	XXXX	XXXX	XXXX	XXXX	XXXX
(5) Less reinsurance ceded amounts	XXXX	XXXX	XXXX	XXXX	XXXX
(6) Rebates unpaid net of reinsurance	XXXX	XXXX	XXXX	XXXX	XXXX
Current Reporting Year-to-Date					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ 1,434,756	\$ -	\$ -	\$ -	\$ 1,434,756
(4) Plus reinsurance assumed amounts	XXXX	XXXX	XXXX	XXXX	XXXX
(5) Less reinsurance ceded amounts	XXXX	XXXX	XXXX	XXXX	XXXX
(6) Rebates unpaid net of reinsurance	XXXX	XXXX	XXXX	XXXX	XXXX

NOTES TO FINANCIAL STATEMENTS

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

	<u>AMOUNT</u>
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	\$ 2,524,000
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	23,035
3. Premium adjustments payable due to ACA Risk Adjustment	825,000
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	1,699,000
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	23,035
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA Reinsurance	0
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	0
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	0
Liabilities	
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium .	0
5. Ceded reinsurance premiums payable due to ACA Reinsurance	0
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	0
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA Reinsurance	0
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	0
9. ACA Reinsurance contributions – not reported as ceded premium	0
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA Risk Corridors	0
Liabilities	
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	0
Operations (Revenue & Expense)	
3. Effect of ACA Risk Corridors on net premium income (paid/received)	0
4. Effect of ACA Risk Corridors on change in reserves for rate credits	0

NOTES TO FINANCIAL STATEMENTS

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any non-admission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before Dec. 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec. 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	1	2	3	4	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)	
					5	6	7	8			
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable .....	.9,064,000	0	0	0	.9,064,000	0	0	0	A	.9,064,000	0
2. Premium adjustments (payable)	0	.4,607,240	0	0	0	.4,607,240	0	0	B	0	.4,607,240
3. Subtotal ACA Permanent Risk Adjustment Program	.9,064,000	.4,607,240	0	0	.9,064,000	.4,607,240	0	0		.9,064,000	.4,607,240
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	0	0	0	0	0	0	0	0	C	0	0
2. Amounts recoverable for claims unpaid (contra liability)	0	0	0	0	0	0	0	0	D	0	0
3. Amounts receivable relating to uninsured plans	0	0	0	0	0	0	0	0	E	0	0
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	0	0	0	0	0	0	0	0	F	0	0
5. Ceded reinsurance premiums payable	0	0	0	0	0	0	0	0	G	0	0
6. Liability for amounts held under uninsured plans ..	0	0	0	0	0	0	0	0	H	0	0
7. Subtotal ACA Transitional Reinsurance Program	0	0	0	0	0	0	0	0		0	0
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	0	0	0	0	0	0	0	0	I	0	0
2. Reserve for rate credits or policy experience rating refunds	0	0	0	0	0	0	0	0	J	0	0
3. Subtotal ACA Risk Corridors Program	0	0	0	0	0	0	0	0		0	0
d. Total for ACA Risk Sharing Provisions	.9,064,000	.4,607,240	0	0	.9,064,000	.4,607,240	0	0		.9,064,000	.4,607,240

Explanation of Adjustments

- A Not Applicable
- B Not Applicable
- C Not Applicable
- D Not Applicable
- E Not Applicable
- F Not Applicable
- G Not Applicable
- H Not Applicable
- I Not Applicable
- J Not Applicable

NOTES TO FINANCIAL STATEMENTS

(4) Roll forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.

Risk Corridors Program Year	Accrued During the Prior Year on Business Written Before Dec. 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec. 31 of the Prior Year		Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	1	2	3	4	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)	
					5	6	7	8			
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)	
a. 2014											
1. Accrued retrospective premium	0	0	0		0	0	0		A	0	0
2. Reserve for rate credits or policy experience rating refunds	0	0	0		0	0	0		B	0	0
b. 2015											
1. Accrued retrospective premium	0	0	0		0	0	0		C	0	0
2. Reserve for rate credits or policy experience rating refunds	0	0	0		0	0	0		D	0	0
c. 2016											
1. Accrued retrospective premium	0	0	0		0	0	0		E	0	0
2. Reserve for rate credits or policy experience rating refunds	0	0	0		0	0	0		F	0	0
d. Total for Risk Corridors	0	0	0		0	0	0			0	0

Explanation of Adjustments

- A Not Applicable
B Not Applicable
C Not Applicable
D Not Applicable
E Not Applicable
F Not Applicable

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-admissions) (1-2-3)	5 Non-admitted	6 Net Admitted Asset (4-5)
a. 2014	0	0	0	0	0	0
b. 2015	0	0	0	0	0	0
c. 2016	0	0	0	0	0	0
d. Total (a+b+c)	0	0	0	0	0	0

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)

24E(5)d (Column 6) should equal 24E(2)c1

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of March 31, 2023 were \$23,293,184. As of March 31, 2023, \$15,596,105 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$2,165,385 as a result of re-estimation of unpaid claims and claim adjustments expenses principally on the comprehensive line of business. Therefore, there has been a \$876,429 unfavorable prior year development since December 31, 2022 to March 31, 2023. The increase is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

NOTES TO FINANCIAL STATEMENTS

- B.** There were no significant changes in methodologies and assumptions used in calculating the liability for unpaid claims and claims adjustment expenses.

26. Intercompany Pooling Arrangements

There were no significant changes for the three months ended March 31, 2023.

27. Structured Settlements

There were no significant changes for the three months ended March 31, 2023.

28. Health Care Receivables

There were no significant changes for the three months ended March 31, 2023.

29. Participating Policies

There were no significant changes for the three months ended March 31, 2023.

30. Premium Deficiency Reserves

The Company recorded premium deficiency reserves at March 31, 2023 and December 31, 2022 of \$6,632,088 and \$15,800,000, respectively.

- | | |
|---|--------------|
| 1. Liability carried for premium deficiency reserves | \$ 6,632,088 |
| 2. Date of the most recent evaluation of this liability | 3/31/2023 |
| 3. Was anticipated investment income utilized in the calculation? | Yes No X |

31. Anticipated Salvage and Subrogation

There were no significant changes for the three months ended March 31, 2023.

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.

- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
 If yes, attach an explanation.

- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2021
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2017
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 10/04/2019
- 6.4 By what department or departments?
 Maine Bureau of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options
GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [] No []
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes [] No []
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No []
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No []
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No []
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA:\$
13. Amount of real estate and mortgages held in short-term investments:\$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [] No []
- 14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$
14.22 Preferred Stock	\$0	\$
14.23 Common Stock	\$0	\$
14.24 Short-Term Investments	\$0	\$
14.25 Mortgage Loans on Real Estate	\$0	\$
14.26 All Other	\$15,000	\$15,000
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$15,000	\$15,000
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No []
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
 If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$0
- 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$0
- 16.3 Total payable for securities lending reported on the liability page.\$0

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options
GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
Key Private Bank	4900 Tiedeman Road, Brooklyn, OH 44144-2302
US Bank	1555 N. Rivercenter Dr. Suite 300 Milwaukee, WI 53212

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

- 17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
Key Private Bank	U.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
Not Applicable	Key Private Bank	HJX2X73FUCYHJVH1BK78	Office of the Comptroller of the Currency	DS.....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

- 18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent84.1 %
- 1.2 A&H cost containment percent3.3 %
- 1.3 A&H expense percent excluding cost containment expenses16.0 %
- 2.1 Do you act as a custodian for health savings accounts? Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date\$.....
- 2.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date\$.....
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []
- 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

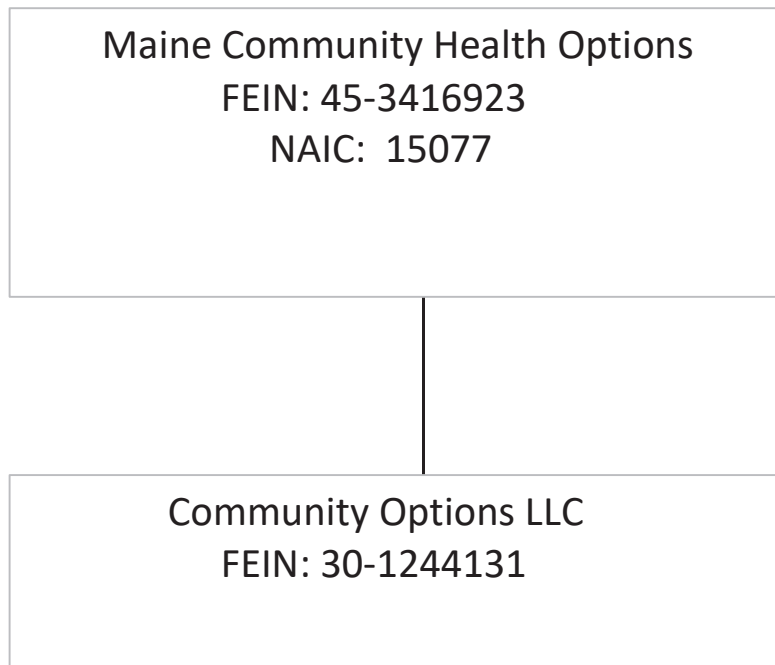
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (a)	Direct Business Only									
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts	
1. Alabama	AL	N								0	
2. Alaska	AK	N								0	
3. Arizona	AZ	N								0	
4. Arkansas	AR	N								0	
5. California	CA	N								0	
6. Colorado	CO	N								0	
7. Connecticut	CT	N								0	
8. Delaware	DE	N								0	
9. District of Columbia	DC	N								0	
10. Florida	FL	N								0	
11. Georgia	GA	N								0	
12. Hawaii	HI	N								0	
13. Idaho	ID	N								0	
14. Illinois	IL	N								0	
15. Indiana	IN	N								0	
16. Iowa	IA	N								0	
17. Kansas	KS	N								0	
18. Kentucky	KY	N								0	
19. Louisiana	LA	N								0	
20. Maine	ME	L	63,190,287							63,190,287	
21. Maryland	MD	N								0	
22. Massachusetts	MA	N								0	
23. Michigan	MI	N								0	
24. Minnesota	MN	N								0	
25. Mississippi	MS	N								0	
26. Missouri	MO	N								0	
27. Montana	MT	N								0	
28. Nebraska	NE	N								0	
29. Nevada	NV	N								0	
30. New Hampshire	NH	L								0	
31. New Jersey	NJ	N								0	
32. New Mexico	NM	N								0	
33. New York	NY	N								0	
34. North Carolina	NC	N								0	
35. North Dakota	ND	N								0	
36. Ohio	OH	N								0	
37. Oklahoma	OK	N								0	
38. Oregon	OR	N								0	
39. Pennsylvania	PA	N								0	
40. Rhode Island	RI	N								0	
41. South Carolina	SC	N								0	
42. South Dakota	SD	N								0	
43. Tennessee	TN	N								0	
44. Texas	TX	N								0	
45. Utah	UT	N								0	
46. Vermont	VT	N								0	
47. Virginia	VA	N								0	
48. Washington	WA	N								0	
49. West Virginia	WV	N								0	
50. Wisconsin	WI	N								0	
51. Wyoming	WY	N								0	
52. American Samoa	AS	N								0	
53. Guam	GU	N								0	
54. Puerto Rico	PR	N								0	
55. U.S. Virgin Islands	VI	N								0	
56. Northern Mariana Islands	MP	N								0	
57. Canada	CAN	N								0	
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0	0	0
59. Subtotal	XXX	63,190,287	0	0	0	0	0	0	63,190,287	0	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX									0	
61. Totals (Direct Business)	XXX	63,190,287	0	0	0	0	0	0	63,190,287	0	0
DETAILS OF WRITE-INS											
58001.	XXX										
58002.	XXX										
58003.	XXX										
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:

- 1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 2
- 2. R - Registered - Non-domiciled RRGs..... 0
- 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0
- 4. Q - Qualified - Qualified or accredited reinsurer..... 0
- 5. N - None of the above - Not allowed to write business in the state..... 55



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

AUGUST FILING

2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	N/A
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Explanation:

1. Not applicable

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



NONE

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest paid and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	221,500	206,500
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	15,000
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	0	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and depreciation	0	0
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other than temporary impairment recognized	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	221,500	221,500
12. Deduct total nonadmitted amounts	221,500	221,500
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	123,429,471	140,171,020
2. Cost of bonds and stocks acquired	0	2,014,600
3. Accrual of discount	18,371	87,227
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	(302,894)	(242,749)
6. Deduct consideration for bonds and stocks disposed of	6,396,675	17,272,972
7. Deduct amortization of premium	315,625	1,459,547
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	131,892
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	116,432,648	123,429,471
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	116,432,648	123,429,471

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	112,653,974	0	6,699,569	(271,053)	105,683,352	0	0	112,653,974
2. NAIC 2 (a)	10,775,487	0	0	(26,201)	10,749,297	0	0	10,775,487
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	123,429,471	0	6,699,569	(297,254)	116,432,648	0	0	123,429,471
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	123,429,471	0	6,699,569	(297,254)	116,432,648	0	0	123,429,471

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 ; NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

NONE

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

NONE

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

NONE

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	11,632,632	32,410,827
2. Cost of cash equivalents acquired	7,713,606	21,771,247
3. Accrual of discount	0	.0
4. Unrealized valuation increase (decrease)	0	.0
5. Total gain (loss) on disposals	0	.0
6. Deduct consideration received on disposals	4,329,666	42,549,442
7. Deduct amortization of premium	0	.0
8. Total foreign exchange change in book/adjusted carrying value	0	.0
9. Deduct current year's other than temporary impairment recognized	0	.0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	15,016,571	11,632,632
11. Deduct total nonadmitted amounts	0	.0
12. Statement value at end of current period (Line 10 minus Line 11)	15,016,571	11,632,632

Schedule A - Part 2 - Real Estate Acquired and Additions Made

NONE

Schedule A - Part 3 - Real Estate Disposed

NONE

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

NONE

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

NONE

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

NONE

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value				16	17	18	19	20	21	22	
										11	12	13	14								15	16	17	18	19	20	21	22
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book/Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
.060516-EU-9	BANK OF AMERICA CORP		01/11/2023	Maturity @ 100.00		2,000,000	2,000,000	1,974,260	1,989,832	0	168	0	168	0	2,000,000	0	0	0	33,000	07/11/2023	XXX
.63948L-AQ-1	PNC BANK NA		03/16/2023	UNKNOWN		2,500,000	2,500,000	2,833,950	2,716,311	0	(16,742)	0	(16,742)	0	2,669,569	0	(302,884)	(302,884)	40,542	11/01/2025	1.6 FE
.851214-D5-3	WESTPAC BANKING CORP		01/11/2023	Maturity @ 100.00		2,000,000	2,000,000	2,111,440	2,001,280	0	(1,280)	0	(1,280)	0	2,000,000	0	0	0	27,500	01/11/2023	1.6 FE
1109999999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					6,396,675	6,500,000	6,919,650	6,717,423	0	(17,854)	0	(17,854)	0	6,699,569	0	(302,884)	(302,884)	101,042	XXX	
2509999998	Total - Bonds - Part 4					XXX	XXX	6,919,650	6,717,423	0	(17,854)	0	(17,854)	0	6,699,569	0	(302,884)	(302,884)	101,042	XXX	
2509999999	Total - Bonds					6,396,675	6,500,000	6,919,650	6,717,423	0	(17,854)	0	(17,854)	0	6,699,569	0	(302,884)	(302,884)	101,042	XXX	
4509999997	Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
4509999999	Total - Preferred Stocks					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
5999999997	Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5999999998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX
5999999999	Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5999999999	Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6009999999	Totals					6,396,675	XXX	6,919,650	6,717,423	0	(17,854)	0	(17,854)	0	6,699,569	0	(302,884)	(302,884)	101,042	XXX	

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open

NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

NONE

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

STATEMENT AS OF MARCH 31, 2023 OF THE Maine Community Health Options
SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
0109999999	Total - U.S. Government Bonds					0	0	0
0309999999	Total - All Other Government Bonds					0	0	0
0509999999	Total - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999	Total - U.S. Political Subdivisions Bonds					0	0	0
0909999999	Total - U.S. Special Revenues Bonds					0	0	0
1109999999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					0	0	0
1309999999	Total - Hybrid Securities					0	0	0
1509999999	Total - Parent, Subsidiaries and Affiliates Bonds					0	0	0
1909999999	Subtotal - Unaffiliated Bank Loans					0	0	0
2419999999	Total - Issuer Obligations					0	0	0
2429999999	Total - Residential Mortgage-Backed Securities					0	0	0
2439999999	Total - Commercial Mortgage-Backed Securities					0	0	0
2449999999	Total - Other Loan-Backed and Structured Securities					0	0	0
2459999999	Total - SVO Identified Funds					0	0	0
2469999999	Total - Affiliated Bank Loans					0	0	0
2479999999	Total - Unaffiliated Bank Loans					0	0	0
2509999999	Total Bonds					0	0	0
31869-54-2	FISBT HBS TBS 66 Z	30	03/02/2023	4.680		111,235	426	1,137
8209999999	Subtotal - Exempt Money Market Mutual Funds - as identified by the SVO					111,235	426	1,137
86394-20-3	FEDERED HBS TPT 15		03/27/2023	4.840		14,955,336	52,483	101,329
8309999999	Subtotal - All Other Money Market Mutual Funds					14,955,336	52,483	101,329
8609999999	Total Cash Equivalents					15,016,571	52,919	102,466