

**QUARTERLY STATEMENT**  
**OF THE**  
**AMERIGROUP Tennessee, Inc.**

**of**  
**Nashville**  
**in the state of**  
**Tennessee**

**TO THE**  
**Insurance Department**  
**OF THE STATE OF**  
**Tennessee**

**FOR THE QUARTER ENDED**  
**June 30, 2016**

**2016**

**HEALTH**

**2016**



# HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2016  
OF THE CONDITION AND AFFAIRS OF THE

## AMERIGROUP Tennessee, Inc.

NAIC Group Code 0671 0671 NAIC Company Code 12941 Employer's ID Number 20-4776597  
(Current) (Prior)

Organized under the Laws of Tennessee, State of Domicile or Port of Entry Tennessee

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

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

Incorporated/Organized 04/26/2006 Commenced Business 04/01/2007

Statutory Home Office 22 Century Boulevard, Suite 220 Nashville, TN, US 37214  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 4425 Corporation Lane  
(Street and Number)  
Virginia Beach, VA, US 23462 757-490-6900  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 4425 Corporation Lane Virginia Beach, VA, US 23462  
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 4425 Corporation Lane  
(Street and Number)  
Virginia Beach, VA, US 23462 757-490-6900  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.amerigroup.com

Statutory Statement Contact Bette Lou Gronseth 757-518-3638  
(Name) (Area Code) (Telephone Number)  
Bette.Gronseth@amerigroup.com 757-557-6742  
(E-mail Address) (FAX Number)

### OFFICERS

Chairperson Charles Brian Shipp Vice President/COO Edna Laverne Willingham  
President/CEO Alvin Brock King Vice President/Assistant Secretary Jack Louis Young

### OTHER

Kathleen Susan Kiefer, Secretary Robert David Kretschmer, Treasurer Eric (Rick) Kenneth Noble, Assistant Treasurer  
Kendall Benjamin Edwards, Vice President - Finance Mark Daniel Justus, Valuation Actuary

### DIRECTORS OR TRUSTEES

Carter Allen Beck Catherine Irene Kelaghan Alvin Brock King  
Charles Brian Shipp

State of Tennessee SS:  
County of Nashville

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.

Alvin Brock King President/CEO  
Robert David Kretschmer Treasurer  
Kathleen Susan Kiefer Secretary

Subscribed and sworn to before me this 9th day of August 2016  
Barbara C. McLean

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

My Commission Expires MAR. 6, 2018





**Amerigroup Tennessee, Inc.**

**Statement of Actuarial Opinion**

This Opinion is	<input checked="" type="checkbox"/> Unqualified	<input type="checkbox"/> Qualified	<input type="checkbox"/> Adverse	<input type="checkbox"/> Inconclusive
Identification Section	<input type="checkbox"/> Prescribed Wording Only	<input checked="" type="checkbox"/> Prescribed Wording with Additional Wording	<input type="checkbox"/> Revised Wording	
Scope Section	<input checked="" type="checkbox"/> Prescribed Wording Only	<input type="checkbox"/> Prescribed Wording with Additional Wording	<input type="checkbox"/> Revised Wording	
Reliance Section	<input type="checkbox"/> Prescribed Wording Only	<input type="checkbox"/> Prescribed Wording with Additional Wording	<input checked="" type="checkbox"/> Revised Wording	
Opinion Section	<input type="checkbox"/> Prescribed Wording Only	<input type="checkbox"/> Prescribed Wording with Additional Wording	<input checked="" type="checkbox"/> Revised Wording	
Relevant Comments				<input checked="" type="checkbox"/> Revised Wording
<input type="checkbox"/> The Actuarial Memorandum includes "Deviation from Standard" wording regarding conformity with an Actuarial Standard of Practice				

**Identification**

I, Mark D. Justus, Director & Actuary III, am an employee of Anthem, Inc., and a member of the American Academy of Actuaries. I was appointed on October 01, 2013 in accordance with the requirements of the annual statement instructions for Amerigroup Tennessee, Inc., a subsidiary of Anthem, Inc. I meet the Academy qualification standards for rendering the opinion.

**Scope**

I have examined the assumptions and methods used in determining loss reserves, actuarial liabilities and related items listed below, as shown in the quarterly statement of the organization as prepared for filing with state regulatory officials, as of June 30, 2016:

- A. Claims unpaid (Page 3, Line 1) \$ 192,654,180
- B. Accrued medical incentive pool and bonus amounts (Page 3, Line 2) \$ 1,234,664
- C. Unpaid claims adjustment expenses (Page 3, Line 3) \$ 6,153,049

D. Aggregate health policy reserves (Page 3, Line 4)	\$ 34,585,007
E. Aggregate life policy reserves (Page 3, Line 5)	\$ 0
F. Property/casualty unearned premium reserve (Page 3, Line 6)	\$ 0
G. Aggregate health claim reserves (Page 3, Line 7)	\$ 0
H. Any other loss reserves, actuarial liabilities, or related items presented as liabilities in the quarterly statement	
Not applicable	
I. Specified actuarial items presented as assets in the quarterly statement	
1. Portion of Rx Rebate Receivables (part of Page 2, Line 24, Column 1)	\$ 520,614

### **Reliance**

In forming my opinion on Unearned Premium Reserves (part of Aggregate Health Policy Reserves) and Legal Claim Reserves (part of Unpaid Claims), I relied upon data prepared by R. David Kretschmer, Senior Vice President, Treasurer and Chief Investment Officer, and John Nicholson, Managing Senior Associate General Counsel, Anthem, Inc. as certified in the attached statements. I evaluated the data for reasonableness and consistency.

In other respects, my examination included such review of the actuarial assumptions and actuarial methods and of the underlying basic liability records and such tests of the actuarial calculations as I considered necessary. I also reconciled the underlying basic liability records to the Underwriting and Investment Exhibit, Analysis of Claims Unpaid of the company's current quarterly statement.

### **Opinion**

In my opinion, the amounts carried in the balance sheet on account of the items identified above:

- A. Are in accordance with accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- B. Are based on actuarial assumptions relevant to contract provisions and appropriate to the purpose for which the statement was prepared;
- C. Meet the requirements of the insurance laws and regulations of the state of Tennessee, and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed;
- D. Make a good and sufficient provision for all unpaid claims and other actuarial liabilities of the organization under the terms of its contracts and agreements;
- E. Are computed on the basis of assumptions and methods consistent with those used in computing the corresponding items in the annual statement of the preceding year-end; and

F. Include appropriate provisions for all actuarial items that ought to be established.

The Underwriting and Investment Exhibit, Analysis of Claims Unpaid was reviewed for reasonableness and consistency with the applicable Actuarial Standards of Practice.

Actuarial methods, considerations, and analyses used in forming my opinion conform to the relevant Standards of Practice as promulgated from time to time by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

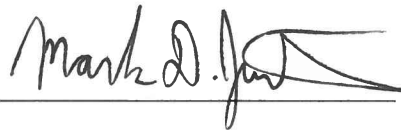
**Relevant Comments**

The liabilities being valued are mainly short term in nature, have no investment income or interest component, are not discounted for interest, and do not fluctuate with changes in the interest rate environment. As a result, no asset adequacy analysis was performed.

Historical claim payment patterns, which form the basis for the majority of the claims unpaid estimate, were analyzed net of claim recoveries, and I am satisfied that this treatment is reasonable based on past experience, current and reasonably anticipated activities.

My review also included consideration of incentive contracts with service providers and the effect on the reserves. I have not reviewed the financial position of any party related by contract to the Company, including those under a capitation agreement with the Company. I have relied on the opinion of the Company that such parties are in a financial position to meet all liabilities resulting from such contracts.

This opinion has been prepared solely for the Board and management of the Company, for filing with insurance regulatory agencies of states in which the Company is licensed.



Mark D. Justus, FSA, MAAA  
Anthem, Inc.  
3350 Peachtree Road  
Atlanta, GA 30326  
(404) 693-1434  
Mark.Justus@anthem.com  
August 11, 2016



Investment Assumption Reliance Statement  
**Amerigroup Tennessee, Inc.**  
For 2016 Actuarial Opinion

I, R. David Kretschmer, Senior Vice President, Treasurer and Chief Investment Officer, of Anthem Inc., the ultimate parent company of **Amerigroup Tennessee, Inc.**, hereby affirm that the listings, summaries and analyses relating to the Unearned Premium Reserve balance (Underwriting and Investment Exhibit, Part 2D, Column 1, Line1), prepared for and submitted to **Mark Justus, Director & Actuary III**, in support of the actuarial opinion for **Amerigroup Tennessee, Inc.**, as of June 30, 2016, were prepared in accordance with generally accepted accounting principles and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the period ended June 30, 2016.

A handwritten signature in blue ink, which appears to read "R. David Kretschmer", is written over a horizontal line.

R. David Kretschmer  
Senior Vice President, Treasurer and Chief Investment Officer  
July 22, 2016

Anthem, Inc.  
120 Monument Circle  
Indianapolis, IN 46204  
317-488-6422



Reliance Statement  
**Amerigroup Tennessee, Inc.**  
For 2016 Actuarial Opinion

I, John B. Nicholson, Managing Senior Associate General Counsel of Anthem Inc., the ultimate parent company of **Amerigroup Tennessee, Inc.**, hereby affirm that the listings, summaries and analyses relating to the Legal Claim Reserve balance, prepared for and submitted to **Mark Justus** in support of the actuarial opinion for **Amerigroup Tennessee, Inc.**, as of June 30, 2016, were prepared in accordance with generally accepted accounting principles and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the quarterly statement for the period ended June 30, 2016.

A handwritten signature in black ink, appearing to read "John B. Nicholson", written over a horizontal line.

John Nicholson  
Managing Senior Associate General Counsel  
July 22, 2016

Anthem, Inc.  
2015 Staples Mill Rd.  
Richmond, VA 23230  
804-354-7697

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**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 .....	366,981,265		366,981,265	358,305,356
2. Stocks:				
2.1 Preferred stocks .....			0	0
2.2 Common stocks .....	16,682,431		16,682,431	21,292,634
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 (\$ .....(351,670) ), cash equivalents (\$ ..... ) and short-term investments (\$ .....4,659,014 ) .....	4,307,344		4,307,344	147,253,525
6. Contract loans (including \$ ..... premium notes) .....			0	0
7. Derivatives .....			0	0
8. Other invested assets .....			0	0
9. Receivables for securities .....	5,525,873		5,525,873	76,941
10. Securities lending reinvested collateral assets .....	44,489,970		44,489,970	24,199,098
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	437,986,883	0	437,986,883	551,127,554
13. Title plants less \$ ..... charged off (for Title insurers only) .....			0	0
14. Investment income due and accrued .....	3,768,139		3,768,139	3,676,491
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	31,475,231		31,475,231	7,908,540
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 (\$ ..... ) .....	6,717,816		6,717,816	1,646,637
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....			0	0
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 .....	7,638,518		7,638,518	8,865,445
18.1 Current federal and foreign income tax recoverable and interest thereon .....	6,571,137		6,571,137	0
18.2 Net deferred tax asset .....	8,204,331	682,454	7,521,877	16,947,281
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....			0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	4,886,788	4,886,788	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....	727,712		727,712	74,636
24. Health care (\$ .....1,646,913 ) and other amounts receivable .....	7,623,914	5,977,001	1,646,913	1,304,578
25. Aggregate write-ins for other than invested assets .....	329,872	329,872	0	99
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	515,930,341	11,876,115	504,054,226	591,551,261
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	515,930,341	11,876,115	504,054,226	591,551,261
<b>DETAILS OF WRITE-INS</b>				
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 .....	329,872	329,872	0	0
2502. State Income Tax Receivable .....			0	99
2503. ....				
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)	329,872	329,872	0	99



**LIABILITIES, CAPITAL AND SURPLUS**

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ ..... reinsurance ceded) .....	192,654,180		192,654,180	182,082,975
2. Accrued medical incentive pool and bonus amounts .....	1,234,664		1,234,664	1,436,341
3. Unpaid claims adjustment expenses .....	6,153,049		6,153,049	6,295,127
4. Aggregate health policy reserves, including the liability of \$ .....0 for medical loss ratio rebate per the Public Health Service Act .....	34,585,007		34,585,007	8,686,982
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 .....	283		283	144,407,148
9. General expenses due or accrued .....	14,694,695		14,694,695	3,290,017
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized gains (losses)) .....			0	6,927,021
10.2 Net deferred tax liability .....			0	0
11. Ceded reinsurance premiums payable .....			0	0
12. Amounts withheld or retained for the account of others .....	108,682		108,682	31,018
13. Remittances and items not allocated .....	10,518,053		10,518,053	11,652,003
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....			0	0
15. Amounts due to parent, subsidiaries and affiliates .....	3,977,817		3,977,817	2,143,617
16. Derivatives .....			0	0
17. Payable for securities .....	819,790		819,790	0
18. Payable for securities lending .....	44,489,970		44,489,970	24,199,098
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 .....	11,832,507		11,832,507	9,898,177
23. Aggregate write-ins for other liabilities (including \$ .....25,054,764 current) .....	25,868,979	0	25,868,979	20,934,704
24. Total liabilities (Lines 1 to 23) .....	346,937,676	0	346,937,676	421,984,228
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	24,277,032
26. Common capital stock .....	XXX	XXX	1,000	1,000
27. Preferred capital stock .....	XXX	XXX		
28. Gross paid in and contributed surplus .....	XXX	XXX	110,809,432	110,809,432
29. Surplus notes .....	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	46,306,118	34,479,569
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	157,116,550	169,567,033
34. Total liabilities, capital and surplus (Lines 24 and 33) .....	XXX	XXX	504,054,226	591,551,261
<b>DETAILS OF WRITE-INS</b>				
2301. Accrued Premium Tax .....	24,811,951		24,811,951	20,394,177
2302. Escheat Liability .....	882,441		882,441	540,527
2303. Other Discrepant Members .....	159,887		159,887	
2398. Summary of remaining write-ins for Line 23 from overflow page .....	14,700	0	14,700	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above) .....	25,868,979	0	25,868,979	20,934,704
2501. Estimated ACA Health Insurer Fee .....	XXX	XXX		24,277,032
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	24,277,032
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 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	2,729,422	2,401,927	4,953,662
2. Net premium income ( including \$ non-health premium income)	XXX	956,007,547	821,325,239	1,682,022,317
3. Change in unearned premium reserves and reserve for rate credits	XXX	(430,434)	7,037,443	6,382,900
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	955,577,113	828,362,682	1,688,405,217
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits		631,337,498	482,763,983	1,014,721,485
10. Other professional services		49,054,898	38,659,192	82,276,481
11. Outside referrals				
12. Emergency room and out-of-area		64,858,575	73,247,631	128,252,813
13. Prescription drugs		6,637,250	4,614,768	8,223,795
14. Aggregate write-ins for other hospital and medical	0	66,340,445	55,065,260	129,993,431
15. Incentive pool, withhold adjustments and bonus amounts		646,370	379,342	1,244,273
16. Subtotal (Lines 9 to 15)	0	818,875,036	654,730,176	1,364,712,278
<b>Less:</b>				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)	0	818,875,036	654,730,176	1,364,712,278
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 42,127,397 cost containment expenses		58,071,317	47,556,353	113,679,238
21. General administrative expenses		98,312,790	105,697,473	167,544,818
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	975,259,143	807,984,002	1,645,936,334
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(19,682,030)	20,378,680	42,468,883
25. Net investment income earned		6,427,995	3,758,897	9,818,763
26. Net realized capital gains (losses) less capital gains tax of \$ 202,804		(4,108,497)	194,889	(30,602)
27. Net investment gains (losses) (Lines 25 plus 26)	0	2,319,498	3,953,786	9,788,161
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ) (amount charged off \$ )]		(512)		
29. Aggregate write-ins for other income or expenses	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	(17,363,044)	24,332,466	52,257,044
31. Federal and foreign income taxes incurred	XXX	(6,773,940)	10,638,584	29,574,694
32. Net income (loss) (Lines 30 minus 31)	XXX	(10,589,104)	13,693,882	22,682,350
<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. DME, Home Health Care, Ambulance, Other LTSS		66,340,445	55,065,260	129,993,431
1402.				0
1403.				0
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	66,340,445	55,065,260	129,993,431
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	169,567,033	156,552,359	156,552,359
34. Net income or (loss) from Line 32.....	(10,589,104)	13,693,882	22,682,350
35. Change in valuation basis of aggregate policy and claim reserves.....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ ..... 2,794,697	5,190,152	(2,339,053)	(7,993,360)
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....	(8,756,063)	(6,789,091)	5,079,142
39. Change in nonadmitted assets.....	1,704,532	(3,250,152)	(6,753,458)
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	0	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).....	(12,450,483)	1,315,586	13,014,674
49. Capital and surplus end of reporting period (Line 33 plus 48)	157,116,550	157,867,945	169,567,033
<b>DETAILS OF WRITE-INS</b>			
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 JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	808,430,403	682,358,501	1,699,226,123
2. Net investment income .....	7,748,176	2,967,128	10,246,910
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	816,178,579	685,325,629	1,709,473,033
5. Benefit and loss related payments .....	809,294,583	560,675,857	1,262,387,412
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	137,213,428	131,060,845	273,295,620
8. Dividends paid to policyholders .....			
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	6,927,022	16,358,315	30,424,370
10. Total (Lines 5 through 9) .....	953,435,033	708,095,017	1,566,107,402
11. Net cash from operations (Line 4 minus Line 10) .....	(137,256,454)	(22,769,388)	143,365,631
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	26,743,267	33,644,209	68,529,076
12.2 Stocks .....	5,525,869	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 .....	295	290	290
12.7 Miscellaneous proceeds .....	819,790	21,508,195	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	33,089,221	55,152,694	68,529,366
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	33,706,803	215,244,789	256,479,726
13.2 Stocks .....	0	694,911	694,911
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 .....	25,739,804	20,365,436	17,958,040
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	59,446,607	236,305,136	275,132,677
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) .....	(26,357,386)	(181,152,442)	(206,603,311)
<b>Cash from Financing and Miscellaneous Sources</b>			
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 .....	0	0	0
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) .....	20,667,659	20,762,800	19,068,385
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	20,667,659	20,762,800	19,068,385
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(142,946,181)	(183,159,030)	(44,169,295)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	147,253,525	191,422,820	191,422,820
19.2 End of period (Line 18 plus Line 19.1) .....	4,307,344	8,263,790	147,253,525

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

20.0001. Depreciation .....	290,567	90,329	243,259
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**EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
<b>Total Members at end of:</b>										
1. Prior Year .....	426,813	0	0	0	0	0	0	7,734	419,079	0
2. First Quarter .....	446,127	0	0	0	0	0	0	7,969	438,158	0
3. Second Quarter .....	459,772							8,756	451,016	
4. Third Quarter .....	0									
5. Current Year	0									
6. Current Year Member Months	2,729,422							48,928	2,680,494	
<b>Total Member Ambulatory Encounters for Period:</b>										
7. Physician .....	1,209,729							64,575	1,145,154	
8. Non-Physician .....	1,472,667							49,385	1,423,282	
9. Total	2,682,396	0	0	0	0	0	0	113,960	2,568,436	0
10. Hospital Patient Days Incurred	159,895							12,086	147,809	
11. Number of Inpatient Admissions	27,128							1,847	25,281	
12. Health Premiums Written (a) .....	956,007,547							55,000,907	901,006,640	
13. Life Premiums Direct .....	0									
14. Property/Casualty Premiums Written .....	0									
15. Health Premiums Earned .....	955,577,113							54,570,473	901,006,640	
16. Property/Casualty Premiums Earned .....	0									
17. Amount Paid for Provision of Health Care Services.....	808,505,508							46,638,965	761,866,543	
18. Amount Incurred for Provision of Health Care Services	818,875,036							47,659,823	771,215,213	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....55,000,907



## UNDERWRITING AND INVESTMENT EXHIBIT

### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior 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) .....					0	0
2. Medicare Supplement .....					0	0
3. Dental Only .....					0	0
4. Vision Only .....					0	0
5. Federal Employees Health Benefits Plan .....					0	0
6. Title XVIII - Medicare .....	9,920,199	40,569,498	(776,593)	10,335,770	9,143,606	8,738,894
7. Title XIX - Medicaid .....	164,160,458	600,495,888	10,863,234	172,231,769	175,023,692	173,344,081
8. Other health .....					0	0
9. Health subtotal (Lines 1 to 8) .....	174,080,657	641,065,386	10,086,641	182,567,539	184,167,298	182,082,975
10. Healthcare receivables (a) .....	897,435	6,591,147			897,435	0
11. Other non-health .....					0	0
12. Medical incentive pools and bonus amounts .....	826,651	21,396	449,108	785,556	1,275,759	1,436,341
13. Totals (Lines 9-10+11+12)	174,009,873	634,495,635	10,535,749	183,353,095	184,545,622	183,519,316

(a) Excludes \$ 135,332 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, 2015. 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 AMERIGROUP Tennessee, Inc. (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 Tennessee Department of Commerce and Insurance ("TDCI").

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

	<u>State of Domicile</u>	<u>June 30, 2016</u>	<u>December 31, 2015</u>
<b><u>Net Income</u></b>			
(1) AMERIGROUP Tennessee Inc. state basis (Page 4, Line 32, Columns 2 & 4)	Tennessee	\$ (10,589,104)	\$ 22,682,350
(2) State Prescribed Practices that increase(decrease) NAIC SAP:	Tennessee	-	-
(3) State Permitted Practices that increase(decrease) NAIC SAP:	Tennessee	-	-
(4) NAIC SAP (1 - 2 - 3 = 4)	Tennessee	\$ (10,589,104)	\$ 22,682,350
<b><u>Surplus</u></b>			
(5) AMERIGROUP Tennessee Inc. state basis (Page 3, Line 33, Columns 3 & 4)	Tennessee	\$ 157,116,550	\$ 169,567,033
(6) State Prescribed Practices that increase(decrease) NAIC SAP:	Tennessee	-	-
(7) State Permitted Practices that increase(decrease) NAIC SAP:	Tennessee	-	-
(8) NAIC SAP (5 - 6 - 7 = 8)	Tennessee	\$ 157,116,550	\$ 169,567,033

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

No significant change.

**C. Accounting Policies**

1. - 5. No significant change.

6. Loan-backed securities are stated at amortized cost. Pre-payment assumptions for loan-backed securities and structured securities were obtained from broker-dealer survey values or internal estimates. These assumptions are consistent with the current interest rate and economic environment. The retrospective adjustment method is used to value all loan-backed securities. Non-investment grade loan-backed securities are stated at the lower of amortized cost or fair value.

7. - 13. No significant change.

**D. Going Concern**

Not applicable.

**2. Accounting Changes and Corrections of Errors**

Not applicable.

**3. Business Combinations and Goodwill**

Not applicable.

**4. Discontinued Operations**

Not applicable.

**5. Investments**

A. - C.

Not applicable.



**D. Loan-Backed Securities**

1. Prepayment assumptions for single-class and multi-class mortgage-backed and asset-backed securities were obtained from broker-dealer survey values or internal estimates. The Company used various third-party pricing sources in determining the market value of its loan-backed securities.
2. The Company did not recognize other-than-temporary impairments (“OTTI”)s on its loan-backed securities during the six months ended June 30, 2016.
3. The Company did not hold other-than-temporarily impaired loan-backed securities at June 30, 2016.
4. The Company had no impaired securities for which an OTTI had not been recognized in earnings as a realized loss at June 30, 2016.
5. The Company had no impaired loan-backed securities at June 30, 2016.

**E. Repurchase Agreements and/or Securities Lending Transactions**

1. Not applicable.
2. No significant change.
3. Collateral Received:
  - a. No significant change.
  - b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged \$44,491,140
  - c. No significant change.
4. Not applicable.
5. No significant change.
6. Not applicable.
7. Not applicable.

**F. Real Estate**

Not applicable.

**G. Investments in Low-Income Housing Tax Credits**

Not applicable.

**H. Restricted Assets**

No significant change.

**I. Working Capital Finance Investments**

Not applicable.

**J. Offsetting and Netting of Assets and Liabilities**

Not applicable.

**K. Structured Notes**

Not applicable.

**6. Joint Ventures, Partnerships and Limited Liability Companies**

No significant change.

**7. Investment Income**

No significant change.

**8. Derivative Instruments**

Not applicable.

**9. Income Taxes**

No significant change.

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

**A. Nature of the Relationship**

On July 24, 2015, the Company's ultimate parent company, Anthem, Inc. ("Anthem"), and Cigna Corporation ("Cigna") entered into an Agreement and Plan of Merger dated as of July 23, 2015, by and among Anthem, Cigna and Anthem Merger Sub Corp., a Delaware corporation and a direct wholly-owned subsidiary of Anthem, pursuant to which Anthem will acquire all outstanding shares of Cigna. The acquisition is expected to close in the second half of 2016 and is subject to certain state regulatory approvals, standard closing conditions, customary approvals required under the Hart-Scott-Rodino Antitrust Improvements Act and the approval of both the Anthem, Inc. shareholders and Cigna's stockholders.

Subsequent to June 30, 2016, the U.S. Department of Justice, along with certain state attorneys general, filed a civil antitrust lawsuit in the U.S. District Court for the District of Columbia seeking to block the acquisition. Anthem intends to vigorously defend the acquisition in this litigation and remains committed to completing the acquisition as soon as practicable.

**B. – C.**

No significant change.

**D. Amounts Due to or from Related Parties**

At June 30, 2016, the Company reported \$727,712 due from affiliates and \$3,977,817 due to affiliates. The receivable and payable balances represent intercompany transactions that will be settled in accordance with the settlement terms of the intercompany agreement.

**E. – L.**

No significant change.

**11. Debt**

Not applicable.

**12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefits Plans**

No significant change.

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

No significant change.

**14. Liabilities, Contingencies and Assessments**

**A. – E.**

No significant change.

**F. All Other Contingencies**

In March 2016, Anthem filed a lawsuit against its vendor for pharmacy benefit management services, captioned *Anthem, Inc. v. Express Scripts, Inc.*, in the U.S. District Court for the Southern District of New York. The lawsuit seeks to recover damages for pharmacy pricing that is higher than competitive benchmark pricing, damages related to operational breaches and seeks various declarations under the agreement between the parties. Anthem's suit asserts that Express Scripts, Inc.'s ("Express Scripts") current pricing exceeds the competitive benchmark pricing required by the agreement over the remaining term of the agreement and through the post-termination transition period. Further, Anthem believes that Express Scripts' excessive pricing has caused Anthem to lose existing customers and prevented the Company from gaining new business. In addition to the amounts associated with competitive benchmark pricing, Anthem is seeking damages associated with operational breaches incurred to date, together with a declaratory judgment that Express Scripts: (1) breached its obligation to negotiate in good faith and to agree in writing to new pricing terms; (2) is required to provide competitive benchmark pricing to Anthem through the term of the agreement; (3) has breached the agreement, and that Anthem can terminate the agreement either due to Express Scripts' breaches or because Anthem has determined that Express Scripts' performance with respect to the delegated Medicare Part D functions has been unsatisfactory; and (4) is required under the agreement to provide post-termination services, at competitive benchmark pricing, for one year following any termination. In April 2016, Express Scripts filed an answer to the lawsuit disputing Anthem's contractual claims and alleging various defenses and

counterclaims. Express Scripts contends that Anthem breached the agreement by failing to negotiate proposed new pricing terms in good faith and that Anthem breached the implied covenant of good faith and fair dealing by disregarding the terms of the transaction. In addition, Express Scripts is seeking declaratory judgments: (1) regarding the timing of the periodic pricing review under the agreement; (2) that it has no obligation to ensure that Anthem receives any specific level of pricing, that Anthem has no contractual right to any change in pricing under the agreement and that its sole obligation is to negotiate proposed pricing terms in good faith; and (3) that Anthem does not have the right to terminate the agreement. In the alternative, Express Scripts claims that Anthem has been unjustly enriched by its payment of \$4.675 billion at the time of the agreement. Anthem believes that Express Scripts' defenses and counterclaims are without merit. Anthem intends to vigorously pursue these claims and defend against any counterclaims; however, the ultimate outcome cannot be presently determined.

Anthem and Express Scripts were also named as defendants in a purported class action lawsuit filed in June 2016 in the Southern District of New York by three members of ERISA plans alleging ERISA violations. The lawsuit is captioned *Karen Burnett, Brendan Farrell, and Robert Shullich, individually and on behalf of all others similarly situated v. Express Scripts, Inc. and Anthem, Inc.* The lawsuit is purportedly filed on behalf of participants in, or beneficiaries of, ERISA governed employee welfare benefit plans from December 1, 2009 to the present who received prescription drug benefits under an Anthem plan provided through an agreement with Express Scripts. The complaint alleges that Express Scripts violated ERISA by overcharging Plaintiffs and the proposed class for percentage based copays based on prescription drug charges that are higher than competitive prices. Plaintiffs allege that Anthem is an ERISA fiduciary and breached its fiduciary obligations by (i) entering into an agreement with Express Scripts that was imprudent and not in the best interests of the members of the proposed class but enriched Anthem and granted to Express Scripts excessive discretion to set prescription drug prices, and (ii) failing to properly monitor and prevent Express Scripts from overcharging Plaintiffs and the proposed class for copays. The complaint asserts seven claims for relief under ERISA, four of which are asserted against Anthem. Plaintiffs seek to recover all losses suffered by the proposed class, equitable relief, disgorgement of alleged ill-gotten gains, injunctive relief, joint and several liability, attorney's fees and costs and interest. Anthem intends to vigorously defend this suit; however, its ultimate outcome cannot be presently determined.

**15. Leases**

No significant change.

**16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk**

No significant change.

**17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**

**A. Transfers of Receivables Reported as Sales**

Not applicable.

**B. Transfer and Servicing of Financial Assets**

1. The Company participates in a securities lending program whereby marketable securities in its investment portfolio are transferred to independent brokers or dealers. At June 30, 2016, the fair value of securities loaned was \$41,653,187 and the carrying value of securities loaned was \$40,856,396.

2. – 7. Not applicable.

**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 the yield on the investments.

2. At June 30, 2016, 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**

Not applicable.

**B. Administrative Services Contract Plans**

No significant change.

**C. Medicare or Other Similarly Structured Cost-Based Reimbursement Contract**

No significant change.

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

Not applicable.

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

## 1. Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Bonds				
Industrial and misc	\$ -	\$ 60,540,161	\$ -	\$ 60,540,161
Hybrid securities	-	733,125	-	733,125
Total bonds	\$ -	\$ 61,273,286	\$ -	\$ 61,273,286
Common stock				
Industrial and misc	\$ 16,682,431	\$ -	\$ -	\$ 16,682,431
Total common stocks	16,682,431	-	-	16,682,431
Total assets at fair value	\$ 16,682,431	\$ 61,273,286	\$ -	\$ 77,955,717

## 2. Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

Description	Beginning balance at 04/01/2016	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending balance at 06/30/2016
a. Assets										
Bonds										
Industrial and misc	\$ 634,915	\$ -	\$ (634,915)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total assets	\$ 634,915	\$ -	\$ (634,915)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

3. The Company's policy is to recognize transfers between Levels, if any, as of the beginning of the reporting period.

4. Fair values of fixed maturity securities are based on quoted market prices, where available. These fair values are obtained primarily from third party pricing services, which generally use Level 1 or Level 2 inputs, for the determination of fair value to facilitate fair value measurements and disclosures. United States government securities represent Level 1 securities, while Level 2 securities primarily include corporate securities, securities from states, municipalities and political subdivisions and residential mortgage-backed securities. For Securities not actively traded, the third party pricing services may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, broker quotes, benchmark yields, credit spreads, default rates and prepayment speeds.

Fair values of equity securities are generally designated as Level 1 and are based on quoted market prices. For certain equity securities, quoted market prices for the identical security are not always available and the fair value is estimated by reference to similar securities for which quoted prices are available. These securities are designated Level 2. The Company has certain equity securities, including private equity securities, for which the fair value is estimated based on each security's current condition and future cash flow projections. Such securities are designated Level 3. The fair values of these private equity securities are generally based on either broker quotes or discounted cash flow projections using assumptions for inputs such as the weighted-average cost of capital, long-term revenue growth rates and earnings before interest, taxes, depreciation and amortization, or revenue multiples that are not observable in the markets.

There have been no significant changes in the valuation techniques during the current period.

**B. Fair Value Measurements Under Other Accounting Pronouncements**

Not applicable.

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**C. Financial Instruments**

Type of Financial Instrument	Aggregated Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	\$ 377,975,244	\$ 366,981,265	\$ -	\$ 377,975,244	\$ -	\$ -
Common Stock	16,682,431	16,682,431	16,682,431	-	-	-
Short Term Inv & MMFs	4,659,014	4,659,014	4,659,014	-	-	-
Securities Lending Collateral	44,491,140	44,489,970	17,126,309	27,364,831	-	-
	<u>\$ 443,807,829</u>	<u>\$ 432,812,680</u>	<u>\$ 38,467,754</u>	<u>\$ 405,340,075</u>	<u>\$ -</u>	<u>\$ -</u>

**D. Not Practicable to Estimate Fair Value**

There are no financial instruments that were not practicable to estimate fair value.

**21. Other Items**

No significant change.

**22. Events Subsequent**

Subsequent events have been considered through August 12, 2016 for the statutory statement issued on August 12, 2016. Other than the acquisition related item discussed in Note 10A, there were no other events occurring subsequent to June 30, 2016 requiring recognition or disclosure.

**23. Reinsurance**

No significant change.

**24. Retrospectively Rated Contracts and Contracts Subject to Redetermination**

**A. – D.**

No significant change.

**E. Risk-Sharing Provisions of the Affordable Care Act (“ACA”)**

1. Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? No
2. Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year.  
  
Not applicable.
3. Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.  
  
Not applicable.
4. Roll-forward of Risk Corridors Asset and Liability Balances by Program Benefit Year.  
  
Not applicable.
5. ACA Risk Corridors Receivable as of Reporting Date.  
  
Not applicable.

**25. Change in Incurred Claims and Claim Adjustment Expenses**

The estimated cost of claims and claim adjustment expense attributable to insured events of prior years increased by \$7,522,317 during 2016. This is approximately 4.0% of unpaid claims and claim adjustment expenses of \$189,814,443 as of December 31, 2015. The deficiency reflects the increases in estimated claims and claims adjustment expenses as a result of claims payment during the year, and as additional information is received regarding claims incurred prior to 2016. Recent claim development trends are also taken into account in evaluating the overall adequacy of unpaid claims and unpaid claim adjustment expense.

**26. Intercompany Pooling Arrangements**

Not applicable.

**27. Structured Settlements**

Not applicable.

**28. Health Care Receivables**

No significant change.

**29. Participating Policies**

Not applicable.

**30. Premium Deficiency Reserves**

- |   |    |                |
|---|----|----------------|
| 1. Liability carried for premium deficiency reserves              | \$ | 0              |
| 2. Date of the most recent evaluation of this liability           |    | June 30, 2016  |
| 3. Was anticipated investment income utilized in the calculation? |    | Yes [ ] No [X] |

The Company did not record any premium deficiency reserves at June 30, 2016.

**31. Anticipated Salvage and Subrogation**

No significant change.

**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.
- 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. .... 12/31/2014
- 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. .... 12/31/2012
- 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). .... 08/20/2014
- 6.4 By what department or departments?  
State of Tennessee Department of Commerce and Insurance TennCare Division
- 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 [ X ] No [ ] N/A [ ]
- 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

**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 [ X ] 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 [ X ] No [ ]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).  
The Anthem Standards of Ethical Business Conduct applies to all associates, management, officers and directors of Anthem. In June 2016 the code of conduct was revised for the following: a) updated Gift policy (offering) to address new Finance policy prohibiting offering gift cards, unless an approved wellness program; b) added a new section on Telephone Consumer Protection Act; c) added a new section on Non-discrimination under the Affordable Care Act (ACA) since we had a section on non-discrimination for government business.
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 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 [ X ] 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 [ X ]
- 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 [ X ]
- 14.2 If yes, please complete the following:
- |   | 1<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>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 .....   | \$ 0   | \$  |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) ..... | \$ 0   | \$ 0  |
| 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 [ X ]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ]  
If no, attach a description with this statement.



## GENERAL INTERROGATORIES

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 .....                   | \$ ..... | 44,491,140 |
| 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 ..... | \$ ..... | 44,489,970 |
| 16.3 Total payable for securities lending reported on the liability page .....                                       | \$ ..... | 44,489,970 |

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 [  ] 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
Bank of New York Mellon Corporation .....	One BNY Mellon Center Room 151-1035 Pittsburgh, PA 15258 .....

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 [  ]

17.4 If yes, give full information relating thereto:

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

17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
105006 .....	Deutsche Asset Management .....	New York, NY .....
113878 .....	McDonnell Investment Management, LLC .....	Oak Brook, IL .....
110441 .....	Western Asset Management .....	Pasadena, CA .....

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

18.2 If no, list exceptions:

# GENERAL INTERROGATORIES

## PART 2 - HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent .....90.1 %
  - 1.2 A&H cost containment percent .....4.4 %
  - 1.3 A&H expense percent excluding cost containment expenses .....12.0 %
- 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 .....\$ .....

**SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
<b>NONE</b>								

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

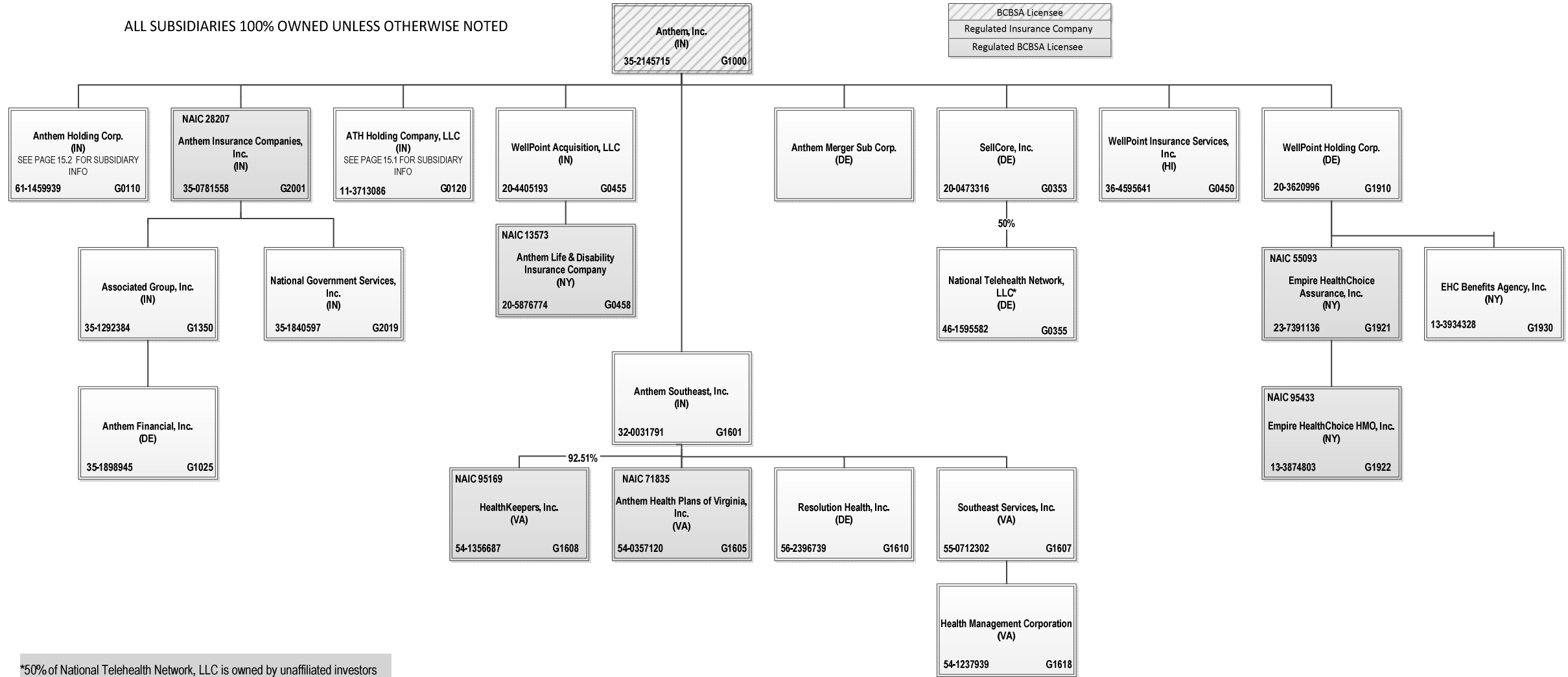
States, etc.	1 Active Status	Direct Business Only							9 Deposit-Type Contracts	
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7		
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	N								0	
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	N								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	L		55,000,907	901,006,640				956,007,547		
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	
59. Subtotal	XXX	0	55,000,907	901,006,640	0	0	0	956,007,547	0	
60. Reporting Entity Contributions for Employee Benefit Plans	XXX							0		
61. Totals (Direct Business)	(a) 1	0	55,000,907	901,006,640	0	0	0	956,007,547	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	
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

ALL SUBSIDIARIES 100% OWNED UNLESS OTHERWISE NOTED



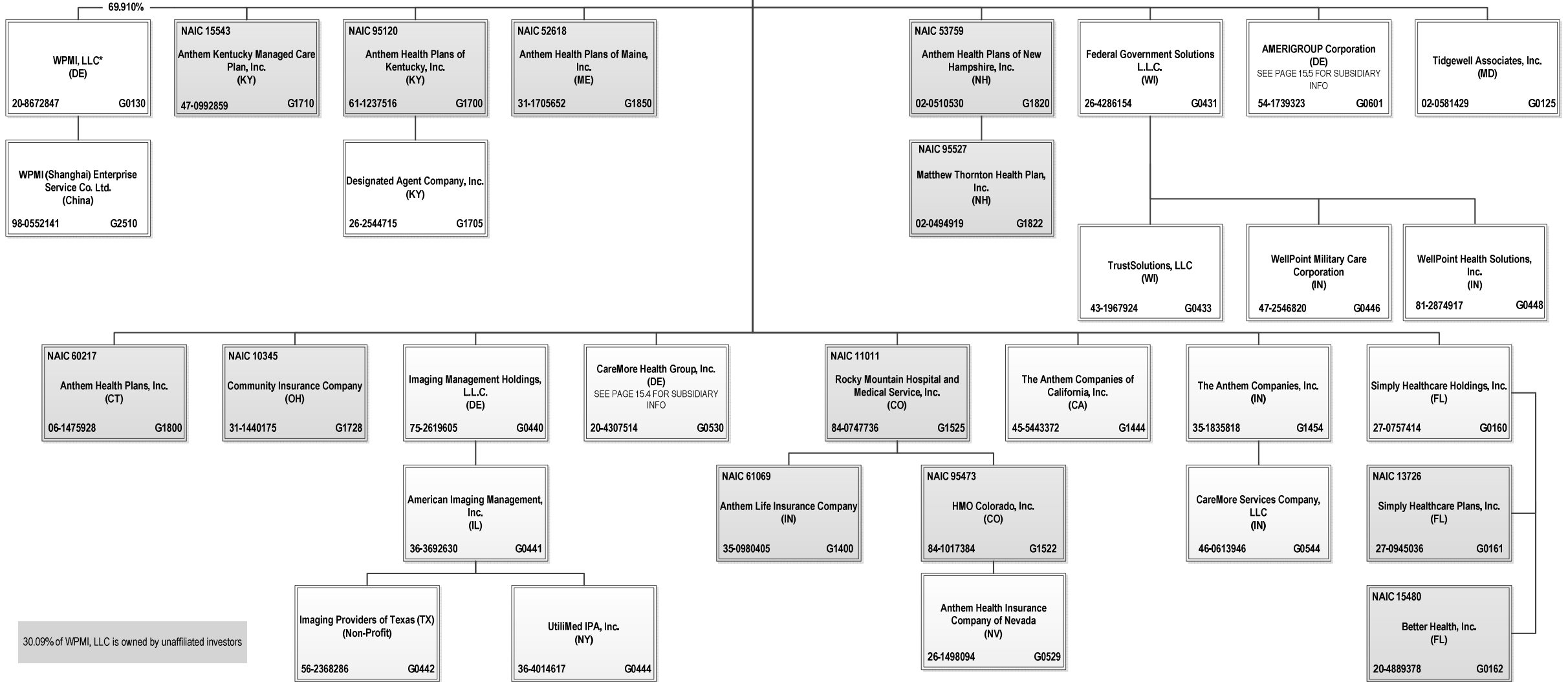
\*50% of National Telehealth Network, LLC is owned by unaffiliated investors

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART**

ALL SUBSIDIARIES OWNED UNLESS OTHERWISE NOTED

ATH Holding Company, LLC (IN)	
11-3713086	G0120

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

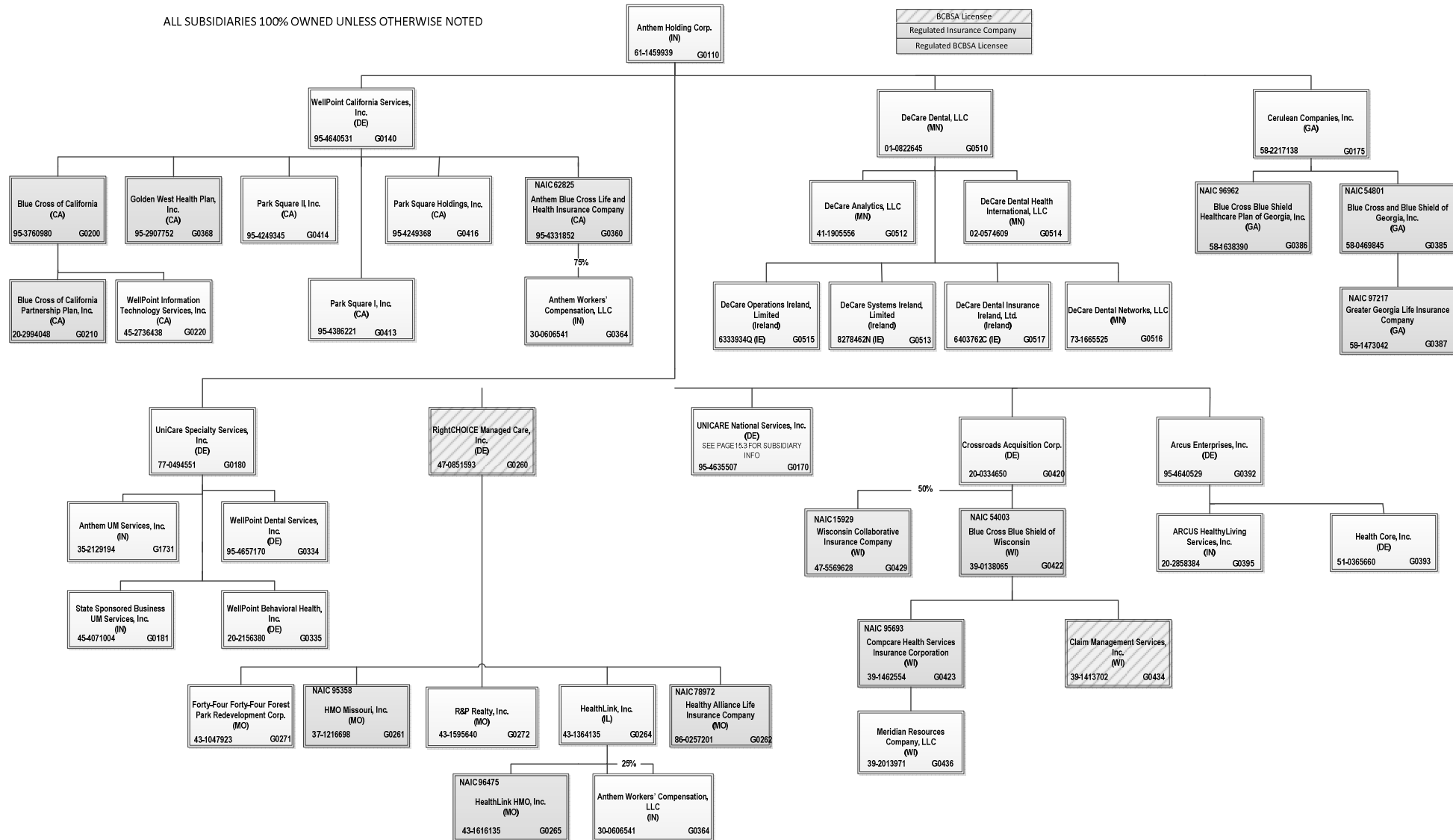


30.09% of WPMI, LLC is owned by unaffiliated investors

15.1

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 – ORGANIZATIONAL CHART**

ALL SUBSIDIARIES 100% OWNED UNLESS OTHERWISE NOTED

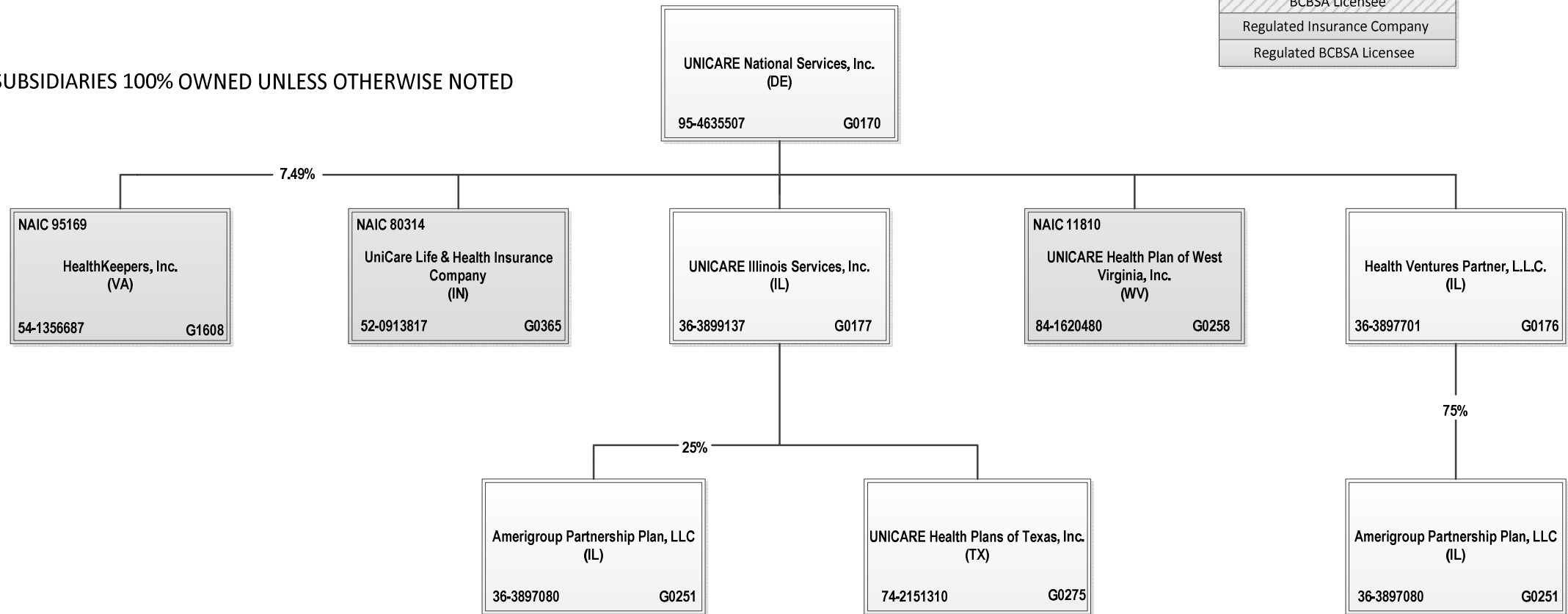


50% of Wisconsin Collaborative Insurance Company is owned by unaffiliated investors

**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART**

ALL SUBSIDIARIES 100% OWNED UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee

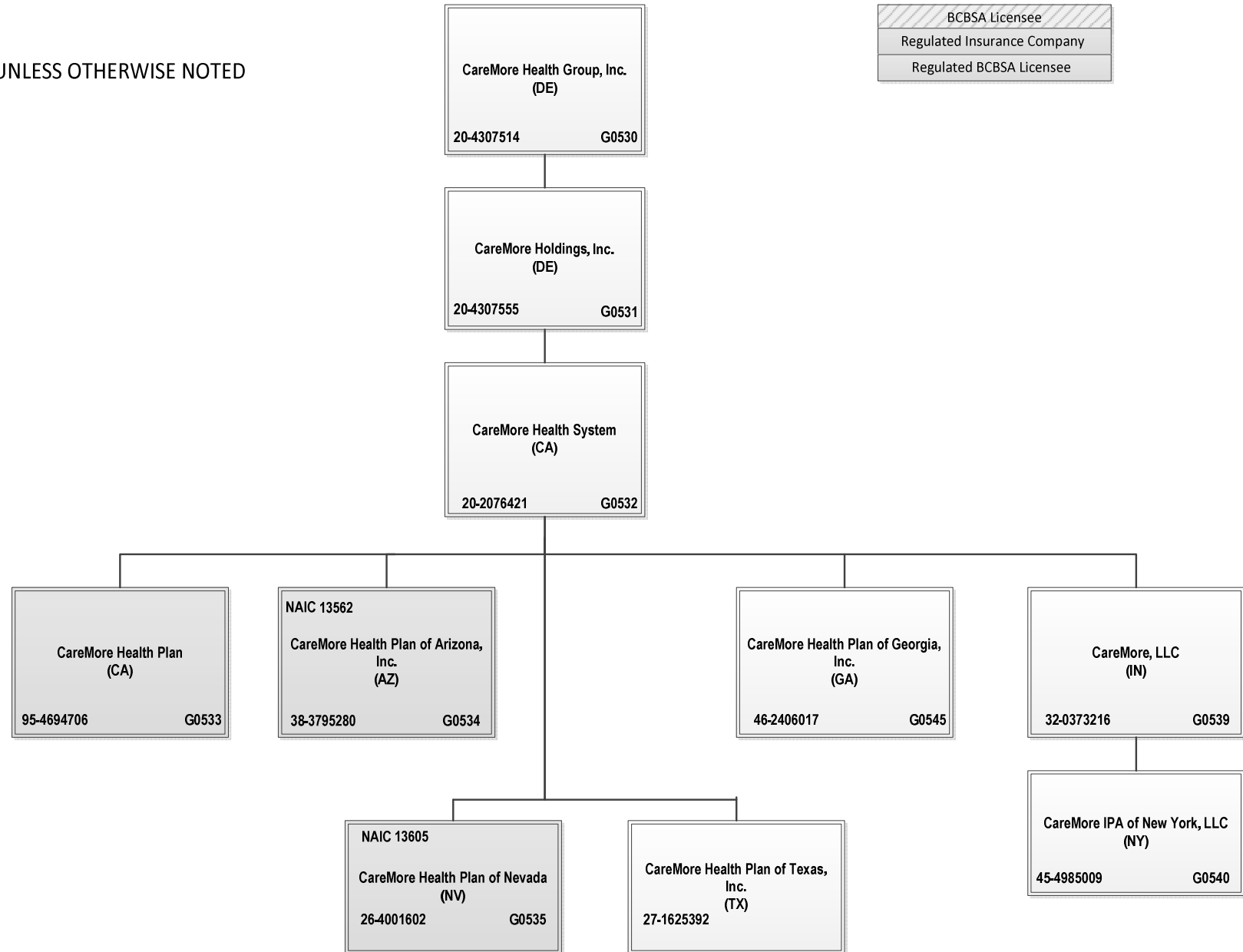




**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART**

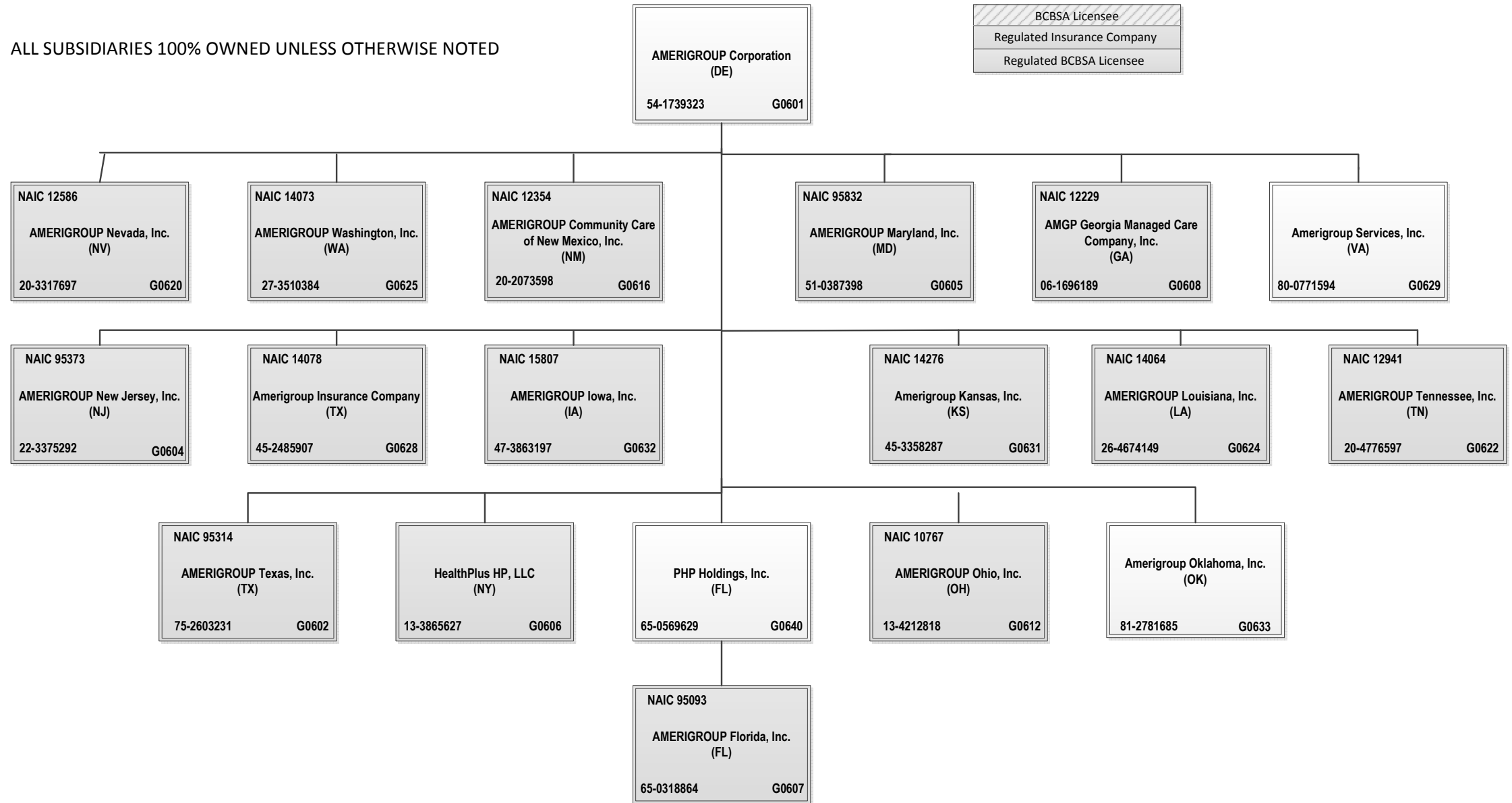
ALL SUBSIDIARIES 100% OWNED UNLESS OTHERWISE NOTED

BCBSA Licensee
Regulated Insurance Company
Regulated BCBSA Licensee



**SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP  
PART 1 – ORGANIZATIONAL CHART**

ALL SUBSIDIARIES 100% OWNED UNLESS OTHERWISE NOTED



15.5

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0671	Anthem, Inc.		36-3692630				American Imaging Management, Inc.	IL	NIA	Imaging Management Holdings, L.L.C.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	12354	20-2073598				AMERIGROUP Community Care of New Mexico, Inc.	NM	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95093	54-1739323				AMERIGROUP Corporation	DE	UDP	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14078	65-0318864				AMERIGROUP Florida, Inc.	FL	IA	PHP Holdings, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	15807	45-2485907				Amerigroup Insurance Company	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14276	47-3863197				AMERIGROUP Iowa, Inc.	IA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14064	45-3358287				Amerigroup Kansas, Inc.	KS	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95832	26-4674149				AMERIGROUP Louisiana, Inc.	LA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	12586	51-0387398				AMERIGROUP Maryland, Inc.	MD	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95373	20-3317697				AMERIGROUP Nevada, Inc.	NV	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	10767	22-3375292				AMERIGROUP New Jersey, Inc.	NJ	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		13-4212818				AMERIGROUP Ohio, Inc.	OH	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		81-2781685				AMERIGROUP Oklahoma, Inc.	OK	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		36-3897080				Amerigroup Partnership Plan, LLC	IL	NIA	Health Ventures Partner, L.L.C.	Ownership	75.000	Anthem, Inc.	
0671	Anthem, Inc.		36-3897080				Amerigroup Partnership Plan, LLC	IL	NIA	UNICARE Illinois Services, Inc.	Ownership	25.000	Anthem, Inc.	
0671	Anthem, Inc.		80-0771594				Amerigroup Services, Inc.	VA	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	12941	20-4776597				AMERIGROUP Tennessee, Inc.	TN	RE	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95314	75-2603231				AMERIGROUP Texas, Inc.	TX	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	14073	27-3510384				AMERIGROUP Washington, Inc.	WA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	12229	06-1696189				AMGP Georgia Managed Care Company, Inc.	GA	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	62825	95-4331852				Anthem Blue Cross Life and Health Insurance Company	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35-1898945				Anthem Financial, Inc.	DE	NIA	Associated Group, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		26-1498094				Anthem Health Insurance Company of Nevada	NV	NIA	HMO Colorado, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95120	61-1237516				Anthem Health Plans of Kentucky, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	52618	31-1705652				Anthem Health Plans of Maine, Inc.	ME	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	53759	02-0510530				Anthem Health Plans of New Hampshire, Inc.	NH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	71835	54-0357120	40003317			Anthem Health Plans of Virginia, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	60217	06-1475928				Anthem Health Plans, Inc.	CT	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		61-1459939				Anthem Holding Corp.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35-2145715		6324	New York Stock Exchange (NYSE)	Anthem, Inc.	IN	UIP				Anthem, Inc.	
0671	Anthem, Inc.	28207	35-0781558				Anthem Insurance Companies, Inc.	IN	IA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	15543	47-0992859				Anthem Kentucky Managed Care Plan, Inc.	KY	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	13573	20-5876774				Anthem Life & Disability Insurance Company	NY	IA	WellPoint Acquisition, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	61069	35-0980405				Anthem Life Insurance Company	IN	IA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		32-0031791				Anthem Merger Sub Corp.	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35-2129194				Anthem Southeast, Inc.	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		30-0606541				Anthem UM Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		30-0606541				Anthem Workers' Compensation, LLC	IN	NIA	Anthem Blue Cross Life and Health Insurance Company	Ownership	75.000	Anthem, Inc.	
0671	Anthem, Inc.		95-4640529				Anthem Workers' Compensation, LLC	IN	NIA	HealthLink, Inc.	Ownership	25.000	Anthem, Inc.	
0671	Anthem, Inc.		20-2858384				Arcus Enterprises, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		35-1292384				ARCUS HealthLiving Services, Inc.	IN	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		11-3713086				Associated Group, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	15480	20-4889378				ATH Holding Company, LLC	IN	UIP	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.						Better Health, Inc.	FL	IA	Simply Healthcare Holdings, Inc.	Ownership	100.000	Anthem, Inc.	

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0671	Anthem, Inc.	54801	58-0469845				Blue Cross and Blue Shield of Georgia, Inc.	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	96962	58-1638390				Blue Cross Blue Shield Healthcare Plan of Georgia, Inc.	GA	IA	Cerulean Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	54003	39-0138065				Blue Cross Blue Shield of Wisconsin	WI	IA	Crossroads Acquisition Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		95-3760980				Blue Cross of California	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	0101
0671	Anthem, Inc.		20-2994048				Blue Cross of California Partnership Plan, Inc.	CA	IA	Blue Cross of California	Ownership	100.000	Anthem, Inc.	0102
0671	Anthem, Inc.		20-4307514				CareMore Health Group, Inc.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		95-4694706				CareMore Health Plan	CA	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	0103
0671	Anthem, Inc.	13562	38-3795280				CareMore Health Plan of Arizona, Inc.	AZ	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		46-2406017				CareMore Health Plan of Georgia, Inc.	GA	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	13605	26-4001602				CareMore Health Plan of Nevada	NV	IA	CareMore Health System	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		27-1625392				CareMore Health Plan of Texas, Inc.	TX	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-4307555				CareMore Holdings, Inc.	DE	NIA	CareMore Health Group, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		45-4985009				CareMore IPA of New York, LLC	NY	NIA	CareMore, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		32-0373216				CareMore, LLC	IN	NIA	CareMore Health System	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-2076421				CareMore Health System	CA	NIA	CareMore Holdings, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		46-0613946				CareMore Services Company, LLC	IN	NIA	The Anthem Companies, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		58-2217138				Cerulean Companies, Inc.	GA	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		39-1413702				Claim Management Services, Inc.	WI	NIA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	10345	31-1440175				Community Insurance Company	OH	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95693	39-1462554				Compcare Health Services Insurance Corporation	WI	IA	Blue Cross Blue Shield of Wisconsin	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		20-0334650				Crossroads Acquisition Corp.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		41-1905556				DeCare Analytics, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		02-0574609				DeCare Dental Health International, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.						DeCare Dental Insurance Ireland, Ltd.	JRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		73-1665525				DeCare Dental Networks, LLC	MN	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		01-0822645				DeCare Dental, LLC	MN	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.						DeCare Operations Ireland, Limited	JRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.						DeCare Systems Ireland, Limited	JRL	NIA	DeCare Dental, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		26-2544715				Designated Agent Company, Inc.	KY	NIA	Anthem Health Plans of Kentucky, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		13-3934328				EHC Benefits Agency, Inc.	NY	NIA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	55093	23-7391136				Empire HealthChoice Assurance, Inc.	NY	IA	WellPoint Holding Corp	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95433	13-3874803				Empire HealthChoice HMO, Inc.	NY	IA	Empire HealthChoice Assurance, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		26-4286154				Federal Government Solutions, LLC	WI	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		43-1047923				Forty-Four Forty-Four Forest Park Redevelopment Corp.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		95-2907752				Golden West Health Plan, Inc.	CA	IA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	0104
0671	Anthem, Inc.	97217	58-1473042				Greater Georgia Life Insurance Company	GA	IA	Blue Cross and Blue Shield of Georgia, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		51-0365660				Health Core, Inc.	DE	NIA	Arcus Enterprises, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		54-1237939				Health Management Corporation	VA	NIA	Southeast Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		36-3897701				Health Ventures Partner, L.L.C.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.	95169	54-1356687				HealthKeepers, Inc.	VA	IA	Anthem Southeast, Inc.	Ownership	92.510	Anthem, Inc.	
0671	Anthem, Inc.	95169	54-1356687				HealthKeepers, Inc.	VA	IA	UNICARE National Services, Inc.	Ownership	7.490	Anthem, Inc.	
0671	Anthem, Inc.	96475	43-1616135				HealthLink HMO, Inc.	MO	IA	HealthLink, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		43-1364135				HealthLink, Inc.	IL	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
0671	Anthem, Inc.		13-3865627				HealthPlus HP, LLC	NY	IA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	0100
0671	Anthem, Inc.	78972	86-0257201				Healthy Alliance Life Insurance Company	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0671	Anthem, Inc.	95473	84-1017384				HMO Colorado, Inc.	CO	IA	Rocky Mountain Hospital and Medical Service, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	95358	37-1216698				HMO Missouri, Inc.	MO	IA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		75-2619605				Imaging Management Holdings, L.L.C.	DE	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		56-2368286				Imaging Providers of Texas (non-profit)	TX	NIA	American Imaging Management, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	95527	02-0494919				Matthew Thornton Health Plan, Inc.	NH	IA	Anthem Health Plans of New Hampshire, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		39-2013971				Meridian Resource Company, LLC	WI	NIA	Compicare Health Services Insurance Corporation	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		35-1840597				National Government Services, Inc.	IN	NIA	Anthem Insurance Companies, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		46-1595582				National Telehealth Network, LLC	DE	NIA	SellCore, Inc.	Ownership	50.000	Anthem, Inc.	0105
...0671	Anthem, Inc.		95-4249368				Park Square Holdings, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		95-4386221				Park Square I, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		95-4249345				Park Square II, Inc.	CA	NIA	WellPoint California Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		65-0569629				PHP Holdings, Inc.	FL	NIA	AMERIGROUP Corporation	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		43-1595640				R & P Realty, Inc.	MO	NIA	RightCHOICE Managed Care, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		56-2396739				Resolution Health, Inc.	DE	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		47-0851593				RightCHOICE Managed Care, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	11011	84-0747736				Rocky Mountain Hospital and Medical Service, Inc.	CO	IA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		20-0473316				SellCore, Inc.	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		27-0757414				Simply Healthcare Holdings, Inc.	FL	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	13726	27-0945036				Simply Healthcare Plans, Inc.	FL	IA	Simply Healthcare Holdings, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		55-0712302				Southeast Services, Inc.	VA	NIA	Anthem Southeast, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		45-4071004				State Sponsored Business UM Services, Inc.	IN	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		35-1835818				The Anthem Companies, Inc.	IN	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		45-5443372				The Anthem Companies of California, Inc.	CA	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		02-0581429				Tidgewell Associates, Inc.	MD	NIA	ATH Holding Company, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		43-1967924				TrustSolutions, LLC	WI	NIA	Government Health Services, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	11810	84-1620480				UNICARE Health Plan of West Virginia, Inc.	WV	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		74-2151310				UNICARE Health Plans of Texas, Inc.	TX	NIA	UNICARE Illinois Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		36-3899137				UNICARE Illinois Services, Inc.	IL	NIA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	80314	52-0913817				UNICARE Life & Health Insurance Company	IN	IA	UNICARE National Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		95-4635507				UNICARE National Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		77-0494551				UNICARE Specialty Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		36-4014617				UtiliMED IPA, Inc.	NY	NIA	American Imaging Management, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		20-4405193				WellPoint Acquisition, LLC	IN	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		20-2156380				WellPoint Behavioral Health, Inc.	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		95-4640531				WellPoint California Services, Inc.	DE	NIA	Anthem Holding Corp.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		95-4651770				WellPoint Dental Services, Inc.	DE	NIA	UNICARE Specialty Services, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		81-2874917				WellPoint Health Solutions, Inc.	DE	NIA	Federal Government Solutions, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		20-3620996				WellPoint Holding Corp	DE	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		45-2736438				WellPoint Information Technology Services, Inc.	CA	NIA	Blue Cross of California	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		36-4595641				WellPoint Insurance Services, Inc.	HI	NIA	Anthem, Inc.	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.		47-2546820				WellPoint Military Care Corporation	IN	NIA	Government Health Services, LLC	Ownership	100.000	Anthem, Inc.	
...0671	Anthem, Inc.	15929	47-5569628				Wisconsin Collaborative Insurance Company	WI	IA	Crossroads Acquisition Corp.	Ownership	50.000	Anthem, Inc.	0107
...0671	Anthem, Inc.		98-0552141				WPMI (Shanghai) Enterprise Service Co. Ltd.	CHN	NIA	WPMI, LLC	Ownership	100.000	Anthem, Inc.	

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
...0671 ...	Anthem, Inc. ....		20-8672847 ..				WPMI, LLC .....	..DE.....	.....NIA.....	ATH Holding Company, LLC .....	Ownership.....	..69.910 ....	Anthem, Inc. ....	...0106 ....

Asterisk	Explanation
0100 .....	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the New York State Department of Health. ....
0101 .....	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. ....
0102 .....	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. ....
0103 .....	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. ....
0104 .....	Insurer is deemed to be an insurance affiliate in column 10, but does not have an NAIC Company Code in column 3 because it is regulated by the California Department of Managed Health Care. ....
0105 .....	50% owned by unaffiliated investors .....
0106 .....	30.09% owned by unaffiliated investors .....
0107 .....	50% owned by unaffiliated investors .....

# 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

Explanation:

1.

Bar Code:

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



**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Liabilities Line 23

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
2304. Other Liabilities .....	14,700		14,700	0
2397. Summary of remaining write-ins for Line 23 from overflow page	14,700	0	14,700	0



STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**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)		

**NONE**

**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 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)		

**NONE**

**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		
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 depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)		

**NONE**

**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	379,597,990	205,942,692
2. Cost of bonds and stocks acquired	33,706,803	257,174,637
3. Accrual of discount	69,533	91,361
4. Unrealized valuation increase (decrease)	7,984,849	(12,297,475)
5. Total gain (loss) on disposals	579,036	(34,842)
6. Deduct consideration for bonds and stocks disposed of	32,269,136	68,529,076
7. Deduct amortization of premium	1,520,355	2,749,307
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized	4,485,024	
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	383,663,696	379,597,990
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	383,663,696	379,597,990

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**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
<b>BONDS</b>								
1. NAIC 1 (a) .....	208,750,719	11,902,543	15,171,901	1,394,270	208,750,719	206,875,631	0	211,770,666
2. NAIC 2 (a) .....	53,923,308	4,122,983	2,254,174	(1,003,156)	53,923,308	54,788,961	0	50,158,738
3. NAIC 3 (a) .....	94,917,473	6,076,976	2,941,538	(74,134)	94,917,473	97,978,777	0	91,427,820
4. NAIC 4 (a) .....	10,091,261	0	590,296	858,820	10,091,261	10,359,785	0	10,116,508
5. NAIC 5 (a) .....	1,690,400	0	484,667	40,292	1,690,400	1,246,025	0	574,300
6. NAIC 6 (a) .....	73,600	0	0	317,500	73,600	391,100	0	
7. Total Bonds	369,446,761	22,102,502	21,442,576	1,533,592	369,446,761	371,640,279	0	364,048,032
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....	0				0	0		0
9. NAIC 2 .....	0				0	0		0
10. NAIC 3 .....	0				0	0		0
11. NAIC 4 .....	0				0	0		0
12. NAIC 5 .....	0				0	0		0
13. NAIC 6 .....	0				0	0		0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	369,446,761	22,102,502	21,442,576	1,533,592	369,446,761	371,640,279	0	364,048,032

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ ..... ; NAIC 2 \$ ..... ; NAIC 3 \$ ..... ; NAIC 4 \$ ..... ; NAIC 5 \$ ..... ; NAIC 6 \$ .....

S102

**SCHEDULE DA - PART 1**

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year-to-Date	5 Paid for Accrued Interest Year-to-Date
9199999 Totals	4,659,014	xxx	4,659,014	246	0

**SCHEDULE DA - VERIFICATION**

Short-Term Investments

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	5,742,676	15,797,950
2. Cost of short-term investments acquired .....	28,156,894	230,823,831
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....	295	290
6. Deduct consideration received on disposals .....	29,240,851	240,866,938
7. Deduct amortization of premium .....		12,457
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	4,659,014	5,742,676
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)	4,659,014	5,742,676

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

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

**SCHEDULE E - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	0	
2. Cost of cash equivalents acquired .....		2,005,469
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration received on disposals .....		2,000,000
7. Deduct amortization of premium .....		5,469
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	0	0
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

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

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE D - PART 3**

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
001626-AC-4	ALM LOAN FUNDING 2.834% 07/15/28		05/10/2016	Citigroup Global Markets		250,000	250,000	.0	1FE
002871-AU-3	ABBVIE INC 2.300% 05/14/21		05/09/2016	Bank of America		284,504	285,000	.0	2FE
07177M-AL-7	BAXALTA INC SERIES W1 3.600% 06/23/22		05/27/2016	Tax Free Exchange		1,089,174	1,090,000	16,786	2FE
128195-AN-4	CALATLANTIC GROUP INC 5.250% 06/01/26		05/25/2016	J P Morgan		340,000	340,000	.0	3FE
131347-CK-0	CALPINE CORPORATION SERIES 144A 5.250% 06/01/26		05/24/2016	Deutsche Bank		340,000	340,000	.0	3FE
15135B-AD-3	CENTENE CORP 4.750% 05/15/22		06/09/2016	Citigroup Global Markets		122,100	120,000	.459	3FE
161175-AR-5	CHARTER COMM OPT LLC CAP SERIES 144A 3.579% 07/23/20		05/24/2016	Tax Free Exchange		185,000	185,000	2,225	2FE
161175-AT-1	CHARTER COMM OPT LLC CAP SERIES 144A 4.908% 07/23/25		05/24/2016	Tax Free Exchange		980,000	980,000	16,166	2FE
161571-HC-1	CHASE ISSUANCE TRUST SERIES 2016-A2 CLASS A 1.370% 06/15/21		06/07/2016	J P Morgan		1,589,996	1,590,000	.0	1FE
20605P-AE-1	CONCHO RESOURCES INC 5.500% 04/01/23		05/05/2016	Various		693,000	700,000	4,171	3FE
212015-AH-4	CONTINENTAL RESOURCES INC 5.000% 09/15/22		06/21/2016	Bony/Barclays Capital Inc		137,025	140,000	1,915	3FE
25272K-AA-1	DIAMOND 1 FIN DIAMOND 2 SERIES 144A 3.480% 06/01/19		05/17/2016	J P Morgan		899,790	840,000	.0	2FE
25272K-AU-7	DIAMOND 1 FIN DIAMOND 2 SERIES 144A 5.875% 06/15/21		06/08/2016	Various		322,600	320,000	.0	3FE
25272K-AW-3	DIAMOND 1 FIN DIAMOND 2 SERIES 144A 7.125% 06/15/24		06/08/2016	J P Morgan		180,000	180,000	.0	3FE
25470X-AX-3	DISH OBS CORP SERIES 144A 7.750% 07/01/26		06/08/2016	Deutsche Bank		170,000	170,000	.0	3FE
35906A-AT-5	FRONTIER COMM SERIES W1 8.875% 09/15/20		05/26/2016	Tax Free Exchange		40,000	40,000	700	3FE
35906A-AW-8	FRONTIER COMM SERIES W1 10.500% 09/15/22		05/26/2016	Tax Free Exchange		280,000	280,000	5,798	3FE
35906A-AZ-1	FRONTIER COMM SERIES W1 11.000% 09/15/25		05/26/2016	Tax Free Exchange		390,000	390,000	8,461	3FE
361841-AH-2	GLP CAPITAL LP / FIN II 5.375% 04/15/26		04/11/2016	Various		353,400	350,000	.0	3FE
382550-BF-7	GOODYEAR TIRE & RUBBER CO 5.000% 05/31/26		05/10/2016	Citigroup Global Markets		190,000	190,000	.0	3FE
410345-AJ-1	HANESBRANDS INC SERIES 144A 4.625% 05/15/24		05/03/2016	J P Morgan		100,000	100,000	.0	3FE
410345-AL-6	HANESBRANDS INC SERIES 144A 4.875% 05/15/26		05/03/2016	J P Morgan		100,000	100,000	.0	3FE
46284V-AB-7	IRON MOUNTAIN INC SERIES 144A 4.375% 06/01/21		05/24/2016	Goldman Sachs & Co		500,000	500,000	.0	3FE
483007-AF-7	KAISER ALUMINUM CORP SERIES 144A 5.875% 05/15/24		04/28/2016	J P Morgan		60,000	60,000	.0	3FE
49461B-AF-1	KINETICS CONCEPT/KC1 USA SERIES 144A 7.875% 02/15/21		06/20/2016	Bank of America		275,800	260,000	7,588	3FE
52736R-BG-6	LEVI STRAUSS & CO SERIES W1 5.000% 05/01/25		04/28/2016	Bony/Barclays Capital Inc		203,500	200,000	56	3FE
57665R-AD-8	MATCH GROUP INC SERIES 144A 6.375% 06/01/24		05/24/2016	J P Morgan		170,000	170,000	.0	3FE
60871R-AE-0	MOLSON COORS BREWING CO 1.450% 07/15/19		06/28/2016	Bank of America		419,790	420,000	.0	2FE
651229-AZ-9	NEWELL BRANDS INC SERIES 144A 5.000% 11/15/23		04/01/2016	Taxable Exchange		324,726	310,000	6,501	2FE
881600-AD-5	TESORO LOGISTICS LP CORP 6.125% 10/15/21		05/09/2016	Citigroup Global Markets		40,100	40,000	184	3FE
881600-AM-5	TESORO LOGISTICS LP CORP 6.375% 05/01/24		05/09/2016	Citigroup Global Markets		120,000	120,000	.0	3FE
928377-AA-8	VISTA OUTDOOR INC SERIES 144A 5.875% 10/01/23		04/13/2016	Morgan Stanley		189,450	180,000	499	3FE
92911U-AC-2	VOYA GLO LTD SERIES 16-2A CLASS A2 144A 2.733% 07/19/28		06/07/2016	Citigroup Global Markets		400,000	400,000	.0	1FE
952355-AQ-8	WEST CORPORATION SERIES 144A 4.750% 07/15/21		06/09/2016	Wachovia Securities		640,000	640,000	.0	3FE
09628T-AA-7	BLUESCOPE STEEL LTD FIN SERIES 144A 6.500% 05/15/21	F	04/28/2016	CS First Boston		120,000	120,000	.0	3FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						12,439,955	12,400,000	71,509	XXX
8399997. Total - Bonds - Part 3						12,439,955	12,400,000	71,509	XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
8399999. Total - Bonds						12,439,955	12,400,000	71,509	XXX
8999997. Total - Preferred Stocks - Part 3						0	XXX	0	XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks						0	XXX	0	XXX
9799997. Total - Common Stocks - Part 3						0	XXX	0	XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
9799999. Total - Common Stocks						0	XXX	0	XXX
9899999. Total - Preferred and Common Stocks						0	XXX	0	XXX
9999999 - Totals						12,439,955	XXX	71,509	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....





STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**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								
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 Temporary 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 or Market Indicator (a)	
384780-AA-0	GRAIN SPECTRUM FUNDING II SERIES 144A			Redemption 100.0000																		
471109-AN-8	3.290% 10/10/19 JARDEN CORP SERIES 144A 5.000% 11/15/23		04/10/2016	Taxable Exchange		5,026	5,026	5,026	5,026	.0	.0	.0	.0	.0	5,026	.0	.0	.0	.83	10/10/2019	1FE	
483007-AF-7	KAISER ALUMINUM CORP SERIES 144A 5.875% 05/15/24		04/01/2016			324,725	310,000	310,000	310,000	.0	.0	.0	.0	.0	310,000	.0	14,725	14,725	7,276	11/15/2023	3FE	
76117W-AB-5	RESOLUTE FOREST PRODUCTS SERIES III 5.875% 05/15/23		05/04/2016	J P Morgan		61,200	60,000	60,000	60,000	.0	.0	.0	.0	.0	60,000	.0	1,200	1,200	.0	05/15/2024	3FE	
90345W-AE-4	US AIRWAYS SERIES 2012-1A ETC 6.750% 06/03/21	G	06/22/2016	Various		280,550	370,000	350,524	269,175	89,147	313	8,112	81,348	.0	350,524	.0	(69,974)	(69,974)	12,323	05/15/2023	3FE	
983793-AD-2	XPO LOGISTICS INC SERIES 144A 6.500% 06/15/22		06/03/2016	Redemption 100.0000		17,516	17,516	19,267	18,392	755	(136)	.0	619	.0	19,011	.0	(1,495)	(1,495)	591	06/03/2021	3FE	
09628T-AA-7	BLUESCOPE STEEL LTD FIN SERIES 144A 6.500% 05/15/21	F	04/27/2016	Various		158,275	160,000	160,000	148,000	12,000	.0	.0	12,000	.0	160,000	.0	(1,725)	(1,725)	3,898	06/15/2022	4FE	
12548C-AA-5	CIFC FUNDING LTD SERIES 2014-2A CLASS A1L 144A 2.141% 05/24/26	F	04/28/2016	CS First Boston		121,800	120,000	120,000	.0	.0	.0	.0	.0	.0	120,000	.0	1,800	1,800	.0	05/15/2021	3FE	
14312J-AA-0	CARLYLE GLOBAL MARKET STRATEGI SERIES 15-5A CLASS A1A 144A 2.184% 01/20/28	F	06/07/2016	Bank of America Citigroup Global Markets		498,800	500,000	496,875	496,930	.0	301	.0	301	.0	497,231	.0	1,569	1,569	5,516	05/24/2026	1FE	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					6,748,314	6,959,542	7,036,700	6,293,713	451,764	(4,434)	8,112	439,218	0	7,022,932	0	(274,620)	(274,620)	222,513	XXX	XXX	
8399997	Total - Bonds - Part 4					9,897,675	10,108,903	10,392,544	9,511,955	451,764	(203,910)	8,112	239,742	0	10,172,293	0	(274,620)	(274,620)	274,159	XXX	XXX	
8399998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999	Total - Bonds					9,897,675	10,108,903	10,392,544	9,511,955	451,764	(203,910)	8,112	239,742	0	10,172,293	0	(274,620)	(274,620)	274,159	XXX	XXX	
8999997	Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
8999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999	Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
464287-40-8	1SHARES MSCI EAFE INDEX FUND LARGE-CAP		06/28/2016	William Blair & Co		3,359,569	3,359,569	2,355,014	3,335,810	(90,797)	.0	.0	(90,797)	.0	2,355,014	.0	1,004,560	1,004,560	40,631			
922042-77-5	VANGUARD INTERNATIONAL EQUITY		06/28/2016	William Blair & Co		2,166,300	2,166,300	2,227,214	2,274,684	(47,470)	.0	.0	(47,470)	.0	2,227,214	.0	(60,914)	(60,914)	35,527			
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)					5,525,869	XXX	4,582,228	5,610,494	(1,028,267)	0	0	(1,028,267)	0	4,582,228	0	943,646	943,646	76,158	XXX	XXX	
9799997	Total - Common Stocks - Part 4					5,525,869	XXX	4,582,228	5,610,494	(1,028,267)	0	0	(1,028,267)	0	4,582,228	0	943,646	943,646	76,158	XXX	XXX	
9799998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999	Total - Common Stocks					5,525,869	XXX	4,582,228	5,610,494	(1,028,267)	0	0	(1,028,267)	0	4,582,228	0	943,646	943,646	76,158	XXX	XXX	
9899999	Total - Preferred and Common Stocks					5,525,869	XXX	4,582,228	5,610,494	(1,028,267)	0	0	(1,028,267)	0	4,582,228	0	943,646	943,646	76,158	XXX	XXX	
9999999	Totals					15,423,544	XXX	14,974,772	15,122,449	(576,503)	(203,910)	8,112	(788,525)	0	14,754,521	0	669,026	669,026	350,317	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....

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

Schedule DB - Part B - Section 1 - Futures Contracts Open  
**N O N E**

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made  
**N O N E**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By  
**N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To  
**N O N E**

## SCHEDULE DL - PART 1 SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation/ Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date
912796-GH-3	UNITED STATES TREASURY BILL		1	32,596	32,596	07/21/2016
912796-HE-2	UNITED STATES TREASURY BILL		1	63,760	63,760	09/15/2016
912796-JB-6	UNITED STATES TREASURY BILL		1	62,995	62,995	07/14/2016
912796-JG-5	UNITED STATES TREASURY BILL		1	12,480	12,480	08/25/2016
912810-RD-2	UNITED STATES TREASURY BOND		1	131,515	131,515	11/15/2043
912810-RF-7	US TREASURY INFLATION INDEXED BONDS		1	21,330	21,330	02/15/2044
912810-RM-2	UNITED STATES TREASURY BOND		1	1,422	1,422	05/15/2045
912810-RR-5	UNITED STATES TREASURY BOND		1	51,169	51,169	11/15/2045
912828-C3-2	UNITED STATES TREASURY NOTE		1	193	193	03/15/2017
912828-C9-9	US TREASURY INFLATION INDEXED NOTES		1	34,607	34,607	04/15/2019
912828-F2-1	UNITED STATES TREASURY NOTE		1	3,203	3,203	09/30/2021
912828-F3-9	UNITED STATES TREASURY NOTE		1	2,873	2,873	09/30/2019
912828-G6-1	UNITED STATES TREASURY NOTE		1	2,164	2,164	11/30/2019
912828-H6-0	UNITED STATES TREASURY NOTE		1	6,820	6,820	01/31/2017
912828-J2-7	UNITED STATES TREASURY NOTE		1	30,329	30,329	02/15/2025
912828-N4-8	UNITED STATES TREASURY NOTE		1	367	367	12/31/2020
912828-ND-8	UNITED STATES TREASURY NOTE		1	93,249	93,249	05/15/2020
912828-P3-8	UNITED STATES TREASURY NOTE		1	12,833	12,833	01/31/2023
912828-RE-2	UNITED STATES TREASURY NOTE		1	9,139	9,139	08/31/2018
912828-RX-0	UNITED STATES TREASURY NOTE		1	770	770	12/31/2016
912828-SJ-0	UNITED STATES TREASURY NOTE		1	3,380	3,380	02/28/2017
912828-TE-0	US TREASURY INFLATION INDEXED NOTES		1	4,378	4,378	07/15/2022
912828-VB-3	UNITED STATES TREASURY NOTE		1	66,170	66,170	05/15/2023
912828-WC-0	UNITED STATES TREASURY NOTE		1	647	647	10/31/2020
912828-WN-6	UNITED STATES TREASURY NOTE		1	23,093	23,093	05/31/2021
912828-WY-2	UNITED STATES TREASURY NOTE		1	513	513	07/31/2021
912828-XN-5	UNITED STATES TREASURY NOTE		1	173,079	173,079	07/31/2017
0199999	Subtotal - Bonds - U.S. Governments - Issuer Obligations			845,073	845,073	XXX
0299999	Subtotal - Bonds - U.S. Governments - Residential Mortgage-Backed Securities			0	0	XXX
0399999	Subtotal - Bonds - U.S. Governments - Commercial Mortgage-Backed Securities			0	0	XXX
0499999	Subtotal - Bonds - U.S. Governments - Other Loan-Backed and Structured Securities			0	0	XXX
0599999	Total - U.S. Government Bonds			845,073	845,073	XXX
0699999	Subtotal - Bonds - All Other Governments - Issuer Obligations			0	0	XXX
0799999	Subtotal - Bonds - All Other Governments - Residential Mortgage-Backed Securities			0	0	XXX
0899999	Subtotal - Bonds - All Other Governments - Commercial Mortgage-Backed Securities			0	0	XXX
0999999	Subtotal - Bonds - All Other Governments - Other Loan-Backed and Structured Securities			0	0	XXX
1099999	Total - All Other Government Bonds			0	0	XXX
1199999	Subtotal - Bonds - U.S. States, Territories and Possessions - Issuer Obligations			0	0	XXX
1299999	Subtotal - Bonds - U.S. States, Territories and Possessions - Residential Mortgage-Backed Securities			0	0	XXX
1399999	Subtotal - Bonds - U.S. States, Territories and Possessions - Commercial Mortgage-Backed Securities			0	0	XXX
1499999	Subtotal - Bonds - U.S. States, Territories and Possessions - Other Loan-Backed and Structured Securities			0	0	XXX
1799999	Total - U.S. States, Territories and Possessions Bonds			0	0	XXX
1899999	Subtotal - Bonds - U.S. Political Subdivisions - Issuer Obligations			0	0	XXX
1999999	Subtotal - Bonds - U.S. Political Subdivisions - Residential Mortgage-Backed Securities			0	0	XXX
2099999	Subtotal - Bonds - U.S. Political Subdivisions - Commercial Mortgage-Backed Securities			0	0	XXX
2199999	Subtotal - Bonds - U.S. Political Subdivisions - Other Loan-Backed and Structured Securities			0	0	XXX
2499999	Total - U.S. Political Subdivisions Bonds			0	0	XXX
2599999	Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations			0	0	XXX
2699999	Subtotal - Bonds - U.S. Special Revenues - Residential Mortgage-Backed Securities			0	0	XXX
2799999	Subtotal - Bonds - U.S. Special Revenues - Commercial Mortgage-Backed Securities			0	0	XXX
2899999	Subtotal - Bonds - U.S. Special Revenues - Other Loan-Backed and Structured Securities			0	0	XXX
3199999	Total - U.S. Special Revenues Bonds			0	0	XXX
064176-KF-4	BANK OF NOVA SCOTIA (HOUSTON)		1	300,064	300,000	12/31/2017
06427E-SF-9	BANK OF MONTREAL (CHICAGO)		1	500,067	500,000	01/15/2023
13606A-PD-4	CANADIAN IMPERIAL BANK OF COMMERCE (NEW YORK)		1	300,090	300,000	04/30/2018
13606A-YR-3	CANADIAN IMPERIAL BANK OF COMMERCE (NEW YORK)		1	300,066	300,000	05/15/2023
161453-BK-0	CHASE BANK USA NA		1	300,035	300,000	11/15/2023
17305T-BM-3	CITIBANK NA		1	299,991	300,000	07/31/2021
40428A-W7-8	HSBC BANK USA NA		1	400,268	400,000	05/31/2020
63253T-D3-9	NATIONAL AUSTRALIA BANK LTD (NEW YORK)		1	300,147	300,000	07/31/2017
65558L-PU-0	NORDEA BANK FINLAND PLC (NEW YORK)		1	300,138	300,000	12/31/1899
65558L-QL-9	NORDEA BANK FINLAND PLC (NEW YORK)		1	300,063	300,000	12/31/1899
8574P1-HZ-2	STATE STREET BANK & TRST		1	300,056	300,000	12/31/1899
8574P1-JF-4	STATE STREET BANK & TRST		1	299,962	300,000	04/01/2016
86563Q-VG-2	SUMITOMO MITSUI BANKING CORP (NEWYORK)		1	380,190	380,000	04/01/2016
86563Q-Z7-8	SUMITOMO MITSUI BANKING CORP (NEWYORK)		1	400,068	400,000	04/01/2016
86958D-3D-2	SVENSKA HANDELSBANKEN AB (NEW YORK)		1	300,136	300,000	05/27/2016
86958D-BQ-4	SVENSKA HANDELSBANKEN AB (NEW YORK)		1	400,150	400,130	07/13/2016
94988E-WH-7	WELLS FARGO BANK NA		1	500,071	500,000	04/01/2016
000000-00-0	PAYABLE/RECEIVABLE		1	(5,405)	(6,043)	08/03/2016
000000-00-0	BNP PARIBAS SECURITIES CORP. REPO		1	284,239	284,239	04/01/2016
63254G-BM-6	NATIONAL AUSTRALIA BANK LTD		1	300,091	300,000	04/01/2016
05574L-TV-0	BNP PARIBAS		1	200,337	200,355	12/07/2016
06053P-QM-2	BANK OF AMERICA NA		1	299,940	300,000	04/01/2016
06366R-PS-8	BANK OF MONTREAL		1	175,034	175,022	04/01/2016
064159-CR-5	BANK OF NOVA SCOTIA		1	330,056	330,046	04/01/2016
191216-BX-7	COCA-COLA CO/THE		1	400,011	400,000	04/01/2016
459200-JD-4	IBM CORP		1	301,019	300,000	04/01/2016
57629H-BX-7	MASSMUTUAL GLOBAL FUNDIN		1	165,113	165,000	02/24/2017
59217G-BB-4	MET LIFE GLOB FUNDING I		1	242,041	242,042	04/08/2016
78010U-BZ-9	ROYAL BANK OF CANADA		1	350,286	350,145	04/01/2016
86960B-AF-9	SVENSKA HANDELSBANKEN AB		1	300,227	300,144	04/01/2016
89236T-CW-3	TOYOTA MOTOR CREDIT CORP		1	300,292	300,000	04/01/2016

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**SCHEDULE DL - PART 1**  
**SECURITIES LENDING COLLATERAL ASSETS**

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation/ Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Date
94988J-5C-7	WELLS FARGO BANK NA		1	300,478	300,000	09/01/2016
066922-76-6	BLACKROCK CASH-PRIME-INS		1	1,669,000	1,669,000	04/01/2016
31607A-20-8	FIDELITY PRIME MON MAR-INS FD #2014		1	1,808,000	1,808,000	04/01/2016
608919-77-5	FEDERATED MKMT MGMT-IS		1	1,618,000	1,618,000	04/01/2016
61747C-71-5	MORGAN STANLEY LIQ PRIME-IN		1	1,698,000	1,698,000	04/01/2016
825252-72-9	INVESCO STIT-LIQ ASSETS-INST		1	1,709,000	1,709,000	04/01/2016
000000-00-0	LANDESBANK BADEN-WURTEMBERG (NEW YORK)		1	1,740,000	1,740,000	04/01/2016
000000-00-0	BNP PARIBAS (CAYMAN)		1	1,640,000	1,640,000	07/15/2016
000000-00-0	CREDIT AGRICOLE CIB (CAYMAN)		1	1,660,000	1,660,000	07/15/2016
000000-00-0	STANDARD CHARTERED BANK (NEW YORK)		1	1,450,000	1,450,000	04/07/2016
000000-00-0	AUSTRALIA & NEW ZEALAND BANKING GROUP LTD (LONDON)		1	1,460,000	1,460,000	08/18/2017
000000-00-0	NATIONAL AUSTRALIA BANK LTD (CAYMAN)		1	1,060,000	1,060,000	12/09/2016
000000-00-0	HSBC BANK PLC (LONDON)		1	1,330,000	1,330,000	08/04/2016
000000-00-0	ROYAL BANK OF CANADA (TORONTO)		1	1,400,000	1,400,000	05/13/2016
000000-00-0	NORDEA BANK FINLAND PLC (NEW YORK)		1	1,240,000	1,240,000	09/09/2016
3299999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations			31,327,321	31,323,079	XXX
000000-00-0	HSBC SECURITIES USA INC REPO		1	8,909,840	8,909,840	07/01/2016
3399999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Residential Mortgage-Backed Securities			8,909,840	8,909,840	XXX
3499999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Commercial Mortgage-Backed Securities			0	0	XXX
161571-GR-9	CHAIT2014-A8		1	300,103	300,081	11/15/2018
161571-GR-9	CHAIT2014-A8		1	300,103	300,076	11/15/2018
17305E-FL-4	CCCIT2013-A12		1	100,023	100,014	11/07/2018
17305E-FV-2	CCCIT2014-A9		1	300,073	300,133	11/23/2018
17305E-FV-2	CCCIT2014-A9		1	300,073	300,133	11/23/2018
254683-BM-6	DCENT2015-A1		1	300,604	300,541	08/17/2020
70659P-AH-4	PENAR2016-1A		1	596,926	600,000	03/18/2020
3599999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Other Loan-Backed and Structured Securities			2,197,906	2,200,978	XXX
3899999	Total - Industrial and Miscellaneous (Unaffiliated) Bonds			42,435,067	42,433,897	XXX
4299999	Subtotal - Bonds - Hybrid Securities - Issuer Obligations			0	0	XXX
4399999	Subtotal - Bonds - Hybrid Securities - Residential Mortgage-Backed Securities			0	0	XXX
4499999	Subtotal - Bonds - Hybrid Securities - Commercial Mortgage-Backed Securities			0	0	XXX
4599999	Subtotal - Bonds - Hybrid Securities - Other Loan-Backed and Structured Securities			0	0	XXX
4899999	Total - Hybrid Securities			0	0	XXX
4999999	Subtotal - Bonds - Parent, Subsidiaries and Affiliates - Issuer Obligations			0	0	XXX
5099999	Subtotal - Bonds - Parent, Subsidiaries and Affiliates - Residential Mortgage-Backed Securities			0	0	XXX
5199999	Subtotal - Bonds - Parent, Subsidiaries and Affiliates - Commercial Mortgage-Backed Securities			0	0	XXX
5299999	Subtotal - Bonds - Parent, Subsidiaries and Affiliates - Other Loan-Backed and Structured Securities			0	0	XXX
5599999	Total - Parent, Subsidiaries and Affiliates Bonds			0	0	XXX
6199999	Total - Issuer Obligations			32,172,394	32,168,152	XXX
6299999	Total - Residential Mortgage-Backed Securities			8,909,840	8,909,840	XXX
6399999	Total - Commercial Mortgage-Backed Securities			0	0	XXX
6499999	Total - Other Loan-Backed and Structured Securities			2,197,906	2,200,978	XXX
6599999	Total Bonds			43,280,140	43,278,970	XXX
6899999	Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)			0	0	XXX
6999999	Subtotal - Preferred Stocks - Parent, Subsidiaries and Affiliates			0	0	XXX
7099999	Total - Preferred Stocks			0	0	XXX
000000-00-0	CITIGROUP GLOBAL MARKETS INC REPO		1	626,000	626,000	
000000-00-0	CITIGROUP GLOBAL MARKETS INC REPO		1	585,000	585,000	
7199999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)			1,211,000	1,211,000	XXX
7299999	Subtotal - Common Stocks - Parent, Subsidiaries and Affiliates			0	0	XXX
7399999	Subtotal - Common Stocks - Mutual Funds			0	0	XXX
7499999	Subtotal - Common Stocks - Money Market Mutual Funds			0	0	XXX
7599999	Total - Common Stocks			1,211,000	1,211,000	XXX
7699999	Total - Preferred and Common Stocks			1,211,000	1,211,000	XXX
8699999	Total - Real Estate (Schedule A type)			0	0	XXX
8799999	Total - Mortgage Loans on Real Estate (Schedule B type)			0	0	XXX
8899999	Total - Other Invested Assets (Schedule BA type)			0	0	XXX
8999999	Total - Short-Term Invested Assets (Schedule DA type)			0	0	XXX
9099999	Total - Cash (Schedule E Part 1 type)			0	0	XXX
9199999	Total - Cash Equivalents (Schedule E Part 2 type)			0	0	XXX
9299999	Total - Other Assets			0	0	XXX
9999999	Totals			44,491,140	44,489,970	XXX

General Interrogatories:

1. Total activity for the year to date	Fair Value \$	20,293,019	Book/Adjusted Carrying Value \$	20,290,872
2. Average balance for the year to date	Fair Value \$	35,707,228	Book/Adjusted Carrying Value \$	35,705,043
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:				
NAIC 1 \$	NAIC 2 \$	NAIC 3 \$	NAIC 4 \$	NAIC 5 \$
44,489,970				
				NAIC 6 \$

**SCHEDULE DL - PART 2  
SECURITIES LENDING COLLATERAL ASSETS**

Reinvested Collateral Assets Owned Current Statement Date

1 CUSIP Identification	2 Description	3 Code	4 NAIC Designation/ Market Indicator	5 Fair Value	6 Book/Adjusted Carrying Value	7 Maturity Date
NONE						
9999999 - Totals						XXX

General Interrogatories:

- |   |                     |                                       |
|---|---------------------|---------------------------------------|
| 1. Total activity for the year to date  | Fair Value \$ ..... | Book/Adjusted Carrying Value \$ ..... |
| 2. Average balance for the year to date | Fair Value \$ ..... | Book/Adjusted Carrying Value \$ ..... |

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

## SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6	7	8	
					First Month	Second Month	Third Month	
Wells Fargo .....					(7,639,606)	(22,366,418)	(18,975,725)	XXX
JP Morgan .....					29,513	2,905	19,711	XXX
Bank of America .....					18,087,798	15,678,773	18,604,344	XXX
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	10,477,705	(6,684,740)	(351,670)	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	10,477,705	(6,684,740)	(351,670)	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999. Total - Cash	XXX	XXX	0	0	10,477,705	(6,684,740)	(351,670)	XXX

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

**N O N E**

Medicare Part D Coverage Supplement

**N O N E**

## QUARTERLY DISKETTE TRANSMITTAL FORM AND CERTIFICATION (HEALTH)

Name of Insurer AMERIGROUP Tennessee, Inc.  
 Date 08/12/2016 FEIN 20-4776597  
 NAIC Group # 0671 NAIC Company # 12941

**THIS FORM IS REQUIRED FOR ALL DISKETTE TRANSMITTALS. PLEASE PROVIDE ANY ADDITIONAL COMMENTS THAT MAY HELP TO IDENTIFY DISKETTE CONTENT.**

A.	QTR. 1	QTR. 2	QTR. 3
1. Is this the first time you've submitted this filing? (Y/N)		YES	
2. Is this being re-filed at the request of the NAIC or a state insurance department? (Y/N)		NO	
3. Is this being re-filed due to changes to the data originally filed? (Y/N) (IF "YES", ENCLOSE HARD COPY PAGES FOR THE CHANGES.)		NO	
4. Other? (Y/N) (If "yes", attach an explanation.)		NO	

B. Additional comments if necessary for clarification:

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C. Diskette Contact Person:

Bette Lou Gronseth  
 Phone: 757-518-3638  
 Address: 4425 Corporation Lane Virginia Beach VA 23462

D. Software Vendor: Eagle Technology Management  
 Version: 2016

E. Have material validation failures been addressed in the explanation file?  
 Yes  No

The undersigned hereby certifies, according to the best of his/her knowledge and belief: that the diskettes submitted with this form were prepared in compliance with the NAIC specifications, that the diskettes have been tested against the validations included with these specifications, and that quarterly statement information required to be contained on diskette is identical to the information in the 2016 Quarterly Statement blank filed with the insurer's domiciliary state insurance department. In addition, the diskettes submitted have been scanned through a virus detection software package, and no viruses are present on the diskettes. The virus detection software used was (name)

McAfee (version number) 4.8.0.1500

Signed Bette L. Gronseth

Type Name and Title: Bette L. Gronseth, Director II Regulatory Reporting

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AMERIGROUP Tennessee, Inc.  
MLR Reconciliation to NAIC Filing  
June 30, 2016

**TOTAL REVENUES**

	Middle Tennessee	East Tennessee	West Tennessee	AMERIVANTAGE	NAIC Filing	Page, Col, Line
Net premium income 2016	335,210,576	306,583,464	259,212,600	54,570,474	955,577,114	4, C2, L8
Net premium income 2015	685,111,632	485,675,994	432,065,197	85,552,392	1,688,405,215	4, C2, L8
Net premium income 2014	942,351,546			63,997,819	1,006,349,365	4, C2, L8
Net premium income 2013	865,968,872			51,049,846	917,018,718	4, C2, L8
Net premium income 2012	863,517,958			41,362,158	904,880,116	4, C2, L8
Net premium income 2011	896,910,241			23,222,262	920,132,503	4, C2, L8
Net premium income 2010	871,851,131			16,750,528	888,601,659	4, C2, L8
Net premium income 2009	612,724,592			13,401,387	626,125,979	4, C2, L8
Net premium income 2008	598,983,073			8,112,101	607,095,174	4, C3, L2-2008
Net premium income 2007	382,864,891				382,864,891	4, C3, L2-2009
TOTAL by Region	7,055,494,512	792,259,458	691,277,797	358,018,967		
MLR Report by Region	7,010,595,062	784,161,486	685,813,658			
TOTAL	8,539,031,767					
MLR Report Total	8,480,570,207					
Difference	58,461,561					
ASO PCP administrative fee reclassified to SG&A	942,810					
Affordable Care Act (ACA) Health Insurer Fee (HIF) Reimbursement	(59,396,126)					
Vendor gift cards in wrong product (4Q15)	(8,246)					
Unreconciled difference	(1)					

**UNPAID CLAIMS**

	Middle Tennessee	East Tennessee	West Tennessee	AMERIVANTAGE	NAIC Filing	Page, Col, Line
Claims unpaid (less reinsurance ceded)	57,155,722	74,069,900	51,869,382	9,559,177	192,654,180	3, C3, L1
Accrued medical incentive pool and bonus amounts	890,650	-	-	344,015	1,234,664	3, C3, L2
Unpaid claims adjustment expenses	1,827,862	2,379,944	1,664,910	280,333	6,153,049	3, C3, L3
TOTAL	59,874,233	76,449,844	53,534,292	10,183,525	200,041,893	
Unpaid Claims Total by Region	59,874,233	76,449,844	53,534,292		189,858,368	
IBNR on MLR report	59,867,824	76,414,234	53,534,292		189,816,350	
Difference	6,408	35,610	-		42,019	
Unreconciled Claims Unpaid					42,019	
Unreconciled difference					0	

**HOSPITAL AND MEDICAL**

				NAIC Filing	Page, Col, Line
Total Middle expenses on MLR report			5,678,144,239		
Total East expenses on MLR report			659,104,381		
Total West expenses on MLR report			600,006,434		
			6,937,255,054		
Total hospital and medical 07 Dec 31				360,775,300	4, C4, L18-2007
Total hospital and medical 08 Dec 31				535,851,712	4, C4, L18-2008
Total hospital and medical 09 Dec 31				516,193,087	4, C3, L18
Total hospital and medical 10 Dec 31				653,302,266	4, C2, L18
Total hospital and medical 11 Dec 31				695,948,802	4, C2, L18
Total hospital and medical 12 Dec 31				741,069,296	4, C2, L18
Total hospital and medical 13 Dec 31				758,273,927	4, C2, L18
Total hospital and medical 14 Dec 31				790,011,501	4, C2, L18
Total hospital and medical 15 Dec 31				1,364,712,278	4, C2, L18
Total hospital and medical 16 Jun 30				818,875,036	4, C2, L18
Total from NAIC filing				7,235,013,205	
Less Medicare expenses				302,233,036	
NAIC net of Medicare expenses			6,932,780,171		
LAE Change-A&H			4,474,222		
Jul-Sep 2013 reinsurance expense			(735)		
Unreconciled difference			1,396		
Rounding					
Difference			0		

**Medical Loss Ratio Report - Total Middle Grand Region**

MCO  
AMERIGROUP, Tennessee, Inc.

Reporting Month	2007			For the Year Ended 6/30/2007	2007							2008						For the Year Ended 6/30/2008	2008					
	Incurred Month				Incurred Month							Incurred Month												
	April	May	June		July	August	September	October	November	December	January	February	March	April	May	June	July		August	September	October	November	December	
Enrollment	186,416	186,037	182,879	555,332	183,226	184,352	185,408	186,126	186,331	186,318	186,042	186,584	187,293	187,102	186,165	185,840	2,230,786	185,087	184,940	185,047	186,028	187,076	187,358	
Capitation Revenue	\$48,938,744	\$48,838,217	\$47,895,955	\$145,672,916	\$47,982,464	\$48,228,287	\$48,453,013	\$48,658,579	\$48,516,420	\$48,587,405	\$48,523,522	\$48,550,055	\$48,602,959	\$46,707,144	\$46,509,019	\$46,388,877	\$575,707,744	\$48,887,130	\$48,964,758	\$49,021,001	\$49,382,058	\$49,781,265	\$49,836,263	
Premium Tax	\$978,775	\$976,764	\$957,919	\$2,913,458	\$959,649	\$964,566	\$969,060	\$973,172	\$970,328	\$971,748	\$970,470	\$971,001	\$972,059	\$934,143	\$930,180	\$927,778	\$11,514,155	\$977,743	\$979,295	\$980,420	\$987,641	\$995,625	\$996,725	
Capitation Revenue Net of Premium Tax	\$47,959,969	\$47,861,452	\$46,938,036	\$142,759,458	\$47,022,815	\$47,263,721	\$47,483,953	\$47,685,407	\$47,546,092	\$47,615,656	\$47,553,052	\$47,579,054	\$47,630,899	\$45,773,001	\$45,578,839	\$45,461,099	\$564,193,589	\$47,909,387	\$47,985,463	\$48,040,581	\$48,394,417	\$48,785,639	\$48,839,538	
Payments for Covered Services for the Month																								
Medical Services																								
CMS 1450/UB 92 Payments by the Claims Processing System																								
Inpatient - Maternity	\$1,235,027	\$1,264,823	\$1,347,430	\$3,847,280	\$1,330,553	\$1,769,128	\$1,286,142	\$1,495,079	\$1,314,707	\$1,433,153	\$1,637,648	\$1,677,317	\$1,364,069	\$1,335,034	\$1,532,229	\$1,491,487	\$17,666,545	\$1,511,746	\$1,602,018	\$1,451,264	\$1,540,657	\$1,303,190	\$1,390,930	
Inpatient - Newborn	\$1,907,306	\$2,026,773	\$2,742,296	\$6,676,374	\$2,695,743	\$1,835,027	\$1,822,518	\$2,793,660	\$1,612,582	\$2,299,760	\$2,392,194	\$2,285,286	\$2,046,793	\$1,683,397	\$1,916,674	\$2,131,724	\$25,515,357	\$3,255,233	\$1,913,374	\$2,150,109	\$1,828,678	\$3,464,797	\$2,446,884	
Inpatient - Medical	\$4,344,569	\$3,735,903	\$3,123,363	\$11,203,836	\$3,470,344	\$3,405,553	\$4,738,638	\$3,402,761	\$3,298,777	\$4,043,720	\$4,462,663	\$4,054,930	\$3,999,478	\$3,760,345	\$3,707,389	\$3,571,563	\$45,916,161	\$4,138,763	\$4,186,733	\$3,939,385	\$3,274,010	\$4,096,218	\$4,651,694	
Inpatient - Surgery	\$2,079,710	\$2,212,167	\$1,966,666	\$6,258,542	\$2,306,448	\$2,530,991	\$2,392,819	\$2,624,370	\$2,164,175	\$2,166,678	\$2,623,512	\$2,571,783	\$2,498,807	\$2,575,533	\$2,328,208	\$2,455,557	\$29,238,881	\$2,361,485	\$2,578,394	\$2,543,388	\$2,548,681	\$2,828,566	\$2,561,851	
Inpatient Other	\$114,359	\$124,419	\$145,565	\$384,342	\$88,412	\$81,757	\$153,591	\$118,176	\$58,393	\$86,462	\$106,732	\$32,234	\$77,323	\$357,360	\$77,329	\$123,243	\$1,361,013	\$90,967	\$130,969	\$67,974	\$76,551	\$48,091	\$37,130	
Outpatient - Emergency Room	\$1,100,289	\$1,182,526	\$1,762,444	\$4,045,259	\$1,894,726	\$2,028,715	\$2,078,116	\$2,093,766	\$2,152,001	\$2,312,458	\$2,398,008	\$2,495,738	\$2,294,502	\$2,176,332	\$2,331,025	\$2,162,748	\$26,418,136	\$2,197,859	\$2,370,301	\$2,354,940	\$2,302,654	\$2,354,534	\$2,396,266	
Outpatient - Laboratory	\$466,565	\$535,238	\$373,281	\$1,375,084	\$362,063	\$399,811	\$358,545	\$409,531	\$391,691	\$371,160	\$473,759	\$477,165	\$441,691	\$423,710	\$401,292	\$413,974	\$4,924,393	\$436,377	\$434,565	\$447,891	\$472,278	\$422,355	\$432,128	
Outpatient - Radiology	\$1,057,286	\$1,177,733	\$1,009,124	\$3,244,143	\$947,868	\$1,133,356	\$972,893	\$1,081,784	\$1,015,313	\$901,511	\$1,079,579	\$994,863	\$1,144,207	\$1,156,041	\$1,026,013	\$1,072,504	\$12,525,933	\$1,128,718	\$1,138,244	\$1,212,878	\$1,250,433	\$1,131,663	\$1,098,275	
Outpatient - Surgery	\$1,001,167	\$1,133,946	\$1,134,385	\$3,269,498	\$1,143,536	\$1,241,465	\$1,132,620	\$1,354,110	\$1,295,849	\$1,092,464	\$1,425,071	\$1,276,260	\$1,321,207	\$1,422,281	\$1,445,838	\$1,377,548	\$15,528,250	\$1,488,084	\$1,403,085	\$1,331,942	\$1,552,396	\$1,393,421	\$1,429,239	
Outpatient - Other	\$181,538	\$202,426	\$218,764	\$602,727	\$210,745	\$236,659	\$251,910	\$254,995	\$233,379	\$248,274	\$238,618	\$237,726	\$225,722	\$252,153	\$269,115	\$268,606	\$2,927,200	\$291,337	\$261,921	\$320,725	\$388,687	\$101,053	\$151,898	
Hospice	\$840,024	\$835,440	\$838,560	\$2,514,024	\$867,971	\$822,923	\$740,424	\$747,313	\$682,790	\$661,177	\$669,796	\$602,477	\$715,782	\$680,926	\$757,929	\$708,584	\$8,658,092	\$679,633	\$728,561	\$666,549	\$697,374	\$617,517	\$638,649	
Long-Term Care Payments																								
Level I Facility	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$150	\$150	\$1,501	\$2,852	\$0	\$0	\$0	\$0	
Level II Facility	\$57,860	\$70,837	\$47,426	\$176,123	\$26,836	\$24,520	\$49,482	\$59,851	\$18,011	\$34,954	\$47,128	\$25,040	\$11,507	\$9,256	\$73,219	\$73,895	\$453,699	\$54,659	\$12,257	\$30,018	\$47,194	\$15,259	\$24,865	
Home and Community Based Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
CMS 1500 Payments by the Claims Processing System																								
Prof - E&M	\$6,271,826	\$6,675,167	\$6,296,387	\$19,243,380	\$6,025,010	\$7,182,893	\$6,252,539	\$7,168,820	\$6,758,751	\$6,196,345	\$7,441,003	\$7,203,037	\$6,782,346	\$7,150,756	\$6,671,918	\$6,518,345	\$81,351,762	\$7,016,869	\$6,868,199	\$7,151,994	\$8,076,401	\$6,759,042	\$6,963,922	
Prof - Home Health	\$5,648,895	\$6,493,507	\$6,271,650	\$18,414,052	\$6,421,299	\$6,571,770	\$6,137,687	\$6,714,885	\$6,555,413	\$6,571,512	\$6,713,394	\$6,126,700	\$6,650,821	\$6,603,485	\$6,789,803	\$6,549,748	\$78,406,516	\$6,646,026	\$6,033,832	\$4,701,656	\$3,568,899	\$3,022,889	\$2,848,529	
Prof - Maternity	\$835,663	\$887,977	\$980,033	\$2,703,673	\$969,549	\$1,087,761	\$932,824	\$1,025,718	\$911,821	\$924,701	\$1,141,290	\$1,135,042	\$1,069,778	\$1,073,697	\$1,065,721	\$1,008,525	\$12,346,426	\$1,104,974	\$1,045,509	\$1,056,045	\$1,114,603	\$932,577	\$999,298	
Prof - Surgery	\$448,304	\$561,253	\$552,941	\$1,562,497	\$528,013	\$578,664	\$499,840	\$640,898	\$515,873	\$457,511	\$621,056	\$517,913	\$606,404	\$638,433	\$623,269	\$641,847	\$6,869,721	\$598,803	\$657,949	\$660,798	\$700,891	\$595,843	\$517,906	
Prof - DME	\$274,993	\$333,228	\$329,712	\$937,932	\$257,856	\$303,569	\$330,077	\$329,894	\$350,225	\$381,484	\$399,331	\$376,742	\$359,932	\$398,256	\$422,227	\$385,219	\$4,294,812	\$361,566	\$386,463	\$367,036	\$430,945	\$333,272	\$415,581	
Prof - Lab	\$600,620	\$626,942	\$611,150	\$1,838,712	\$508,663	\$594,077	\$513,624	\$574,236	\$529,848	\$454,397	\$628,947	\$640,888	\$584,531	\$716,549	\$653,309	\$673,794	\$7,072,862	\$699,720	\$711,374	\$723,944	\$818,289	\$668,101	\$675,758	
Prof - Radiology	\$878,150	\$996,991	\$891,218	\$2,766,359	\$763,040	\$875,129	\$763,447	\$923,009	\$766,280	\$705,444	\$882,374	\$784,341	\$819,706	\$877,816	\$833,197	\$852,861	\$9,846,644	\$914,752	\$893,615	\$890,071	\$909,935	\$795,545	\$829,100	
Prof - Transportation	\$1,050,072	\$1,299,108	\$1,241,857	\$3,591,036	\$1,237,953	\$1,342,682	\$1,212,520	\$1,427,082	\$1,344,621	\$1,240,681	\$1,485,916	\$1,382,440	\$1,431,636	\$1,470,466	\$1,480,278	\$1,467,170	\$16,523,445	\$1,516,911	\$1,330,670	\$338,139	\$253,998	\$226,754	\$195,713	
Prof - Other	\$1,628,238	\$1,739,955	\$1,572,681	\$4,940,014	\$1,579,512	\$1,734,720	\$1,531,299	\$1,813,399	\$1,759,846	\$1,582,658	\$1,894,920	\$1,797,714	\$1,703,926	\$1,824,792	\$1,782,976	\$1,735,258	\$20,741,021	\$1,803,744	\$1,867,536	\$1,813,744	\$2,041,057	\$1,797,979	\$1,866,098	
Capitation Payments	\$475,218	\$465,005	\$483,007	\$1,423,230	\$267,446	\$266,369	\$264,974	\$254,250	\$245,175	\$251,953	\$249,129	\$267,708	\$225,878	\$229,400	\$226,162	\$226,162	\$2,972,238	\$226,344	\$226,352	\$833,267	\$851,464	\$868,498	\$851,739	
Subcontractor Payments for Medical Services	\$96,057	\$97,717	\$97,222	\$290,996	\$130,108	\$164,740	\$128,435	\$142,227	\$115,935	\$96,741	\$126,734	\$117,941	\$125,893	\$116,922	\$97,793	\$94,110	\$1,457,579	\$148,835	\$168,971	\$149,303	\$168,301	\$142,635	\$134,561	
Other Medical (provide description)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Behavioral Health																								
Inpatient Payments by the Claims Processing System	\$1,481,858	\$1,601,864	\$1,652,695	\$4,736,417	\$1,753,932	\$1,966,599	\$1,903,445	\$1,822,031	\$1,718,707	\$1,942,843	\$1,897,487	\$1,962,501	\$1,807,123	\$1,933,304	\$1,986,693	\$1,713,268	\$22,407,933	\$1,755,553	\$1,784,929	\$1,640,791	\$1,267,952	\$1,520,521	\$1,544,438	
Outpatient Payments by the Claims Processing System	\$1,226,232	\$1,162,660	\$1,299,700	\$3,688,592	\$1,016,742	\$1,153,927	\$941,175	\$613,953	\$527,605	\$451,246	\$581,274	\$533,676	\$508,116	\$578,187	\$526,218	\$556,101	\$7,988,218	\$606,141	\$754,710	\$752,151	\$355,097	\$832,605	\$936,736	
Supported Housing Payments by the Claims Processing System	\$165,415	\$167,121	\$181,880	\$514,416	\$176,847	\$181,499	\$200,206	\$225,668	\$222,703	\$240,717	\$241,737	\$228,638	\$244,983	\$240,553	\$255,550	\$244,832	\$2,703,932	\$246,459	\$267,616	\$232,292	\$2,637	\$247,649	\$294,683	
Intensive Outpatient Payments by the Claims Processing System	\$53,205	\$81,970	\$79,391	\$214,565	\$80,192	\$89,315	\$73,223	\$81,453	\$70,655	\$61,461	\$79,725	\$59,152	\$79,867	\$100,580	\$92,205	\$79,812	\$947,640	\$74,752	\$74,692	\$70,215	\$16,438	\$84,704	\$87,038	
Partial Hospitalization Payments by the Claims Processing System	\$2,752	\$6,126	\$																					

Medical Loss Ratio Report - Total  
Middle Grand Region

MCO																								
AMERIGROUP, Tennessee, Inc.																								
Reporting Month		2009					For the Year	2009					2010						For the Year					
		Incurred Month					Ended	Incurred Month					Incurred Month						Ended					
		January	February	March	April	May	June	6/30/2009	July	August	September	October	November	December	January	February	March	April	May	June	6/30/2010	July	August	
Enrollment		186,756	188,192	190,142	191,838	192,882	194,486	2,259,833	193,482	192,406	190,840	191,203	191,550	192,027	195,125	195,762	196,847	197,539	197,961	199,076	2,333,818	198,527	200,355	
Capitation Revenue		\$49,364,498	\$49,976,829	\$50,392,708	\$50,663,366	\$50,711,245	\$50,962,365	\$597,943,485	\$56,699,901	\$55,549,745	\$54,620,650	\$54,560,133	\$54,479,940	\$54,529,104	\$55,746,440	\$55,628,096	\$72,851,170	\$72,953,405	\$73,229,500	\$73,823,709	\$734,671,792	\$72,999,675	\$73,531,537	
Premium Tax		\$987,290	\$999,537	\$1,007,854	\$1,013,267	\$1,014,225	\$1,019,247	\$11,958,870	\$3,118,495	\$3,055,236	\$3,004,136	\$3,000,807	\$2,996,397	\$2,999,101	\$3,066,054	\$3,059,545	\$4,006,814	\$4,012,437	\$4,027,622	\$4,060,304	\$40,406,949	\$4,014,982	\$4,044,235	
Capitation Revenue Net of Premium Tax		\$48,377,208	\$48,977,292	\$49,384,854	\$49,650,098	\$49,697,020	\$49,943,118	\$585,984,615	\$53,581,407	\$52,494,509	\$51,616,514	\$51,559,325	\$51,483,543	\$51,530,003	\$52,680,386	\$52,568,551	\$68,844,356	\$68,940,968	\$69,201,877	\$69,763,405	\$694,264,843	\$68,984,692	\$69,487,303	
Payments for Covered Services for the Month																								
Medical Services																								
CMS 1450/UB 92 Payments by the Claims Processing System																								
Inpatient - Maternity		\$1,471,298	\$1,370,660	\$1,498,570	\$1,403,272	\$1,565,365	\$1,427,910	\$17,536,880	\$1,511,753	\$1,464,999	\$1,605,172	\$1,689,624	\$1,535,149	\$2,041,052	\$1,451,632	\$1,431,696	\$1,461,528	\$1,398,459	\$1,473,809	\$1,420,122	\$18,484,995	\$1,511,786	\$1,607,428	
Inpatient - Newborn		\$2,236,955	\$1,656,984	\$2,324,926	\$2,091,546	\$2,453,226	\$2,550,192	\$28,372,905	\$3,203,995	\$2,381,706	\$2,454,640	\$2,876,122	\$2,567,490	\$2,876,905	\$2,260,810	\$2,020,148	\$2,601,484	\$2,298,834	\$2,244,413	\$2,774,998	\$30,561,547	\$3,336,478	\$3,570,708	
Inpatient - Medical		\$3,635,595	\$5,164,609	\$4,579,919	\$4,440,320	\$4,259,336	\$4,751,859	\$51,118,440	\$5,291,203	\$3,598,922	\$4,532,785	\$5,482,473	\$4,948,134	\$4,094,078	\$2,808,536	\$2,808,066	\$3,327,275	\$2,990,245	\$2,476,556	\$3,246,929	\$45,605,203	\$3,005,923	\$2,953,121	
Inpatient - Surgery		\$2,773,051	\$2,389,916	\$3,021,881	\$2,606,965	\$3,134,424	\$3,075,637	\$32,634,240	\$3,077,243	\$3,101,288	\$2,842,373	\$2,989,035	\$2,214,032	\$2,654,115	\$3,628,178	\$4,061,038	\$3,707,105	\$3,907,526	\$2,810,257	\$3,891,635	\$38,483,826	\$4,014,277	\$5,462,058	
Inpatient Other		\$62,801	\$52,273	\$91,817	\$58,188	\$42,464	\$76,998	\$836,224	\$132,140	\$96,938	\$70,136	\$80,399	\$72,138	\$170,357	\$1,400,795	\$2,210,586	\$959,452	\$919,853	\$1,034,686	\$8,871,236	\$1,283,293	\$461,159		
Outpatient - Emergency Room		\$2,404,544	\$2,471,380	\$2,811,169	\$2,606,557	\$2,710,551	\$2,471,965	\$29,452,718	\$2,474,212	\$2,896,156	\$3,385,215	\$2,843,712	\$1,916,591	\$1,897,606	\$1,919,818	\$1,737,633	\$2,140,625	\$2,060,051	\$2,189,756	\$2,072,520	\$27,533,894	\$2,051,970	\$2,094,896	
Outpatient - Laboratory		\$527,082	\$507,138	\$576,823	\$514,728	\$501,857	\$499,401	\$5,777,624	\$457,592	\$485,683	\$523,537	\$426,888	\$447,837	\$426,246	\$449,740	\$432,373	\$507,333	\$457,379	\$410,435	\$455,278	\$5,066,320	\$425,389	\$494,277	
Outpatient - Radiology		\$1,275,888	\$1,217,018	\$1,344,397	\$1,379,856	\$1,219,995	\$1,265,801	\$14,663,166	\$1,306,847	\$1,272,266	\$1,181,397	\$1,091,317	\$956,484	\$1,020,301	\$985,403	\$926,638	\$1,190,005	\$1,194,907	\$1,046,792	\$1,051,384	\$13,223,743	\$1,077,664	\$1,170,904	
Outpatient - Surgery		\$1,510,385	\$1,616,384	\$1,764,197	\$1,834,380	\$1,710,540	\$1,909,467	\$18,943,521	\$1,800,626	\$1,876,338	\$1,764,976	\$1,916,333	\$1,535,367	\$1,652,829	\$1,679,008	\$1,665,746	\$2,194,640	\$2,036,503	\$1,819,888	\$2,016,334	\$21,958,589	\$1,977,396	\$2,083,910	
Outpatient - Other		\$177,295	\$170,749	\$188,712	\$193,879	\$205,745	\$201,792	\$2,453,792	\$2,303,788	\$2,152,187	\$2,239,408	\$2,262,110	\$2,322,566	\$2,281,811	\$2,221,811	\$2,200,119	\$2,220,119	\$2,220,119	\$2,220,119	\$2,220,119	\$2,220,119	\$2,220,119	\$2,220,119	\$2,220,119
Hospice		\$652,997	\$607,478	\$679,452	\$715,881	\$811,176	\$779,126	\$8,274,393	\$789,864	\$757,969	\$720,026	\$751,273	\$685,954	\$707,040	\$652,379	\$590,242	\$669,280	\$645,055	\$722,155	\$792,264	\$8,483,502	\$772,052	\$784,585	
Long-Term Care Payments																								
Level I Facility		\$0	\$1,950	\$0	\$0	\$0	\$0	\$6,303	\$0	\$600	\$0	\$0	\$0	\$0	\$1,050	\$1,050	\$10,544,014	\$10,231,125	\$10,710,994	\$10,284,285	\$41,773,117	\$11,543,297	\$11,664,763	
Level II Facility		\$23,750	\$54,625	\$23,135	\$18,750	\$18,500	\$41,500	\$364,512	\$48,800	\$70,500	\$60,125	\$70,625	\$78,250	\$29,075	\$38,875	\$47,125	\$1,348,014	\$1,404,725	\$1,404,725	\$1,404,725	\$15,531,519	\$1,543,033	\$1,553,519	
Home and Community Based Services		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$875,192	\$936,062	\$1,016,815	\$1,136,481	\$3,964,549	\$1,260,485	\$1,359,130	
CMS 1500 Payments by the Claims Processing System																								
Prof - E&M		\$7,765,646	\$7,931,459	\$8,427,231	\$8,261,928	\$7,756,868	\$7,988,235	\$90,967,796	\$8,258,638	\$8,165,199	\$8,233,685	\$8,011,740	\$7,393,384	\$7,388,414	\$7,166,076	\$7,226,872	\$8,642,466	\$8,071,293	\$7,019,980	\$7,544,850	\$93,122,598	\$7,477,682	\$8,068,069	
Prof - Home Health		\$2,701,255	\$2,596,453	\$2,760,460	\$2,610,461	\$2,532,648	\$2,468,080	\$42,491,136	\$2,595,493	\$2,589,941	\$2,514,175	\$2,507,538	\$2,381,496	\$2,417,699	\$2,494,783	\$2,358,766	\$2,791,810	\$2,712,863	\$2,677,047	\$2,652,079	\$30,699,689	\$2,611,796	\$2,584,367	
Prof - Maternity		\$1,081,387	\$957,930	\$1,079,949	\$1,039,770	\$1,016,264	\$1,082,837	\$12,511,143	\$1,227,422	\$1,151,822	\$1,210,564	\$1,195,345	\$1,075,951	\$1,202,946	\$1,164,944	\$1,149,599	\$1,292,015	\$1,126,127	\$1,115,272	\$1,056,320	\$13,968,325	\$1,241,383	\$1,274,902	
Prof - Surgery		\$681,264	\$697,531	\$716,239	\$696,684	\$639,981	\$763,223	\$7,927,111	\$888,618	\$762,302	\$754,078	\$702,502	\$636,110	\$577,413	\$628,325	\$593,438	\$776,258	\$673,384	\$695,793	\$830,442	\$676,591	\$728,828		
Prof - DME		\$396,628	\$498,637	\$443,774	\$466,169	\$406,059	\$379,581	\$4,885,712	\$394,632	\$470,381	\$378,690	\$364,872	\$396,261	\$403,756	\$371,455	\$354,029	\$438,535	\$413,368	\$385,937	\$421,490	\$4,793,406	\$375,121	\$448,212	
Prof - Lab		\$818,725	\$826,003	\$930,866	\$908,485	\$814,124	\$879,903	\$9,475,292	\$879,735	\$917,155	\$959,039	\$933,127	\$794,792	\$794,404	\$877,340	\$800,306	\$959,898	\$844,443	\$706,649	\$759,469	\$10,136,358	\$717,065	\$814,342	
Prof - Radiology		\$915,662	\$908,608	\$1,044,726	\$1,060,118	\$976,803	\$1,021,162	\$11,160,097	\$1,008,804	\$956,782	\$990,110	\$970,834	\$926,866	\$940,790	\$912,732	\$895,093	\$1,074,082	\$1,004,996	\$890,279	\$966,457	\$11,537,825	\$942,198	\$1,012,451	
Prof - Transportation		\$230,532	\$217,433	\$255,708	\$262,583	\$239,926	\$251,344	\$5,319,712	\$248,179	\$272,844	\$288,701	\$277,230	\$248,184	\$260,580	\$276,305	\$240,988	\$277,911	\$277,831	\$276,160	\$294,112	\$3,239,023	\$293,529	\$308,497	
Prof - Other		\$1,823,232	\$1,774,283	\$1,916,761	\$1,870,775	\$1,823,588	\$1,788,250	\$22,187,046	\$1,896,895	\$2,016,194	\$2,191,987	\$2,147,261	\$1,936,965	\$1,840,886	\$1,833,758	\$1,753,901	\$2,069,397	\$1,923,007	\$1,833,520	\$1,917,812	\$23,361,523	\$1,929,016	\$2,146,587	
Capitation Payments		\$845,597	\$2,290,647	\$1,171,185	\$1,097,776	\$1,108,045	\$1,095,697	\$11,466,612	\$988,167	\$987,938	\$908,973	\$1,165,459	\$1,092,964	\$1,093,461	\$1,189,150	\$1,236,598	\$1,236,670	\$1,315,958	\$1,310,230	\$13,806,242	\$2,501,322	\$1,013,252		
Subcontractor Payments for Medical Services		\$151,691	\$153,469	\$176,019	\$151,136	\$129,014	\$138,851	\$1,812,787	\$174,750	\$218,399	\$173,904	\$184,777	\$150,464	\$146,422	\$155,032	\$151,097	\$198,262	\$173,387	\$119,270	\$143,999	\$1,989,763	\$193,525	\$232,637	
Other Medical (provide description)		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Behavioral Health																								
Inpatient Payments by the Claims Processing System		\$1,197,829	\$1,252,343	\$1,323,229	\$1,199,519	\$1,198,150	\$969,507	\$16,654,761	\$914,477	\$913,245	\$822,985	\$767,323	\$917,123	\$852,768	\$967,211	\$960,121	\$946,047	\$805,749	\$897,495	\$864,760	\$10,629,305	\$1,103,616	\$1,063,685	
Outpatient Payments by the Claims Processing System		\$1,013,294	\$1,045,883	\$1,159,124	\$1,165,334	\$1,158,269	\$1,184,473	\$10,963,816	\$1,901,906	\$1,961,000	\$2,054,274	\$2,085,071	\$1,890,319	\$1,932,755	\$1,897,598	\$1,868,595	\$1,969,852	\$1,988,981	\$1,806,043	\$1,837,357	\$23,193,750	\$1,651,842	\$1,955,410	
Supported Housing Payments by the Claims Processing System		\$298,008	\$288,523	\$316,935	\$250,684	\$242,138	\$239,062	\$2,926,686	\$331,257	\$333,629	\$331,320	\$350,659	\$347,827	\$372,990	\$390,982	\$303,865	\$318,810	\$335,818	\$353,965	\$356,450	\$4,127,572	\$331,591	\$364,749	
Intensive Outpatient Payments by the Claims Processing System		\$74,747	\$67,566	\$83,170	\$76,821	\$77,643	\$81,571	\$869,357	\$71,666	\$82,212	\$78,099	\$84,222	\$66,498	\$72,742	\$62,286	\$55,863	\$79,980	\$61,888	\$66,417	\$86,025	\$87,898	\$68,062	\$67,955	
Partial Hospitalization																								

Medical Loss Ratio Report - Total Middle Grand Region

MCO

1944

AMERIGROUP, Tennessee, Inc.

Reporting Month	2010				2011							For the Year Ended 6/30/2011	2011					2012				
	Incurred Month				Incurred Month								Incurred Month					Incurred Month				
	September	October	November	December	January	February	March	April	May	June	July		August	September	October	November	December	January	February	March	April	
201,773	202,366	202,373	202,248	202,354	202,349	202,604	202,721	203,164	202,971	201,241	201,941	202,807	203,364	202,758	202,379	202,044	201,969	201,617	201,786			
<b>Enrollment</b>																						
<b>Capitation Revenue</b>	\$73,867,382	\$74,314,550	\$74,571,774	\$74,627,513	\$75,175,608	\$75,128,153	\$75,401,993	\$75,741,234	\$75,896,151	\$76,145,209	\$89,400,779	\$70,460,349	\$71,052,425	\$71,367,413	\$71,820,352	\$71,887,533	\$71,904,554	\$71,369,624	\$71,552,898	\$71,788,728	\$71,977,311	
<b>Premium Tax</b>	\$4,062,706	\$4,087,300	\$4,101,448	\$4,104,513	\$4,134,658	\$4,132,048	\$4,147,110	\$4,165,768	\$4,174,288	\$4,187,986	\$49,357,043	\$3,875,319	\$3,907,883	\$3,925,208	\$3,950,119	\$3,953,814	\$3,954,750	\$3,925,329	\$3,935,409	\$3,948,380	\$3,958,752	
<b>Capitation Revenue Net of Premium Tax</b>	\$69,804,676	\$70,227,250	\$70,470,326	\$70,523,000	\$71,040,950	\$70,996,104	\$71,254,884	\$71,575,466	\$71,721,863	\$71,957,222	\$848,043,737	\$66,585,030	\$67,144,541	\$67,442,205	\$67,870,232	\$67,933,719	\$67,949,803	\$67,444,295	\$67,617,489	\$67,840,348	\$68,018,559	
<b>Payments for Covered Services for the Month</b>																						
<b>Medical Services</b>																						
CMS 1450/UB 92 Payments by the Claims Processing System																						
Inpatient - Maternity	\$1,667,253	\$1,785,117	\$1,546,814	\$1,711,702	\$1,592,718	\$1,607,046	\$1,606,176	\$1,320,132	\$1,433,232	\$1,528,133	\$18,917,537	\$1,606,053	\$1,742,404	\$1,621,449	\$1,457,004	\$1,542,552	\$1,663,170	\$1,522,744	\$1,561,330	\$1,593,676	\$1,572,261	
Inpatient - Newborn	\$2,454,938	\$3,244,761	\$2,315,195	\$2,710,483	\$3,481,421	\$2,136,112	\$3,601,916	\$3,431,532	\$3,491,188	\$2,352,980	\$36,127,713	\$2,389,642	\$2,963,662	\$2,657,573	\$2,891,930	\$2,901,538	\$2,391,559	\$3,897,851	\$2,374,643	\$3,200,140	\$2,419,388	
Inpatient - Medical	\$2,905,251	\$2,713,784	\$2,964,865	\$4,658,565	\$3,072,316	\$2,992,343	\$3,135,052	\$3,684,555	\$3,107,036	\$3,270,613	\$38,463,426	\$2,775,376	\$3,512,232	\$2,711,074	\$2,789,697	\$3,048,630	\$3,431,459	\$4,260,359	\$3,981,782	\$3,337,254	\$3,448,306	
Inpatient - Surgery	\$3,816,714	\$3,314,561	\$2,920,863	\$3,170,480	\$4,478,570	\$3,010,440	\$4,318,708	\$3,450,508	\$4,104,772	\$4,503,542	\$46,565,493	\$3,272,107	\$3,315,659	\$3,714,393	\$3,383,120	\$3,723,475	\$4,267,285	\$4,813,845	\$4,547,928	\$5,241,183	\$5,021,185	
Inpatient Other	\$229,387	\$431,181	\$246,825	\$208,886	\$233,250	\$454,279	\$130,124	\$416,397	\$166,574	\$197,274	\$4,638,631	\$220,351	\$184,368	\$224,167	\$363,259	\$142,134	\$247,667	\$211,507	\$151,563	\$150,518	\$120,855	
Outpatient - Emergency Room	\$2,040,136	\$2,056,330	\$2,117,124	\$2,044,227	\$2,312,106	\$2,103,261	\$2,162,086	\$2,143,549	\$2,259,404	\$2,087,079	\$25,472,169	\$2,153,745	\$2,222,763	\$2,168,789	\$2,136,304	\$2,024,289	\$2,011,038	\$2,177,675	\$2,518,597	\$2,774,333	\$2,670,078	
Outpatient - Laboratory	\$467,057	\$455,207	\$480,699	\$481,209	\$530,934	\$507,894	\$541,730	\$484,449	\$496,548	\$476,646	\$5,842,630	\$433,162	\$520,610	\$480,445	\$482,896	\$477,625	\$415,023	\$457,111	\$369,323	\$380,542	\$358,614	
Outpatient - Radiology	\$1,190,341	\$1,192,978	\$1,247,539	\$1,047,711	\$982,261	\$991,812	\$1,205,399	\$1,112,435	\$1,127,858	\$1,105,201	\$13,452,102	\$964,904	\$1,138,971	\$1,136,646	\$1,082,579	\$1,031,588	\$933,060	\$1,073,566	\$1,015,438	\$1,018,498	\$1,058,230	
Outpatient - Surgery	\$1,955,927	\$1,860,307	\$1,816,355	\$1,727,596	\$1,661,189	\$1,872,217	\$2,147,668	\$2,106,706	\$1,913,290	\$2,159,116	\$23,281,679	\$1,859,005	\$2,237,119	\$1,985,030	\$1,903,417	\$2,017,656	\$1,829,862	\$2,318,219	\$2,336,017	\$2,275,114	\$2,356,572	
Outpatient - Other	\$253,999	\$271,381	\$262,642	\$236,486	\$222,769	\$228,611	\$258,654	\$243,742	\$244,286	\$246,225	\$2,939,975	\$261,644	\$242,656	\$252,419	\$250,378	\$291,350	\$288,942	\$279,779	\$286,576	\$273,442	\$273,442	
Hospice	\$791,336	\$793,056	\$717,731	\$819,938	\$802,027	\$759,350	\$830,353	\$803,580	\$895,944	\$857,060	\$9,627,013	\$922,877	\$883,422	\$844,828	\$826,786	\$787,914	\$800,013	\$708,938	\$770,028	\$865,806	\$763,524	
Long-Term Care Payments																						
Level I Facility	\$11,382,969	\$11,876,159	\$11,470,951	\$11,801,056	\$11,677,195	\$10,217,176	\$11,473,990	\$11,128,253	\$11,544,140	\$11,230,376	\$137,010,326	\$11,678,294	\$11,872,558	\$11,329,556	\$11,684,685	\$11,170,120	\$11,602,529	\$11,248,781	\$10,370,603	\$11,355,660	\$10,856,279	
Level II Facility	\$1,412,665	\$1,395,431	\$1,397,493	\$1,406,140	\$1,360,396	\$1,235,457	\$1,405,149	\$1,405,805	\$1,425,465	\$1,346,632	\$16,887,187	\$1,395,311	\$1,345,749	\$1,248,500	\$1,363,670	\$1,413,455	\$1,399,693	\$1,340,692	\$1,242,516	\$1,396,640	\$1,342,589	
Home and Community Based Services	\$1,379,527	\$1,433,042	\$1,593,077	\$1,749,423	\$1,697,280	\$1,709,846	\$2,004,018	\$1,981,649	\$2,128,208	\$2,156,621	\$20,452,306	\$2,186,976	\$2,486,903	\$2,470,134	\$2,644,277	\$2,711,647	\$2,833,538	\$2,862,591	\$2,872,096	\$3,109,798	\$3,070,663	
CMS 1500 Payments by the Claims Processing System																						
Prof - E&M	\$8,180,395	\$7,802,187	\$7,950,938	\$7,285,092	\$7,516,972	\$8,044,956	\$8,537,547	\$7,740,789	\$7,871,662	\$7,585,862	\$94,062,152	\$6,957,671	\$8,574,353	\$7,791,916	\$7,698,482	\$7,656,678	\$7,173,874	\$8,317,047	\$8,188,505	\$8,479,042	\$7,950,220	
Prof - Home Health	\$2,458,126	\$2,448,534	\$2,424,202	\$2,460,048	\$2,342,268	\$2,133,156	\$2,375,763	\$2,246,564	\$2,288,914	\$2,162,120	\$28,535,859	\$2,048,638	\$2,055,829	\$1,951,375	\$1,964,197	\$1,985,743	\$1,980,161	\$1,880,307	\$1,768,430	\$1,893,699	\$1,810,100	
Prof - Maternity	\$1,231,445	\$1,174,839	\$1,187,549	\$1,203,649	\$1,139,170	\$1,108,634	\$1,178,468	\$1,144,918	\$1,157,900	\$1,267,603	\$14,310,641	\$1,206,010	\$1,381,895	\$1,299,124	\$1,176,223	\$1,216,115	\$1,283,212	\$1,283,580	\$1,381,529	\$1,426,690	\$1,354,318	
Prof - Surgery	\$715,088	\$718,588	\$659,842	\$653,385	\$743,334	\$651,157	\$717,188	\$876,127	\$818,927	\$857,621	\$8,736,325	\$704,235	\$821,288	\$800,927	\$695,850	\$673,310	\$638,620	\$783,648	\$751,762	\$752,328	\$868,521	
Prof - DME	\$389,649	\$466,543	\$428,291	\$482,668	\$431,127	\$347,547	\$429,539	\$433,092	\$443,368	\$458,164	\$5,133,321	\$447,889	\$430,576	\$424,105	\$482,610	\$486,061	\$533,439	\$482,263	\$530,278	\$484,967	\$575,818	
Prof - Lab	\$816,462	\$736,075	\$712,672	\$674,991	\$762,354	\$809,328	\$860,831	\$732,774	\$753,729	\$765,823	\$9,156,446	\$655,207	\$816,244	\$726,027	\$659,569	\$712,267	\$679,735	\$802,373	\$806,979	\$825,961	\$799,399	
Prof - Radiology	\$985,023	\$925,757	\$921,392	\$842,483	\$865,103	\$842,539	\$1,014,234	\$925,884	\$944,062	\$924,543	\$11,145,669	\$789,912	\$943,097	\$937,253	\$911,010	\$884,997	\$849,133	\$921,090	\$961,482	\$944,643	\$945,756	
Prof - Transportation	\$292,387	\$299,012	\$265,448	\$294,264	\$322,922	\$274,797	\$319,465	\$315,787	\$310,469	\$291,904	\$3,588,480	\$290,720	\$267,683	\$283,189	\$265,569	\$246,056	\$232,902	\$264,082	\$247,251	\$262,485	\$268,458	
Prof - Other	\$2,081,939	\$2,161,848	\$2,047,284	\$1,895,307	\$1,986,051	\$1,939,435	\$2,173,604	\$2,010,845	\$2,024,067	\$1,977,213	\$24,373,196	\$1,927,452	\$2,251,358	\$2,091,182	\$2,089,948	\$1,984,175	\$1,907,929	\$2,086,651	\$2,039,120	\$2,151,773	\$2,139,719	
Capitation Payments	\$1,406,842	\$1,328,129	\$1,373,011	\$1,371,593	\$1,306,837	\$1,330,786	\$1,420,549	\$1,370,830	\$1,381,202	\$1,856,065	\$17,660,419	\$1,383,086	\$1,421,099	\$1,394,560	\$1,580,501	\$1,403,877	\$1,377,696	\$1,286,673	\$1,290,713	\$1,299,357	\$1,265,206	
Subcontractor Payments for Medical Services	\$184,000	\$185,734	\$169,172	\$145,165	\$171,898	\$157,781	\$214,820	\$176,223	\$150,339	\$155,909	\$2,137,264	\$207,076	\$255,891	\$186,157	\$207,223	\$209,297	\$189,384	\$211,649	\$231,329	\$228,804	\$199,549	
Other Medical (provide description)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
<b>Behavioral Health</b>																						
Inpatient Payments by the Claims Processing System	\$1,069,623	\$1,169,495	\$1,020,909	\$1,007,572	\$1,035,277	\$1,106,646	\$1,256,083	\$1,365,986	\$1,306,062	\$1,344,509	\$13,849,463	\$1,305,424	\$1,386,982	\$1,199,072	\$1,173,093	\$1,195,772	\$1,127,153	\$1,228,240	\$1,258,753	\$1,279,604	\$1,219,859	
Outpatient Payments by the Claims Processing System	\$2,014,944	\$2,006,234	\$2,026,511	\$1,832,803	\$1,836,985	\$1,887,381	\$2,236,369	\$2,123,435	\$2,063,343	\$1,951,998	\$23,587,255	\$1,821,175	\$2,167,154	\$2,314,167	\$2,281,349	\$2,343,321	\$2,143,662	\$2,438,321	\$2,478,100	\$2,545,688	\$2,466,034	
Supported Housing Payments by the Claims Processing System	\$357,533	\$388,183	\$370,419	\$380,849	\$382,246	\$340,988	\$344,993	\$359,262	\$365,564	\$382,194	\$4,368,571	\$420,587	\$439,165	\$413,061	\$434,458	\$426,269	\$436,221	\$450,177	\$434,609	\$453,161	\$482,237	
Intensive Outpatient Payments by the Claims Processing System	\$65,927	\$64,039	\$61,541	\$66,313	\$51,178	\$61,512	\$67,480	\$65,186	\$65,515	\$774,729	\$65,703	\$79,145	\$55,348	\$50,181	\$44,107	\$60,287	\$64,824	\$83,568	\$62,981	\$54,344		
Partial Hospitalization Payments by the Claims Processing System	\$121,865	\$65,860	\$5,595	\$5,435	\$7,090	\$1,395	\$6,215	\$8,175	\$15,640	\$5,385	\$414,997	\$6,930	\$14,387	\$12,838	\$12,596	\$6,346	\$4,217	\$15,264	\$6,591	\$4,414	\$5,805	
In Home Payments by the Claims Processing System	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
Transportation Payments by the Claims Processing System	\$6,555	\$10,606	\$8,473	\$12,318																		

Medical Loss Ratio Report - Total  
Middle Grand Region

MCO

AMERIGROUP, Tennessee, Inc.

Reporting Month	For the Year Ended 6/30/2012		2012								2013						For the Year Ended 6/30/2013		2013				
			Incurred Month								Incurred Month								Incurred Month				
	May	June	July	August	September	October	November	December	January	February	March	April	May	June	July	August	September	October	November				
	201.530	201.436	199.873	199.950	201.170	202.514	202.047	201.361	200.363	199.651	199.236	198.151	198.318	198.430	198.799	196.583	197.963	198.838	198.718	198.155			
<b>Enrollment</b>	\$72,083,550	\$72,239,784	\$859,504,520	\$71,818,291	\$72,012,969	\$72,213,612	\$72,135,377	\$71,987,243	\$71,596,468	\$72,490,865	\$72,106,074	\$71,845,654	\$71,750,913	\$71,635,293	\$71,621,758	\$863,214,518	\$72,585,842	\$72,959,784	\$72,944,371	\$72,850,933	\$72,599,848		
<b>Capitation Revenue</b>	\$3,964,595	\$3,973,188	\$47,272,749	\$3,950,006	\$3,960,713	\$3,971,749	\$3,967,446	\$3,959,298	\$3,937,806	\$3,986,998	\$3,965,834	\$3,951,511	\$3,946,300	\$3,939,941	\$3,939,197	\$47,476,799	\$3,992,221	\$4,012,788	\$4,011,940	\$4,006,801	\$3,992,992		
<b>Premium Tax</b>	\$68,118,954	\$68,266,596	\$812,231,771	\$67,868,285	\$68,052,256	\$68,241,863	\$68,167,931	\$68,027,945	\$67,658,663	\$68,503,867	\$68,140,240	\$67,894,143	\$67,804,613	\$67,695,352	\$67,682,561	\$815,737,720	\$68,593,621	\$68,946,996	\$68,932,431	\$68,844,132	\$68,606,856		
<b>Capitation Revenue Net of Premium Tax</b>																							
<b>Payments for Covered Services for the Month</b>																							
<b>Medical Services</b>																							
CMS 1450/UB 92 Payments by the Claims Processing System																							
Inpatient - Maternity	\$1,583,988	\$1,448,738	\$18,915,370	\$1,829,607	\$1,568,710	\$1,557,185	\$1,762,752	\$1,678,982	\$1,507,745	\$1,680,176	\$1,505,594	\$1,731,716	\$1,526,681	\$1,627,618	\$1,630,271	\$19,607,037	\$1,829,422	\$1,568,833	\$1,541,325	\$1,453,225	\$1,596,379		
Inpatient - Newborn	\$2,611,349	\$2,740,641	\$33,439,916	\$3,208,850	\$2,735,925	\$2,536,556	\$5,511,537	\$3,040,871	\$3,606,455	\$2,801,023	\$3,186,503	\$3,009,838	\$2,468,160	\$3,804,624	\$3,695,210	\$39,605,551	\$4,798,696	\$3,258,471	\$2,528,322	\$3,811,709	\$2,552,702		
Inpatient - Medical	\$2,989,565	\$2,860,033	\$39,145,767	\$3,090,649	\$3,164,871	\$2,702,927	\$2,937,325	\$3,071,867	\$2,967,799	\$2,856,299	\$2,569,725	\$3,167,042	\$2,850,017	\$3,751,590	\$2,801,045	\$35,931,336	\$3,301,122	\$2,608,906	\$2,410,623	\$3,153,490	\$3,590,995		
Inpatient - Surgery	\$4,189,591	\$5,223,217	\$50,712,986	\$3,381,528	\$3,845,907	\$3,112,578	\$5,021,812	\$3,669,713	\$3,809,615	\$4,548,294	\$3,630,190	\$4,086,597	\$4,457,305	\$4,104,062	\$4,386,899	\$48,054,499	\$4,943,174	\$3,756,954	\$4,734,288	\$3,996,170	\$3,626,972		
Inpatient Other	\$283,271	\$246,151	\$2,545,810	\$125,833	\$183,212	\$175,804	\$209,826	\$146,037	\$207,577	\$185,747	\$118,153	\$167,401	\$81,408	\$107,364	\$202,800	\$2,271,162	\$191,718	\$95,468	\$152,932	\$153,406	\$130,191		
Outpatient - Emergency Room	\$2,734,008	\$2,595,218	\$28,186,838	\$2,672,174	\$2,890,243	\$2,843,239	\$2,833,828	\$2,453,921	\$2,693,340	\$2,658,565	\$2,303,110	\$2,494,955	\$2,481,967	\$2,587,343	\$2,425,896	\$31,338,579	\$2,529,850	\$2,724,265	\$2,716,390	\$2,589,881	\$2,506,334		
Outpatient - Laboratory	\$360,513	\$318,483	\$5,054,347	\$339,399	\$379,702	\$323,136	\$377,438	\$354,773	\$369,598	\$417,081	\$347,668	\$338,550	\$369,060	\$341,939	\$305,761	\$4,263,905	\$348,273	\$338,320	\$343,957	\$372,423	\$348,729		
Outpatient - Radiology	\$1,050,683	\$902,481	\$12,406,644	\$993,906	\$1,098,027	\$1,002,054	\$1,109,322	\$967,833	\$927,983	\$1,037,141	\$977,117	\$997,606	\$1,068,584	\$1,056,480	\$968,563	\$12,204,616	\$1,085,324	\$1,031,923	\$988,774	\$1,054,034	\$871,830		
Outpatient - Surgery	\$2,300,469	\$2,199,456	\$25,617,936	\$2,414,614	\$2,647,054	\$2,053,119	\$2,557,482	\$2,429,546	\$1,863,165	\$2,546,245	\$2,417,120	\$2,350,578	\$2,557,294	\$2,498,598	\$2,114,616	\$28,449,433	\$2,292,500	\$2,281,377	\$2,174,210	\$2,235,782	\$1,996,269		
Outpatient - Other	\$292,332	\$281,436	\$3,259,442	\$265,504	\$308,351	\$290,613	\$345,706	\$358,889	\$431,285	\$494,253	\$476,885	\$473,485	\$505,387	\$480,821	\$426,298	\$4,857,478	\$472,180	\$536,092	\$518,093	\$590,856	\$621,833		
Hospice	\$805,482	\$791,598	\$9,771,216	\$861,908	\$866,469	\$855,303	\$907,674	\$831,939	\$836,981	\$861,095	\$719,811	\$876,116	\$806,615	\$836,862	\$830,519	\$10,091,292	\$870,746	\$862,835	\$864,570	\$859,437	\$859,480		
Long-Term Care Payments																							
Level I Facility	\$11,533,755	\$11,191,546	\$135,894,366	\$12,546,476	\$12,571,156	\$12,221,744	\$12,681,298	\$12,186,363	\$12,457,769	\$12,320,985	\$10,648,393	\$11,878,167	\$11,345,153	\$11,727,908	\$11,364,581	\$143,949,993	\$11,832,843	\$11,726,516	\$11,195,005	\$11,605,835	\$11,022,737		
Level II Facility	\$1,362,531	\$1,247,194	\$16,098,541	\$1,233,071	\$1,015,958	\$825,527	\$803,920	\$728,956	\$724,442	\$686,614	\$623,930	\$705,801	\$695,037	\$747,821	\$706,225	\$9,497,303	\$749,740	\$802,667	\$708,787	\$763,914	\$708,246		
Home and Community Based Services	\$3,363,144	\$3,236,015	\$33,847,782	\$3,257,082	\$3,468,080	\$3,233,489	\$3,584,443	\$3,442,813	\$3,353,214	\$3,557,091	\$3,230,455	\$3,443,338	\$3,515,362	\$3,648,951	\$3,377,422	\$41,111,739	\$3,589,254	\$3,601,987	\$3,463,706	\$3,736,974	\$3,490,701		
CMS 1500 Payments by the Claims Processing System																							
Prof - E&M	\$8,184,959	\$7,397,403	\$94,370,150	\$7,195,281	\$8,127,102	\$7,173,892	\$8,113,912	\$7,812,834	\$7,287,835	\$9,467,238	\$8,422,578	\$8,208,969	\$8,548,657	\$8,284,237	\$7,356,806	\$95,999,341	\$7,915,062	\$8,426,534	\$7,999,275	\$8,385,083	\$7,574,455		
Prof - Home Health	\$1,853,649	\$1,751,090	\$22,943,218	\$1,807,708	\$1,851,879	\$1,706,382	\$1,840,959	\$1,729,576	\$1,769,682	\$1,794,088	\$1,615,453	\$1,742,078	\$1,745,374	\$1,788,943	\$1,643,835	\$21,035,958	\$1,723,623	\$1,720,913	\$1,689,761	\$1,767,610	\$1,758,658		
Prof - Maternity	\$1,351,032	\$1,304,082	\$15,663,809	\$1,456,472	\$1,424,094	\$1,313,459	\$1,438,041	\$1,408,061	\$1,297,353	\$1,393,477	\$1,296,248	\$1,424,934	\$1,318,873	\$1,356,734	\$1,338,979	\$16,466,725	\$1,517,701	\$1,466,680	\$1,372,007	\$1,386,081	\$1,308,632		
Prof - Surgery	\$822,815	\$763,765	\$9,077,069	\$817,395	\$809,529	\$723,417	\$808,830	\$772,298	\$608,538	\$786,660	\$719,877	\$673,723	\$800,819	\$833,339	\$678,064	\$9,032,490	\$773,273	\$702,224	\$707,554	\$726,790	\$708,794		
Prof - DME	\$542,912	\$538,993	\$5,959,910	\$482,705	\$520,986	\$467,140	\$566,693	\$596,699	\$652,875	\$529,007	\$251,010	\$202,514	\$131,181	\$166,395	\$142,728	\$4,709,932	\$101,063	\$188,279	\$211,687	\$220,840	\$205,316		
Prof - Lab	\$872,018	\$818,204	\$9,173,984	\$816,364	\$948,236	\$766,999	\$877,804	\$834,213	\$770,198	\$1,004,342	\$926,764	\$894,733	\$919,532	\$905,859	\$862,209	\$10,523,653	\$953,962	\$1,000,957	\$998,543	\$1,027,033	\$861,260		
Prof - Radiology	\$945,658	\$880,994	\$10,915,023	\$873,000	\$964,428	\$855,928	\$985,378	\$856,647	\$766,930	\$939,542	\$821,852	\$839,497	\$892,013	\$864,704	\$802,161	\$10,462,539	\$871,541	\$881,556	\$870,152	\$912,714	\$787,812		
Prof - Transportation	\$284,773	\$285,733	\$3,198,901	\$260,752	\$272,830	\$240,710	\$263,929	\$231,358	\$269,985	\$245,648	\$229,554	\$238,889	\$261,760	\$259,699	\$274,944	\$3,050,060	\$267,466	\$263,719	\$267,114	\$269,164	\$249,832		
Prof - Other	\$2,235,179	\$2,007,197	\$24,911,682	\$2,070,308	\$2,330,332	\$2,107,387	\$2,399,792	\$2,192,550	\$2,077,300	\$2,489,234	\$2,142,978	\$2,171,862	\$2,258,191	\$2,202,397	\$2,013,022	\$26,455,355	\$2,281,077	\$2,370,285	\$2,295,498	\$2,505,715	\$2,181,095		
Capitation Payments	\$1,316,454	\$1,309,001	\$16,328,223	\$1,433,956	\$1,341,842	\$1,328,256	\$1,366,022	\$1,370,770	\$1,366,459	\$1,379,630	\$1,828,886	\$1,808,784	\$1,883,172	\$1,887,466	\$1,909,155	\$18,904,397	\$1,809,227	\$1,810,109	\$1,840,334	\$1,764,202	\$1,805,347		
Subcontractor Payments for Medical Services	\$177,311	\$171,211	\$2,474,882	\$257,449	\$262,803	\$216,501	\$235,550	\$206,253	\$189,444	\$226,293	\$234,718	\$233,585	\$210,374	\$179,835	\$182,994	\$2,635,800	\$266,179	\$280,714	\$233,579	\$254,510	\$206,001		
Other Medical (provide description)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0		
<b>Behavioral Health</b>																							
Inpatient Payments by the Claims Processing System	\$1,386,880	\$1,121,442	\$14,882,275	\$1,263,065	\$1,334,402	\$1,153,829	\$1,242,802	\$1,217,626	\$1,154,118	\$1,341,854	\$1,261,553	\$1,329,926	\$1,406,057	\$1,468,680	\$1,477,720	\$15,651,633	\$1,621,555	\$1,582,041	\$1,311,566	\$1,485,047	\$1,291,520		
Outpatient Payments by the Claims Processing System	\$2,586,617	\$2,301,310	\$27,886,898	\$2,249,633	\$2,492,051	\$2,256,132	\$3,293,809	\$3,021,368	\$2,812,240	\$3,327,280	\$3,102,801	\$3,075,419	\$3,349,361	\$3,178,662	\$2,835,138	\$34,993,894	\$2,911,005	\$3,100,248	\$2,978,210	\$3,205,638	\$2,874,510		
Supported Housing Payments by the Claims Processing System	\$503,556	\$504,967	\$5,398,468	\$515,306	\$552,330	\$529,096	\$557,067	\$551,611	\$571,773	\$558,927	\$502,130	\$569,218	\$542,368	\$567,587	\$552,916	\$6,570,329	\$578,556	\$621,061	\$605,532	\$612,287	\$569,859		
Intensive Outpatient Payments by the Claims Processing System	\$68,247	\$59,831	\$748,566	\$58,658	\$59,618	\$48,476	\$69,718	\$58,823	\$55,485	\$63,921	\$61,097	\$84,702	\$86,760	\$67,961	\$62,538	\$777,757	\$70,260	\$85,124	\$81,734	\$78,389	\$61,821		
Partial Hospitalization Payments by the Claims Processing System	\$11,975	\$17,499	\$118,862	\$9,503	\$20,552	\$20,750	\$20,889	\$13,134	\$5,020	\$15,407	\$21,137	\$26,368	\$19,038	\$37,036	\$15,301	\$224,135	\$22,609	\$32,566	\$19,016	\$29,555	\$31,002		



**Medical Loss Ratio Report - Total  
Middle Grand Region**

MCO												
AMERIGROUP, Tennessee, Inc.												
Reporting Month		2015				2016						For the Year
		Incurred Month				Incurred Month						Ended
		September	October	November	December	January	February	March	April	May	June	6/30/2016
		165,214	165,392	166,287	167,285	168,545	169,815	170,658	171,574	172,843	173,421	2,018,587
<b>Enrollment</b>												
<b>Capitation Revenue</b>		\$54,208,530	\$53,991,036	\$53,916,099	\$53,988,797	\$53,696,248	\$53,841,777	\$53,995,515	\$53,986,137	\$54,244,555	\$54,254,839	\$648,655,595
<b>Premium Tax</b>		\$3,252,512	\$3,239,462	\$3,234,966	\$3,239,328	\$3,221,775	\$3,230,507	\$3,239,731	\$3,239,168	\$3,254,673	\$3,255,290	\$38,919,336
<b>Capitation Revenue Net of Premium Tax</b>		\$50,956,018	\$50,751,574	\$50,681,133	\$50,749,469	\$50,474,473	\$50,611,270	\$50,755,784	\$50,746,969	\$50,989,882	\$50,999,549	\$609,736,259
<b>Payments for Covered Services for the Month</b>												
<b>Medical Services</b>												
CMS 1450/UB 92 Payments by the Claims Processing System												
Inpatient - Maternity		\$1,079,997	\$944,128	\$917,603	\$961,065	\$921,977	\$1,041,457	\$1,004,439	\$897,094	\$973,961	\$214,721	\$11,177,665
Inpatient - Newborn		\$1,800,851	\$4,417,349	\$2,667,456	\$3,350,433	\$2,455,611	\$2,499,950	\$2,533,506	\$1,698,680	\$1,538,375	\$166,370	\$28,314,727
Inpatient - Medical		\$2,029,076	\$2,657,136	\$1,986,489	\$2,327,712	\$3,136,818	\$1,789,854	\$2,613,752	\$2,109,342	\$2,006,041	\$265,346	\$25,160,072
Inpatient - Surgery		\$2,695,486	\$2,745,326	\$3,280,677	\$2,681,934	\$2,547,295	\$2,165,502	\$2,408,838	\$2,838,771	\$1,735,284	\$255,650	\$28,532,101
Inpatient - Other		\$109,525	\$153,163	\$121,410	\$148,499	\$135,720	\$210,070	\$112,123	\$138,573	\$60,787	\$0	\$1,444,889
Outpatient - Emergency Room		\$2,234,830	\$2,215,044	\$2,186,480	\$2,335,293	\$2,247,607	\$2,121,100	\$2,567,475	\$2,533,138	\$2,503,487	\$1,232,871	\$26,547,122
Outpatient - Laboratory		\$145,230	\$129,641	\$117,467	\$119,123	\$108,541	\$109,438	\$139,905	\$126,914	\$134,398	\$63,557	\$1,424,816
Outpatient - Radiology		\$718,322	\$705,228	\$559,301	\$611,210	\$580,883	\$652,245	\$665,279	\$688,398	\$702,297	\$308,385	\$7,522,344
Outpatient - Surgery		\$1,880,096	\$2,045,420	\$1,640,904	\$1,804,612	\$1,917,444	\$1,758,561	\$1,989,637	\$1,991,289	\$2,117,159	\$831,360	\$21,842,516
Outpatient - Other		\$577,682	\$502,855	\$518,197	\$500,657	\$368,648	\$411,545	\$460,156	\$413,364	\$345,699	\$144,987	\$5,344,407
Hospice		\$610,257	\$628,375	\$594,337	\$657,847	\$579,243	\$627,225	\$622,790	\$619,521	\$521,670	\$0	\$6,706,422
Long-Term Care Payments												
Level I Facility		\$7,908,774	\$7,880,134	\$7,554,747	\$7,733,816	\$7,637,675	\$7,007,716	\$7,454,749	\$6,819,397	\$7,084,546	\$1,395,334	\$84,949,895
Level II Facility		\$468,285	\$510,937	\$467,179	\$460,760	\$459,344	\$465,421	\$508,831	\$508,934	\$453,955	\$46,245	\$5,405,188
Home and Community Based Services		\$2,834,004	\$2,817,071	\$2,661,304	\$2,638,038	\$2,489,530	\$2,551,197	\$2,728,094	\$2,578,936	\$2,527,635	\$1,459,628	\$31,311,257
CMS 1500 Payments by the Claims Processing System												
Prof - E&M		\$6,183,316	\$6,048,988	\$5,657,274	\$5,983,958	\$5,718,443	\$5,989,665	\$6,336,377	\$6,082,159	\$5,801,462	\$2,658,744	\$68,508,206
Prof - Home Health		\$1,421,593	\$1,436,995	\$1,362,364	\$1,392,524	\$1,237,823	\$1,208,883	\$1,234,576	\$1,146,346	\$1,072,855	\$247,500	\$14,760,229
Prof - Maternity		\$799,825	\$840,082	\$900,642	\$980,060	\$952,763	\$906,277	\$917,190	\$848,915	\$886,710	\$443,015	\$10,295,723
Prof - Surgery		\$541,605	\$520,075	\$464,795	\$476,758	\$480,266	\$460,559	\$537,434	\$469,283	\$485,812	\$203,002	\$5,753,741
Prof - DME		\$345,269	\$350,111	\$279,146	\$349,518	\$295,482	\$324,568	\$281,093	\$279,250	\$286,135	\$126,407	\$3,577,873
Prof - Lab		\$600,729	\$597,512	\$529,692	\$564,121	\$524,391	\$592,601	\$647,396	\$587,931	\$505,455	\$317,305	\$6,657,990
Prof - Radiology		\$621,555	\$623,299	\$565,466	\$604,112	\$569,139	\$594,133	\$668,551	\$605,064	\$626,485	\$263,576	\$6,919,781
Prof - Transportation		\$248,729	\$226,290	\$212,215	\$235,682	\$223,891	\$188,173	\$222,972	\$211,382	\$193,587	\$88,264	\$2,521,310
Prof - Other		\$1,759,712	\$1,792,345	\$1,730,826	\$1,690,185	\$1,602,247	\$1,632,305	\$1,789,028	\$1,690,493	\$1,555,716	\$774,125	\$19,393,710
Capitation Payments		\$1,013,557	\$1,024,076	\$1,011,285	\$1,021,637	\$1,171,252	\$1,160,903	\$1,198,896	\$1,188,158	\$1,188,139	\$1,181,424	\$13,188,619
Subcontractor Payments for Medical Services		\$185,975	\$199,543	\$171,132	\$152,525	\$133,175	\$177,333	\$186,322	\$159,557	\$121,101	\$85,702	\$1,981,396
Other Medical (provide description)		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Behavioral Health</b>												
Inpatient Payments by the Claims Processing System		\$1,095,377	\$1,372,953	\$1,243,285	\$1,199,599	\$1,263,140	\$1,113,293	\$1,193,061	\$1,234,033	\$974,758	\$47,749	\$13,019,070
Outpatient Payments by the Claims Processing System		\$2,758,840	\$3,157,796	\$3,084,696	\$3,130,657	\$2,871,198	\$3,121,051	\$3,247,077	\$3,130,773	\$2,865,517	\$819,861	\$33,399,064
Supported Housing Payments by the Claims Processing System		\$555,022	\$556,614	\$528,902	\$531,321	\$507,353	\$458,982	\$470,516	\$466,447	\$494,595	\$193,571	\$5,914,710
Intensive Outpatient Payments by the Claims Processing System		\$64,286	\$67,092	\$63,372	\$63,871	\$47,306	\$76,070	\$82,348	\$65,743	\$52,582	\$16,689	\$726,373
Partial Hospitalization Payments by the Claims Processing System		\$24,223	\$23,758	\$28,154	\$13,685	\$24,031	\$18,980	\$19,727	\$29,558	\$37,822	\$13,848	\$309,105
In Home Payments by the Claims Processing System		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Transportation Payments by the Claims Processing System		\$14,218	\$20,120	\$21,564	\$20,756	\$27,016	\$22,092	\$26,566	\$22,436	\$17,730	\$10,597	\$235,508
Twenty-Three Hour Payments by the Claims Processing System		\$82	\$233	\$781	\$175	\$104	\$1,227	\$1,869	\$690	\$110	\$104	\$5,541
CMHA Capitation Payments		\$273,007	\$272,232	\$273,482	\$273,704	\$276,621	\$278,541	\$281,782	\$285,559	\$285,833	\$286,397	\$3,324,416
Other Capitation Payments		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Grant Payments		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Non-FFS Inpatient		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subcontractor Payments for Mental Health and Substance Abuse S		\$7,980	\$7,220	\$5,800	\$5,800	\$6,760	\$8,780	\$9,880	\$8,260	\$6,580	\$0	\$83,840
Crisis Services Team Pass Through		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Less:												
Recoveries not Reflected in Claims Payments		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total Payments</b>		\$43,607,313	\$47,489,141	\$43,408,425	\$45,021,645	\$43,518,735	\$41,745,698	\$45,162,240	\$42,474,386	\$40,164,279	\$14,162,333	\$496,259,625
UB92 IBNR		\$1,579	\$365,579	\$360,966	\$375,682	\$1,766,325	\$724,872	\$1,409,290	\$1,857,501	\$4,672,568	\$15,536,912	\$27,122,170
Professional IBNR		\$136,310	\$172,222	\$378,601	\$481,913	\$639,225	\$997,403	\$1,634,882	\$2,456,417	\$4,210,371	\$12,759,780	\$23,919,927
LTC IBNR		-\$15,243	\$11,528	\$99,616	\$195,671	\$60,407	\$72,125	\$183,253	\$663,730	\$1,123,701	\$8,625,371	\$10,975,215
<b>Total IBNR</b>		\$122,646	\$549,329	\$839,183	\$1,053,266	\$2,465,956	\$1,794,400	\$3,227,426	\$4,977,648	\$10,006,639	\$36,922,063	\$62,017,312
<b>Payments and Remaining IBNR</b>		\$43,729,960	\$48,038,470	\$44,247,608	\$46,074,911	\$45,984,691	\$43,540,098	\$48,389,666	\$47,452,034	\$50,170,918	\$51,084,396	\$558,276,937
<b>Medical Loss Ratio, Gross Premium</b>		80.67%	88.97%	82.07%	85.34%	85.64%	80.87%	89.62%	87.90%	92.49%	94.16%	86.07%
<b>Medical Loss Ratio, Net Premium</b>		85.82%	94.65%	87.31%	90.79%	91.10%	86.03%	95.34%	93.51%	98.39%	100.17%	91.56%
<b>Per Member Expense</b>		\$264.69	\$290.45	\$266.09	\$275.43	\$272.83	\$256.40	\$283.55	\$276.57	\$290.27	\$294.57	\$276.57

Premium Tax Paid (Quarterly)	-	-	28,898,916	-	-	35,982,839	-	-	21,735,678	-	111,585,986
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**Medical Loss Ratio Report - Total  
West Grand Region**

MCO																				
AMERIGROUP, Tennessee, Inc.																				
Reporting Month	2015														For the Year 6/30/2016					
	Incurred Month						Incurred Month						Incurred Month							
	January	February	March	April	May	June	July	August	September	October	November	December	January	February		March	April	May	June	
<b>Enrollment</b>	116,120	115,559	114,390	115,818	116,336	117,847	696,070	121,473	123,107	124,322	126,098	128,239	130,028	131,796	132,945	134,113	133,621	134,461	1,539,728	
<b>Capitation Revenue</b>	\$32,128,650	\$31,801,165	\$31,494,918	\$36,707,166	\$36,786,555	\$37,123,909	\$206,042,363	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####
<b>Premium Tax</b>	\$1,767,076	\$1,749,064	\$1,732,220	\$2,018,894	\$2,023,261	\$2,041,815	\$1,332,330	\$2,256,649	\$2,292,923	\$2,323,213	\$2,360,931	\$2,395,832	\$2,438,196	\$2,428,871	\$2,440,975	\$2,455,623	\$2,476,928	\$2,457,392	\$2,458,746	\$28,786,278
<b>Capitation Revenue Net of Premium Tax</b>	\$30,361,574	\$30,052,101	\$29,762,697	\$34,688,272	\$34,763,295	\$35,082,094	\$194,710,033	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####	#####
<b>Payments for Covered Services for the Month</b>																				
<b>Medical Services</b>																				
CMS 1450/UB 92 Payments by the Claims Processing System																				
Inpatient - Maternity	\$803,776	\$664,498	\$656,155	\$743,432	\$708,885	\$654,669	\$4,231,415	\$739,574	\$777,680	\$995,413	\$880,365	\$960,799	\$824,798	\$956,993	\$749,260	\$863,403	\$735,211	\$748,040	\$131,668	\$9,363,202
Inpatient - Newborn	\$1,046,758	\$1,883,667	\$1,541,731	\$1,892,583	\$2,233,542	\$1,536,277	\$10,134,557	\$2,447,540	\$1,291,270	\$1,702,491	\$1,939,296	\$1,911,766	\$1,687,178	\$1,961,554	\$1,694,142	\$1,269,965	\$1,192,792	\$859,891	\$183,837	\$18,141,721
Inpatient - Medical	\$2,296,520	\$1,982,142	\$1,901,586	\$1,576,827	\$1,343,158	\$1,714,953	\$10,815,186	\$1,612,503	\$1,953,496	\$1,779,001	\$2,424,857	\$2,063,848	\$2,025,655	\$1,745,505	\$1,801,613	\$1,941,990	\$1,773,974	\$1,058,925	\$239,093	\$20,420,460
Inpatient - Surgery	\$2,856,072	\$2,105,098	\$2,947,776	\$1,908,015	\$2,570,631	\$2,814,656	\$15,202,248	\$2,108,788	\$1,990,920	\$2,391,472	\$2,357,231	\$2,284,494	\$2,742,732	\$2,292,939	\$1,990,406	\$1,920,208	\$1,720,228	\$1,344,117	\$141,253	\$23,284,789
Inpatient Other	\$78,214	\$107,943	\$76,576	\$37,197	\$63,646	\$117,936	\$481,513	\$134,347	\$73,715	\$96,421	\$123,312	\$125,317	\$41,406	\$155,878	\$117,887	\$84,032	\$48,535	\$23,884	\$0	\$1,024,733
Outpatient - Emergency Room	\$2,023,029	\$1,627,838	\$1,842,897	\$2,034,952	\$1,976,461	\$1,786,477	\$11,291,654	\$1,950,299	\$2,140,256	\$2,159,990	\$2,271,381	\$2,267,116	\$2,234,061	\$2,360,579	\$2,327,963	\$2,556,263	\$2,402,062	\$2,301,949	\$1,363,459	\$26,335,297
Outpatient - Laboratory	\$40,923	\$32,885	\$40,118	\$38,114	\$46,350	\$48,013	\$246,402	\$45,459	\$55,778	\$46,417	\$45,459	\$39,115	\$37,652	\$44,677	\$44,372	\$55,193	\$51,099	\$39,829	\$0	\$533,771
Outpatient - Radiology	\$597,933	\$509,068	\$635,273	\$655,462	\$625,472	\$603,195	\$3,626,402	\$593,473	\$635,564	\$637,539	\$688,379	\$612,891	\$673,712	\$555,957	\$614,904	\$646,130	\$611,837	\$500,323	\$264,382	\$7,035,089
Outpatient - Surgery	\$986,964	\$647,232	\$830,584	\$922,805	\$941,280	\$1,038,773	\$5,367,639	\$1,019,609	\$1,070,240	\$951,733	\$1,154,337	\$998,666	\$1,058,899	\$1,042,450	\$1,293,879	\$1,369,037	\$1,162,806	\$1,122,095	\$432,954	\$12,676,704
Outpatient - Other	\$523,644	\$473,797	\$517,942	\$563,915	\$535,473	\$510,494	\$3,125,265	\$534,197	\$568,384	\$558,641	\$549,185	\$503,029	\$480,822	\$372,503	\$383,391	\$412,977	\$361,958	\$328,823	\$117,218	\$5,171,127
Hospice	\$267,010	\$238,940	\$301,106	\$392,686	\$465,305	\$446,506	\$2,111,553	\$468,089	\$529,969	\$471,604	\$497,734	\$468,078	\$480,234	\$497,693	\$465,513	\$498,990	\$449,609	\$417,971	\$0	\$5,245,482
Long-Term Care Payments																				
Level I Facility	\$3,445,504	\$3,095,096	\$3,648,498	\$6,474,997	\$6,792,365	\$6,532,817	\$29,989,277	\$7,336,601	\$7,441,294	\$7,283,572	\$8,027,254	\$7,844,054	\$8,265,678	\$8,323,518	\$7,650,514	\$8,186,325	\$7,730,108	\$7,784,602	\$1,760,896	\$87,634,416
Level II Facility	\$388,794	\$349,649	\$468,403	\$688,632	\$744,829	\$709,173	\$3,349,478	\$764,383	\$758,818	\$707,425	\$761,020	\$759,970	\$751,466	\$694,437	\$636,826	\$672,922	\$645,458	\$601,332	\$106,044	\$7,860,101
Home and Community Based Services	\$685,759	\$535,886	\$562,932	\$1,276,828	\$1,216,059	\$1,156,014	\$5,433,478	\$1,231,512	\$1,205,341	\$1,202,097	\$1,268,216	\$1,248,031	\$1,199,647	\$1,226,722	\$1,325,474	\$1,267,290	\$1,246,939	\$747,135	\$14,378,031	
CMS 1500 Payments by the Claims Processing System																				
Prof - E&M	\$3,117,316	\$2,853,335	\$3,139,314	\$3,383,655	\$3,139,966	\$3,458,183	\$19,091,768	\$3,700,551	\$3,837,836	\$3,749,916	\$3,605,906	\$3,560,101	\$3,751,397	\$3,954,434	\$4,418,590	\$4,642,062	\$4,357,001	\$3,921,069	\$1,877,057	\$45,375,922
Prof - Home Health	\$265,954	\$212,599	\$190,792	\$230,111	\$231,590	\$241,071	\$1,372,117	\$295,650	\$324,916	\$324,314	\$334,065	\$399,820	\$468,709	\$435,630	\$404,939	\$417,742	\$425,389	\$316,255	\$83,957	\$4,231,386
Prof - Maternity	\$471,053	\$395,988	\$455,006	\$433,848	\$493,219	\$482,798	\$2,731,913	\$519,501	\$547,192	\$604,574	\$545,223	\$564,023	\$596,574	\$667,870	\$644,878	\$608,748	\$519,554	\$514,059	\$236,981	\$6,569,176
Prof - Surgery	\$260,281	\$222,503	\$261,157	\$264,420	\$300,455	\$356,148	\$1,664,964	\$356,315	\$356,863	\$403,866	\$373,911	\$307,988	\$343,652	\$317,759	\$361,441	\$396,472	\$343,257	\$342,198	\$171,299	\$4,075,022
Prof - DME	\$89,797	\$99,905	\$129,469	\$165,554	\$131,545	\$141,329	\$757,599	\$141,760	\$172,889	\$237,875	\$283,883	\$146,652	\$217,134	\$220,725	\$232,752	\$279,056	\$234,863	\$185,822	\$78,781	\$2,432,193
Prof - Lab	\$437,761	\$364,421	\$430,145	\$427,992	\$344,870	\$392,366	\$2,397,556	\$417,317	\$395,432	\$420,590	\$395,946	\$370,812	\$379,696	\$401,881	\$461,787	\$480,232	\$438,777	\$391,216	\$238,157	\$4,791,762
Prof - Radiology	\$316,444	\$275,749	\$336,852	\$353,922	\$334,059	\$366,768	\$1,983,793	\$349,465	\$354,773	\$376,945	\$365,296	\$367,403	\$390,102	\$380,488	\$398,081	\$446,100	\$425,762	\$370,044	\$217,662	\$4,442,120
Prof - Transportation	\$227,811	\$224,717	\$210,818	\$228,287	\$241,256	\$223,612	\$1,356,501	\$266,604	\$256,113	\$245,427	\$252,917	\$245,771	\$248,823	\$247,141	\$245,988	\$246,472	\$234,124	\$184,320	\$108,109	\$2,781,810
Prof - Other	\$1,140,638	\$918,911	\$1,032,908	\$1,048,377	\$981,450	\$1,003,200	\$6,125,485	\$1,163,708	\$1,302,893	\$1,266,364	\$1,250,351	\$1,196,199	\$1,225,570	\$1,243,415	\$1,394,782	\$1,505,046	\$1,418,727	\$1,295,526	\$641,969	\$14,904,551
Capitation Payments	\$1,934,359	\$1,934,247	\$1,884,811	\$1,861,714	\$1,836,409	\$1,844,550	\$11,296,089	\$1,822,848	\$1,962,961	\$1,900,449	\$1,916,436	\$1,915,371	\$1,987,152	\$1,580,916	\$1,541,995	\$1,548,400	\$1,560,919	\$1,527,864	\$1,518,547	\$20,783,856
Subcontractor Payments for Medical Services	\$42,562	\$78,527	\$47,520	\$91,856	\$65,378	\$65,718	\$391,562	\$110,484	\$117,730	\$122,161	\$119,334	\$102,446	\$84,680	\$96,865	\$102,925	\$109,327	\$111,393	\$80,650	\$47,327	\$1,205,321
Other Medical (provide description)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Behavioral Health</b>																				
Inpatient Payments by the Claims Processing System	\$878,512	\$734,249	\$811,633	\$910,228	\$967,125	\$878,574	\$5,180,322	\$1,011,906	\$1,058,080	\$1,032,839	\$1,010,881	\$925,493	\$1,195,962	\$1,157,108	\$1,106,491	\$1,141,140	\$1,155,906	\$973,248	\$22,088	\$11,791,141
Outpatient Payments by the Claims Processing System	\$1,069,531	\$845,555	\$968,872	\$967,603	\$924,058	\$962,154	\$5,737,773	\$967,770	\$957,903	\$921,835	\$1,225,390	\$1,132,067	\$1,227,127	\$1,159,616	\$1,315,038	\$1,432,614	\$1,262,409	\$896,466	\$314,496	\$12,812,730
Supported Housing Payments by the Claims Processing System	\$81,509	\$70,262	\$72,703	\$73,209	\$85,604	\$93,038	\$476,325	\$95,222	\$100,405	\$110,640	\$141,598	\$158,394	\$167,744	\$158,300	\$183,490	\$221,937	\$204,487	\$187,911	\$57,841	\$1,787,970
Intensive Outpatient Payments by the Claims Processing System	\$18,919	\$26,058	\$31,227	\$25,403	\$18,912	\$29,578	\$150,097	\$42,150	\$38,352	\$33,239	\$48,514	\$52,656	\$42,733	\$34,372	\$39,353	\$32,791	\$31,163	\$31,884	\$7,977	\$435,184
Partial Hospitalization Payments by the Claims Processing System	\$9,079	\$22,800	\$22,315	\$22,732	\$45,019	\$39,532	\$161,477	\$36,544	\$39,450	\$18,150	\$12,900	\$19,248	\$33,400	\$24,324	\$22,130	\$33,110	\$28,550	\$13,600	\$5,800	\$287,205
In Home Payments by the Claims Processing System	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Transportation Payments by the Claims Processing System	\$13,056	\$12,714	\$12,909	\$16,268	\$16,861	\$13,944	\$85,754	\$16,684	\$18,790	\$17,069	\$33,245	\$30,006	\$35,843	\$33,936	\$37,131	\$41,590	\$30,222	\$28,579	\$13,458	\$336,554
Twenty-Three Hour Payments by the Claims Processing System	\$0	\$0	\$0	\$82	\$0	\$962	\$1,044	\$0	\$105	\$0	\$409	\$0	\$110	\$383	\$482	\$2,673	\$213	\$343	\$1,978	\$6,696
CMHA Capitation Payments	\$98,113	\$98,113	\$98,113	\$99,341	\$101,015	\$102,285	\$596,981	\$103,647	\$105,847	\$108,934	\$109,034	\$110,240	\$111,699	\$113,419	\$114,823	\$117,988	\$119,236	\$117,774	\$118,793	\$1,351,433
Other Capitation Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Grant Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Non-FFS Inpatient	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Subcontractor Payments for Mental Health and Substance Abuse S	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Crisis Services Team Pass Through	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Less:																				
Recoveries not Reflected in Claims Payments	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total Payments	\$26,513,593	\$23,644,393	\$26,108,143	\$29,81																

**AMERIGROUP Tennessee, Inc. - Middle Region**  
**Report 2A**  
**For the Period Ending 06/30/16**

Member Months	Current Period 522,133	Year-To-Date Total 1,030,463	Previous Year Total 1,961,019
<b>Revenues:</b>			
TennCare Capitation	165,783,046	327,672,422	662,326,176
Investment	1,563,087	1,284,509	4,546,042
Other Revenues	3,775,807	7,538,154	22,785,457
<b>Total Revenues</b>	<b>171,121,940</b>	<b>336,495,085</b>	<b>689,657,675</b>
<b>Estimated Expenses:</b>			
<b>Hospital and Medical (w/o Mental Health)</b>			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	31,291,877	62,015,004	116,230,732
Inpatient Hospital Services	37,633,988	61,345,358	94,335,451
Outpatient Hospital Services	8,175,429	16,100,609	26,408,984
Emergency Room Services	9,648,013	16,974,060	27,234,878
Dental Services	-	-	-
Vision Services	499,551	989,911	1,887,456
Pharmacy Services	-	-	-
Home Health Services	3,547,859	8,064,862	15,589,217
Chiropractic Services	-	-	-
Radiology Services	4,721,673	8,676,278	15,679,086
Laboratory Services	2,513,324	4,745,749	10,310,560
Durable Medical Equipment Services	967,541	2,008,937	3,724,881
Transportation Services	4,091,062	7,715,481	14,026,005
Outside Referrals	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Medical and Hospital Services - Write-Ins	-	-	-
<b>Subtotal Medical and Hospital</b>	<b>103,090,317</b>	<b>188,636,249</b>	<b>325,427,250</b>
<b>Mental Health and Substance Abuse Services</b>			
Inpatient Psychiatric Facility Services	2,501,061	4,745,749	7,489,367
Inpatient Substance Abuse Treatment and Detox	1,647,964	3,144,423	5,083,661
Outpatient Mental Health Services	3,332,912	5,910,350	8,574,563
Outpatient Substance Abuse Treatment and Detox	2,163,424	3,843,183	5,820,088
Housing/Residential Treatment	1,529,461	3,289,998	5,132,733
Specialized Crisis Services	1,054,233	1,921,592	3,248,569
Psychiatric Rehab and Support Services	1,390,354	2,503,892	3,933,294
Case Management	4,938,398	8,792,738	12,947,524
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	-	-	-
PCP and Specialist Services	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
<b>Subtotal MH&amp;SAS</b>	<b>18,557,807</b>	<b>34,151,925</b>	<b>52,229,799</b>
<b>CHOICES</b>			
Nursing Facility Care	24,223,237	51,009,525	108,583,020
HCBS Services	8,558,686	17,352,555	33,422,508
<b>Subtotal CHOICES</b>	<b>32,781,923</b>	<b>68,362,080</b>	<b>142,005,528</b>
Value Based Payouts	-	-	-
Value Based Recoveries	-	-	-
Other Medical Incentive Pool and Withhold Adjustments	-	-	-
<b>Subtotal Hospital, Medical, MH&amp;SAS, CHOICES</b>	<b>154,430,047</b>	<b>291,150,254</b>	<b>519,662,577</b>
<b>LESS:</b>			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Coordination of Benefits	-	-	-
<b>Subtotal Reinsurance, Copay, Subrogation</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total Hospital, Medical, MH&amp;SAS</b>	<b>154,430,047</b>	<b>291,150,254</b>	<b>519,662,577</b>
<b>Administration:</b>			
Compensation	5,140,454	10,190,530	22,204,188
Direct and Allocated Admin expenses	7,717,989	17,028,850	36,177,502
Marketing	40,932	70,368	170,166
Interest Expense	-	-	-
Premium Tax Expense	9,988,064	19,927,167	39,687,795
Occupancy, Depreciation, and Amortization	218,740	425,926	653,316
Other Administration - Write-Ins	972,981	11,343,063	11,266,268
<b>Total Administration Expenses</b>	<b>24,079,159</b>	<b>58,985,904</b>	<b>110,159,236</b>
<b>Total Expenses</b>	<b>178,509,206</b>	<b>350,136,158</b>	<b>629,821,813</b>
Extraordinary Item	-	-	-
Provision for Income Tax	6,859,796	4,305,437	25,352,212
<b>Net Income (Loss)</b>	<b>(14,247,062)</b>	<b>(17,946,510)</b>	<b>34,483,650</b>
<b>Write-Ins for Other Revenues</b>			
HIF Reimbursement	3,775,807	7,538,154	22,785,457
<b>Total Other Revenues</b>	<b>3,775,807</b>	<b>7,538,154</b>	<b>22,785,457</b>
<b>Write-Ins for Other Medical and Hospital</b>			
<b>Total Other Medical and Hospital</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other MH &amp; SS</b>			
<b>Total Other MH &amp; SS</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other Administration</b>			
ACA Health Insurer Fee	(59,117)	8,895,922	5,271,430
Claims Adjustment Expense	(49,644)	(15,185)	(515,912)
DME/Vision Network Admin Fees	54,448	107,649	621,687
External Labor Services	266,928	887,908	1,245,560
Printing	100,555	203,287	387,873
Implementation Fee	-	-	(1,000,000)
Mailings	93,634	169,194	452,628
Bad Debt	201,434	672,486	2,825,666
Telecommunication	74,125	175,100	385,676
Travel	142,964	282,368	766,012
Liquidated Damages	71,960	(198,809)	567,517
Other Administration < \$175,000 YTD	75,694	163,142	258,131
<b>Total Other Administration</b>	<b>972,981</b>	<b>11,343,063</b>	<b>11,266,268</b>

**AMERIGROUP Tennessee, Inc. - East Region**  
**Report 2A**  
**For the Period Ending 06/30/16**

Member Months	Current Period	Year-To-Date Total	Previous Year Total
	433,876	843,288	1,480,312
<b>Revenues:</b>			
TennCare Capitation	154,371,028	298,485,493	485,675,994
Investment	878,071	353,331	2,616,855
Other Revenues	4,048,986	8,097,972	-
<b>Total Revenues</b>	<b>159,298,085</b>	<b>306,936,796</b>	<b>488,292,849</b>
<b>Estimated Expenses:</b>			
<b>Hospital and Medical (w/o Mental Health)</b>			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	25,412,835	50,764,883	90,418,645
Inpatient Hospital Services	22,841,086	47,375,461	83,993,323
Outpatient Hospital Services	7,336,075	12,334,440	19,287,355
Emergency Room Services	8,285,132	16,360,971	24,936,730
Dental Services	-	-	-
Vision Services	216,026	509,688	1,100,185
Pharmacy Services	-	-	-
Home Health Services	937,027	1,529,063	6,664,865
Chiropractic Services	-	-	-
Radiology Services	4,626,138	8,333,392	11,800,711
Laboratory Services	1,790,701	3,185,547	6,692,351
Durable Medical Equipment Services	478,284	1,223,250	2,751,460
Transportation Services	3,645,013	7,059,173	11,627,076
Outside Referrals	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Medical and Hospital Services - Write-Ins	-	-	-
<b>Subtotal Medical and Hospital</b>	<b>75,568,317</b>	<b>148,675,868</b>	<b>259,272,701</b>
<b>Mental Health and Substance Abuse Services</b>			
Inpatient Psychiatric Facility Services	3,312,574	5,249,782	6,207,361
Inpatient Substance Abuse Treatment and Detox	2,225,372	3,516,844	4,401,539
Outpatient Mental Health Services	2,272,874	3,797,173	5,709,450
Outpatient Substance Abuse Treatment and Detox	1,437,399	2,421,016	4,299,307
Housing/Residential Treatment	183,158	305,813	2,429,283
Specialized Crisis Services	544,757	993,891	2,009,478
Psychiatric Rehab and Support Services	1,177,424	2,013,266	2,839,616
Case Management	3,259,414	5,504,626	8,858,593
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	-	-	-
PCP and Specialist Services	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
<b>Subtotal MH&amp;SAS</b>	<b>14,412,972</b>	<b>23,802,411</b>	<b>36,754,627</b>
<b>CHOICES</b>			
Nursing Facility Care	40,860,033	73,879,215	90,478,478
HCBS Services	5,043,038	8,486,298	15,373,849
<b>Subtotal CHOICES</b>	<b>45,903,071</b>	<b>82,365,513</b>	<b>105,852,327</b>
Value Based Payouts	-	-	-
Value Based Recoveries	-	-	-
Other Medical Incentive Pool and Withhold Adjustments	-	-	-
<b>Subtotal Hospital, Medical, MH&amp;SAS, CHOICES</b>	<b>135,884,360</b>	<b>254,843,792</b>	<b>401,879,655</b>
<b>LESS:</b>			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Coordination of Benefits	-	-	-
<b>Subtotal Reinsurance, Copay, Subrogation</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total Hospital, Medical, MH&amp;SAS</b>	<b>135,884,360</b>	<b>254,843,792</b>	<b>401,879,655</b>
<b>Administration:</b>			
Compensation	4,731,641	9,155,731	15,980,912
Direct and Allocated Admin expenses	5,286,872	11,881,902	25,158,135
Marketing	34,195	58,418	129,964
Interest Expense	-	-	-
Premium Tax Expense	9,373,670	18,263,477	27,999,108
Occupancy, Depreciation, and Amortization	201,928	389,442	430,319
Other Administration - Write-Ins	710,556	9,161,999	14,277,631
<b>Total Administration Expenses</b>	<b>20,338,861</b>	<b>48,910,969</b>	<b>83,976,070</b>
<b>Total Expenses</b>	<b>156,223,221</b>	<b>303,754,761</b>	<b>485,855,725</b>
Extraordinary Item	-	-	-
Provision for Income Tax	(2,561,425)	(9,702,098)	4,421,461
<b>Net Income (Loss)</b>	<b>5,636,289</b>	<b>12,884,133</b>	<b>(1,984,337)</b>
<b>Write-Ins for Other Revenues</b>			
HIF Reimbursement	4,048,986	8,097,972	-
<b>Total Other Revenues</b>	<b>4,048,986</b>	<b>8,097,972</b>	<b>-</b>
<b>Write-Ins for Other Medical and Hospital</b>			
<b>Total Other Medical and Hospital</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other MH &amp; SS</b>			
<b>Total Other MH &amp; SS</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other Administration</b>			
ACA Health Insurer Fee	66,854	7,510,940	8,917,681
Claims Adjustment Expense	64,981	104,579	2,275,365
DME/Vision Network Admin Fees	34,495	72,803	672,098
External Labor Services	97,458	409,435	749,681
Printing	85,143	167,987	292,369
Implementation Fee	-	-	-
Mailings	78,147	139,107	339,813
Bad Debt	4,844	5,159	584
Telecommunication	73,895	155,674	279,605
Travel	130,763	245,125	477,377
Liquidated Damages	-	195,604	26,500
Other Administration < \$175,000 YTD	73,976	155,586	246,558
<b>Total Other Administration</b>	<b>710,556</b>	<b>9,161,999</b>	<b>14,277,631</b>

**AMERIGROUP Tennessee, Inc. - West Region**  
**Report 2A**  
**For the Period Ending 06/30/16**

Member Months	Current Period 408,381	Year-To-Date Total 806,743	Previous Year Total 1,429,059
<b>Revenues:</b>			
TennCare Capitation	127,863,882	253,748,457	432,065,197
Investment	945,350	494,448	2,079,256
Other Revenues	2,732,071	5,464,143	-
<b>Total Revenues</b>	<b>131,541,303</b>	<b>259,707,048</b>	<b>434,144,453</b>
<b>Estimated Expenses:</b>			
<b>Hospital and Medical (w/o Mental Health)</b>			
Capitated Physician Services	-	-	-
Fee-for Service Physician Services	20,957,507	49,030,648	92,450,287
Inpatient Hospital Services	17,175,153	43,760,473	81,820,499
Outpatient Hospital Services	4,829,772	10,607,917	18,651,320
Emergency Room Services	8,111,942	15,923,136	22,225,114
Dental Services	-	-	-
Vision Services	272,450	653,141	1,233,606
Pharmacy Services	-	-	-
Home Health Services	1,215,284	2,702,654	7,701,708
Chiropractic Services	-	-	-
Radiology Services	3,250,105	6,689,069	11,339,032
Laboratory Services	1,694,098	3,243,185	6,626,364
Durable Medical Equipment Services	864,652	1,554,026	2,595,488
Transportation Services	3,062,319	6,486,370	10,564,406
Outside Referrals	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Medical and Hospital Services - Write-Ins	-	-	-
<b>Subtotal Medical and Hospital</b>	<b>61,433,282</b>	<b>140,650,619</b>	<b>255,207,824</b>
<b>Mental Health and Substance Abuse Services</b>			
Inpatient Psychiatric Facility Services	2,317,760	4,481,901	6,176,331
Inpatient Substance Abuse Treatment and Detox	1,552,681	2,995,441	3,624,356
Outpatient Mental Health Services	1,384,519	2,499,955	4,510,034
Outpatient Substance Abuse Treatment and Detox	825,199	1,508,982	3,024,193
Housing/Residential Treatment	840,666	1,283,761	2,673,020
Specialized Crisis Services	402,391	788,274	1,729,875
Psychiatric Rehab and Support Services	550,679	1,126,106	2,100,159
Case Management	1,885,075	3,445,884	7,081,849
Forensics	-	-	-
Other Judicial	-	-	-
Pharmacy	-	-	-
Lab Services	-	-	-
Transportation	-	-	-
Occupancy, Depreciation and Amortization	-	-	-
Other Mental Health and Substance Abuse Services	-	-	-
PCP and Specialist Services	-	-	-
Other Mental Health Services - Write-Ins	-	-	-
<b>Subtotal MH&amp;SAS</b>	<b>9,758,970</b>	<b>18,130,304</b>	<b>30,919,817</b>
<b>CHOICES</b>			
Nursing Facility Care	33,782,123	57,971,928	71,728,192
HCBS Services	4,117,803	8,468,316	15,264,525
<b>Subtotal CHOICES</b>	<b>37,899,926</b>	<b>66,440,244</b>	<b>86,992,717</b>
Value Based Payouts	-	-	-
Value Based Recoveries	-	-	-
Other Medical Incentive Pool and Withhold Adjustments	-	-	-
<b>Subtotal Hospital, Medical, MH&amp;SAS, CHOICES</b>	<b>109,092,178</b>	<b>225,221,167</b>	<b>373,120,358</b>
<b>LESS:</b>			
Net Reinsurance Recoveries Incurred	-	-	-
Copayments	-	-	-
Subrogation and Coordination of Benefits	-	-	-
<b>Subtotal Reinsurance, Copay, Subrogation</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Total Hospital, Medical, MH&amp;SAS</b>	<b>109,092,178</b>	<b>225,221,167</b>	<b>373,120,358</b>
<b>Administration:</b>			
Compensation	4,036,770	8,082,485	14,118,791
Direct and Allocated Admin expenses	4,654,464	10,924,304	24,126,981
Marketing	35,595	67,456	123,028
Interest Expense	-	-	-
Premium Tax Expense	7,718,751	15,435,750	24,907,112
Occupancy, Depreciation, and Amortization	156,344	307,938	367,238
Other Administration - Write-Ins	198,053	7,859,519	12,660,235
<b>Total Administration Expenses</b>	<b>16,799,977</b>	<b>42,677,452</b>	<b>76,303,385</b>
<b>Total Expenses</b>	<b>125,892,155</b>	<b>267,898,619</b>	<b>449,423,743</b>
Extraordinary Item	-	-	-
Provision for Income Tax	(5,286,324)	1,481,877	(2,860,337)
<b>Net Income (Loss)</b>	<b>10,935,472</b>	<b>(9,673,448)</b>	<b>(12,418,953)</b>
<b>Write-Ins for Other Revenues</b>			
HIF Reimbursement	2,732,071	5,464,143	-
<b>Total Other Revenues</b>	<b>2,732,071</b>	<b>5,464,143</b>	<b>-</b>
<b>Write-Ins for Other Medical and Hospital</b>			
<b>Total Other Medical and Hospital</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other MH &amp; SS</b>			
<b>Total Other MH &amp; SS</b>	<b>-</b>	<b>-</b>	<b>-</b>
<b>Write-Ins for Other Administration</b>			
ACA Health Insurer Fee	(125,000)	6,558,350	7,933,625
Claims Adjustment Expense	(280,005)	(211,223)	1,876,133
DME/Vision Network Admin Fees	36,078	76,131	550,425
External Labor Services	161,480	499,982	805,194
Printing	79,557	160,141	281,477
Implementation Fee	-	-	-
Mailings	73,413	132,648	326,823
Bad Debt	21,518	21,518	652
Telecommunication	61,529	138,775	257,164
Travel	107,858	204,786	414,383
Liquidated Damages	-	140,791	4,500
Other Administration < \$175,000 YTD	61,625	137,620	209,859
<b>Total Other Administration</b>	<b>198,053</b>	<b>7,859,519</b>	<b>12,660,235</b>

**EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
0299997. Group subscriber subtotal	0	0	0	0	0	0
0299998. Premiums due and unpaid not individually listed						
0299999. Total group	0	0	0	0	0	0
0399999. Premiums due and unpaid from Medicare entities	359,317					359,317
0499999. Premiums due and unpaid from Medicaid entities	31,115,914					31,115,914
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0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	31,475,231	0	0	0	0	31,475,231

TN-18

STATEMENT AS OF JUNE 30, 2016 OF THE Amerigroup Tennessee, Inc.

**EXHIBIT 3 - HEALTH CARE RECEIVABLES**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
Express Scripts	1,646,913			1,758,516	1,758,516	1,646,913
CVS Caremark				12,301	12,301	
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed						
0199999. Total Pharmaceutical Rebate Receivables	1,646,913	0	0	1,770,817	1,770,817	1,646,913
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	584,434	370,119	625,812	2,255,611	3,835,976	
0299999. Total Claim Overpayment Receivables	584,434	370,119	625,812	2,255,611	3,835,976	0
0399998. Aggregate Loans and Advances to Providers Not Individually Listed				135,332	135,332	
0399999. Total Loans and Advances to Providers	0	0	0	135,332	135,332	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed						
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed						
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Receivables Not Individually Listed	231,029			3,847	234,876	
0699999. Total Other Receivables	231,029	0	0	3,847	234,876	0
0799999 Gross health care receivables	2,462,376	370,119	625,812	4,165,607	5,977,001	1,646,913

## EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1 Name of Affiliate	2 1 - 30 Days	3 31 - 60 Days	4 61 -90 Days	5 Over 90 Days	6 Nonadmitted	Admitted	
						7 Current	8 Non-Current
Anthem Insurance Companies, Inc.	461,772					461,772	
Blue Cross of California	209,184					209,184	
0199999 Total - Individually listed receivables .....	670,956					670,956	
0299999 Receivables not individually listed .....	56,756					56,756	
0399999 Total gross amounts receivable .....	727,712					727,712	