Health Maintenance Organization
Quarterly Minimum Statutory Net Worth Calculation in accordance with I.C. 27-13-12-3

_____ _____ _____
(Company Name) *(NAIC Company Code)* (Type of organization; e.g., staff, group, IPA, network or direct contract model.)

Minimum Net Worth Calculation - Part 1
Note: The quarterly calculation differs from the annual calculation in that amounts must be annualized.

A health maintenance organization shall maintain a minimum net worth equal to the greater of:

						ANNUALIZED **
(1)	One million dollars ($1,000,000)				$1,000,000 (1)	$1,000,000
(2)	Two percent of of the first $150,000,000 premium revenues as reported on the most recent financial statement *(page 4, column 2, Net Premium Income =< $150,000,000)*	$	X .02 =	$ (2A)		
	and 1% of premium revenues in excess of $150,000,000 *(page 4, column 2, Net Premium Income > $150,000,000)*	$	X .01 =	$ (2B)		
					$ (2) *(Sum of 2A and 2B)*	
(3)	The sum of three (3) months of uncovered health care expenditures, as reported on the most recent financial statement				(3) $	N/A
(4)	An amount equal to the sum of:					
	Health care expenditures reported on the most recent quarterly financial statement *(page 4, column 2, Total Medical & Hospital)*	$				
	Less: Expenditures paid on a capitated basis *(Company calculation)*	$				
	Less: Expenditures paid on a managed hospital payment basis *(Company calculation)*	$				
	8% of health care expenditures except those paid on a capitated basis or managed hospital payment basis as reported on the most recent financial statement	$	X .08 =	$ (4A)		
	4% of hospital expenditures paid on a managed hospital payment basis as reported on the most recent financial statement *(Company calculation)*	$	X .04 =	$ (4B)		
					$ (4) *(Sum of 4A and 4B)*	

Net Worth as of _____/_____/_____	$
Less: Minimum Net Worth required per I.C. 27-13-12-3 (the greater of annualized 1, 2, 3, or 4)	$
Excess / (Deficiency)	$

** Annualized = to annualize multiply amount by 4 for the March 31st filing, by 2 if the June 30th filing and by 4/3 for the September 30th filing.

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(Company Name)	*(NAIC Company Code)*	(Type of organization; e.g., staff, group, IPA, network or direct contract model.)

Minimum Net Worth Calculation - Part 2

Individually list all intermediaries and providers that received capitation greater than 5% of the HMO's total capitation. List in aggregate the other intermediaries and providers that received capitation less than 5% of the HMO's total capitation.

Year-to-date Health care expenditures reported on a capitated basis

Name of Provider/Intermediary	Capitation Amount
	$
Sub total	
Aggregate Amount	
Total	$

Individually list all intermediaries and providers that received payment on a managed hospital basis greater than 5% of the HMO's total managed hospital expense. List in aggregate the other intermediaries and providers that received less than 5% of the HMO's total managed hospital expense.

Year-to-date Health care expenditures reported on a managed hospital payment basis

Name of Provider/Intermediary	Capitation Amount
	$
Sub total	
Aggregate Amount	
Total	$