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

Excess / (Deficiency)
Revised 5/15/03

	(NAIC Company Code)	(Type of organization IPA, network or direction)	r; e.g., staff, group,	
Minimum Net Worth Calculation - Part 1		r., notion of anot		
A health maintenance organization shall maintain a minimum net worth equal to the greater of:				
One million dollars (\$1,000,000)			(1)	\$1,000,000
Based on annual premium revenues as reported on the most recent annual financial statement filed with the comm the total of two percent (2%) of annual premium revenues on the first one hundred fifty million dollars of premium	issioner, <u>\$</u> (page 4, column 2, Net Premium Income =< \$2	X <sub>.02</sub> = <u>\$</u>	(2A)	
and one percent (1%) of annual premium revenues (on the premium) in excess of one hundred fifty million dollars	\$ (page 4, column 2, Net Premium Income > \$1;	X <sub>.01</sub> = \$	(2B)	
	(page 4, column 2, Net 1 remiain meetic 2 4 ft	33,000,000)	(2) <b>\$</b> (Sum	of 2A and 2B)
An amount equal to the sum of three (3) months of uncovered health care expenditures, as reported on the most recent (annual) financial statement of the health maintenance organization filed with the commissioner under I.C. 2	7-13-8-2(a)(1);		(3) <u>\$</u>	
An amount equal to the sum of:				
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm	issioner	pital)		
	(page 4, column 2, Total Medical & Hos			
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm	(page 4, column 2, Total Medical & Hos\$  (note: this amount should be supported by the details	provided in Part 2)		
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm  Less: Expenditures paid on a capitated basis	(page 4, column 2, Total Medical & Hos	provided in Part 2)  provided in Part 2)	(4A)	
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm  Less: Expenditures paid on a capitated basis  Less: Expenditures paid on a managed hospital payment basis	(page 4, column 2, Total Medical & Hos	provided in Part 2)  provided in Part 2)  X .08 = \$  X .04 = \$	(4A) (4B)	
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm  Less: Expenditures paid on a capitated basis  Less: Expenditures paid on a managed hospital payment basis  Eight percent (8%) of annual health care expenditures except those paid on a capitated basis or manager hospital payment basis as reported on the most recent financial statement filed with the commissioner  Four percent (4%) of annual hospital expenditures paid on a managed hospital payment basis as reported on	(page 4, column 2, Total Medical & Hos	provided in Part 2)  provided in Part 2)  X .08 = \$  X .04 = \$	(4B) (4)\$	of 4A and 4B)
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm  Less: Expenditures paid on a capitated basis  Less: Expenditures paid on a managed hospital payment basis  Eight percent (8%) of annual health care expenditures except those paid on a capitated basis or manager hospital payment basis as reported on the most recent financial statement filed with the commissioner  Four percent (4%) of annual hospital expenditures paid on a managed hospital payment basis as reported on	(page 4, column 2, Total Medical & Hos	provided in Part 2)  provided in Part 2)  X .08 = \$  X .04 = \$	(4B) (4)\$	of 4A and 4B)
Total annual health care expenditures reported on the most recent (annual) financial statement filed with the comm  Less: Expenditures paid on a capitated basis	(page 4, column 2, Total Medical & Hos	provided in Part 2)  provided in Part 2)  X .08 = \$  X .04 = \$  provided in Part 2)	(4B) (4)\$	of 4A and 4B)

## (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 Individually list all intermediaries and providers that received payment on a managed than 5% of the HMO's total capitation. List in aggregate the other intermediaries hospital basis greater than 5% of the HMO's total managed hospital expense. List in and providers that received capitation less than 5% of the HMO's total capitation. aggregate the other intermediaries and providers that received less than 5% of the HMO's total managed hospital expense. Health care expenditures Health care expenditures reported on a reported on a capitated basis managed hospital payment basis Name of Provider/Intermediary Name of Provider/Intermediary **Capitation Amount Capitation Amount** Sub total Sub total

Aggregate Amount

Total

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Aggregate Amount

Total