



Exhibit of Premiums, Enrollment and Utilization - HMO

STATEMENT AS OF 12/31/2016 OF THE AMERIGROUP Ohio, Inc.

Affix Bar Code Here

NAIC Group Code 0671

HMO BUSINESS IN THE STATE OF OHIO

NAIC Company Code 10767

	1	Comprehensive (H & M.)		4	5	6	7	8	9	10	11	12	13
		2	3										
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Stop Loss	Disability Income	Long-Term Care
Total Members at end of:													
1. Prior Year													
2. First quarter													
3. Second Quarter													
4. Third Quarter													
5. Current Year													
6. Current Year Member Months													
Total Member Ambulatory Encounters for year:													
7. Physician													
8. Non-Physician													
9. Total													
10. Hospital Patient Days Incurred													
11. Number of Inpatient Admissions													
12. Health Premiums Written													
13. Life Premiums Direct													
14. Property/Casualty Premiums Written													
15. Health Premiums Earned													
16. Property/Casualty Premiums Earned													
17. Amount Paid for Provision of Health Care Services	-473,064									-473,064			
18. Amount incurred for Provision of Health Care Services	-473,064									-473,064			

** Quarterly Filing – Year to Date