



EDW Underwriting Reporting

Premium & Claims Summary Report – Paid Basis

Parameter Name	Parameter Values	Parameter Description
Customer	764341	TRANSMARITIME INC
Platform	EM	METAVANCE
Type of Customer	ENTERPRISE	CUSTOMER AND PLATFORM ABOVE ARE ENTERPRISE-LEVEL FIELDS
Auto Cross-Reference	YES	SELECT ALL SOURCE CUSTOMERS IN THE ENTERPRISE CUSTOMER
Division	BLANK	ALL SOURCE DIVISION IDS
Benefit ID	BLANK	ALL SOURCE CUSTOMER BENEFIT IDS
From Date	04-01-2020	
To Date	03-31-2022	
As Of Date	03-31-2022	
Reporting Level	ENT CUST	ENTERPRISE CUSTOMER
Product Line Codes	MEDICAL (Only product line code of Medical)	
Financial Product Codes	Display all Separately	



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Enterprise Platform: EM	Platform: ALL SRC PLATFORMS SELECTED	Financial Product: PPO
Ent Platform Name: METAVANCE	Customer: ALL SRC CUSTOMERS SELECTED	Type of Customer: ENTERPRISE
Enterprise Customer: 764341	MTV Div/CI Class: ALL SRC DIVISIONS SELECTED	Auto Cross-Ref: YES
Ent Customer Name: TRANSMARITIME INC	Benefit Plan: ALL SRC BENEFIT IDS SELECTED	Reporting Level: ENT CUST
Src Platform Name: ALL SOURCE PLATFORMS SELECTED	Group Number: ALL SRC CUSTOMERS SELECTED	From Date: 04-01-2020
Src Customer Name: ALL SOURCE CUSTOMERS SELECTED	MTV Ben/CAS Subgrp: ALL SRC BENEFIT IDS SELECTED	To Date: 03-31-2022
Division Name: ALL SOURCE DIVISIONS SELECTED	Product Line: MEDICAL	As of Date: 03-31-2022

***** SUBSCRIBER COVERAGE TYPES *****														
Date	EE Only	EE + Sp	EE + Ch	Family	Total	Members	Premium	Medical*	RX*	Med & Rx Total*				
04-2020	37	1	1	1	40	46	20,573	78,670	3,935	82,605				
05-2020	36	1	1	1	39	45	20,114	3,739	4,069	7,808				
06-2020	35	1	1	1	38	44	19,518	6,410	3,773	10,183				
07-2020	36	1	0	1	38	43	18,954	9,489	3,269	12,758				
08-2020	36	1	0	1	38	43	18,954	13,529	7,340	20,869				
09-2020	34	1	0	1	36	41	17,869	8,304	2,370	10,674				
10-2020	34	1	0	1	36	41	17,870	8,310	4,786	13,096				
11-2020	36	1	0	1	38	43	18,650	14,277	2,678	16,955				
12-2020	38	1	0	1	40	45	19,430	14,098	6,040	20,138				
01-2021	48	1	2	2	53	63	26,310	53,559	4,216	57,775				
02-2021	47	1	2	2	52	62	25,951	4,627	24	4,651				
03-2021	45	1	2	2	50	60	25,400	6,553	5,776	12,329				
					462	12	9	15	498	576	249,593	221,565	48,276	269,841

IBNR:	5,100
Total Cost PMPM*:	462.04
Premium PMPM:	433.32

***** SUBSCRIBER COVERAGE TYPES *****														
Date	EE Only	EE + Sp	EE + Ch	Family	Total	Members	Premium	Medical*	RX*	Med & Rx Total*				
04-2021	43	1	1	2	47	57	23,341	17,266	4,109	21,375				
05-2021	42	1	1	2	46	56	22,982	11,517	1,571	13,089				
06-2021	43	1	1	2	47	57	23,712	25,685	3,157	28,842				
07-2021	41	1	2	2	46	57	23,404	23,521	5,536	29,058				
08-2021	39	1	2	2	44	55	23,060	25,326	2,171	27,498				
09-2021	39	1	2	2	44	55	22,788	29,568	1,700	31,268				
10-2021	38	1	2	1	42	50	20,908	17,861	5,503	23,364				
11-2021	37	0	1	1	39	45	18,536	19,623	4,764	24,386				
12-2021	34	0	1	1	36	42	17,271	7,173	6,325	13,498				
01-2022	44	1	2	1	48	56	26,702	3,028	4,622	7,650				
02-2022	44	1	3	1	49	58	27,477	3,463	2,547	6,010				
03-2022	44	1	2	1	48	56	26,702	5,688	7,536	13,223				
					488	10	20	18	536	644	276,883	189,720	49,540	239,261

IBNR:	4,287
Total Cost PMPM*:	353.66
Premium PMPM:	429.94