

HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2022 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Maine corporation)

NAIC Grou	p Code 0001 000 (Prio		de 95517 Employer's	ID Number01-	0504252
Organized under the Laws of	Maine		State of Domicile or Port of Er	ntry.	ME
Country of Domicile		United States	of America		
Licensed as business type:		Health Maintenand	e Organization		
Is HMO Federally Qualified? Yes [] No[X]				
Incorporated/Organized	10/03/1995		Commenced Business _		04/10/1996
Statutory Home Office	191 Marginal Way, Su			Portland, ME, US 0	
	(Street and Number		(Town, State, Country	and Zip Code)
Main Administrative Office		151 Farmingto (Street and			
	ford, CT, US 06156 , State, Country and Zip Code)	(A	800-872-3862 rea Code) (Telephone	
Mail Address	151 Farmington Avenue, RT	,	•	Hartford, CT, US 0	•
	(Street and Number or P.O. B			Town, State, Country	
Primary Location of Books and Rec	ords	191 Marginal \			
	tiand, ME, US 04101	(Street and		800-872-3862	
(City or Town	, State, Country and Zip Code)	(A	rea Code) (Telephone	Number)
Internet Website Address		www.aetr	ia.com		
Statutory Statement Contact	Kim E. (Nan			215-775-6 (Area Code) (Telep	
	ryReporting@aetna.com	,		860-262-7767	
	(E-mail Address)			(FAX Number)	
President _	Duncan Graeme S	OFFICE Stuart Pri	ERS ncipal Financial Officer and C	controller S	Steven Matthew Conte #
Vice President and Secretary					
Derek Scott Blunt, Senior In Whitney Dorothy Lavoie, As		OTHE Frank Ferris Chronister I Gregory Stephen Mar	II, Assistant Controller		ler, Assistant Controller
Vincent John Lisco		DIRECTORS OF Spence Willi	TRUSTEES		can Graeme Stuart
The officers of this reporting entity be all of the herein described assets we statement, together with related exh condition and affairs of the said report in accordance with the NAIC Annual rules or regulations require difference. Furthermore, the scope of this attest (except for formatting differences dienclosed statement.	ere the absolute property of the schedules and explanation riting entity as of the reporting Statement Instructions and Ales in reporting not related to actation by the described office are to electronic filling) of the explanation of the ex	the said reporting entity, one therein contained, and period stated above, and occounting Practices and president also includes the relationship of the said occounting the relationship of the relationship o	ree and clear from any liens nexed or referred to, is a full a of its income and deductions Procedures manual except to cocedures, according to the be ed corresponding electronic felectronic filing may be reque	or claims thereon, exind true statement of all therefrom for the period the extent that: (1) step of their information, filing with the NAIC, we set of their information, we set of the various regulations.	cept as herein stated, and that this I the assets and liabilities and of the d ended, and have been completed ate law may differ; or, (2) that state knowledge and belief, respectively, hen required, that is an exact copy ators in lieu of or in addition to the
President	art	Edward Chun Vice President an	•		ven Matthew Conte lancial Officer and Controller
State of Pennsylvania County of Montgomery		of Connecticut nty of Hartford		State of Penn County of Monte	-
Subscribed and sworn to before me	this Subs	cribed and sworn to befo	re me this, 2022	2010	orn to before me this August , 2022
NOTARY PUBLIC (Seal)	NOTA	ARY PUBLIC (Seal)		NOTARY PUBLIC	(Seal)
Commonwealth of Pennsylvania KIM E. ROTH, Notary Pu Montgomery County My Commission Expires April 7 Commission Number 1141	25, 2025			My Commiss	of Pennsylvania - Notary Seal ROTH, Notáry Public Intgomery County Ion Expires April 25, 2025 Ision Number 1141410

a. Is this an original filing? Yes [X] No []



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2022 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Maine corporation)

NAIC G	roup Code 0001 (Current)	NAIC	Company Code	e <u>95517</u>	Employer's I	D Number _	01-0504	252	
Organized under the Laws of	(laine	St	ate of Domicile	or Port of En	itry		ME	
Country of Domicile		.,	United States of	f America					
Licensed as business type:		Heal	Ith Maintenance	Organization		.,			
Is HMO Federally Qualified? Ye	s[] No[X]								
Incorporated/Organized	10/03/1998	5		Commenced E	Business		04/1	0/1996	
Statutory Home Office	191 Marginal V	Vay, Suite G				Portland, Mi	E, US 04101		
	(Street and	Number)			(City or	Town, State, 0	Country and	Zip Code)	
Main Administrative Office			151 Farmingtor						
ŀ	lartford, CT, US 06156		(Street and N	lumber)		800-87	72-3862		
	wn, State, Country and Zip	Code)		· · · · · · · · · · · · · · · · · · ·	(A	rea Code) (Tel	ephone Num	nber)	
Mail Address	151 Farmington Avenu	ue, RT21					, US 06156		
	(Street and Number or	P.O. Box)			(City or	Town, State, 0	Country and 2	Zip Code)	
Primary Location of Books and R	ecords		191 Marginal W (Street and N						
	Portland, ME, US 04101		(Sireer and N	umber)			2-3862		
(City or To	wn, State, Country and Zip	Code)			(Aı	rea Code) (Tel	ephone Num	iber)	
Internet Website Address			www.aetna	a.com					
Statutory Statement Contact		Kim E. Roth					15-775-6508		
Stat	utoryReporting@aetna.cor	(Name)				,) (Telephone 32-7767	Number)	
Otal	(E-mail Address)						lumber)		
			OFFICE	RS					
		eme Stuart	Prin	cipal Financial C	Officer and C	ontroller	Steve	n Matthew Cont	e#
Vice President and Secretary	Edward Ch	nung-I Lee							
Derek Scott Blunt, Senior	Investment Officer	Frank For	OTHE	R , Assistant Cont	roller	D	eter Keller A	Assistant Control	ller
Whitney Dorothy Lavoie,				no, Vice Preside				ce President and	
Vincent John Li	scomb, Jr.	DIRE	ECTORS OR Spence Willia				Duncan G	Graeme Stuart	
The officers of this reporting entity all of the herein described assets statement, together with related econdition and affairs of the said rein accordance with the NAIC Anrules or regulations require differentlemore, the scope of this a (except for formatting differences enclosed statement.	s were the absolute prope exhibits, schedules and exporting entity as of the rep- ural Statement Instructions ences in reporting not relate ttestation by the described	rty of the said repolanations therein orting penod states and Accounting bed to accounting proficers also incl	conting entity, for contained, annoted above, and of Practices and Fractices and produces the relate	ee and clear from the control of its income and or occurred man occurres, accord to corresponding	om any liens to, is a full and deductions ual except to ding to the be gelectronic f	or claims ther nd true statement therefrom for the the extent that est of their infor- iling with the N	eon, except and of all the and the period end at: (1) state lar mation, know NAIC, when re-	as herein stated assets and liabil ded, and have be aw may differ, or vledge and belie required, that is	d, and that this lities and of the een completed r, (2) that state ef, respectively. an exact copy
Duncan Graeme	Stuart		Edward Chung					Matthew Conte	
President		Vice	e President and	Secretary		Prin	cipal Financia	al Officer and Co	ontroller
State of Pennsylvania County of Montgomery		State of Co					Pennsylva Montgome		
Subscribed and sworn to before r	ne this	Subscribed and	sworn to before	e me this		Subscribed	and sworn t	o before me this	\$
day of	, 2022	$25^{\text{fh}}_{\text{day of}}$	Tule	1,2	022	day	of	August	, 2022
		agrit	aia N	lentar	20				
NOTARY PUBLIC (Seal)		NOTARY PUBL	IC (Seai)			NOTARY F	PUBLIC (Sea	1)	

ميات	CYNTHIA MONTANO
£\$\$\$	CYNTHIA MONTANO Notary Public, State of Connecticut My Commission Expires Mar. 31, 2026
	My Commission Expires Mar. 31, 2026

Is this an original filing?	Yes [X]	No [}
16			

- b. If no,
 - State the amendment number.....
 Date filed
 Number of pages attached.......

ASSETS

			Current Statement Date		4
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	27,938,155	0		29,894,579
	Stocks:				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	1,766,821	0	1,766,821	0
3.	Mortgage loans on real estate:				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens		0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5	Cash (\$0), cash equivalents				
	(\$				
	investments (\$	13 097 949	0	13,097,949	8 869 354
6.	Contract loans (including \$0 premium notes)				0
7.	Derivatives				0
8.	Other invested assets				00
9.	Receivables for securities				0
10.	Securities lending reinvested collateral assets				0
11.	Aggregate write-ins for invested assets				0
12.	Subtotals, cash and invested assets (Lines 1 to 11)			42,802,925	
	Title plants less \$				
	only)	0	0	0	0
14.	Investment income due and accrued		0		142,449
	Premiums and considerations:	,		,,	
	15.1 Uncollected premiums and agents' balances in the course of collection	203.978	55.715	148,263	84.469
	15.2 Deferred premiums, agents' balances and installments booked but	,	, , , , ,	, , , , , , , , , , , , , , , , , , , ,	
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$5, 163, 650)	5,925,006	0	5,925,006	4,581,181
16.	Reinsurance:	, ,		, ,	, ,
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies			0	0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans				437,734
	Current federal and foreign income tax recoverable and interest thereon				449,559
	Net deferred tax asset				138,448
19.	Guaranty funds receivable or on deposit			0	0
20.	Electronic data processing equipment and software				0
21.	Furniture and equipment, including health care delivery assets				
	(\$0)	0	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0
23.	Receivables from parent, subsidiaries and affiliates			1,928,378	0
24.	Health care (\$1,413,774) and other amounts receivable			1,413,774	1,202,225
25.	Aggregate write-ins for other than invested assets		0	0	39,994
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	52,699,641	55,720	52,643,921	45,839,992
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	52,699,641		52,643,921	45,839,992
20.	DETAILS OF WRITE-INS	02,000,011	00,120	02,010,021	10,000,002
1101.	DETAILS OF WRITE-INS				
1101.					
1102.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				n
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0		0	0
2501.	Current state income tax receivable	_	-	_	39,994
					,
2502.					
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page			0	0
		0		0	39,994
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	l U	U	U	39,994

LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP	117 (2 / (11)	Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$256, 181 reinsurance ceded)	14,501,181	680,992	15, 182, 173	11,663,883
2.	Accrued medical incentive pool and bonus amounts	2,745,996	0	2,745,996	2,872,875
3.	Unpaid claims adjustment expenses	193,958	0	193,958	179,905
4.	Aggregate health policy reserves, including the liability of				
	\$1,449,653 for medical loss ratio rebate per the Public				
	Health Service Act	3,961,235	0	3,961,235	4,007,444
5.	Aggregate life policy reserves		0	0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves				4,230
8.	Premiums received in advance				
9.	General expenses due or accrued			74,395	1,246
10.1					1,270
10.1	9 1 3	000 000	0	000 000	0
	(including \$0 on realized gains (losses))		0	·	0
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				0
13.	Remittances and items not allocated	0	0	0	3,323
14.	Borrowed money (including \$0 current) and				
	interest thereon \$0 (including				
	\$0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates	0	0	0	2,607,412
16.	Derivatives			0	0
17.	Payable for securities				0
18.	Payable for securities lending			0	0
19.	Funds held under reinsurance treaties (with \$0				
19.	authorized reinsurers, \$				
		070 500	0	070 500	101 051
	reinsurers and \$	270,596	0	270,596	121,051
20.	Reinsurance in unauthorized and certified (\$0)				
	companies				1,271
21.	Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22.	Liability for amounts held under uninsured plans	3,736,853	0	3,736,853	1,030,889
23.	Aggregate write-ins for other liabilities (including \$				
	current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	25,809,776	680,992	26,490,768	22,527,356
25.	Aggregate write-ins for special surplus funds		xxx	0	0
26.	Common capital stock				1,000,000
27.	Preferred capital stock				0
28.	Gross paid in and contributed surplus				8.700.000
29.	Surplus notes				0
30.	Aggregate write-ins for other than special surplus funds				0
			XXX		
31.	Unassigned funds (surplus)			10,453,153	
32.	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26				
	\$0)	XXX	XXX	0	0
	32.20 shares preferred (value included in Line 27				
	\$0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	26 , 153 , 153	23,312,636
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	52,643,921	45,839,992
	DETAILS OF WRITE-INS				
2301.					
2301.					
2302.					
2398.	Summary of remaining write-ins for Line 23 from overflow page				0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.					
2502.					
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	0
3001.		XXX	XXX		
3002.			XXX		
3003.			XXX		
	Summary of remaining write-ins for Line 30 from overflow page		XXX		0
3098.				0	
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	U	0

STATEMENT OF REVENUE AND EXPENSES

		Current Y	9	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1. N	Member Months	XXX	98,570	85,271	174,662
2. N	Net premium income (including \$0 non-health				
	premium income)	XXX	79,332,981	64,494,927	130,364,522
3. 0	Change in unearned premium reserves and reserve for rate credits	XXX	621	(66,981)	1, 194, 654
4. F	ee-for-service (net of \$	XXX	0	0	0
	Risk revenue				0
	Aggregate write-ins for other health care related revenues				0
	Aggregate write-ins for other non-health revenues				0
	otal revenues (Lines 2 to 7)	XXX	79,333,602	64,427,946	131,559,176
	lospital and Medical:				
	lospital/medical benefits	· · · ·			
	Other professional services		, ,	2,216,063	, ,
	Outside referrals		, ,		2,034,964
	Emergency room and out-of-area		, , , , , , , , , , , , , , , , , , , ,	1,988,204 7,810,869	4,673,242
	Prescription drugs			, ,	
	ncentive pool, withhold adjustments and bonus amounts				
	Subtotal (Lines 9 to 15)				113.334.110
	Less:	0,270,020 [01 ,244 ,000		110,004,110
	let reinsurance recoveries	0	722,720	433,356	1 207 903
	otal hospital and medical (Lines 16 minus 17)				112,126,207
	Non-health claims (net)				0
	Claims adjustment expenses, including \$				
20.	containment expenses	0	1,442,482	1.142.888	2.435.220
21. 0	General administrative expenses				12,481,963
	ncrease in reserves for life and accident and health contracts	-		,,	
	(including \$0 increase in reserves for life only)	0	(71,209)	12,929	27,638
23. T	otal underwriting deductions (Lines 18 through 22)				127,071,028
	Net underwriting gain or (loss) (Lines 8 minus 23)		3,939,205	2,867,898	4,488,148
	Net investment income earned			499,748	908,052
26. N	let realized capital gains (losses) less capital gains tax of				
	\$(107,630)		(479,967)	(115,915)	(163,232)
	let investment gains (losses) (Lines 25 plus 26)	0	(28,085)	383,833	744,820
28. N	let gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$0)				
	(amount charged off \$0)]		0	0	0
	Aggregate write-ins for other income or expenses	0	0	0	0
30. N	let income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	3 911 120	3,251,731	5,232,968
	Federal and foreign income taxes incurred				914,458
	Net income (loss) (Lines 30 minus 31)	XXX	3,122,828	2,662,435	4,318,510
	DETAILS OF WRITE-INS	7001	0,122,020	2,002,100	.,0.0,0.0
0601.		XXX			
0602.		XXX			
0603.					
	Summary of remaining write-ins for Line 6 from overflow page			0	0
	otals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		1001	-		
0702					
0702					
	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	
	otals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	٥
1401.	, , , , , , , , , , , , , , , , , , , ,	^^^	0	0	0
1402 1403					
		0			^
	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
	otals (Lines 1401 through 1403 plus 1498)(Line 14 above)	U	U	U	0
2901					
2902					
2903					
	Summary of remaining write-ins for Line 29 from overflow page			0	0
2999. T	otals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	1 Current Year to Date	Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT	0 300	10 2 310	333333
33.	Capital and surplus prior reporting year	23,312,636	22,004,213	22,004,213
34.	Net income or (loss) from Line 32		2,662,435	4,318,510
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$(57, 116)			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets			
40	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			0
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)			0
	44.3 Transferred to surplus		0	0
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)		0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders			(3,300,000
47.	Aggregate write-ins for gains or (losses) in surplus			0
48.	Net change in capital & surplus (Lines 34 to 47)		(97.675)	1,308,423
49.	Capital and surplus end of reporting period (Line 33 plus 48)	26,153,153	21,906,538	23,312,636
	DETAILS OF WRITE-INS	==,,	,,,	,
4701.				
4701.				
4702. 4703.				
4703. 4798.	Summary of remaining write-ins for Line 47 from overflow page		٥	Λ
+1 90.	Outsimary of remaining write-ins for Line 47 Horn overflow page	0	0	0

CASH FLOW

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations	To Bate	10 Date	December 01
1.	Premiums collected net of reinsurance	77,947,048	65,422,941	130,361,27
2.	Net investment income	464,946	491,962	899,410
3.	Miscellaneous income	0	0	1
4.	Total (Lines 1 to 3)	78,411,994	65,914,903	131,260,68
5.	Benefit and loss related payments	63,342,693	51,893,322	107,423,57
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	
7.	Commissions, expenses paid and aggregate write-ins for deductions	5,827,582	4, 194, 406	13,392,45
8.	Dividends paid to policyholders	0	0	
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital			
	gains (losses)	(49, 125)	1,797,946	2,295,70
10.	Total (Lines 5 through 9)	69, 121, 150	57,885,674	123,111,73
11.	Net cash from operations (Line 4 minus Line 10)	9,290,844	8,029,229	8,148,95
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	2,716,968	6,500,000	10,000,00
	12.2 Stocks	0	0	
	12.3 Mortgage loans		0	
	12.4 Real estate			
	12.5 Other invested assets	0	0	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	20	(53)	(14
	12.7 Miscellaneous proceeds	_	250,000	
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		6,749,947	9,999,85
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	1.399.528	9.311.718	15.147.33
	13.2 Stocks			
	13.3 Mortgage loans	, , ,		
	13.4 Real estate			
	13.5 Other invested assets		0	
	13.6 Miscellaneous applications	0	0	
	13.7 Total investments acquired (Lines 13.1 to 13.6)		9,311,718	15,147,33
14.	Net increase (or decrease) in contract loans and premium notes	0,003,000	0	10, 147,00
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)		(2,561,771)	(5,147,47
10.	Net dash non investments (Ente 12.0 hintes Ente 10.7 and Ente 14)	(072,000)	(2,001,111)	(0, 147, 47)
16.	Cash from Financing and Miscellaneous Sources Cash provided (applied):			
	16.1 Surplus notes, capital notes		0	
	16.2 Capital and paid in surplus, less treasury stock			
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			3,300,00
			(5,194,664)	
47	16.6 Other cash provided (applied)	(4,369,309)	(3, 194,004)	110, 17
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(4,389,569)	(8,494,664)	(3,183,82
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	4,228,595	(3,027,206)	(182,35
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	8,869,354	9,051,710	9,051,71
	19.2 End of period (Line 18 plus Line 19.1)	13,097,949	6,024,504	8,869,35
_				
	upplemental disclosures of cash flow information for non-cash transactions: 01. Non-cash investment exchanges	0	563,121	1,561,48
		i l		

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 1	Compreh (Hospital &	ensive	4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees Health Benefit	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Plan	Medicare	Medicaid	Other
Total Members at end of:										
1. Prior Year	15 , 138	0	691	0	0	0	0	14,447	0	
2. First Quarter	16,265	0	747	0	0	0	0	15,518	0	
3. Second Quarter	16,903	0	761	0	0	0	0	16,142	0	
4. Third Quarter	0	0	0	0	0	0	0	0	0	
5. Current Year	0	0	0	0	0	0	0	0	0	
6. Current Year Member Months	98,570	0	4,523	0	0	0	0	94,047	0	
Total Member Ambulatory Encounters for Period:										
7 Physician	190,410	0	3,478	0	0	0	0	186,932	0	
8. Non-Physician	197,562	0	3,482	0	0	0	0	194,080	0	
9. Total	387,972	0	6,960	0	0	0	0	381,012	0	
10. Hospital Patient Days Incurred	5,216	0	69	0	0	0	0	5,147	0	
11. Number of Inpatient Admissions	679	0	11	0	0	0	0	668	0	
12. Health Premiums Written (a)	80,072,105	0	2,581,978	0	0	0	0	77,490,127	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	80,072,726	0	2,582,058	0	0	0	0	77,490,668	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
Amount Paid for Provision of Health Care Services	63,932,004	87	1,456,765	0	0	0	0	62,475,152	0	
18. Amount Incurred for Provision of Health Care Services	67,244,888	87	1,530,202	0	0	0	0	65,714,599	0	

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported) Aging Analysis of Unpaid Claims

Aging Analy	sis of Unpaid Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)	•		•	•		
• • • •						
0299999 Aggregate accounts not individually listed-uncovered	20,340	585	(4)	18,098	944	39,963
0399999 Aggregate accounts not individually listed-covered	2,618,575		(69)		16,283	2,957,052
0499999 Subtotals	2,638,915	10,680	(73)	330,266	17,227	2,997,015
0599999 Unreported claims and other claim reserves						12,441,339
0699999 Total amounts withheld						0
0799999 Total claims unpaid					·	15,438,354
0899999 Accrued medical incentive pool and bonus amounts						2,745,996

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNP	AID - PRIOR YEAR - NET OF REINSU				т.	
	Claims		Liab		5	6
	Year to		End of Curre	ent Quarter		
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
Comprehensive (hospital and medical)	320,467	1,119,525	32,041	760,225	352,508	683,936
2. Medicare Supplement	0	0	0	0	0	0
Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare	6,232,147	53,207,014	171,286	14,222,464	6,403,433	10,984,177
7 Title XIX - Medicaid	0	0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	6,552,614	54,326,539	203,327	14,982,689	6,755,941	11,668,113
10. Healthcare receivables (a)	0	1,413,779	0	0	0	1,202,230
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	879,379	1,584,161	1,469,767	1,276,229	2,349,146	2,872,875
13. Totals (Lines 9-10+11+12)	7,431,993	54,496,921	1,673,094	16,258,918	9,105,087	13,338,758

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health Inc. (a Maine corporation) ("the Company"), indirectly a wholly-owned subsidiary of CVS Health Corporation ("CVS Health"), have been prepared in conformity with accounting practices prescribed or permitted by the Maine Department of Professional and Financial Regulation, Bureau of Insurance ("Maine Department") ("Maine Accounting Practices"). The Maine Department recognizes only statutory accounting practices prescribed or permitted by the State of Maine for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP").

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Maine for the periods ended June 30, 2022 and December 31, 2021 is as follows:

		SSAP#	F/S Page	F/S Line #	2022	2021
NET IN	NCOME					
(1)	Aetna Health Inc. (a Maine corporation) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 3,122,828	\$ 4,318,510
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4)	Net Income NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 3,122,828	\$ 4,318,510
SURPL	US					
(5)	Aetna Health Inc. (a Maine corporation) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 26,153,153	\$ 23,312,636
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:				,,	- ,- , :
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8)	Statutory Surplus NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 26,153,153	\$ 23,312,636

B. <u>Use of Estimates in the Preparation of the Financial Statements</u>

The preparation of these financial statements in conformity with Maine Accounting Practices requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and revenues and expenses. Actual results could differ from those estimates.

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) No significant change.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at, June 30, 2022,. Bonds include all investments whose maturity is greater than one year when purchased. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus.

Bonds are recorded as purchases or sales on the trade date.

The Company periodically reviews its bonds to determine whether a decline in fair value below the carrying value is other-than-temporary. For bonds, other than loan-backed and structured securities ("LB&SS") discussed in Note 1C. (6) below, an other-than-temporary impairment ("OTTI") shall be recorded if it is probable that the Company will be unable to collect all amounts due according to the contractual terms in effect at the date of acquisition. Declines deemed to be OTTI in the cost basis are recognized as realized capital losses. Yield-related impairments are deemed other-than-temporary when the Company intends to sell an investment at the reporting date before recovery of the cost of the investment.

The Company analyzes all relevant facts and circumstances for each investment when performing its analysis to determine whether an OTTI exists. Among the factors considered in evaluating whether a decline is other-than-temporary, management considers whether the decline in fair value results from a change in the quality of the investment security itself, whether the decline results from a downward movement in the market as a whole, the prospects for realizing the carrying value of the bond based on the investee's current and short-term prospects for recovery and other factors. The risks inherent in assessing the impairment of an investment include the risk that market factors may differ from the Company's expectations and the risk that facts and circumstances factored into its assessment may change with the passage of time. Unexpected changes to market factors and circumstances that were not present in past reporting periods may result in a current period decision to sell securities that were not other-than-temporarily-impaired in prior reporting periods.

The Company had no Securities Valuation Office-identified investments that are being reported at a different measurement method from the prior year annual statement.

(3) Common Stocks

Common stocks are recorded as purchases or sales on the trade date. Common stocks are carried at fair value. Declines in the cost basis deemed to be OTTI are recognized as realized capital losses.

- (4) through (5): No significant change.
- (6) Loan-Backed and Structured Securities

LB&SS are carried at amortized cost adjusted for unamortized premiums and discounts and are accounted for using the retrospective adjustment method. Premiums and discounts on loan-backed and structured securities are amortized using the scientific method over the estimated remaining term of the securities, adjusted for anticipated prepayments.

For LB&SS, the Company records OTTI when the fair value of the loan-backed or structured security is less than the amortized cost basis at the balance sheet date and (1) the Company intends to sell the investment, or (2) the Company does not have the intent and ability to retain the investment for the time sufficient to recover the amortized cost basis, or (3) the Company does not expect to recover the entire amortized cost basis of the security, even if it does not intend to sell the security and has the intent and ability to hold. If it is determined an OTTI has occurred because of (1) or (2), the amount of the OTTI is equal to the difference between the amortized cost and the fair value of the security at the Balance Sheet date and this difference is recorded as a realized capital loss. If it is determined an OTTI has occurred because of (3), the amount of the OTTI is equal to the difference between the amortized cost and the present value of cash flows expected to be collected, discounted at the loan-backed or structured security's effective interest rate and this difference is also accounted for as a realized capital loss.

(7) through (20): No significant change.

D. Going Concern

As of August 10, 2022, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or corrections of errors in the period ended June 30, 2022.

3. Business Combinations and Goodwill

No significant change.

4. <u>Discontinued Operations</u>

No significant change.

5. <u>Investments</u>

A. through C.: No significant change.

D. Loan-Backed Securities

- Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.
- (2) The Company did not recognize any other-than-temporary impairment ("OTTI") on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with Statements of Statutory Accounting Principles ("SSAP") No. 43R, Loan-Backed and Structured Securities ("SSAP No. 43R") at June 30, 2022.
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at the reporting date June 30, 2022.
- (4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at June 30, 2022 is as follows:
 - a. The aggregate amount of unrealized losses:

	1. Less than 12 Months	\$ (132,272)
	2. 12 Months or Longer	(27,272)
).	The aggregate related fair value of securities with unrealized losses:	
	1. Less than 12 Months	\$ 2,631,167
	2. 12 Months or Longer	229,691

- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at June 30, 2022 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.
- E. <u>Dollar Repurchase Agreements and/or Securities Lending Transactions</u>
 - (1) and (2): No significant change.

b.

- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of June 30, 2022.
- (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at June 30, 2022.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at June 30, 2022.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at June 30, 2022.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at June 30, 2022.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at June 30, 2022.
- N. The Company did not have any offsetting and netting of derivative, repurchase and reverse repurchase, and securities borrowing and securities lending assets or liabilities at June 30, 2022.
- O. through Q.: No significant change.
- R. The Company did not participate in any Qualified Cash Pools at June 30, 2022.
- 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

The Company did not have any derivative instruments at June 30, 2022.

9. <u>Income Taxes</u>

No significant change.

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

No significant change.

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at June 30, 2022.
- B. The Company did not have any Federal Home Loan Bank agreements at June 30, 2022.
- 12. <u>Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans</u>

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at June 30, 2022.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

No significant change.

16. <u>Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk</u>

No significant change.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. <u>Transfers of Receivables Reported as Sales</u>

No significant change.

- B. Transfer and Servicing of Financial Assets
 - (1) No significant change.
 - (2) and (3): The Company did not have any servicing assets or liabilities at June 30, 2022.
 - (4) The Company did not have any securitized financial assets at June 30, 2022.
 - (5) through (7): No significant change.
- C. Wash Sales
 - (1) In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio.
 - (2) The Company had no securities sold during the quarter ended June 30, 2022 and reacquired within 30 days of the sale date.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No significant change.

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

No significant change.

20. Fair Value Measurements

A.

(1) The Company carries unaffiliated common stocks at fair value in the financial statements. Certain bonds are also valued at the lower of cost or fair value as described in Note 1. The Company's financial instruments carried at fair value in the financial statements at June 30, 2022 is as follows:

Type of Financial Instrument	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
Common stocks	\$ 1,766,821	\$ —	\$ —	\$ —	\$ 1,766,821

- (2) There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2022.
- (3) Transfers in and out of all levels are recognized at the end of the reporting period of which the transfer occurred.
- (4) The Company's fair value measurement valuation techniques are described in B. below.
- (5) The Company did not have any derivative instruments at June 30, 2022.
- B. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:
 - Level 1 Unadjusted quoted prices for identical assets or liabilities in active markets.
 - **Level 2** Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.
 - Level 3 Developed from unobservable data, reflecting the Company's own assumptions.

Financial assets and liabilities are classified based upon the lowest level of input that is significant to the valuation. When quoted prices in active markets for identical assets and liabilities are available, the Company uses these quoted market prices to determine the fair value of financial assets and liabilities and classifies these assets and liabilities as Level 1. In other cases where a quoted market price for identical assets and liabilities in an active market is either not available or not observable, the Company estimates fair value using valuation methodologies based on available and observable market information or by using a matrix pricing model. These financial assets and liabilities would then be classified as Level 2. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

C. The carrying values and estimated fair values of the Company's financial instruments at June 30, 2022 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds, short-term, and cash equivalents	\$ 38,833,776	\$ 41,036,104	\$ 6,542,711	\$ 32,291,065	\$ —	\$ —	\$ —
Common stocks	\$ 1,766,821	\$ 1,766,821	\$ 1,766,821	\$	\$	\$	\$ —

In evaluating the Company's management of interest rate and liquidity risk and currency exposures, the fair values of all assets and liabilities should be taken into consideration, not only those presented above.

- D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.
- E. The Company has not elected to use the net asset value practical expedient to fair value to measure its investments.

21. Other Items

No significant change.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through August 10, 2022 for the statutory statement issued on August 11, 2022.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through August 10, 2022 for the statutory statement issued on August 11, 2022.

The Company had no known reportable non-recognized subsequent events.

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D.: No significant change.

E. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes [X] No []
- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year:

		AMOUNT
a.	Permanent ACA Risk Adjustment Program	
	Assets	
	1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments)	\$ 286
	Liabilities	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	24
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	24,133
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	(27,077)
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	6
b.	Transitional ACA Reinsurance Program	
	Assets	
	1. Amounts recoverable for claims paid due to ACA Reinsurance	_
	2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	_
	3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	_
	Liabilities	
	4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	_
	5. Ceded reinsurance premiums payable due to ACA Reinsurance	_
	6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	_
	Operations (Revenue & Expense)	
	7. Ceded reinsurance premiums due to ACA Reinsurance	_
	8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	_
	9. ACA Reinsurance contributions – not reported as ceded premium	_
c.	Temporary ACA Risk Corridors Program	
	Assets	
	1. Accrued retrospective premium due to ACA Risk Corridors	_
	Liabilities	
	2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	_
	Operations (Revenue & Expense)	
	3. Effect of ACA Risk Corridors on net premium income (paid/received)	_
	4. Effect of ACA Risk Corridors on change in reserves for rate credits	_

(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:

			I								
	Accrued Du Year on Bus	aring the Prior siness Written		Paid as of the r on Business	Diffe	rences	A	djustments			ances as of the ing Date
		mber 31 of the r Year	Written Befor	e December 31 rior Year	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
Premium adjustments receivable (including high risk pool payments)	\$ 3,490	s —	s –	s —	\$ 3,490	s —	\$ (3,490)	s —	A	s —	s —
Premium adjustments (payable) (including high risk pool premium)	_	260	_	_	_	260	_	15,408	В	_	15,668
Subtotal ACA Permanent Risk Adjustment Program	3,490	260	_	_	3,490	260	(3,490)	15,408		_	15,668
b. Transitional ACA Reinsurance Program											
Amounts recoverable for claims paid	_	_	_	_	_	_	_	_	С	_	_
2. Amounts recoverable for claims unpaid (contra liability)	_	_	_	_	_	_	_	_	D	_	_
3. Amounts receivable relating to uninsured plans	_	_	_	_	_	_	_	_	Е	_	_
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	_	_	_	_	_	_	_	_	F	_	_
5. Ceded reinsurance premiums payable	_	_	_	_	_	_	_	_	G	_	_
Liability for amounts held under uninsured plans	_	_	_	_	_	_	_	_	Н	_	_
7. Subtotal ACA Transitional Reinsurance Program	_	_	_	_	_	_	_	_		_	_
c. Temporary ACA Risk Corridors Program											
Accrued retrospective premium	_	_	_	_	_	_	_		Ι	_	
Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	J	_	-
3. Subtotal ACA Risk Corridors Program	_	_	_	_	_	_	_	_		_	-
d. Total for ACA Risk Sharing Provisions	\$ 3,490	\$ 260	\$ —	s –	\$ 3,490	\$ 260	\$ (3,490)	\$ 15,408		s —	\$ 15,668

Explanations of Adjustments

- A. Due to updates to the data available to the Company to calculate the risk adjustment.
- B. Due to updates to the data available to the Company to calculate the risk adjustment.
- (4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year:

Risk Corridors Program Year	Accrued Du Year on Bus	ring the Prior		Paid as of the	Diffe	rences	A	djustments			ances as of the
										^	
		mber 31 of the Year		e December 31 rior Year	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium	\$	\$	\$ —	\$	\$	\$	\$ —	\$ —	Α	\$ —	\$ —
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	В	_	_
b. 2015											
1. Accrued retrospective premium	_	_	_	_	_	_	_	_	С	_	_
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	D	_	_
c. 2016											
1. Accrued retrospective premium	_	_	_	_	_	_	_	_	Е	_	_
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	F	_	_
d. Total for Risk Corridors	\$ —	\$	\$	\$	\$	\$ —	\$ —	\$		\$ —	\$

 $24E(4)d\ (Column\ 1\ through\ 10)\ should\ equal\ 24E(3)c3\ (Column\ 1\ through\ 10\ respectively)$

(5) ACA Risk Corridors Receivable as of Reporting Date:

	Risk Corridors Program Year	Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	Asset Balance (Gross of Non- admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4-5)
a.	2014	\$	s —	\$ —	\$ —	\$ —	\$
b.	2015	_	_	_	_	_	_
c.	2016	_	_	_	_	_	_
d.	Total $(a + b + c)$	s —	s —	s —	\$	\$	\$

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9) 24E(5)d (Column 6) should equal 24E(2)c1

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of December 31, 2021 were \$14,720,893. As of June 30, 2022, \$7,611,898 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,673,094 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$5,435,901 favorable prior-year development since December 31, 2021 to June 30, 2022. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$5,122,288 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.
- B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

June 30, 2022 1. Liability carried for premium deficiency reserves \$149 500 2. Date of the most recent evaluation of this liability 6/30/2022 3. Was anticipated investment income utilized in the calculation? No

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 th 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 chareporting entity?					Yes [] No	[X]
2.2	If yes, date of change:							
3.1	Is the reporting entity a member of an Insurance Holding Company Systems is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.					Yes [X]] No	[]
3.2	Have there been any substantial changes in the organizational chart single	ce the prior quarter end?				Yes [X]] No	[]
3.3	If the response to 3.2 is yes, provide a brief description of those changes Effective May 6, 2022, Aetna Health Insurance (Thailand) Public Compa Enterprise Co. Ltd, Health Care Management Co., Ltd, and Aetna Servidue to the shares being sold to a third party. Effective June 1, 2022, Pa MTC Intermediate Holdco, Inc. Effective July 1, 2022, Aetna Insurance a subsidiary of Loews Corporation.	any Limited, Aetna Holdings (Thailand ces (Thailand) Limited are no longer syFlex Holdings, Inc. and PayFlex Sys	part of the CVS Hea stems USA, Inc. were	Ith Group e sold to	ıy,			
3.4	Is the reporting entity publicly traded or a member of a publicly traded gr	roup?				Yes [X]] No	[]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code is	ssued by the SEC for the entity/group)			0000	064803	3
4.1	Has the reporting entity been a party to a merger or consolidation during	the period covered by this statemen	t?			Yes [] No	[X]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state oceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbre	viation) for any entity	that has				
	1 Name of Entity	NAIC Company Code	3 State of Domicile	9				
5.	If the reporting entity is subject to a management agreement, including t in-fact, or similar agreement, have there been any significant changes re If yes, attach an explanation.				es [] No []	X]N	/A [
6.1	State as of what date the latest financial examination of the reporting en	ntity was made or is being made			<u>-</u>	12/3	1/2020)
6.2	State the as of date that the latest financial examination report became date should be the date of the examined balance sheet and not the date					12/3	1/2020)
6.3	State as of what date the latest financial examination report became average the reporting entity. This is the release date or completion date of the example.	xamination report and not the date of	the examination (ba	lance shee	et	06/3	0/2022	2
6.4 6.5	By what department or departments? Maine Bureau of Insurance Have all financial statement adjustments within the latest financial exam statement filed with Departments?				es [] No [] N	I/A [X
6.6	Have all of the recommendations within the latest financial examination	report been complied with?		Υ	es [] No [] N	/A [X
7.1	Has this reporting entity had any Certificates of Authority, licenses or regrevoked by any governmental entity during the reporting period?	gistrations (including corporate regist	ration, if applicable)	suspended	J or	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	e Federal Reserve Board?				Yes [] No	[X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding co	ompany.						
8.3	Is the company affiliated with one or more banks, thrifts or securities firm	ms?				Yes [] No	[X]
8.4	If response to 8.3 is yes, please provide below the names and location (regulatory services agency [i.e. the Federal Reserve Board (FRB), the Clinsurance Corporation (FDIC) and the Securities Exchange Commission	Office of the Comptroller of the Currer	ncv (OCC), the Fede	ral Deposit				
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC		
				oxdot				

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?			Yes [X] No []	
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting	ng 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						
0.44	(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							
	In the second quarter the Code of Conduct was updated to include Office of Workplace Assistance and the CVS He content. Refer to page 6 and various references to the OWA/Ombuds team throughout the Code. In the first quarter updated to revise the definition of PII to be included before PHI. This was to clarify that PII was not a subset of PHI.	the code of conduct w	as				
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes [1 No [X 1	
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 [1	
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:						J
	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:	erwise made available	for 	Yes [] No [Х]	
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:						1
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No [Х]	
14.2	if yes, please complete the following.	1			2		
		Prior Year-End		Cur	rrent Qua	arter	
		Book/Adjusted			ok/Adjus		
14 21	Bonds	Carrying Value	1		rrying Va		
	Preferred Stock						
	Common Stock						
	Short-Term Investments						
	Mortgage Loans on Real Estate			\$			0
	All Other			\$			0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$			
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	;()	\$			0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes [1 No [X 1	
	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?]
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		\$	i		()
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Pa						
	16.3. Total payable for securities lending reported on the liability page)

GENERAL INTERROGATORIES

	at comply with the i	requirements of the NAIC Financi	T CONDITION Examiners har	idbook, complete	e trie following.		
	Name of Custo	odian(s)		Custodian Addr	ess		
State Street Bank	and Trust Company		State Street Financial Co 02111-2900	enter; One Linco	In Street; Boston, MA		
For all agreements to		th the requirements of the NAIC I	Financial Condition Examin	ers Handbook, p	rovide the name,		
1		2		3 Complete Expla	nation(a)		
Name		Location(s)					
Have there been any If yes, give full inform			(s) identified in 17.1 during t	ne current quarte	r?	Yes [] No [X
1 Old Cus		2 New Custodian	3 Date of Change		4 Reason		
make investment de	cisions on behalf of	vestment advisors, investment mather reporting entity. For assets the ment accounts"; "handle securi	at are managed internally b ities"]				
Derek S. Blunt as	1 <u>Name of Firm</u> Senior Investment 0	or Individual fficer	2 Affiliation				
17.5097 For those fi	rms/individuals listed	I in the table for Question 17.5, do	o any firms/individuals unafi	iliated with the re	eporting entity (i.e.		
		more than 10% of the reporting e				Yes	[] No [
		with the reporting entity (i.e. desi aggregate to more than 50% of t				Yes	[] No [
For those firms or in-	dividuals listed in the	e table for 17.5 with an affiliation o	code of "A" (affiliated) or "U'	(unaffiliated), pr	ovide the information for the	he	
1		2		3	4		5 Investment
Central Registration	 						Management Agreement
Central Registration Depository Number	r	Name of Firm or Individual		Identifier (LEI)	Registered With	N	Management
Depository Number N/A Have all the filing rec	Derek S. Blunt		N/A		Not registered	N	Management Agreement (IMA) Filed
Depository Number	Derek S. Blunt		N/A		Not registered	N	Management Agreement (IMA) Filed
Depository Number N/A	Derek S. Blunt Quirements of the Pu GGI securities, the report necessary to perm		of the NAIC Investment Ana	lysis Office been	Not registeredfollowed?security:	N	Management Agreement (IMA) Filed
Depository Number N/A Have all the filing red If no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer have	GGI securities, the reon necessary to permit available.	rposes and Procedures Manual of porting entity is certifying the follonit a full credit analysis of the section tracted interest and principal pition of ultimate payment of all contracted and contracted interest and principal pition of ultimate payment of all contracted interest and principal pition of ultimate payment of all contracted interest and principal pition of ultimate payment of all contracted interests.	of the NAIC Investment Ana owing elements for each sellurity does not exist or an NA oayments. Intracted interest and princip	lysis Office been -designated 5GI NIC CRP credit ra	Not registeredfollowed?security:	Yes	Management Agreement (IMA) Filed V0
Depository Number N/A Have all the filing red If no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer h Has the reporting en By self-designating F	purements of the Pure GGI securities, the result available. Some san actual expectatity self-designated september 200.	porting entity is certifying the follonit a full credit analysis of the section for full contracted interest and principal ption of ultimate payment of all contracted interest and principal ption of ultimate payment of all contracted interest and principal ption of ultimate payment of all contracted interest and principal ption of ultimate payment of all contracted interest and principal principal principal principal ption of ultimate payment of all contracted interest and principal principal principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and principal ption of ultimate payment of all contracted interests and all contracted	of the NAIC Investment Analowing elements for each selfurity does not exist or an NAD payments.	lysis Office been f-designated 5GI NIC CRP credit ra	followed?security:	Yes	Management Agreement (IMA) Filed V0
Depository Number N/A Have all the filing red If no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer has the reporting en By self-designating F a. The security w b. The reporting c. The NAIC Des on a current pi	Derek S. Blunt	rposes and Procedures Manual of porting entity is certifying the follonit a full credit analysis of the section function of ultimate payment of all confections of the securities? The porting entity is certifying the folion January 1, 2018. It is commensurate with the NAIC of from the credit rating assigned to the insurer and available for	of the NAIC Investment Analowing elements for each selfurity does not exist or an NAD payments. Illowing elements of each selfuncted interest and principal control of the by an NAIC CRP in its legal or examination by state insur	lysis Office been -designated 5GI NC CRP credit ra al. If-designated PL e security. capacity as a NF	Not registered	Yes	Management Agreement (IMA) Filed V0
Depository Number N/A Have all the filing red If no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer has the reporting en By self-designating F a. The security w b. The reporting c. The NAIC Des on a current pi d. The reporting	Derek S. Blunt	porting entity is certifying the follonit a full credit analysis of the section for a full material payment of all conformations of ultimate payment of all conformations of the sectifying entity is certifying the folion January 1, 2018.	of the NAIC Investment Analowing elements for each selfurity does not exist or an NAD payments. Illowing elements of each selfurity does not exist or an NAD payments. Designation reported for the by an NAIC CRP in its legal or examination by state insure PL security with the SVO.	lysis Office been f-designated 5GI NIC CRP credit ra al. If-designated PL e security. capacity as a NF ance regulators.	Not registered	Yes	Management Agreement (IMA) Filed V0
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Depository Number N/A Have all the filing red If no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer h Has the reporting en By self-designating 6 a. The security w b. The reporting c. The NAIC Des on a current p d. The reporting en By assigning FE to a FE fund: a. The shares we b. The reporting c. The shares we b. The reporting c. The security h	Derek S. Blunt Derek S. Blunt Quirements of the Putagorian securities, the report of the period of the	porting entity is certifying the follonit a full credit analysis of the section for a full credit analysis of the section for a full credit analysis of the section of ultimate payment of all confocial securities? The porting entity is certifying the folion of January 1, 2018. The tredit rating assigned the folion of the credit rating assigned the section of the place of the plac	of the NAIC Investment Analowing elements for each selurity does not exist or an Napayments. Illowing elements of each selurity does not exist or an Napayments. Illowing elements of each selucion preparted for the by an NAIC CRP in its legal or examination by state insure PL security with the SVO. Ingentity is certifying the folucion preparted for the Designation reported for the Designati	lysis Office been -designated 5GI NC CRP credit ra al. If-designated PL e security. capacity as a NF ance regulators. lowing elements	Not registered	Yes	Management Agreement (IMA) Filed 10
Depository Number N/A Have all the filing red f no, list exceptions: By self-designating 5 a. Documentatic security is no b. Issuer or oblig c. The insurer has the reporting en By self-designating F a. The security w b. The reporting c. The NAIC Des on a current p d. The reporting en By assigning FE to a FE fund: a. The shares we b. The reporting c. The shares we b. The reporting c. The specific to a FE fund: a. The shares we b. The reporting c. The specific to a FE fund: a. The shares we b. The reporting c. The scurity h January 1, 20° d. The fund only e. The current re	purements of the Pure Boll securities, the repart available. The securities are an actual expectative self-designated self-des	porting entity is certifying the follonit a full credit analysis of the section for a full credit analysis of the section for ultimate payment of all conformation of ultimate payment of all conformation that the NAIC of from the credit rating assigned by the insurer and available for dot of the payment of the public of January 1, 2019. The provided in the portion of the public of the provided in the portion of the public of the portion of the public of the provided in the protection of the public of the provided in the public of the publ	of the NAIC Investment Analowing elements for each seleurity does not exist or an NAI payments. Illowing elements of each seleurity does not exist or an NAI payments. Illowing elements of each seleur examination reported for the boy an NAIC CRP in its legal or examination by state insure PL security with the SVO. Ing entity is certifying the folionistic payments in the security with the SVO. Designation reported for the security and NAIC CRP in the security and NAIC CRP i	lysis Office been f-designated 5GI NC CRP credit ra al. If-designated PL e security. capacity as a NF ance regulators. lowing elements e security. its legal capacity	followed?security: GI security: RSRO which is shown of each self-designated as an NRSRO prior to	Yes	Management Agreement (IMA) Filed 10

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent					85.1 %
	1.2 A&H cost containment percent					1.3 %
	1.3 A&H expense percent excluding cost containment expenses					9.8 %
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	.\$				0
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	.\$				0
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?		Yes [] No	[X]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?		Yes [] No	o [X]	

Showing A	All New Reinsurance	Trootice Current	Voor to Date

Showing All New Reinsurance Treaties - Current Year to Date 1 2 3 4 5 6 7 8 9												
1 NAIC	2	3 4	5	6 Type of		8	9 Certified Reinsurer	10 Effective Date of Certified				
Company ID Code Number		Effective Date Name of Reinsurer	Domiciliary Jurisdiction	Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Rating (1 through 6)	Reinsurer				
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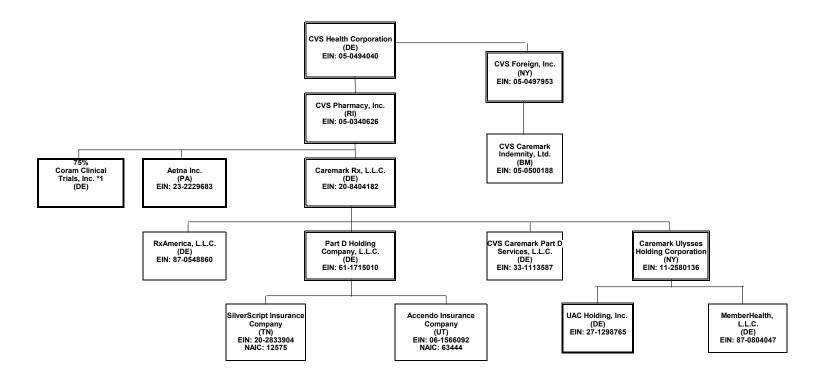
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories 10 Federal Life and Annuity Premiums & Other Employees Health Accident and Health Property/ Casualty Total Columns 2 Active Renefite Deposit-Type Program Premiums States, etc (a) Title XVIII Title XIX XXI Premiums sideration Premiums Through 8 Contracts Alabama ..0 ..0 .0 .0 ..0 .0 ..0 ..0 ΑL .0 Alaska ΑK N .0 .0 3. Arizona ΑZ ..0 ..0 .0 .0 ..0 .0 .0 0. .0 4. Arkansas AR N n 0 0 0 0 0 n ٥ 0 5. California CA N 0 0 0 0 0 0 0 0 0 .0 0. 6. Colorado CO N. ..0 .0 .0 .0 .0 .0 .0 Connecticut СТ .0 .N. ..0 ..0 .0 .0 ..0 .0 ..0 .0 DE ..0 ..0 .0 .0 ..0 .0 .0 .0 .0 .N. 9. District of Columbia DC .N. .0 .0 .0 .0 .0 .0 10. Florida 0 0 0 .0 0 .0 0 0 0. 11. Georgia GΑ N. 0 .0 .0 .0 0 0 0 0 0. 12. Hawaii н N 0 0 0 0 0 0 0 0 0 13. .0 0. Idaho ID .N. ..0 ..0 .0 .0 ..0 .0 .0 14. Illinois ..0 ..0 .0 .0 ..0 .0 .0 ..0 .0 IL .N. 15. Indiana IN ..0 .0 .0 .0 .0 .0 .0 .0 0. N 16. .N .0 .0 .0 .0 ..0 .0 .0 .0 .0 17. Kansas KS .0 ..0 .0 .0 .0 .0 .0 .0 .0 18 Kentucky ΚY N 0 n 0 n n 0 n ٥ 0 19. Louisiana LA N. 0 0 0 0 0 0 0 0 0 2.581.978 77.490.127 80.072.105 20. 0 Maine ME 0 0 0 0 0 Maryland 21. MD .N. ..0 ..0 .0 .0 ..0 .0 .0 ..0 .0 22. Massachusetts MA .0 .0 .0 .0 .0 .0 .0 .0 .0 .N. 23. Michigan .0 .0 .0 .0 .0 .0 .0 N. 0. 24. Minnesota MN .0 ..0 .0 .0 ..0 .0 .0 .0 .0 25. Mississippi MS N. 0 0 0 0 0 0 0 0 0 26. Missouri MO N 0 0 0 0 0 0 0 0 0 0. 27. Montana MT N. ..0 .0 .0 .0 .0 .0 .0 .0 28. Nebraska ..0 .0 .0 ..0 0. NE ..N. ..0 .0 .0 ..0 29. Nevada . NV ..0 ..0 .0 .0 ..0 .0 .0 .0 .0 30. New Hampshire .0 0. 0 .0 .0 .0 .0 0. 0. NH N New Jersey 31. ..0 ..0 .0 .0 .0 .0 .0 .0 .0 32 New Mexico NM N. ٥ ٥ ٥ ٥ ٥ ٥ Λ ٥ 0. 33. New York NY N 0 0 0 0 0 0 0 0 0 North Carolina 0 34. NC N 0 0 0 0 0 0 0 0 35. North Dakota ..0 0 .0 .0 .0 .0 0 ND N. .0 .0 36. Ohio ..0 ..0 .0 .0 ..0 .0 .0 .0 0. ОН .N. 37. Oklahoma .0 .0 .0 .0 OK .N. 38 Oregon OR ..0 ..0 .0 .0 ..0 .0 .0 0. .0 39 Pennsylvania РΑ N. 0 0 0 0 0 0 n ٥ 0 40. Rhode Island RI N 0 0 0 0 0 0 0 0 0 41. South Carolina .0 0. SC N. ..0 .0 .0 .0 .0 .0 .0 42. South Dakota SD ..0 .0 .0 .0 .N. ..0 .0 .0 ..0 .0 ..0 ..0 .0 .0 ..0 .0 .0 .0 .0 ΤN 44. .0 .0 ..0 .0 .0 ΤX .N. .0 45. Utah UT 0 0 0 .0 0 .0 0 0 0. 46. Vermont VT N. 0 .0 .0 .0 0 0 0 0 0. 47. Virginia VΑ N 0 0 0 0 0 0 0 0 0 48. Washington .0 0. WA .N. ..0 ..0 .0 .0 ..0 .0 .0 West Virginia WV 49. ..0 ..0 .0 .0 ..0 .0 .0 ..0 0. N. 50. Wisconsin WI ..0 .0 .0 .0 .0 .0 .0 .0 0. N 51. Wyoming .0 .0 .0 .0 ..0 .0 .0 .0 .0 WY N. 52 American Samoa AS .0 .0 .0 .0 .0 .0 .0 .0 .0 53 Guam GU N 0 n 0 n n 0 n ٥ 0 54. Puerto Rico PR N 0 0 0 0 0 0 0 0 0 55. U.S. Virgin Islands VI N 0 0 0 0 0 0 0 0 0 56. Northern Mariana MP .0 .0 .0 .0 0. Islands N. ..0 .0 .0 .0 57. Canada ..0 .0 .0 .0 .0 .0 .0 .0 .0 CAN N. 58. Aggregate Other ОТ XXX 0 0 0 0 0 0 0 59. Subtotal 2,581,978 .77,490,127 0 .0 .0 .0 .0 80,072,105 0. XXX. 60. Reporting Entity Contributions for Employe Benefit Plans XXX 0 0 0 0 61 Totals (Direct Business) XXX 2,581,978 77,490,127 0 0 0 0 0 80,072,105 0 DETAILS OF WRITE-INS 58001 XXX. 58002 XXX 58003. .XXX. 58998. Summary of remaining write-ins for Line 58 from XXX 0 0 0 0 0 0 0 0 0 58999. 58003 plus 58998)(Line 58

a) Active Status Counts:	
L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG1	R - Registered - Non-domiciled RRGs0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state0	Q - Qualified - Qualified or accredited reinsurer0
N - None of the above - Not allowed to write business in the state 56	

above)

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.

(1) Insurers/HMO's

Double borders indicate entity has subsidiaries shown on the same page.

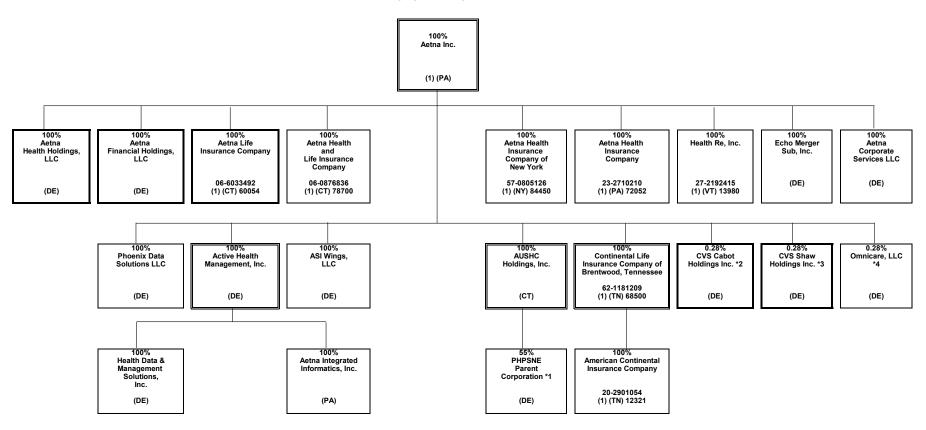
Bold borders indicate entity has subsidiaries shown on a separate page.

Percentages are rounded to the nearest whole percent and based on ownership of voting rights.

^{*1} Coram Clinical Trials, Inc. is also 25% owned by Aetna Life Insurance Company

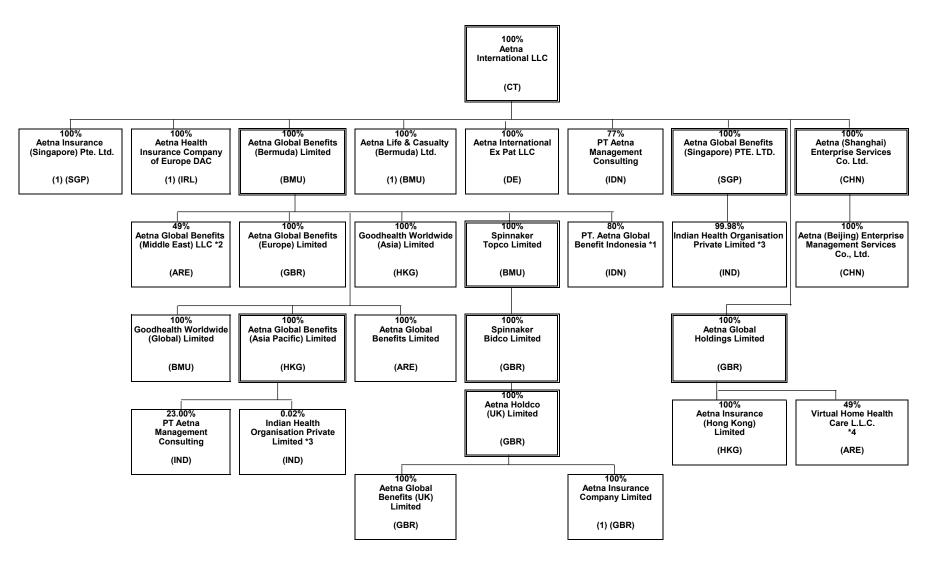
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



^{*1} PHPSNE Parent Corporation is also 45% owned by third parties.
*2 CVS Cabot Holdngs Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*3 CVS Shaw Holdngs Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*4 Omnicare, LLC is also owned by CVS Cabot Holdings Inc and CVS Shaw Holdngs Inc., each with 49.86% ownership.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



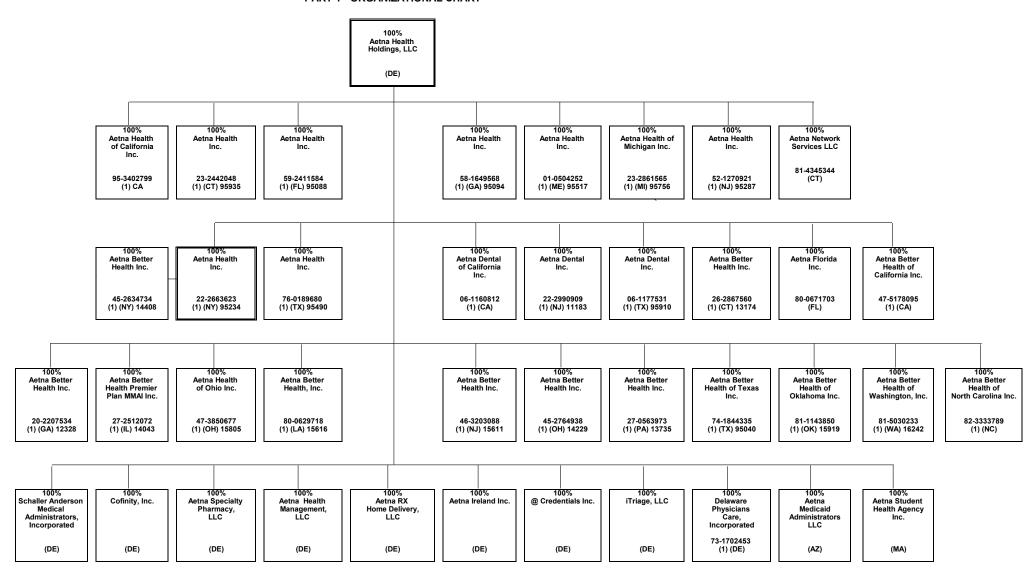
^{*1} PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

*2 Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.

*3 Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.

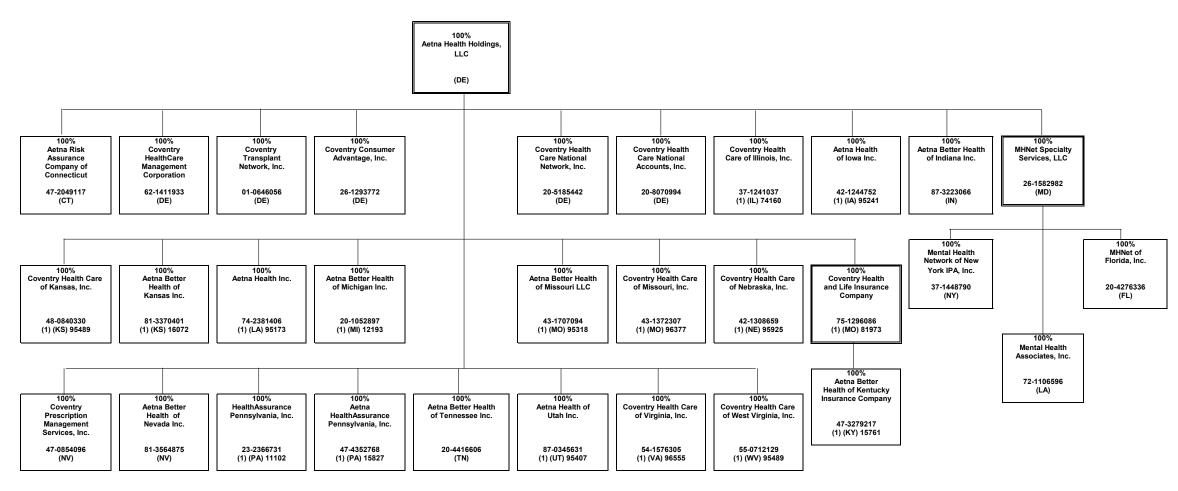
*4 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART

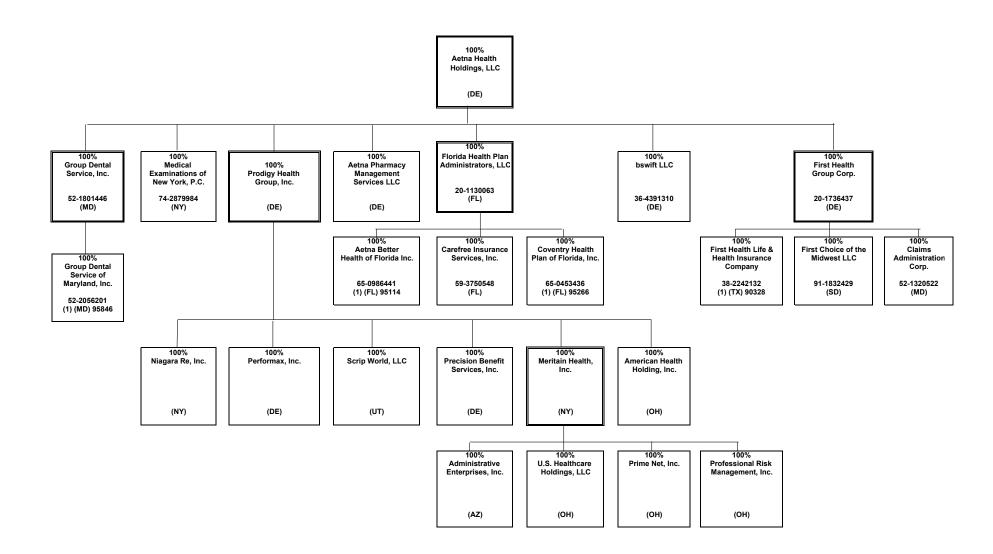


SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

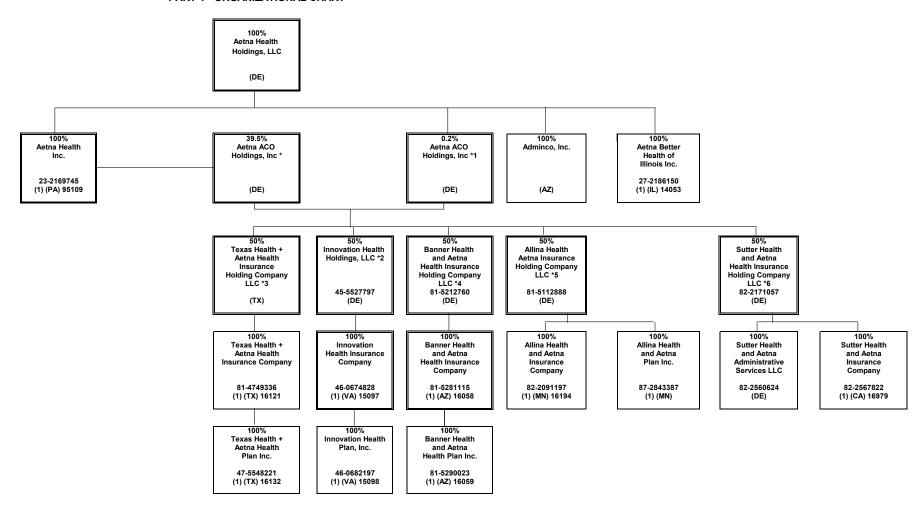


SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



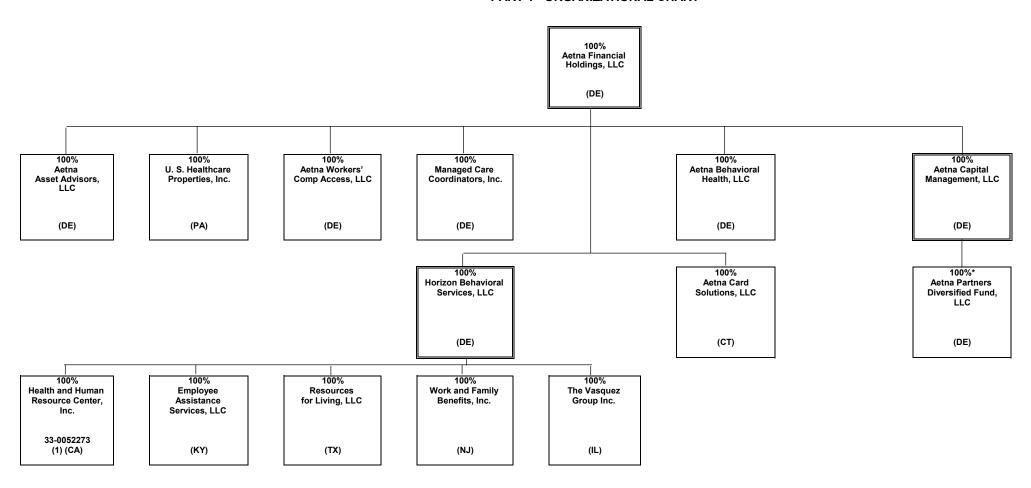
^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.
*4 Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

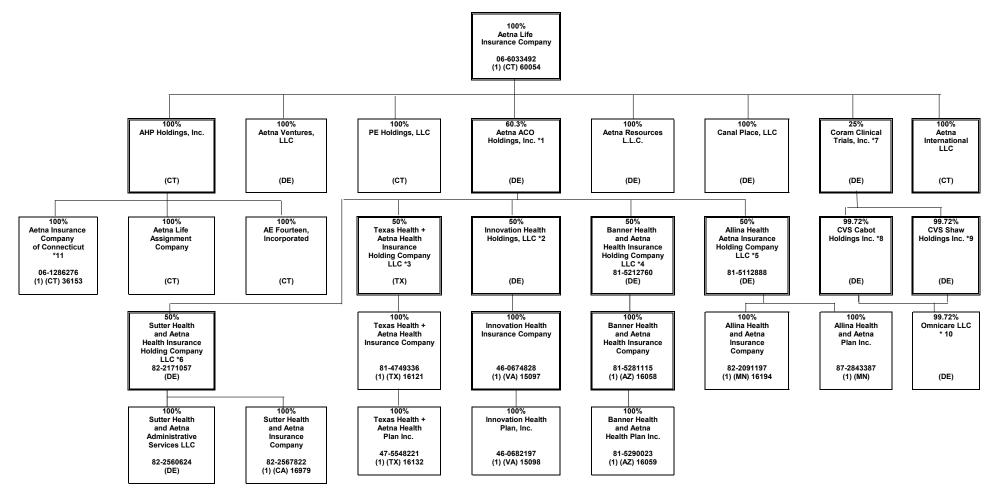
^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.
*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



^{*} Aetna Capital Management, LLC owns 100% of the voting rights of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF.

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



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources. *4 Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.

^{*6} Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.
*7 Coram Clinical Trials, Inc. is also 75% owned by CVS Pharmacy, Inc.

^{*8} CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.

^{*9} CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.

^{*10} Remaining .28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.

^{*11} Effective July 1, 2022, Aetna Insurance Company of Connecticut was sold to Continental Casualty Company, a subsidiary of Loews Corporation.

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6										
		J	4	5	О	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	,
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No	
	VS HEALTH GROUP	Code	05-0494040	ROOD	0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	N0	0
	VS HEALTH GROUP	63444	06-1566092		0000004003	NIOL	Accendo Insurance Company	UT	IA	Part D Holding Company, L.L.C.	Ownership.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		20-2833904				SilverScript Insurance Company	TN	IA	Part D Holding Company, L.L.C.	Owner ship	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP	00000	05-0340626				CVS Pharmacy, Inc.	RI	UIP	CVS Health Corporation	Ownership	100.000	. CVS Health Corporation	NO.	0
0001 CVS	VS HEALTH GROUP	00000	20-8404182				Caremark Rx, L.L.C.	DE	NIA	CVS Pharmacy, Inc	Ownership.	100.000	CVS Health Corporation	NO	.]0
0001 CVS	VS HEALTH GROUP	00000	61-1715010				Part D Holding Company, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		33-1113587				CVS Caremark Part D Services, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		87-0548860				RxAmerica, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP	00000	11-2580136				Caremark Ulysses Holding Corporation	NY	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		87-0804047				MemberHealth, L.L.C.	DE	NIA	Caremark Ulysses Holding Corporation	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		05-0500188	-			CVS Caremark Indemnity, Ltd.	BMU	IA	CVS Foreign, Inc.	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		27-1298765				UAC Holding, Inc.	DE	NIA	Caremark Ulysses Holding Corporation	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		05-0497953				CVS Foreign, Inc	DE	NIA	CVS Health Corporation	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUPVS HEALTH GROUP		58-2160656 23-2229683	3060706	0001122304		Aetna Inc.	PA	NIA UIP	CVS Pharmacy, Inc	Ownership	75.000	. CVS Health Corporation	N0	13
	VS HEALTH GROUP		30-0123754	. 3060706	0001122304		Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP	00000	95-3402799				Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		23-2442048				Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		59-2411584				Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		58-1649568				Aetna Health Inc.	GA	IA.	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		01-0504252				Aetna Health Inc.	ME	RE	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001 CVS	VS HEALTH GROUP	95756	23-2861565				Aetna Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		52-1270921				Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
0001 CVS	VS HEALTH GROUP		22-2663623				Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP	14408	45-2634734				Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP	95490	76-0189680				Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS_HEALTH_GROUP	95040	74-1844335				Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	N0	0
	VS HEALTH GROUP		20-2207534				Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	N0	0
	VS HEALTH GROUPVS HEALTH GROUP		06-1160812				Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	N0 N0	0
	VS HEALTH GROUP		22-2990909 06-1177531				Aetna Dental Inc.	TX	IAIA	Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		30-0123760				Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	N0	0
	VS HEALTH GROUP	00000	13-3670795				Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		22-3187443				Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO NO	0
	VS HEALTH GROUP		57-1209768				Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		20-1274723				Cofinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		23-2671370				@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP	13735	27-0563973	.			Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		26-2867560				Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		47-5178095	.			Aetna Better Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP		27-2512072				Aetna Better Health Premier Plan MMAI Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	N0	0
	VS_HEALTH_GROUP		47-3850677	.			Aetna Health of Ohio Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	N0	0
	VS HEALTH GROUP		80-0629718				Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		80-0671703	-[Aetna Florida Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUPVS HEALTH GROUP	14229	45-2764938 46-3203088				Aetna Better Health Inc.	H	IAIA	Aetna Health Holdings, LLC	Ownership.	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUPVS HEALTH GROUP		81-1143850				Aetna Better Health of Oklahoma Inc.	NJ OK	IA	Aetna Health Holdings, LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	VS HEALTH GROUP		04-2708160				Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	
	VS HEALTH GROUP	00000	73-1702453				Delaware Physicians Care, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
							Schaller Anderson Medical Administrators,			Total Total Holdings, ELO		100.000	or round of poraction		1
0001 CVS	VS HEALTH GROUP	00000	01-0826783	l			Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
	VS HEALTH GROUP	00000	86-0842559				Aetna Medicaid Adminstrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001 CVS	VS HEALTH GROUP	00000	45-2944270				iTriage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001 CVS	VS HEALTH GROUP	00000	16-1471176				Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANT STSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
'	<u>-</u>	Ŭ			Ŭ	•	ŭ	ľ		' '	Type	If			
											of Control	Control		1	
														'	
									5		(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership.	0.200	CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP	00000	74-2879984				Medical Examinations of New York, P.C.	NY	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	45-5527797				Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Owner ship.	50.000	CVS Health Corporation	N0	6
0001	CVS HEALTH GROUP	15097	46-0674828				Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	15098	46-0682197				Innovation Health Plan, Inc.	VA	IA	Innovation Health Insurance Company	Ownership	100.000	CVS Health Corporation	N0	0
							Texas Health + Aetna Health Insurance Holding							1	
0001	CVS HEALTH GROUP	00000	81-3789357				Company LLC	TX	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	8
							Texas Health + Aetna Health Insurance Company	1		Texas Health + Aetna Health Insurance				1	
0001	CVS HEALTH GROUP	16121	81-4749336					TX	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	N0	0
										Texas Health + Aetna Health Insurance				1	
0001	CVS HEALTH GROUP	16132	47-5548221				Texas Health + Aetna Health Plan Inc.	TX	IA	Company	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	95109	23-2169745				Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NI A	Aetna Health Inc. (PA)	Owner ship		CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP	00000	20-0438576				Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	52-2200070				Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	87-0632355				Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	27-1760756				Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	31-1368946				American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	16-1264154				Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	86-0537707				Adminco, Inc.	AZ	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	86-0527428				Administrative Enterprises, Inc.	AZ	NI A	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	16-1684061				U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc.	Owner ship.	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	34-1670299				Prime Net, Inc.	OH	NI A	Meritain Health, Inc.	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	34-1348032				Professional Risk Management, Inc.	OH	NIA	Meritain Health, Inc.	Ownership.	100.000	CVS Health Corporation	N0	9
0004	OVO LIEM THE OPOLID	00500	00 4404000				Continental Life Insurance Company of	TN				400.000	0/0 // /// 0	NO	
0001	CVS HEALTH GROUP	68500	62-1181209				Brentwood, Tennessee	IN	IA	Aetna Inc.	Ownership.	100.000	CVS Health Corporation	N0	Q
0001	CVS HEALTH GROUP	12321	20-2901054				American Continental Insurance Company	TN	1.4	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	0/0 11 14 0 4:	NO	
0001	CVS HEALTH GROUP	60054	06-6033492				Aetna Life Insurance Company	IN	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	. NO NO	V
0001	CVS HEALTH GROUP	40000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership	60.300	CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP	00000	06-1270755				AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	36153	06-1286276				Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Owner ship	100.000	CVS Health Corporation	NO	17
0001	CVS HEALTH GROUP	00000	06-1028469				AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Owner ship	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	00000	06-1373153				Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-3678339				PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	06-1423207				Aetna Resources L.L.C.	DE	NIA	Aetna Life Insurance Company	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000					Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-3180700				Aetna Ventures. LLC	DE	NIA	Aetna Life Insurance Company	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials, Inc.	DE	NIA	Aetna Life Insurance Company	Owner ship.	25.000	CVS Health Corporation	NO	13
0001	CVS HEALTH GROUP	00000	85-3918720				CVS Cabot Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Ownership	99.720	CVS Health Corporation	NO	14
0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Owner ship.	99.720	CVS Health Corporation	NO	15
0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare. LLC	DE	NIA	CVS Cabot Holdings Inc	Owner ship.	49.860	CVS Health Corporation	NO	16
0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare, LLC	DE	NIA	CVS Shaw Holdings Inc	Owner ship.	49.860	CVS Health Corporation	NO	16
0001	CVS HEALTH GROUP	00000	41-2035961				Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Owner ship.		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	26-2030792				Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	23-2354500				U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	38-3704481				Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	11-3667142	l	0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership.	100.000	CVS Health Corporation	N0	1
0001	CVS HEALTH GROUP	00000	20-0446676				Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-0446713				Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	23-2670015				Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	59-3269144				Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	61-1193498				Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Owner ship.		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	33-0052273	l			Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership.		CVS Health Corporation	NO	J0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control		,	
											(Ownership,	is		Is an	
						Name of Constition			Deletion			-			
						Name of Securities		D	Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	36-3681261				The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	22-3178125				Work and Family Benefits, Inc	NJ	NIA	Horizon Behavioral Services, LLC	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	27-1773021				Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	78700	06-0876836				Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	84450	57-0805126				Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	06-1571642				Aetna International LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	98-0211470				Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000					Aetna Insurance (Singapore) PTE. LTD	SGP	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	86-1455140				Aetna International Ex Pat LLC	DE	NIA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N0	Ω
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Europe) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	CVS Health Corporation	NO	4
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership.	49.000	CVS Health Corporation	NO	5
							Aetna Global Benefits (Asia Pacific) Limited				·				
0001	CVS HEALTH GROUP	00000						HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Aetna International LLC	Owner ship	77.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Owner ship.	100,000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.000	CVS Health Corporation	N0	0
.0001	CVS HEALTH GROUP	00000					Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Owner ship.	100,000	CVS Health Corporation	NO.	0
										Aetna Global Benefits (Asia Pacific)					
0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Limited	Owner ship.	23.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Insurance Company Limited	GBR	IA.	Aetna Holdco (UK) Limited	Ownership	100,000	CVS Health Corporation	NO NO	0
							, , , , , , , , , , , , , , , , , , , ,			Aetna Global Benefits (Asia Pacific)					
0001	CVS HEALTH GROUP	00000					Indian Health Organisation Private Limited	IND	NIA	Limited	Ownership	0.020	CVS Health Corporation	NO	2
							Aetna Health Insurance Company of Europe DAC								
0001	CVS HEALTH GROUP	00000						IRL	IA	Aetna International LLC	Ownership	100,000	CVS Health Corporation	NO	0
							Aetna (Shanghai) Enterprise Services Co. Ltd.								
0001	CVS HEALTH GROUP	00000					(********************************	CHN	NIA	Aetna International LLC	Ownership	100,000	CVS Health Corporation	NO	0
							Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.					1
0001	CVS HEALTH GROUP	00000					Services Co., Ltd.	CHN	NIA	Ltd.	Ownership	100,000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Singapore) PTE. LTD.	SGP	NIA	Aetna International LLC	Ownership.	100.000	CVS Health Corporation	N0	0
							(1.1.94)			Aetna Global Benefits (Singapore) PTE, LTD.					
0001	CVS HEALTH GROUP	00000	l				Indian Health Organisation Private Limited	IND	NIA	(1.00)	Ownership.	99.980	CVS Health Corporation	NO	2
0001	CVS HEALTH GROUP	00000	22-2578985				AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000]				Aetna Global Holdings Limited	GBR	NIA	Aetna International LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Insurance (Hong Kong) Limited	HKG	IA	Aetna Global Holdings Limited	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	06-1182176				PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership.	55.000	CVS Health Corporation	NO	7
0001	CVS HEALTH GROUP	00000	52-2182411				Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership	_100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	47-0970432				Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc.	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	23-2604867				Aetna Integrated Informatics, Inc.	PA	NIA	Active Health Management, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	13980	27-2192415				Health Re, Inc.	VT	IA	Aetna Inc.	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	81-0579372	l			Phoenix Data Solutions LLC	DE	NIA	Aetna Inc.	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	51-0029326				ASI Wings, LLC	DE	NIA	Aetna Inc.	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	47-4556274	l			Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	47-4547145				Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	85-3918720	l			CVS Cabot Holdings Inc.	DE	NIA	Aetna Inc.	Ownership.	0.280	CVS Health Corporation	NO	14
0001	CVS HEALTH GROUP	00000	85-3918567	1			CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Owner ship.	0.280	CVS Health Corporation	NO	15
0001	CVS HEALTH GROUP	00000	31-1001351	l			Omnicare, LLC	DE	NIA	Aetna Inc.	Ownership.	0.280	CVS Health Corporation	NO	16

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control		,	1
											(Ownership,	is		Is an	1
						Name of Securities			Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	1
		NAIG					Names of	-	- 1			- 1		J J	1
		NAIC	I.D.			if Publicly Traded	Names of	ciliary	to	Discoul Controlled	Attorney-in-Fact,	Provide	LUC Lo O Lo U'	Re-	1
Group		Company	, ID	Federal	0114	(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	'
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	
0001	CVS HEALTH GROUP	81973	75-1296086				Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0'
2004	ava usu su anaun	45704	47 0070047				Aetna Better Health of Kentucky Insurance	101		Coventry Health and Life Insurance Company		400.000	ava u u u a	1	
0001	CVS HEALTH GROUP	15761	47-3279217				Company	KY	IA		Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	52-1801446				Group Dental Service, Inc.	MD	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95846	52-2056201 81-4345344				Group Dental Service of Maryland, Inc.	MD	IA	Group Dental Service, Inc.	Owner ship.	100.000	CVS Health Corporation	N0 N0	0
0001	CVS HEALTH GROUP	95241					Aetna Network Services LLC		NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation		0
0001	CVS HEALTH GROUP	95241	42-1244752				Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	V
1 000 1	CVS HEALTH GHOUP	90920	42-1308659				Coventry Health Care of Nebraska, Inc.	NE	IA	Aetha Health Holdings, LLC	Ownersnip	100.000	CVS Health Corporation	N0	v
0001	CVS HEALTH GROUP	00000	47-2049117				Aetna Risk Assurance Company of Connecticut Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95173	74-2381406				Aetna Health Inc.		IA	Aetna Health Holdings, LLC	Owner strip	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	11102	23-2366731				HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Owner strip	100.000	CVS Health Corporation	NO	0
1 000 1	CVS REALIN GROUP	11102	23-2300/31				Coventry Prescription Management Services.	PA	IA	Aetha nearth hordings, LLC	Owner Strip	100.000	CVS Hearth Corporation		v
0001	CVS HEALTH GROUP	00000	47-0854096				Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	16148	81-3564875				Aetna Better Health of Nevada Inc.	NV NV	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	96555	54-1576305				Coventry Health Care of Virginia, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	01-0646056				Coventry Transplant Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	96377	43-1372307				Coventry Health Care of Missouri, Inc.	MO	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95318	43-1702094				Aetna Better Health of Missouri LLC	MO	IA.	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95408	55-0712129				Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	62-1411933				Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	15827	47-4352768				Aetna HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95489	48-0840330				Coventry Health Care of Kansas, Inc.	KS	IA.	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	16072	81-3370401				Aetna Better Health of Kansas Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	12193	20-1052897				Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership.	_100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95407	87-0345631				Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	00000	20-4416606				Aetna Better Health of Tennessee Inc.	TN	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	74160	37-1241037				Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100,000	CVS Health Corporation	NO NO	0
			1				Coventry Health Care National Accounts, Inc.			0 -7					
0001	CVS HEALTH GROUP	00000	20-8070994				, ,	DE	NIA	Aetna Health Holdings, LLC	Ownership	100,000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-5185442				Coventry Health Care National Network, Inc	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	26-1293772				Coventry Consumer Advantage, Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-1736437				First Health Group Corp.	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
							First Health Life & Health Insurance Company						·	,	
0001	CVS HEALTH GROUP	90328	38-2242132					TX	IA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	91-1832429	.			First Choice of the Midwest LLC	SD	NIA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	52-1320522				Claims Administration Corp	MD	NIA	First Health Group Corp	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-1130063	.			Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95114	. 65-0986441				Aetna Better Health of Florida Inc	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95266	65-0453436	.			Coventry Health Plan of Florida, Inc	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	59–3750548				Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	36-4391310				bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000					Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership	49.000	CVS Health Corporation		12
0001	CVS HEALTH GROUP	00000	26-1582982				MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	. 37-1448790				Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	72-1106596				Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	. 20-4276336				MHNet of Florida, Inc.	FL	NIA	MHNet Specialty Services, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	16242	81-5030233				Aetna Better Health of Washington, Inc.	WA	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	N0	0
0004	OVO LIEM THE ODOLID	00000	04 5040700				Banner Health and Aetna Health Insurance	DE	NIA	Askes ACO Haldiana Inc	0	FO. 00C	01/0 11 141- 0 4:	NO	
0001	CVS HEALTH GROUP	00000	81–5212760				Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc	Owner ship	50.000	CVS Health Corporation	N0	9
0001	CVS HEALTH GROUP	16058	81-5281115				Banner Health and Aetna Health Insurance	AZ	1.4		Ownership	100.000	CVC Health Corneration	NO	
1 000 1	OVO HEALIN UNUUF	86001	0111026-101				Company	AZ	IA	Holding Company LLC	Owner Silip	100.000	CVS Health Corporation	INU	v
0001	CVS HEALTH GROUP	16059	81-5290023				Banner Health and Aetna Health Plan Inc	AZ	IA	Company	Ownership.	100.000	CVS Health Corporation	NO	l ,
1 000 1	OVO HENETH UNDUF		01-0230023				Danner nearth and Metha nearth Fian Inc	MZ		oumpany	Towns on th	100.000	LONG LICATELL COLPOLATION	IW	V

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	16
											Туре	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filina	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	
0000	3.5up . tu5			11002	0	international)	Allina Health and Aetna Health Insurance	1.0	Linking	(riame or Emaily); ereeny	0	uge		(100/110)	+
0001	. CVS HEALTH GROUP	00000	81-5112888				Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc.	Owner ship	50.000	CVS Health Corporation	NO	10
										Allina Health and Aetna Health Insurance					
0001	. CVS HEALTH GROUP	16194	82-2091197				Allina Health and Aetna Insurance Company	MN	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
										Allina Health and Aetna Health Insurance			•		
0001	. CVS HEALTH GROUP	00000	87-2843387				Allina Health and Aetna Health Plan Inc	MN	NIA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
							Sutter Health and Aetna Insurance Holding								
0001	. CVS HEALTH GROUP	00000	82-2171057				Company LLC	DE		Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	11
							Sutter Health and Aetna Administrative			Sutter Health and Aetna Insurance Holding					
0001	. CVS HEALTH GROUP	00000	82-2560624				Services LLC	DE	NIA	Company LLC	Ownership	100.000	CVS Health Corporation	N0	0
										Sutter Health and Aetna Insurance Holding					
	. CVS HEALTH GROUP		82-2567822				Sutter Health and Aetna Insurance Company	CA	IA	Company LLC	Owner ship		CVS Health Corporation	N0	0
	. CVS HEALTH GROUP		82-3031812				Aetna Pharmacy Management Services LLC	DE		Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
	. CVS HEALTH GROUP		82-3333789				Aetna Better Health of North Carolina Inc	NC	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	. CVS HEALTH GROUP		27-2186150				Aetna Better Health of Illinois Inc.	L	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	00000	87-3223066				Aetna Better Health of Indiana Inc	. IN	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
								-				0.000			·
I								1						1	

Asterisk	Explanation
1 Aetna Life Insurance Company owns substantially all of the	non-managing membership interests of Aetna Partners Diversified Fund LLC.
2 Indian Health Organisation Private Limited is 0.019857% ow	ed by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
3 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance C	mpany (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
4PT. Aetna Global Benefits Indonesia is also 20% owned by S	rhatsyah Rivai, Aetna's Nominee
5	y Euro Gulf LLC, Aetna's Nominee.
6	Health System Foundation.
7	nc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
B	s also 50% owned by Texas Health Resources.
Banner Health and Aetna Health Insurance Holding Company L	C is also 50% owned by Banner Health.
10 Allina Health and Aetna Insurance Holding Company LLC is a	so 50% owned by Allina Health System.
11 Sutter Health and Aetna Insurance Holding Company LLC is a	so 50% owned by Sutter Health Plan Products Organization, LLC.
12 Virtual Home Health Care L.L.C. is also 51% owned by CBD (nmmercial Brokers LLC, Aetna's Nominee.
13 Coram Clinical Trials, Inc. is 75% owned by CVS Pharmacy,	nc. and 25% owned by Aetna Life Insurance Company.
14 CVS Cabot Holdings Inc is owned 99.72% by Coram Clinical 1	ials, Inc. and 0.28% owned by Aetna Inc.
15 CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Tr	als, Inc. and 0.28% owned by Aetna Inc.
16	also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership.
17 Effective July 1, 2022, Aetna Insurance Company of Connect	cut was sold to Continental Casualty Company, a subsidiary of Loews Corporation.

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
	AUGUST FILING	
2.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	YES
	Explanation:	
1.	The data for this supplement is not required to be filed	
	Bar Code:	
1.	Medicare Part D Coverage Supplement [Document Identifier 365]	

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	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 rying		
7.	Deduct current year's other than temporary impailment 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)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	wortgage Loans	1	2
		ı	Prior Year Ended
		Year to Date	December 31
			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 in lest parallel amitme less less less less less less less le		
9.	Total foreign exchange change in book value/recorded investment excurse accrued atterest		
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)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets		_
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.			
	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)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	29,894,579	25,069,699
2.	Cost of bonds and stocks acquired		16,708,826
3.	Accrual of discount		79,584
4.	Unrealized valuation increase (decrease)	(271,983)	(197,718)
5.	Total gain (loss) on disposals	(525,829)	6,385
6.	Deduct consideration for bonds and stocks disposed of	2,751,886	11,753,479
7.	Deduct amortization of premium	39,499	82,743
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	61,788	127,964
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	34,918	191,989
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	29,704,975	29,894,579
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	29,704,975	29,894,579

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

	1	2	3	4	5	6	7	8
	Book/Adjusted	Ai-i4i	Diamanikiana	Non Tandina Astivity	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
201.20								
1. NAIC 1 (a)	26,019,189	118,661,437	116,769,049	45,220	26,019,189	27,956,797	0	24,211,699
2. NAIC 2 (a)		0	0	(17,616)	12,355,220	12,337,604	0	12,762,541
3. NAIC 3 (a)		0	0		848.168	741,203	0	901,178
4. NAIC 4 (a)	·	0	0	0	0	0	0	888,086
5. NAIC 5 (a)		0	0	0	0	0	0	0
6. NAIC 6 (a)		0	0	0	0	0	0	0
7. Total Bonds	39.222.577	118.661.437	116.769.049	(79.361)	39.222.577	41,035,604	0	38,763,504
7. Total Bolids	00,222,011	110,001,101	110,100,010	(10,001)	00,222,011	11,000,001		00,700,001
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	39,222,577	118,661,437	116,769,049	(79,361)	39,222,577	41,035,604	0	38,763,504

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **NONE**

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open **NONE**

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Odon Equivalents)	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	8,869,354	9,051,710
2.	Cost of cash equivalents acquired		
3.	Accrual of discount	59,306	14,262
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	20	(141)
6.	Deduct consideration received on disposals	149,221,104	155,017,883
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	13,097,949	8,869,354
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	13,097,949	8,869,354

Schedule A - Part 2 - Real Estate Acquired and Additions Made **NONE**

Schedule A - Part 3 - Real Estate Disposed **NONE**

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made **NONE**

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

NONE

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made NONE

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid $\bf N$ $\bf O$ $\bf N$ $\bf E$

SCHEDULE D - PART 3

Show All Long-Term	Pande and Stack	Acquired During the	Current Quarter

			SHOW All L	Long-Term Bonds and Stock Acquired During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
									SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	
Identification	Description	Foreign		Name of Vendor	Stock	Actual Cost	Par Value	Dividends	strative
		Foreign	Acquired	CHASE SECURITIES	Slock	Actual Cost	Par Value 400.000	Dividends	Symbol
	AMAZON. COM INC SR UNSECURED 4.100% 04/13/62		04/11/2022	UHASE SECURITIES		,	,	U	1.D FE
	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					398, 128	400,000	0	
	otal - Bonds - Part 3					398,128	400,000	0	XXX
	otal - Bonds - Part 5					XXX 398 . 128	XXX	XXX	XXX
2509999999. Total - Bonds							400,000	0	XXX
4509999997. T	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
	Total - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. T	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. T	otal - Common Stocks					0	XXX	0	XXX
5999999999. T	otal - Preferred and Common Stocks					0	XXX	0	XXX
			·····						
6009999999 -	Totals				•	398.128	XXX	0	XXX

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold Re	ledeemed or Otherwise Disposed of During the Current Quarter
Show All Long-Term Bonds and Stock Sold, N	tedeelijed di Otijelwise Disposed di Dujijid tije Cuijelit Qualtel

					SHOW All LO	ng-renn bo	onds and Sto	ck Solu, Red	reemed or c	Julierwise i	Jisposea c	or During tr	ie Current	Quarter							
1	2	3	4	5	6	7	8	8 9 10 Change In Book/Adjusted Carryi				Carrying Va	lue	16	17	18	19	20	21	22	
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized	Year's	Temporary		Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification		eign		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	AMAZON.COM INC SR UNSECURED 4.100% 04/13/62	Ť								(- /			'		·			
023135-CK-0			04/12/2022	GOLDMAN SACHS & CO		399,921	400,000	398 , 128	0	0	0	0	0	0	398 , 128	0	1,793	1,793	46	04/13/2062	1.D FE
	ASTRAZENECA PLC SR UNSECURED 2.375%																				
046353-AQ-1		D	06/12/2022			1,000,000	1,000,000	959,570	995,307	0	4,693	0	4,693	0	1,000,000	0	0	0		06/12/2022	1.G FE
	99. Subtotal - Bonds - Industrial and M	liscell	aneous (Una	affiliated)		1,399,921	1,400,000	1,357,698	995,307	0	4,693	0	4,693	0	1,398,128	0	1,793	1,793	11,921	XXX	XXX
	97. Total - Bonds - Part 4					1,399,921	1,400,000	1,357,698	995,307	0	4,693	0	4,693	0	1,398,128	0	1,793	1,793	11,921	XXX	XXX
	98. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Bonds					1,399,921	1,400,000	1,357,698	995,307	0	4,693	0	4,693	0	1,398,128	0	1,793	1,793	11,921	XXX	XXX
	97. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	U	0	0	0	0	0	XXX	XXX
	98. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
59899999	97. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
598999999	98. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
598999999	99. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
59999999	99. Total - Preferred and Common Sto	cks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
									• • • • • • • • • • • • • • • • • • • •												
60099999	99 - Totals					1,399,921	XXX	1,357,698	995,307	0	4,693	0	4,693	0	1,398,128	0	1,793	1,793	11,921	XXX	XXX

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open NONE

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made **NONE**

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 NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month	Fnd	Depository	Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			
			Amount of	Amount of	6	7	8	
			Interest Received					
December	0.1.	Rate of		at Current				*
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	_ ^
State Street Bank and Trust								
Co. Boston, MA		0.000	0	0	0	12,656	0	XXX
0199998. Deposits in 0 depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	0	12,656	0	XXX
0299998. Deposits in 0 depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	0	12,656	0	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
	· · · · · · · · · · · · · · · · · · ·							
		†						
								
	· · · · · · · · · · · · · · · · · · ·							
								
OFFICIAL Cook			0	0	0	10 656		
0599999. Total - Cash	XXX	XXX	1	L	L	12,656	0	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

~ 1 1 1			•
Show Investments	()Whed End	1 of Current	()uarter

			whea Ena of Curren					•
1	2	3	4	5	6	7 Book/Adjusted	8 Amount of Interest	9 Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0109999999.	Fotal - U.S. Government Bonds					0	0	0
	Fotal - All Other Government Bonds					0	0	0
0509999999.	Fotal - U.S. States, Territories and Possessions Bonds					0	0	0
0709999999.	Total - U.S. Political Subdivisions Bonds					0	0	0
0909999999.	Total - U.S. Special Revenues Bonds					0	0	0
	CIGNA CORP CP 4(2) 144A		06/28/2022	2.000	07/28/2022	1,997,000	0	333
	EVERGY MISSOURI WEST INC CP 4(2) 1444		06/29/2022	2.020	07/13/2022	1,741,826	0	195
	FIDELITY NATL INFO SERV CP 42144A FORTUNE BRANDS HOME & SE CP 4(2) 144A		06/27/2022 06/27/2022	2.020 2.650	07/20/2022 07/25/2022			219
	FUTURE DRIVES POINT & SECT 94(2) 144A KENTUCKY UTILITIES OF 4(2) 144A		06/21/2022	2.050	07/21/2022	3,023,551		1,347 1,722
	SOUTHERN POWER CO CP 4(2) 144A		06/28/2022	2.000	07/19/2022	784,215	0	131
10199999999.	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations	•	1			13,097,450	0	3,947
11099999999.	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					13,097,450	0	3,947
1309999999.	Total - Hybrid Securities					0	0	0
1509999999.	Fotal - Parent, Subsidiaries and Affiliates Bonds					0	0	0
19099999999.	Subtotal - Unaffiliated Bank Loans					0	0	0
	Total - Issuer Obligations					13,097,450	0	3,947
24299999999.	Total - Residential Mortgage-Backed Securities					0	0	0
24399999999.	Total - Commercial Mortgage-Backed Securities					0	0	0
24499999999.	Total - Other Loan-Backed and Structured Securities					0	0	0
24599999999.	Total - SVO Identified Funds					0	0	0
24699999999.	Total - Affiliated Bank Loans					0	0	0
24799999999.	Total - Unaffiliated Bank Loans					0	0	0
2509999999.	Total Bonds					13,097,450	0	3,947
60934N-50-0	FEDERATED INVESTORS INC TREASURY OBLIGATION FUND		02/25/2022	0.000		0	0	0
60934N-50-0	FEDERATED INVESTORS INC TREASURY OBLIGATION FUND		06/28/2022	0.000		499	7	1
82099999999.	Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO		T			499	7	1
								İ
860999999	Total Cash Equivalents					13,097,949	7	3,948
- 66666666	rotar outri Equivalente					13,097,949		3,948