

### **HEALTH QUARTERLY STATEMENT**

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

## Aetna Health Inc. (a Maine corporation)

NAIC Group Co		NAIC Company Cod	le <u>95517</u> Employer's	ID Number	01-0504252
Organized under the Laws of	(Current) (Prior) Maine	s	tate of Domicile or Port of E	Entry	ME
Country of Domicile		United States	of America		
Licensed as business type:		Health Maintenanc	e Organization		
ls HMO Federally Qualified? Yes [ ]	No [X]				
Incorporated/Organized	10/03/1995	<del> </del>	Commenced Business		04/10/1996
Statutory Home Office	191 Marginal Way, Suite	G		Portland, ME,	
	(Street and Number)		, ,	or Town, State, Co	ountry and Zip Code)
Main Administrative Office		151 Farmingto (Street and I			
	I, CT, US 06156 ate, Country and Zip Code)		(,	800-872 Area Code) (Tele	
•	1 Farmington Avenue, RT21		,	Hartford, CT,	JS 06156
	eet and Number or P.O. Box)		(City o	or Town, State, Co	ountry and Zip Code)
Primary Location of Books and Records		191 Marginal V (Street and N			
	d, ME, US 04101	(Street and r		800-872	
	ate, Country and Zip Code)		,	Area Code) (Tele	ohone Number)
Internet Website Address		www.aetn	ia.com		
Statutory Statement Contact	Kim E. Ro (Name)				-775-6508 Telephone Number)
	eporting@aetna.com mail Address)			860-262 (FAX Nu	
Vice President and Secretary  Derek Scott Blunt, Senior Invest Whitney Dorothy Lavoie, Assista	ment Officer Fra	OTHE	II, Assistant Controller		ter Keller, Assistant Controller e Smith, Vice President and Treasurer
Vincent John Liscomb	, Jr	DIRECTORS OR Spence Willia	Deal :		Duncan Graeme Stuart
all of the herein described assets were statement, together with related exhibits condition and affairs of the said reporting in accordance with the NAIC Annual Strules or regulations require differences in Furthermore, the scope of this attestation	the absolute property of the , schedules and explanations g entity as of the reporting per atement Instructions and According to the n reporting not related to accord to by the described officers as	said reporting entity, f therein contained, and iod stated above, and ounting Practices and unting practices and pr also includes the relate	free and clear from any lien lexed or referred to, is a full first income and deduction. Procedures manual except rocedures, according to the led corresponding electronic electronic filling may be requested.	s or claims there and true statemers is therefrom for the to the extent that best of their inform. filling with the N/u uested by various	that on the reporting period stated above on, except as herein stated, and that this not of all the assets and liabilities and of the period ended, and have been complete.  (1) state law may differ; or, (2) that statuation, knowledge and belief, respectively AIC, when required, that is an exact cope regulators in lieu of or in addition to the Steven Matthew Conte pal Financial Officer and Controller
State of Pennsylvania County of Montgomery  Subscribed and sworn to before me this  day of October	County Subscrit	Connecticut of Hartford bed and sworn to befo day of		County of	Pennsylvania Montgomery and sworn to before me this  Movember, 2022
<i>k</i>		ATTE 1/	Der , 2022 Vantano	,	
NOTARY PUBLIC (Seal)	NOTAR	Y PUBLIC (Seal)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	NOTARY PU	JBLIC (Seal)
Commonwealth of Pennsylvania - KIM E. ROTH, Notary Pub Montgomery County My Commission Expires April 25 Commission Number 11414	lic S	Notary Public,	A MONTANO State of Connecticut Expires Mar. 31, 2026	My Con	ealth of Pennsylvania - Notary Seal IM E. ROTH, Notary Public Montgomery County Imission Expires April 25, 2025 Inmission Number 1141410

a. Is this an original filing? ...... Yes [ X ] No [  $\,$  ] 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	28,083,100	0	28,083,100	29,894,579	
	Stocks:					
	2.1 Preferred stocks	0	0	0	0	
	2.2 Common stocks	1,643,493	0	1,643,493	0	
3.	Mortgage loans on real estate:					
	3.1 First liens	0	0	0	0	
	3.2 Other than first liens	0	0	0	0	
4.	Real estate:					
	4.1 Properties occupied by the company (less \$					
	encumbrances)	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					
5.						
	(\$21,910,700 ) and short-term	01 010 700	0	21 010 700	0.000.054	
	investments (\$				_	
	Contract loans (including \$			0	0	
	Derivatives			0	0	
8.	Other invested assets			0	0	
9.				0		
10.	Securities lending reinvested collateral assets			0	0	
11.	Aggregate write-ins for invested assets			51,637,293	0	
12.	Title plants less \$	51,007,290				
13.	only)	0	0	0	0	
14.	Investment income due and accrued			214,281		
15.	Premiums and considerations:	214,201	0	214,201	142,443	
15.	15.1 Uncollected premiums and agents' balances in the course of collection	101 874	60 330	131,544	84 460	
	15.2 Deferred premiums, agents' balances and installments booked but	131,074	00,330	101,044	04,403	
	deferred and not yet due (including \$0					
		0	0	0	0	
	15.3 Accrued retrospective premiums (\$					
	contracts subject to redetermination (\$3,114,845 )	3,604,505	0	3,604,505	4,581,181	
16.	Reinsurance:					
10.	16.1 Amounts recoverable from reinsurers	0	0	0	0	
	16.2 Funds held by or deposited with reinsured companies				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		0		449,559	
	Net deferred tax asset		0		138,448	
19.	Guaranty funds receivable or on deposit				0	
20.	Electronic data processing equipment and software			0	0	
	Furniture and equipment, including health care delivery assets					
	(\$	0	0	0	0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates				0	
23.	Receivables from parent, subsidiaries and affiliates			0	0	
24.	Health care (\$1,810,896 ) and other amounts receivable			1,810,896		
25.	Aggregate write-ins for other than invested assets			0	39,994	
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			58,231,877	,	
27.	From Separate Accounts, Segregated Accounts and Protected Cell					
	Accounts			0	0	
28.	Total (Lines 26 and 27)	58,292,212	60,335	58,231,877	45,839,992	
	DETAILS OF WRITE-INS					
1101.						
1102.						
1103.						
1198.	Summary of remaining write-ins for Line 11 from overflow page				0	
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	-	1	0	
2501.	Current state income tax receivable	0	0	0	39,994	
2502.						
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page			0	0	
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	39,994	

# LIABILITIES, CAPITAL AND SURPLUS

	LIADILITIES, CAP		Current Period	<u> </u>	Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$276,785 reinsurance ceded)	14,282,736	693,335	14,976,071	11,663,883
2.	Accrued medical incentive pool and bonus amounts	4,076,525	0	4,076,525	2,872,875
3.	Unpaid claims adjustment expenses		0	203, 117	179,905
4.	Aggregate health policy reserves, including the liability of	,		,	.,.
	\$				
	Health Service Act	2 407 764	0	2 407 764	4 007 444
_					
5.	Aggregate life policy reserves				0
6.	Property/casualty unearned premium reserve				0
7.	Aggregate health claim reserves	1,737	0	1,737	4,230
8.	Premiums received in advance	24,629	0	24,629	33,827
9.	General expenses due or accrued			82,087	1,246
10.1					
	(including \$0 on realized gains (losses))	171 061	0	171 061	0
40.0					
	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		
16.	Derivatives		0		0
17.	Payable for securities		0		0
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties (with \$0				
	authorized reinsurers, \$294,652 unauthorized				
	reinsurers and \$0 certified reinsurers)	294.652	0	294.652	121.051
20.	Reinsurance in unauthorized and certified (\$0 )	, ,		, ,	, .
20.	companies	0	0	0	1.271
					, _
21.	Net adjustments in assets and liabilities due to foreign exchange rates				0
22.	Liability for amounts held under uninsured plans	5,734,665	0	5,734,665	1,030,889
23.	Aggregate write-ins for other liabilities (including \$0				
	current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	29,230,773	693,335	29,924,108	22,527,356
25.	Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26.	Common capital stock				1,000,000
	Preferred capital stock				0
27.					
28.	Gross paid in and contributed surplus				8,700,000
29.	Surplus notes				0
30.	Aggregate write-ins for other than special surplus funds		XXX	0	0
31.	Unassigned funds (surplus)	XXX	XXX	18,607,769	13,612,636
32.	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26				
	\$	XXX	XXX	0	0
	32.2				
		VVV	VVV	0	0
	\$				0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX		23,312,636
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	58,231,877	45,839,992
	DETAILS OF WRITE-INS				
2301.		•			
2302.					
2303.					,
	Summary of remaining write-ins for Line 23 from overflow page				0
2398.					
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.					
2502.		XXX	XXX		
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.	Totale (Emico 2007 timotgri 2000 piao 2000)(Emic 20 aboto)		XXX		<u> </u>
3002.			XXX		
3003.			XXX		
		VVV	XXX	0	0
3098.	Summary of remaining write-ins for Line 30 from overflow page	ļ		0	

# STATEMENT OF REVENUE AND EXPENSES

		Current Y To Date		Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months				174,662
2.	Net premium income ( including \$0 non-health				
	premium income)	XXX	118,019,162	97,240,743	130,364,522
3.	Change in unearned premium reserves and reserve for rate credits	xxx	1,436,305	(307,801)	1, 194, 654
4.	Fee-for-service (net of \$0 medical expenses)	XXX	0	0	0
5.	Risk revenue	XXX	0	0	0
6.	Aggregate write-ins for other health care related revenues				0
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX	119,455,467	96,932,942	131,559,176
	Hospital and Medical:				
9.	Hospital/medical benefits				84,419,036
10.	Other professional services				4,992,142
11.	Outside referrals				2,034,964
12.	Emergency room and out-of-area	*			4,673,242
13.	Prescription drugs				14,201,177
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts				3,013,549
16.	Subtotal (Lines 9 to 15)	5,002,409	100,318,133		113,334,110
17	Less: Net reinsurance recoveries	0	1 116 501	690 417	1 207 002
17. 18.	Total hospital and medical (Lines 16 minus 17)		· · ·	· ·	
19.	Non-health claims (net)				0
20.	Claims adjustment expenses, including \$	0			0
20.	containment expenses	0	2 238 945	1 762 408	2 435 220
21.	General administrative expenses				
22.	Increase in reserves for life and accident and health contracts		11,040,010		12,401,000
	(including \$0 increase in reserves for life only)	0	(220, 709)	233 409	27 638
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned				908,052
26.	Net realized capital gains (losses) less capital gains tax of				
	\$(107,630)	0	(613,074)	(146,599)	(163,232)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	163,242	537 , 127	744,820
28.					
	recovered \$0 )				
	(amount charged off \$0 )]		0	0	0
29.	Aggregate write-ins for other income or expenses	0	0	0	0
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	<b>&gt;&gt;&gt;</b>	6,750,348	5,318,035	5,232,968
31.	Federal and foreign income taxes incurred		4 000 000	1,025,155	914,458
32.	Net income (loss) (Lines 30 minus 31)	XXX	5,449,986	4,292,880	4,318,510
02.	DETAILS OF WRITE-INS	7000	0,110,000	1,202,000	1,010,010
0601.	DETAILS S. WAITE INC	XXX			
0602.		XXX			
0603.		XXX			
0698.	["	XXX	n	n	n
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	n
0701.	- Same (Lines and Farinasy) and place according to above)	XXX		3	0
0701.		2004			
0702.					
0703.	Summary of remaining write-ins for Line 7 from overflow page	XXX		0	Λ
0798.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	٥
1401.	Totals (Lines 0701 timough 0700 plus 0730)(Line 7 above)	7000	Ů	0	
1401.		····			
1402.					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0		^
1498. 1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)		0	0	
2901.	Totals (Lines 1401 tillough 1405 plus 1430)(Line 14 800Ve)	0	U	0	0
2902.					
2903	Common of complaints with the fact the CO Common of				
2998.	Summary of remaining write-ins for Line 29 from overflow page			0	0
2999.	Totals (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	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	23,312,636	22,004,213	22,004,213
34.	Net income or (loss) from Line 32	5,449,986	4,292,880	4,318,510
35.	Change in valuation basis of aggregate policy and claim reserves	0	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$(92,381)	(347,528)	(39,514)	(156, 197
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38.	Change in net deferred income tax	(92,381)	(10,504)	(91,249
39.	Change in nonadmitted assets	(16,215)	535,577	538,630
40	Change in unauthorized and certified reinsurance	1,271	0	(1,271
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles	0	0	0
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus	0	0	0
45.	Surplus adjustments:			
	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital		0	0
46.	Dividends to stockholders		(3,300,000)	(3.300.000
47.	Aggregate write-ins for gains or (losses) in surplus		0	0
48.	Net change in capital & surplus (Lines 34 to 47)			
49.	Capital and surplus end of reporting period (Line 33 plus 48)	28,307,769	23,482,652	23,312,636
<del></del>		20,001,700	20,402,002	20,012,000
4704	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page		0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

## **CASH FLOW**

		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	119,070,685	98,286,335	130,361,273
2.	Net investment income			
3.	Miscellaneous income	0	0	(
4.	Total (Lines 1 to 3)	119,788,367	98,846,227	131,260,689
5.	Benefit and loss related payments	95,296,938		107,423,574
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	(
7.	Commissions, expenses paid and aggregate write-ins for deductions			
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital			
	gains (losses)	571,212	1,817,634	2,295,705
10.	Total (Lines 5 through 9)	, i	88.803.281	123,111,738
11.	Net cash from operations (Line 4 minus Line 10)		10,042,946	8,148,95
12.	Cash from Investments  Proceeds from investments sold, matured or repaid:			
12.	12.1 Bonds	3 382 968	6 500 000	10,000,00
	12.2 Stocks			10,000,00
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
		_	0	
	12.7 Miscellaneous proceeds  12.8 Total investment proceeds (Lines 12.1 to 12.7)	_		
40		3,362,966		9,999,60
13.	Cost of investments acquired (long-term only):	0 000 070	14 000 007	45 447 00
	13.1 Bonds			
	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)		14,606,967	15,147,33
14.	Net increase (or decrease) in contract loans and premium notes	0	0	
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,005,825)	(8,107,109)	(5, 147, 47
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	
	16.2 Capital and paid in surplus, less treasury stock	0	0	
	16.3 Borrowed funds	0	0	
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	
	16.5 Dividends to stockholders	0	3,300,000	3,300,00
	16.6 Other cash provided (applied)	(576,235)	(2,225,698)	116, 17
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(576,235)	(5,525,698)	(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) $\dots$	13,041,346	(3,589,861)	(182,35
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year		9,051,710	9,051,71
	19.2 End of period (Line 18 plus Line 19.1)	21,910,700	5,461,849	8,869,35
ote: S	upplemental disclosures of cash flow information for non-cash transactions:			
	O1. Non-cash investment exchanges	0	563 , 121	1,561,48

## **EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION**

	1	1 Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year	15,138	0	691	0	0	0	0	14,447	0	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	17,528	0	761	0	0	0	0	16,767	0	(
5. Current Year	0	0	0	0	0	0	0	0	0	(
6. Current Year Member Months	150,647	0	6,794	0	0	0	0	143,853	0	(
Total Member Ambulatory Encounters for Period:										
7 Physician	309,337	0	4,960	0	0	0	0	304,377	0	
8. Non-Physician	336,297	0	5,001	0	0	0	0	331,296	0	
9. Total	645,634	0	9,961	0	0	0	0	635,673	0	(
10. Hospital Patient Days Incurred	9,783	0	78	0	0	0	0	9,705	0	(
11. Number of Inpatient Admissions	1,198	0	16	0	0	0	0	1,182	0	(
12. Health Premiums Written (a)	119,155,539	0	3,910,878	0	0	0	0	115,244,661	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	120,591,844	0	3,910,958	0	0	0	0	116,680,886	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	96,258,996	(45)	2,029,024	0	0	0	0	94,230,017	0	
18. Amount Incurred for Provision of Health Care Services	100,318,133	(45)	1,920,071	0	0	0	0	98,398,107	0	(

<sup>(</sup>a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .......115,244,661

# CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysi	is 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	33,130	2,411	150			44,341
0399999 Aggregate accounts not individually listed-covered	2,767,752	40,043	2,486			2,953,915
0499999 Subtotals	2,800,882	42,454	2,636	789	151,495	2,998,256
0599999 Unreported claims and other claim reserves			<del></del>	<del></del>		12,254,600
0699999 Total amounts withheld	·					0
0799999 Total claims unpaid			<del></del>	<del></del>		15,252,856
0899999 Accrued medical incentive pool and bonus amounts						4,076,525

### **UNDERWRITING AND INVESTMENT EXHIBIT**

#### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE							
		Claims Paid Liability Year to Date End of Current Quarter		5	6		
	Year to						
Line of Business	On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 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)	318,921	1,677,021	15,061	529,794	333,982	683,936	
2. Medicare Supplement	0	0	0	0	0	0	
3. Dental Only	0	0	0	0	0	0	
4. Vision Only	0	0	0	0	0	0	
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0	
6. Title XVIII - Medicare	6,472,277	84 , 169 , 458	382,044	14,050,909	6,854,321	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)	6,791,198	85,846,479	397, 105	14,580,703	7, 188, 303	11,668,113	
10. Healthcare receivables (a)	0	1,810,901	0	0	0	1,202,230	
11. Other non-health	0	0	0	0	0	0	
12. Medical incentive pools and bonus amounts		1,776,423	1,473,433	2,603,092	2,356,271	2,872,875	
13. Totals (Lines 9-10+11+12)	7,674,036	85,812,001	1,870,538	17, 183, 795	9,544,574	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 September 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	\$ 5,449,986	\$ 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	\$ 5,449,986	\$ 4,318,510
SURPL	LUS					
(5)	Aetna Health Inc. (a Maine corporation) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 28,307,769	\$ 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	\$ 28,307,769	\$ 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, September 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 November 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 September 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 September 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 September 30, 2022.
- (4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at September 30, 2022 is as follows:
  - a. The aggregate amount of unrealized losses:

	1. Less than 12 Months	\$ (161,937)
	2. 12 Months or Longer	(42,259)
).	The aggregate related fair value of securities with unrealized losses:	
	1. Less than 12 Months	\$ 2,595,525
	2. 12 Months or Longer	214,788

- (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 September 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. Dollar Repurchase Agreements and/or Securities Lending Transactions
  - (1) and (2): No significant change.

h

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

No significant change.

#### 7. <u>Investment Income</u>

No significant change.

#### 8. Derivative Instruments

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

#### 9. Income Taxes

No significant change.

10. <u>Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties</u>

No significant change.

#### 11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at September 30, 2022.
- B. The Company did not have any Federal Home Loan Bank agreements at September 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 September 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</u>
Risk

No significant change.

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

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 September 30, 2022.
  - (4) The Company did not have any securitized financial assets at September 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 September 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. <u>Direct Premium Written/Produced by Managing General Agents/Third Party Administrators</u>

No significant change.

20. Fair Value Measurements

Α

(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 September 30, 2022 is as follows:

Type of Financial Instrument	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
Common stocks	\$ 1,643,493	s —	\$ —	s —	\$ 1,643,493

- (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 September 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 September 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 investments, and cash equivalents	\$ 47,196,104	\$ 49,993,800	\$ 6,384,564	\$ 40,811,540	s —	s —	s —
Common stocks	\$ 1,643,493	\$ 1,643,493	\$ 1,643,493	s —	\$	\$	\$

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 November 10, 2022 for the statutory statement issued on November 11, 2022.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through November 10, 2022 for the statutory statement issued on November 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)	\$ 258
	Liabilities	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	12
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	29,455
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	(48,094)
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	18
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:

	Accrued I Year on E	Ouring the Prior usiness Written		Paid as of the r on Business	Differ	rences	A	ljustments			ances as of the ng Date
		Before December 31 of the Prior Year of the Prior 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		( 3, 3 3		( 15 11 1		( 13 1)		( 3) 3)			( 15 11 1)
Premium adjustments receivable (including high risk pool payments)	\$ 3,49	0   \$	\$ 1	s —	\$ 3,489	s –	\$ (3,489)	s —	A	s —	s —
2. Premium adjustments (payable) (including high risk pool premium)	-	- 260	_	15,668	_	(15,408)	_	15,408	В	_	_
3. Subtotal ACA Permanent Risk Adjustment Program	3,49	0 260	1	15,668	3,489	(15,408)	(3,489)	15,408		_	_
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	_	_
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											
1. Accrued retrospective premium	-	-	_	-	_	_	_	_	I	_	-
Reserve for rate credits or policy experience rating refunds	-	-	_	_	_	_	_	_	J	_	_
3. Subtotal ACA Risk Corridors Program	=	-	_	_	_	_	_	_		_	_
d. Total for ACA Risk Sharing Provisions	\$ 3,49	0 \$ 260	\$ 1	\$ 15,668	\$ 3,489	\$ (15,408)	\$ (3,489)	\$ 15,408		\$ —	\$

#### 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		Unsettled Balances as of the Reporting Date		
										^		
		mber 31 of the Year	Written Before December 31 Acc		Prior Year Accrued Less Payments (Col 1 - 3)	Payments Payments		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	4 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 September 30, 2022, \$7,853,941 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,870,538 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$4,996,414 favorable prior-year development since December 31, 2021 to September 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 \$4,670,551 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. <u>Premium Deficiency Reserves</u>

September 30, 2022

\$—

Liability carried for premium deficiency reserves
 Date of the most recent evaluation of this liability

9/30/2022 No

3. Was anticipated investment income utilized in the calculation?

### 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 the filing of Disclosure of Material Transactions with the State of 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 charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?	Yes [ ] No [ X ]
2.2	If yes, date of change:	
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which 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 since 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 July 1, 2022, Aetna Insurance Company of Connecticut was sold to Continental Casualty Company, a subsidiary of Loews Corporation. Effective August 23, 2022, Aetna Integrated Informatics, Inc.'s name was changed to CVS Accountable Care Organization Inc.	
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?	Yes [ X ] No [ ]
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.	0000064803
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?	Yes [ ] No [ X ]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.	
	1 2 3 Name of Entity NAIC Company Code State of Domicile	
	Tune of Entry	
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [ If yes, attach an explanation.	] No [ X ] N/A [
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.	12/31/2020
٠		12/01/2020
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.	
6.2	date should be the date of the examined balance sheet and not the date the report was completed or released.  State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?	12/31/2020
6.2	date should be the date of the examined balance sheet and not the date the report was completed or released.  State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).	12/31/2020 06/30/2022
<ul><li>6.2</li><li>6.3</li><li>6.4</li></ul>	date should be the date of the examined balance sheet and not the date the report was completed or released.  State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial	12/31/2020 06/30/2022
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li></ul>	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?	12/31/2020 06/30/2022 ] No [ ] N/A [ X
<ul><li>6.2</li><li>6.3</li><li>6.4</li><li>6.5</li><li>6.6</li></ul>	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [	12/31/2020 06/30/2022 ] No [ ] N/A [ X ] No [ ] N/A [ X
6.2 6.3 6.4 6.5 6.6 7.1	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?	12/31/2020  06/30/2022  ] No [ ] N/A [ X ] No [ ] N/A [ X Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?  If yes, give full information:	12/31/2020  06/30/2022  ] No [ ] N/A [ X ] No [ ] N/A [ X Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2 8.1	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?  If yes, give full information:  Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?	12/31/2020  06/30/2022  ] No [ ] N/A [ X ] No [ ] N/A [ X Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2 8.1 8.2	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance  Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?  If yes, give full information:  Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?  If response to 8.1 is yes, please identify the name of the bank holding company.	12/31/2020  06/30/2022  ] No [ ] N/A [ X ] No [ ] N/A [ X  Yes [ ] No [ X ]  Yes [ ] No [ X ]
6.2 6.3 6.4 6.5 6.6 7.1 7.2 8.1 8.2	State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  By what department or departments?  Maine Bureau of Insurance Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?  Yes [  Have all of the recommendations within the latest financial examination report been complied with?  Yes [  Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?  If yes, give full information:  Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?  If response to 8.1 is yes, please identify the name of the bank holding company.  If the company affiliated with one or more banks, thrifts or securities firms?  If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit	12/31/2020  06/30/2022  J No [ ] N/A [ X J No [ ] N/A [ X Yes [ ] No [ X ]  Yes [ ] No [ X ]

## **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	( ] N	lo [ ]	
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporti	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	( ] N	lo [ ]	
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 quarte 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 v	vas				
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes [	1 1	lo [ X ] ol	1
9.31	· · · · · · · · · · · · · · · · · · ·			100 [	,	io [ A ]	
	FINANCIAL						
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?			Yes [	] N	lo [ X ]	
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:						
	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.)						
13.	Amount of real estate and mortgages held in other invested assets in Schedule BA:  Amount of real estate and mortgages held in short-term investments:						
14.1							
	If yes, please complete the following:			100 [	, "	io [ A ]	
		1			_	2	
		Prior Year-End Book/Adjusted				Quarte diusted	
		Carrying Value				g Value	
	Bonds	S	.0	\$			
	Preferred Stock			\$			
	Common Stock Stock			\$			
	Short-Term Investments			\$			
	All Other State			\$ \$			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$			
	Total Investment in Parent included in Lines 14.21 to 14.26 above			\$			
15 1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			V [	1 1	la FV 1	
	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?						
10.2	If no, attach a description with this statement.		100 [	ן או ן	. 1	IN/A [	1
10	For the constitue actifue acquire landing program at the third constitue of the following actifue actification actifue						
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date		•				0
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2						
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Page 16.3. Total payable for securities lending reported on the liability page.						

## **GENERAL INTERROGATORIES**

	1			ndbook, complete				
Ctata Ctraat Dank	Name of Custo	odian(s)	Ctata Ctraat Einanaial C	Custodian Addr	ess In Ctract: Baston MA			
State Street Dank	and trust company		02111-2900					
For all agreements ocation and a comp		th the requirements of the NAIC	Financial Condition Examin	ers Handbook, pi	rovide the name,			
Nam		2 Location(s)		3 Complete Expla	nation(s)			
	y changes, including mation relating thereto	name changes, in the custodiar	n(s) identified in 17.1 during t	he current quarte	r?	Yes [	]	No [ X
		2 New Custodian	3 Date of Change		4 Reason			
Old Cu	stodian	New Custodian	Date of Change		Reason			
nake investment de	ecisions on behalf of t	restment advisors, investment nether reporting entity. For assets to ment accounts"; "handle secu	hat are managed internally b irities"]					
Derek S. Blunt as	Name of Firm Senior Investment 0	or Individual fficer	2 Affiliation 					
		I in the table for Question 17.5, more than 10% of the reporting				Yes	[ ]	No [ )
		with the reporting entity (i.e. deaggregate to more than 50% of				Yes	[ ]	No [ )
For those firms or in able below.	ndividuals listed in the	table for 17.5 with an affiliation	code of "A" (affiliated) or "U'	(unaffiliated), pr	ovide the information for the	he		
1		2		3	4		5 Invest	
Central Registration		Name of Firm or Individual	Local Entit	Identifies (LEI)	Degistered With		Agree	ement
Depository Numbe		Name of Firm or Individual	N/A	/ Identifier (LEI)	Registered With Not registered	N	(IMA) 10	
lave all the filing re		rposes and Procedures Manual	<u>"</u>		•		[ X ]	No [
no, list exceptions								
sy self-designating a. Documentati security is no b. Issuer or obl c. The insurer h	on necessary to permot available. gor is current on all class an actual expecta	porting entity is certifying the foll hit a full credit analysis of the se ontracted interest and principal tion of ultimate payment of all co	curity does not exist or an NA payments. ontracted interest and princip	AIC CRP credit ra	iting for an FE or PL			
sy self-designating a. Documentati security is no b. Issuer or obl c. The insurer h las the reporting en	on necessary to permot available. gor is current on all class an actual expectantity self-designated 5	nit a full credit analysis of the se ontracted interest and principal tion of ultimate payment of all co iGI securities?	curity does not exist or an NA payments. ontracted interest and princip	AIC CRP credit ra	iting for an FE or PL	Yes	[ ]	No [ ]
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### **GENERAL INTERROGATORIES**

### PART 2 - HEALTH

#### 1. Operating Percentages:

	1.1 A&H loss percent	 			8	4.2 9
	1.2 A&H cost containment percent	 				1.4 %
	1.3 A&H expense percent excluding cost containment expenses	 			1	0.2 %
2.1	Do you act as a custodian for health savings accounts?	 Yes [	]	No [	Х]	
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 [	Х]	
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 [	Х ]	
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	Yes [	1	No [	X 1	

### **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

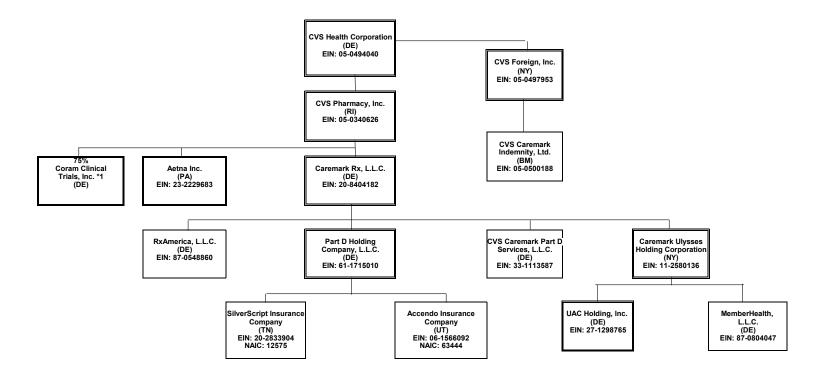
		Showing All New Neith	isurance meanes	- Current rea	i to Date	· · · · · · · · · · · · · · · · · · ·		
1	2	Showing All New Rein 3 4	5	6	7	8	9	10
								Effective
							Certified	Date of
NAIC			Domiciliary Jurisdiction	Type of	Type of Business		Reinsurer	Certified
Company Code	ID	Effective	Domiciliary	Reinsurance	Business		Rating	Reinsurer
Code	Number	Date Name of Reinsurer	Jurisdiction	Ceded	Ceded	Type of Reinsurer	(1 through 6)	Rating
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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 Total Columns 2 Active Renefite Property/ Casualty 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. 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 n n 0 n 0 0 n ٥ 0 19. Louisiana LA N. 0 0 0 0 0 0 0 0 0 3.910.878 .115.244.661 119.155.539 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. 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 n 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 0 59. Subtotal 3,910,878 .115,244,661 0 .0 .0 .0 .0 .119, 155, 539 0. XXX. 60. Reporting Entity Contributions for Employe Benefit Plans XXX 0 0 0 0 3,910,878 61 Totals (Direct Business) XXX 115,244,661 0 0 0 0 0 119, 155, 539 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 above) (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	

# 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.

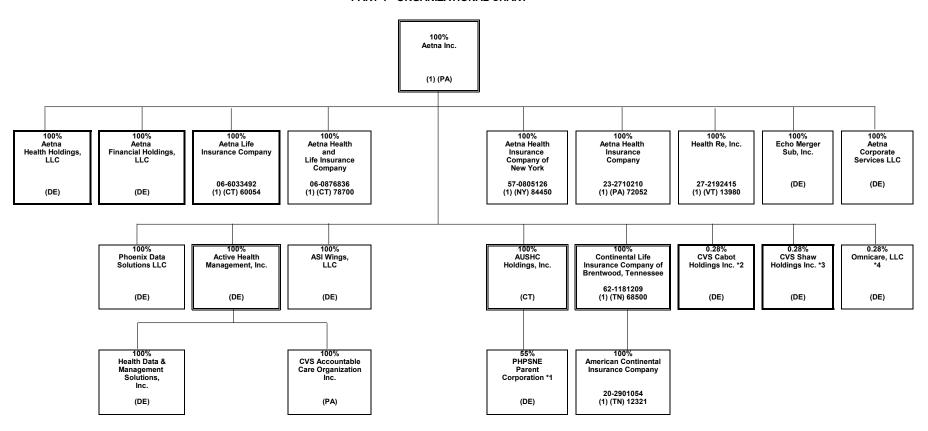
Bold borders indicate entity has subsidiaries shown on a separate page.

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

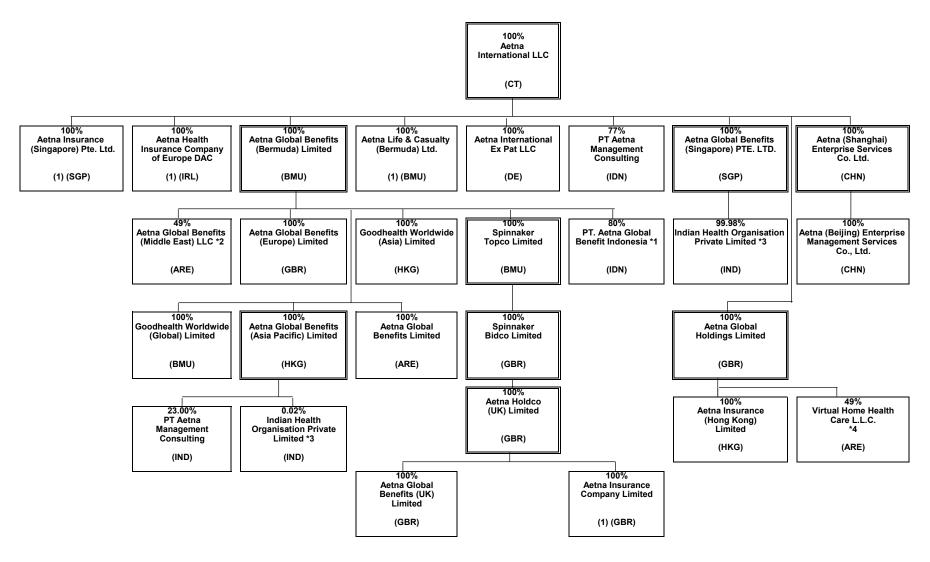
<sup>\*1</sup> Coram Clinical Trials, Inc. is also 25% owned by Aetna Life Insurance Company

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

#### PART 1 - ORGANIZATIONAL CHART



<sup>\*1</sup> 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.

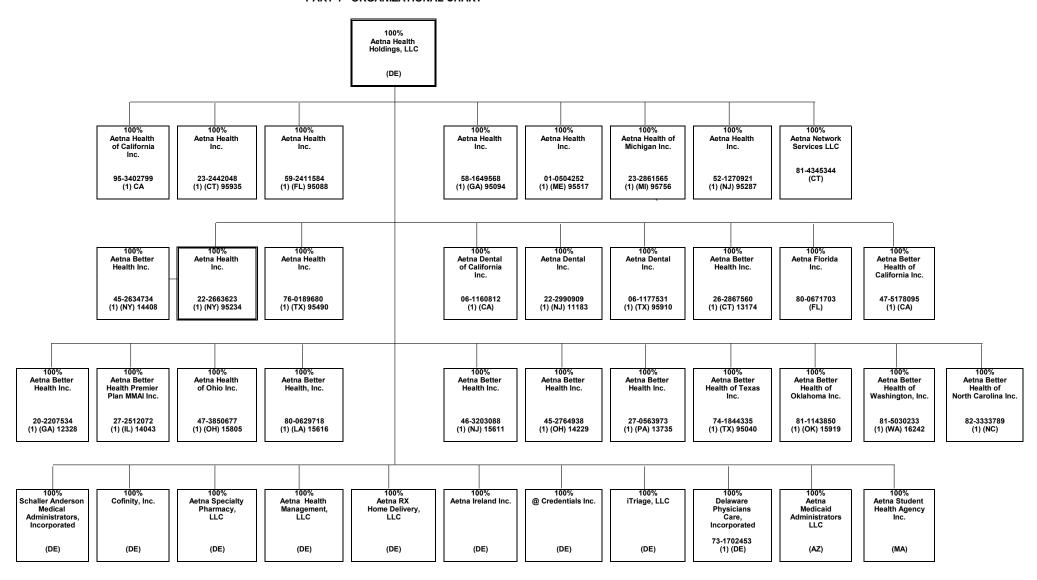


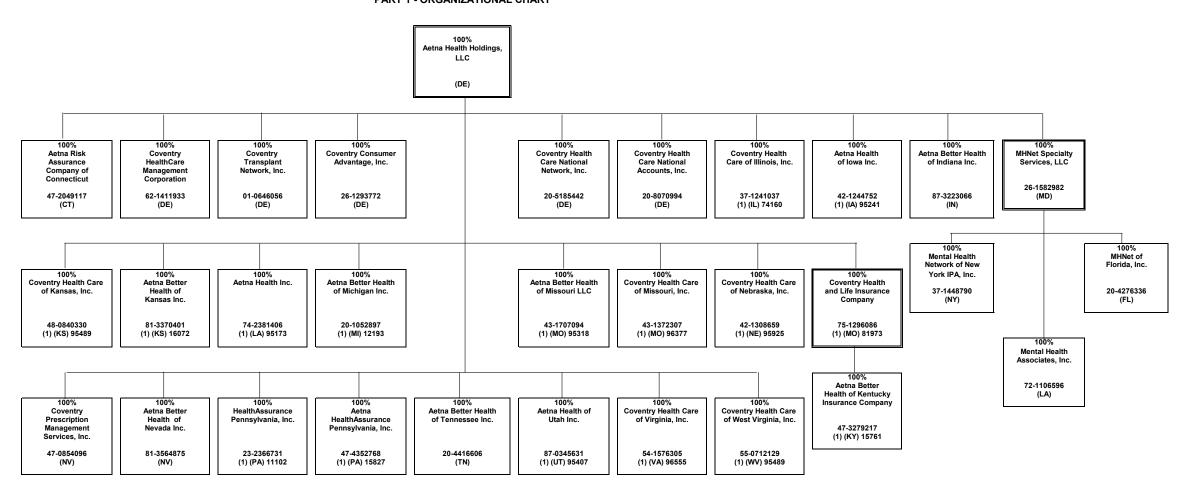
<sup>\*1</sup> PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

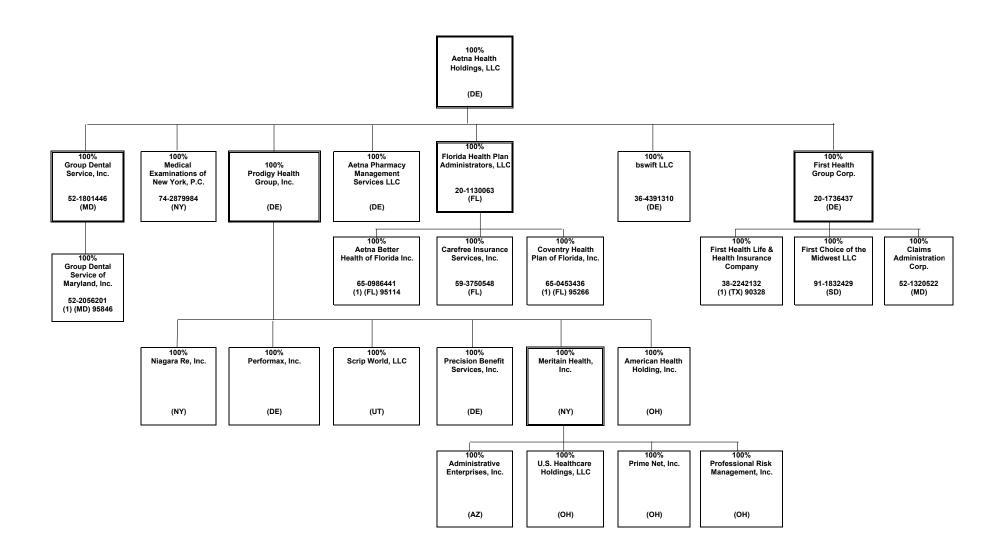
\*2 Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.

\*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

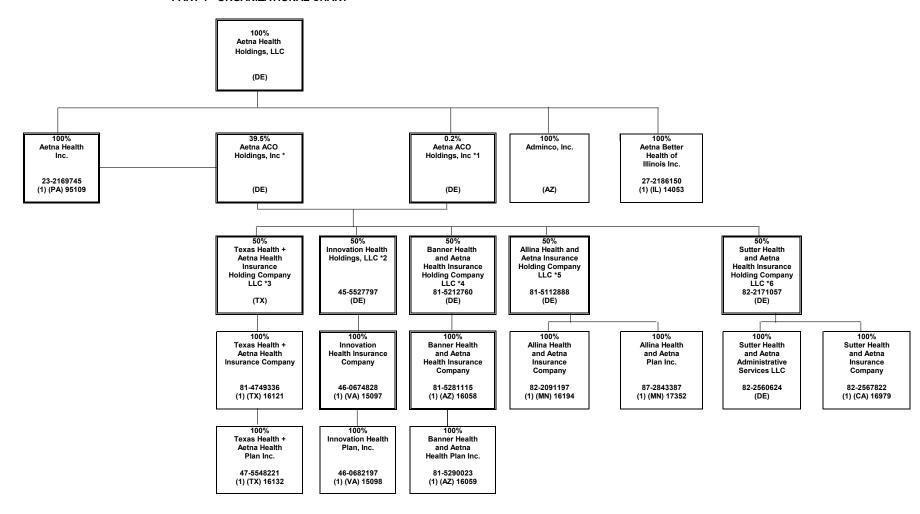






#### SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

#### PART 1 - ORGANIZATIONAL CHART

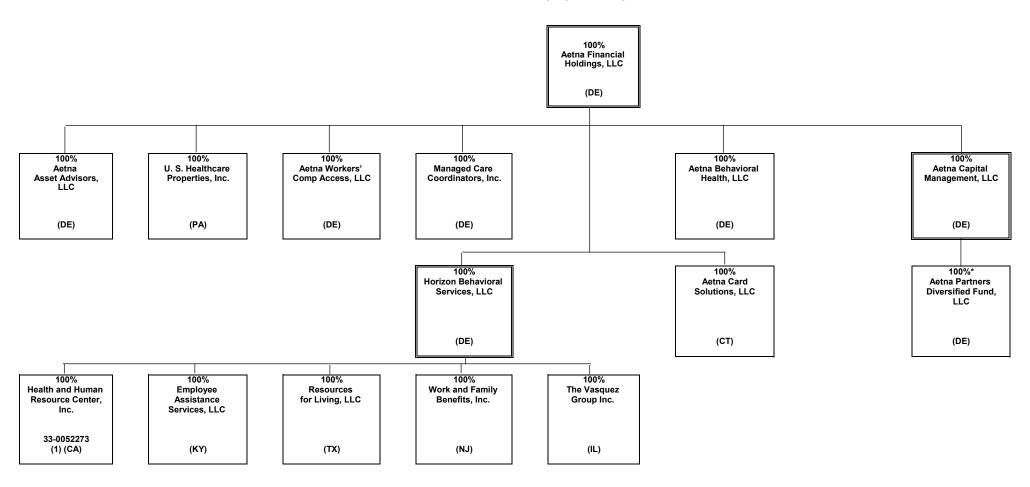


<sup>\*1</sup> Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

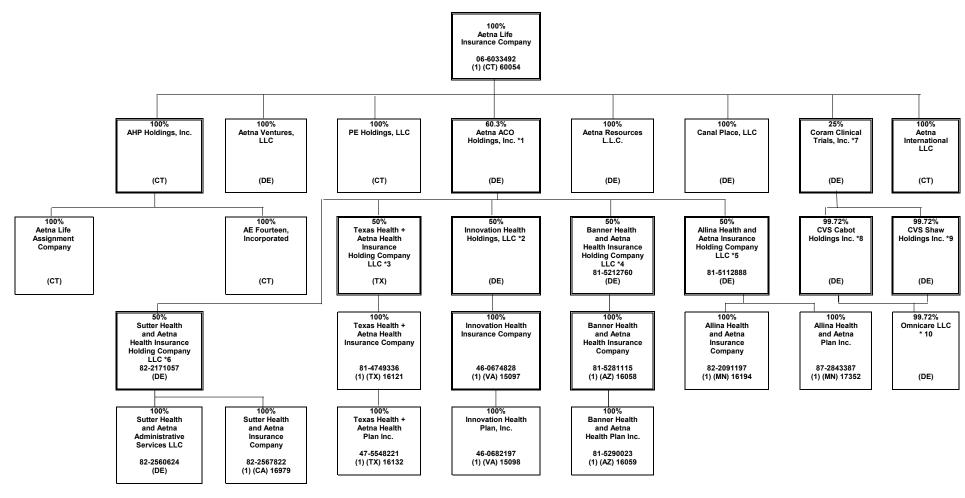
<sup>\*2</sup> Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

<sup>\*3</sup> 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.

<sup>\*5</sup> Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Sulter Health Plan Products Organization, LLC.
\*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.



<sup>\*</sup> 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.



<sup>\*1</sup> 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.

<sup>\*3</sup> Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

<sup>\*4</sup> Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

<sup>\*5</sup> Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.

<sup>\*6</sup> 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.

<sup>\*8</sup> CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.

<sup>\*9</sup> CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.

<sup>\*10</sup> Remaining .28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.

Name of Securities   Part					PA		A - DE I AI	L OF INSURAN	CEI	JOLL	ING COMPANT	SISIEIVI				
Control   Cont	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Company   Comp												Type	If			
Name of Sources    Name of Company												of Control	Control			
MAC   Corporative   Color   Company   D   Fodoral   Color   Fodoral   Color												(Ownership,	is		Is an	
Company   Comp							Name of Securities			Relation-		Board,	Owner-		SCA	
Company   Comp							Exchange		Domi-	ship		Management,	ship		Filing	
Code   Color   Code			NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Code   Cotton   Code	Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	!
Control   Cont	Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion		(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	)) *
Section   Control   Cont						0000064803	NYSE			UIP					N0	0
Oct   Description   Descript									UT						N0	0
Section   Control   Cont															N0	0
Section   Sect															NO NO	0
1901   0.00   1904   1907															NO	0
Section   Sect															NO	V
Output   Control   Contr															N0	0
Description   Control   Part   Part   Control   Part   Control   Part   Part   Control   Part   Part   Part   Control   Part   Pa											Caremark. Rx., L.L.C.				NO	0
OS SELIN SIGNED   DOIS   OS SELIN SIGNED   DOIS   Develop   DOIS   Develop   DOIS   Develop   DOIS	0001	CVS HEALTH GROUP	00000	87-0804047					DE	NIA	Caremark Ulysses Holding Corporation	Ownership.	100.000	CVS Health Corporation	NO	0
Control   Cont								CVS Caremark Indemnity, Ltd.		IA	CVS Foreign, Inc.	Ownership	100.000	CVS Health Corporation	N0	0
DOTAL   COS HEALTH SPUP											Caremark Ulysses Holding Corporation				NO	0
Sept															N0	0
1,001   1,005   1,00															N0	13
DOT   ON EALTH GRAPP   9000   50-Section   9000   90-Section   90000   90000					3060706	0001122304									N0	0
DOIST   100   10															NO NO	0
Dots   Dots   EALTH GRUP   S008   Se 241958   Alera Health Inc.   FL   Li   Aetha Wealth Rollings   LD   Owership   100,000   OS Realth Corporation   100,000   OS Realth Corp															NO	0
DOST   DOST   FACTOR   DOST															NO	0
															NO	0
ONS FEALTH GRUP															NO	0
DOI   ON SEALTH GOUP															NO	0
OSS PEALTH GRUP				52-1270921						IA		Ownership	100.000		N0	0
OSS   EALTH 690UP   95-6990   76-0-1968680   Alartas   Hast Ith Incl.   TX   I.A   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Antras   Hast Ith Holdings, LLC   Ownership   100,000   OSS   Hast Ith Corporation   Ownership   100,000   O															N0	0
DOID   OIS HEALTH GROUP   95040   74-1844355     Alerta Relative Health of Fasas Inc.   TX.   IA. Alerta Relative Health Group   1000   000   Sis Health Corporation   1000   000   Sis Health Group   1000   000   000   Sis Health Group   1000   000   000   Sis Health Group   1000   000   000   Sis Health Group   100											Aetna Health Inc. (NY)				N0	0
DOID   OTS HEALTH GROUP   12288   20-227/534   Alerta Better Health Inc.   GA   I.A.   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   1908   1908   22-289909   Alerta Bertal of California Inc.   CA   I.A.   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   59991   Other 177531   Alerta Bertal Inc.   T. I.A.   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   30-1027/60   Alerta Bertal Inc.   T. I.A.   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   30-1027/60   Alerta Retal Handparent, LL   DE   NIAL   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   22-3187/443   Alerta Fealth Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   22-3187/443   Alerta Fealth Holdings, LL   DE   NIAL   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   22-3187/443   Alerta Settler Health Inc.   DE   NIAL   Alerta Health Holdings, LL   Omership   100,000   CS Health Corporation   2001   OTS HEALTH GROUP   0,0000   20-127/723   DESTINATION   0,0000															N0	0
DOID   ON FEALTH GRUP   DOID   ON FEALTH GRUP   THIS   22 - 22990999   DOID   ON FEALTH GRUP   DOING   ON FEALTH GRUP   DOID   ON FEALTH GRUP   DOING   DOING   ON FEALTH GRUP   DOING   DOING   ON FEALTH GRUP   DOING   DO															NO NO	0
DODI   CVS HEALTH GRUP   95910   959															NO	
DOID   CVS FEALTH GROUP   95610   66-1177531   Aetra Bental Inc.   TX										ΙΑ ΙΔ					NO	v
Actna RH Home Delivery, LLC   DE   NIA   Actna Health Holdings LLC   Ounership   100,000   CVS Health Corporation   Nonership   100,000   CVS Health GROUP   0,0000   30-9123780   Actna Health Management, LLC   DE   NIA   Actna Health Holdings LLC   Ounership   100,000   CVS Health GROUP   0,0000   22-918743   Actna Health Management, LLC   DE   NIA   Actna Health Holdings LLC   Ounership   100,000   CVS Health GROUP   0,0000   CVS Health Groperation   0,0000   CVS Health Groperation   0,0000   CVS Health GROUP   0,0000   CVS Health Groperation   0,0000										ΙΔ					NO	0
DOID   CVS HEALTH GROUP   DO0000   23-3670755   Aletna Health Management, LLC   DE   NIA   Aletna Health Holdings, LLC   Demership   100,000   CVS Health Group   DO0000   DO0000   DO0000   DO0000   DO0000   DO0000   DO0000   DO0000   DO0000   DO00000   DO0000   DO0000   DO0000   DO0000   DO00000   DO0000   DO00000   DO000000   DO000000   DO000000   DO000000   DO000000   DO0000000   DO000000   DO0000000000															NO	0
DOD1   CVS HEALTH RGRUP   DOD000   DOD0000   CVS HEALTH RGRUP   DOD000   DOD0000   DOD00000   DOD000000   DOD000000   DOD0000000000								Aetna Health Management, LLC							NO	0
0,000   CVS   EALTH   GROUP   0,0000   27-1274723   Cofinity, Inc.   DE   NIA   Aetna   Heal th Holdings, LLC   0,000   CVS   Heal th Corporation   0,0001   CVS   EALTH   GROUP   0,0000   CVS   EALTH   CVS	0001	CVS HEALTH GROUP	00000					Aetna Ireland Inc.		NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
DO01   CVS   FEALTH GROUP   D.0000   D.00000   D.0000   D.00000				57-1209768				Aetna Specialty Pharmacy, LLC							NO	0
DOOI   CVS HEALTH GROUP   13736   27-0583973   Aetna Better Health Inc.   P.A.   I.A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   DOOI   CVS HEALTH GROUP   13174   26-2867560   Aetna Better Health Inc.   CT.   I.A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CA.   I.A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CA.   I.A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15805   47-3850677   Aetna Better Health Prenier Plan MMAI Inc.   I.L.   I.A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15805   47-3850677   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15806   80-0629718   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15806   80-0629718   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15806   80-0671703   Aetna Florida Inc.   FL.   NIA.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   14229   42-2764938   Aetna Better Health Inc.   D.H.   A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15611   46-320308   Aetna Better Health Inc.   D.H.   A.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15919   81-1143850   Aetna Better Health Agency Inc.   MA.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   15919   81-1143850   Aetna Better Health Agency Inc.   MA.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   CVS HEALTH GROUP   100.000   CVS Health Corporation   Delaware Physicians Care, Incorporated   DE.   NIA.   Aetna Health Holdings, LLC   Unnership.   100.000   CVS Health Corporation   Delaware Physicians Care, Incorporated   DE.															NO	0
0001   CVS HEALTH GROUP   .13174   26-2867560   Aetna Better Health Inc.   CT   1A   Aetna Health Holdings LLC   Ownership   .100.000   CVS Health Corporation   .0001   CVS HEALTH GROUP   .14043   .27-2512072   Aetna Better Health Premier Plan MMAI Inc.   L.   I.A   Aetna Health Holdings LLC   Ownership   .100.000   CVS Health Corporation   .0001   CVS HEALTH GROUP   .15805   47-3850677   Aetna Better Health Premier Plan MMAI Inc.   L.   I.A   Aetna Health Holdings LLC   Ownership   .100.000   CVS Health Corporation   .0001   CVS HEALTH GROUP   .15816   80-0629718   Aetna Better Health Inc.   L.A   I.A   Aetna Health Holdings LLC   Ownership   .100.000   CVS Health Corporation   .0001   CVS HEALTH GROUP   .00000   .0001   CVS HEALTH GROUP   .00000   .00000   .00000   .00000   .00000   .00000   .00000   .00000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .000000   .0000000   .0000000   .0000000   .0000000   .0000000   .00000000															N0	0
DOO1   CVS HEALTH GROUP   DO000   47-5178095   Aetna Better Health of California Inc.   CA   IA   Aetna Health Holdings, LLC   Ownership.   Dou000   CVS Health Corporation   Aetna Better Health Premier Plan MMAI Inc.   L   IA   Aetna Health Holdings, LLC   Ownership.   Dou000   CVS Health Corporation   CVS Health GROUP   Do000   CVS Health Corporation   Aetna Health Holdings, LLC   Ownership.   Do000   CVS Health Corporation   CVS Health GROUP   Do000   CVS Health GROUP   Do000   CVS Health Group CVS Health Health Holdings, LLC Ownership.															NO	0
.0001   CVS   EALTH   GROUP															NO NO	0 0
D001   CVS   EALTH   GROUP   15805   47-3850677   Aetna   Health   of Ohio   Inc.   OH.   IA.   Aetna   Health   Holdings, LLC   Ownership   100.000   CVS   Health   Corporation   Over   Health   Group   15616   80-0629718   Aetna   Better   Health   Inc.   LA.   IA.   Aetna   Health   Holdings, LLC   Ownership   100.000   CVS   Health   Corporation   CVS   Health   Group   Gro															NO NO	0
															N0	0
D001   CVS HEALTH GROUP   D0000   80-0671703   Aetna Florida Inc.   FL   NIA   Aetna Health Holdings, LLC   Ownership   D00.000   CVS Health Corporation   DVS HEALTH GROUP   D0000   DVS HEALTH GROUP   D0000   DVS HEALTH GROUP   D0000   DVS Health Corporation   D001   CVS HEALTH GROUP   D0000   DVS Health Corporation   D001   CVS HEALTH GROUP   D0000   DVS Health Corporation   D001   DVS HEALTH GROUP   D0000   DVS Health Corporation   D001   DVS HEALTH GROUP   D0000   D0000   DVS Health Corporation   D001   DVS HEALTH GROUP   D0000   D00000   D000000   D000000   D000000   D000000   D00000000															NO	0
0001   CVS HEALTH GROUP   14229   45-2764938   Aetna Better Health Inc.   .0H   .1A   Aetna Health Holdings LLC   .0wnership   .100.000   .CVS Health Corporation															NO	0
.0001         CVS HEALTH GROUP         .15919         81-1143850         Aetna Better Health of Oklahoma Inc.         .0K         I.A.         Aetna Health Holdings, LLC         Ownership         .100.000         CVS Health Corporation           .0001         CVS HEALTH GROUP         .00000         04-2708160         Aetna Student Health Agency Inc.         .MA.         .NIA         .NIA	0001	CVS HEALTH GROUP	14229	45-2764938				Aetna Better Health Inc.	HO		Aetna Health Holdings, LLC	Ownership	100.000		N0	0
.0001         CVS HEALTH GROUP         .00000         04-2708160         Aetna Student Health Agency Inc.         .MA.         .NIA.         Aetna Health Holdings, LLC.         Ownership.         .000 .000 .000 .000 .000 .000 .0000.         CVS Health Corporation.         .000 .000 .000 .000 .000 .000 .000 .00															NO	0
0001 CVS HEALTH GROUP															N0	0
Schaller Anderson Medical Administrators,0001CVS HEALTH GROUP0000001-0826783100.000CVS Health Corporation100.000CVS Health Corporation															N0	0
	0001	CVS HEALTH GROUP	00000	/3-1702453					DE	NIA	Aetna Health Holdings, LLC	. Uwnership	100.000	CVS Health Corporation	N0	0
	0004	CVC HEALTH CDOLID	00000	01 0000700					DE	NI A	Astro Health Heldings 110	Ownership	100 000	CVC Health Company time	NO.	_
1 0001 1 1000 UEALTH CHORD 1 0000 10 10 10 10 10 10 10 10 10 10 10	0001	CVS HEALTH GROUP	00000	86-0842559				Aetna Medicaid Adminstrators LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
DOUGH CVS HEALTH GROUP DOUGH 160-0642539 Aetha Medicaid Administrators LLC NIA Aetha Health Holdings, LLC University University 100.000 CVS Health Corporation University 100.000 CVS Health Corporati															NO	0
											Aetna Health Holdings IIC				N0	n

	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	
														la an	
									5		(Ownership,	is		Is an	
						Name of Securities		١	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	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	45-5527797				Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	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	NO.	0
							Texas Health + Aetna Health Insurance Holding								
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			Texas Health + Aetna Health Insurance					1
0001	CVS HEALTH GROUP	16121	81-4749336				,	TX	IA	Holding Company LLC	Ownership.	100.000	CVS Health Corporation	NO	0
										Texas Health + Aetna Health Insurance					1
0001	CVS HEALTH GROUP	16132	47-5548221	1			Texas Health + Aetna Health Plan Inc.	TX	IA	Company	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95109	23-2169745	1			Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Owner ship.	39.500	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.	Ownership	100.000	CVS Health Corporation	NO	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	NO	0
0001	CVS HEALTH GROUP	00000	31-1368946				American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	16-1264154				Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	86-0537707				Adminco. Inc.	AZ	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	86-0527428				Administrative Enterprises, Inc.	AZ	NIA	Meritain Health, Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	16-1684061				U.S. Healthcare Holdings, LLC	0H	NIA	Meritain Health, Inc.	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	34-1670299				Prime Net. Inc.	OH	NIA	Meritain Health, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	34-1348032				Professional Risk Management, Inc.	OH	NIA	Meritain Health, Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
1 000	OVS TIENETTI GROOT	90000					Continental Life Insurance Company of			weiltaninearth, mc.	Owner Sirip	100.000	CVO HEATTH COTPORATION	IW	
0001	CVS HEALTH GROUP	68500	62-1181209				Brentwood, Tennessee	TN	1.0	Aetna Inc.	Ownership.	100,000	CVS Health Corporation	NO.	0
10001	OVS TEALTH GROOT	90500	02-1101203				Di cittwood, Tellilessee	1110		Continental Life Insurance Company of	Owner strip	100.000	Ovo nearth corporation		
0001	CVS HEALTH GROUP	12321	20-2901054				American Continental Insurance Company	TN	1.0	Brentwood. Tennessee	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	60054	06-6033492				Aetna Life Insurance Company	CT	IA	Aetna Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Owner ship	60.300	CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP	00000	06-1270755				AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	06-1028469				AE Fourteen, Incorporated	CT	NIA	AHP Holdings. Inc.	Owner ship	100.000	CVS Health Corporation	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	1			Aetna Resources L.L.C.	DE	NIA	Aetna Life Insurance Company	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	142320/				Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Owner Strip	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	00000	20-3180700				Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Owner Strip.	100.000	CVS Health Corporation	NO	ا۲
0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials, Inc.	DE	NIA	Aetna Life Insurance Company	Owner strip	25.000	CVS Health Corporation	NO	13
0001	CVS HEALTH GROUP	00000	85-3918720	1			CVS Cabot Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Ownership	25.000	CVS Health Corporation	NO	14
0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Owner strip	99.720	CVS Health Corporation	NO	15
0001	CVS HEALTH GROUP	00000	31-1001351	1			Omnicare, LLC	DE	NIA	CVS Cabot Holdings Inc.	Ownership	99.720	CVS Health Corporation	NO	16
0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare, LLC	DE	NIA	CVS Shaw Holdings Inc	Ownership	49.860	CVS Health Corporation	N0	16
0001	CVS HEALTH GROUP	00000	41-2035961	1			Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	26-2030792				Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000		N0	v
0001	CVS HEALTH GROUP	00000	23-2354500	1			U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	38-3704481				Aetna Capital Management, LLC	PA DE	NIA	Aetna Financial Holdings, LLC	Owner ship	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	11-3667142		0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	CVS Health Corporation	N0	
0001	CVS HEALTH GROUP	00000	20-0446676		0001314322			DE	NIA	Aetna Financial Holdings, LLC	Owner ship	100.000		N0	
0001	CVS HEALTH GROUP	00000	20-0446676	-			Aetna Workers' Comp Access, LLC Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO NO	0 0
	CVS HEALTH GROUP	00000						DE						N0	
0001	CVS HEALTH GROUP	00000		-			Managed Care Coordinators, Inc.	DE	NIA NIA	Aetna Financial Holdings, LLC Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
		00000		-			Horizon Behavioral Services, LLC					100.000	CVS Health Corporation		
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		33-0052273	-			Health and Human Resource Center, Inc.		IA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	N0	V
0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Owner ship	100.000	CVS Health Corporation	N0	0

	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			Dalatian						
						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	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	NO	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 PA	IA	Aetna Inc.	Owner ship	100.000	CVS Health Corporation	NO	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.	Ownership	100.000	CVS Health Corporation	NO	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	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Insurance (Singapore) PTE. LTD.	SGP	IA	Aetna International LLC	Owner ship	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	1				Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	1				Goodhealth Worldwide (Global) Limited	BMU	NIA NIA	Aetna Global Benefits (Bermuda) Limited Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	N0 N0	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Europe) Limited Goodhealth Worldwide (Asia) Limited	GBH	NIA	Aetna Global Benefits (Bermuda) Limited Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	00000						ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Owner ship	100.000		NO	
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits LimitedPT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Owner ship.		CVS Health Corporation CVS Health Corporation	NO	0 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
1000	CVS REALIN GROUP	00000					Aetna Global Benefits (Middle East) LLC	ANE		Aetha Grobal benefits (bermuda) Elmited	Owner Sirrp	49.000	CVS Hearth Corporation		
0001	CVS HEALTH GROUP	00000					Aetha diobai benefits (Asia Facific) Elimited	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	Ownership.	77.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Owner ship.	100.000	CVS Health Corporation	NO	0
	OTO TENETH GROOT						Notice florado (dit) Elimitos			Aetna Global Benefits (Asia Pacific)	omici dirip.		ove reartif corporation		
0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Limited	Ownership	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	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	N0	0
							Aetna (Shanghai) Enterprise Services Co. Ltd.							'	
0001	CVS HEALTH GROUP	00000						CHN	NIA	Aetna International LLC	Owner ship	100.000	CVS Health Corporation	N0	0
							Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.				'	
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	<u>.</u> SGP	NIA	Aetna International LLC	Owner ship	100.000	CVS Health Corporation	NO	0
1	l		I	1				l		Aetna Global Benefits (Singapore) PTE, LTD.				_ [ '	
0001	CVS HEALTH GROUP	00000					Indian Health Organisation Private Limited	IND	NIA		Ownership	99.980	CVS Health Corporation	NO	2
0001	CVS HEALTH GROUP	00000	22-2578985				AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	1				Aetna Global Holdings Limited	GBR	NIA	Aetna International LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	06-1182176				Aetna Insurance (Hong Kong) Limited	HKG DE	IA	Aetna Global Holdings Limited	Ownership	55.000	CVS Health Corporation	N0 N0	0 7
0001							PHPSNE Parent Corporation		NIA		Ownership		CVS Health Corporation		
0001	CVS HEALTH GROUP	00000	52-2182411 47-0970432				Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	23-2604867				Health Data & Management Solutions, Inc CVS Accountable Care Organization Inc	DE PA	NIA NIA	Active Health Management, Inc	Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO NO	V
0001	CVS HEALTH GROUP	13980	27-2192415				Health Re. Inc.	VT	NIA	Active meaith management, inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	81-0579372	1			Phoenix Data Solutions LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	51-05/93/2				ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	47-4556274	1			Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO NO	U
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				CVS Cabot Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	14
0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	15
0001	CVS HEALTH GROUP	00000	31-1001351	1			Omnicare, LLC	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	16
0001	CVS HEALTH GROUP	81973	75-1296086	1			Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Owner ship.	_100.000	CVS Health Corporation	NO	0
							,,, and Erro modranes company		F		1 P				

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANT STSTEM														
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		_									Type	If			
											of Control	Control			
											(Ownership,	is		lo on	
						No			D. L. C.			_		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)	*
	•					,	Aetna Better Health of Kentucky Insurance			Coventry Health and Life Insurance Company	ŕ	Ĭ	, , , , , , , , , , , , , , , , , , , ,	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	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95846	52-2056201				Group Dental Service of Maryland, Inc	MD		Group Dental Service, Inc.	Owner ship	100.000	. CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	81-4345344				Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95241	42-1244752				Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Owner ship	100.000	. CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95925	42-1308659				Coventry Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
							Aetna Risk Assurance Company of Connecticut			• .	·		·		
0001	CVS HEALTH GROUP	00000	47-2049117				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.	LA	IA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	11102	23-2366731				HealthAssurance Pennsylvania, Inc.	PA	IA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
							Coventry Prescription Management Services,			, , , , , , , , , , , , , , , , , , ,					
0001	CVS HEALTH GROUP	00000	47-0854096				Inc.	NV	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	16148	81-3564875				Aetna Better Health of Nevada Inc.	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	Owner ship.	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	Ownership	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	Owner ship	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	Owner ship.	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	Owner ship	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	Owner ship.	100.000	CVS Health Corporation	NO	0
	OVO TIEMETTI GITOOI	1100	1211001				Coventry Health Care National Accounts, Inc.			nothe hour thiniotatingo, LLo	omior orrip.		Ovo ricartii corporation		
0001	CVS HEALTH GROUP	00000	20-8070994				overti y nourth our o national necessite, me.	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	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	26-1293772				Coventry Consumer Advantage, Inc.	DE	NIA	Aetna Health Holdings, LLC	Owner ship.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-1736437				First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
	OVO TIEMETTI GROOT		20 1700107				First Health Life & Health Insurance Company			nothe hour th horarigo, LEO	omor omp.		Ovo ricartii corporation		
0001	CVS HEALTH GROUP	90328	38-2242132				Thou hourth are a nearth mourance company	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	NO	0
0001	CVS HEALTH GROUP	00000	52-1320522				Claims Administration Corp.	MD	NIA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	00000	20-1130063				Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95114	65-0986441				Aetna Better Health of Florida Inc.	FL	14	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.		. CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	36-4391310				bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	100 100 10 10				Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership.	49.000	CVS Health Corporation	NO	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	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	72-1106596				Mental Health Associates. Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-4276336				MHNet of Florida, Inc.	FL	NIA	MHNet Specialty Services, LLC	Ownership.		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	16242	81-5030233				Aetna Better Health of Washington, Inc.	WA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	OTO TIENETTI GITOOT	10272					Banner Health and Aetna Health Insurance		n	notha hoartii nordingo, LLO	σπιοι σπιρ		oro nourth corporation		
0001	CVS HEALTH GROUP	00000	81-5212760				Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	. CVS Health Corporation	NO	9
	OTO TIENETTI GITOOT	90000	0. 0212700				Banner Health and Aetna Health Insurance			Banner Health and Aetna Health Insurance	σπιοι σπιρ				
0001	CVS HEALTH GROUP	16058	81-5281115				Company	AZ	IΔ	Holding Company LLC	Ownership	100.000	. CVS Health Corporation	NO	0
	OTO TIENETTI GITOOT		0.0201110				ounpuri,	nz	n	Banner Health and Aetna Health Insurance	σπιοι σπιρ		oro nourth corporation		
0001	CVS HEALTH GROUP	16059	81-5290023				Banner Health and Aetna Health Plan Inc	AZ	IA	Company	Ownership.	100,000	CVS Health Corporation	NO	0
1 000 1	010 IEIE III UII00I		10.0200020				Daniel noutti and notha noutti i fall file		in	vompung	Omitor on 19		.   OTO 11041 til OUI PUI ALTOII	[10	

## **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
											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.Š. 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)	
	·						Allina Health and Aetna Health Insurance				·				
0001	CVS HEALTH GROUP	00000	81-5112888				Holding Company LLC	DE		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		Holding Company LLC	Ownership	100.000	. CVS Health Corporation	N0	0
	010 151 51 00010	47050								Allina Health and Aetna Health Insurance		400 000			
0001	CVS HEALTH GROUP	17352	87-2843387				Allina Health and Aetna Health Plan Inc	MN	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NU	D
0001	CVS HEALTH GROUP	00000	82-2171057				Sutter Health and Aetna Insurance Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	E0 000	CVS Health Corporation	NO	44
1 0001	CVS REALIN GROUP	00000	02-21/100/				Sutter Health and Aetna Administrative	UE		Sutter Health and Aetna Insurance Holding	owner snrp	30.000	. Cvs nearth corporation		1!!
0001	CVS HEALTH GROUP	00000	82-2560624				Services LLC	DE		Company LLC	Ownership	100 000	CVS Health Corporation	NO	0
	OTO TENETH GROOT		02 2000021				00111000 EE0			Sutter Health and Aetna Insurance Holding	omici dirip	100.000	ovo nourth corporation		
0001	CVS HEALTH GROUP	16979	82-2567822				Sutter Health and Aetna Insurance Company	CA	IA	Company LLC	Ownership.	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP		82-3031812				Aetna Pharmacy Management Services LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		82-3333789				Aetna Better Health of North Carolina Inc	NC	IA	Aetna Health Holdings, LLC	Ownership.		CVS Health Corporation	N0	0
	CVS HEALTH GROUP		27-2186150				Aetna Better Health of Illinois Inc	IL		Aetna Health Holdings, LLC	Owner ship		CVS Health Corporation	N0	O
0001	CVS HEALTH GROUP	00000	87-3223066				Aetna Better Health of Indiana Inc	IN	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	. CVS Health Corporation	N0	0

Asterisk	Explanation
1 Aetna Life Insurance Company owns substantially all	of the non-managing membership interests of Aetna Partners Diversified Fund LLC.
2	57% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
Aetna ACO Holdings Inc. is owned by Aetna Life Insur-	ance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
4PT. Aetna Global Benefits Indonesia is also 20% owner	d by Suhatsyah Rivai, Aetna's Nominee.
5	owned by Euro Gulf LLC, Aetna's Nominee.
Innovation Health Holdings LLC. Is also 50% owned by	Inova Health System Foundation.
	ings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
B Texas Health + Aetna Health Insurance Holding Compan	y LLC is also 50% owned by Texas Health Resources.
Banner Health and Aetna Health Insurance Holding Com	pany LLC is also 50% owned by Banner Health.
10 Allina Health and Aetna Insurance Holding Company LLi	C is also 50% owned by Allina Health System.
11	C is also 50% owned by Sutter Health Plan Products Organization, LLC.
12	CBD Commercial Brokers LLC. Aetna's Nominee.
13	macy, Inc. and 25% owned by Aetna Life Insurance Company.
14 CVS Cabot Holdings Inc is owned 99.72% by Coram Clin	ical Trials, Inc. and 0.28% owned by Aetna Inc.
15	· ·
	any is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership.

## 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
2.	AUGUST FILING 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.	N/A
	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.	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 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	51,533	79,584
4.	Unrealized valuation increase (decrease)	(439,909)	(197,718)
5.	Total gain (loss) on disposals	(614,019)	6,385
6.	Deduct consideration for bonds and stocks disposed of	3,437,546	11,753,479
7.	Deduct amortization of premium	64,731	82,743
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	106,705	127,964
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	54,578	191,989
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	29,726,593	29,894,579
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	29,726,593	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

Duning th	1	all Bonds and Prefe	3	4	5	6	7	8
	Book/Adjusted	-	Ü	'	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Carrying Value	Carrying Value	Carrying Value	Carrying Value
NAIC Designation	Beginning of Current Quarter	During Current Quarter	During Current Quarter	During Current Quarter	End of First Quarter	End of Second Quarter	End of Third Quarter	December 31 Prior Year
NAIC Designation	or Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Piloi feai
BONDS								
1. NAIC 1 (a)	27,956,797	88,075,608	78,379,000	96.565	26,019,189	27,956,797	37,749,970	24,211,699
2. NAIC 2 (a)	12,337,604	0	754 , 190	(37,289)	12,355,220	12,337,604	11,546,125	12,762,541
3. NAIC 3 (a)			704, 100	(44.271)	848.168	741.203	696.932	901,178
				(44,271)	040, 100	741,203	090,932	,
4. NAIC 4 (a)	0	0	0	0	0	0	0	888,086
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	. 0	0	0	0	0	0	0	0
7. Total Bonds	41,035,604	88,075,608	79, 133, 190	15,005	39,222,577	41,035,604	49,993,027	38,763,504
DDEFEDDED GTOOK								
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	n	n	0	0	n	0	o
	0	0	0	0	0	0	0	
14. Total Preferred Stock		0	-		ŭ	44 005	ŭ	U
15. Total Bonds and Preferred Stock	41,035,604	88,075,608	79, 133, 190	15,005	39,222,577	41,035,604	49,993,027	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)

	1	1	
		1	2
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	8,869,354	9,051,710
2.	Cost of cash equivalents acquired	240,497,250	154,821,406
3.	Accrual of discount	174,320	14,262
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	227,630,244	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)	21,910,700	8,869,354
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	21,910,700	8,869,354

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

Schedule A - Part 3 - Real Estate Disposed **N O N E** 

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	Dondo and Ctaal	Acquired During th	a Current Quarter

			SHOW All L	ong-reim Bonds and Stock Acquired During the Current Quarter					
1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
									Modifier
									and
								5	SVO
					Number of			Paid for Accrued	Admini-
CUSIP			Date		Shares of			Interest and	strative
Identification	Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
	DEERE JOHN CAP CORP SR UNSECURED 4.150% 09/15/27			MITSUBISHI			500,000	0	1.F FE
	HSBC HOLDINGS PLC SR UNSECURED 5.210% 08/11/28	D	08/04/2022	HSBC SEC INC		500,000	500,000	0	1.G FE
	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					999, 145	1,000,000	0	XXX
2509999997. Total - Bonds - Part 3						999, 145	1,000,000	0	XXX
2509999998. T	otal - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. T	otal - Bonds					999, 145	1,000,000	0	XXX
4509999997. T	otal - Preferred Stocks - Part 3					0	XXX	0	XXX
4509999998. T	otal - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
	otal - Preferred Stocks					0	XXX	0	XXX
5989999997. T	otal - Common Stocks - Part 3					0	XXX	0	XXX
	otal - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999. T	Total - Common Stocks					0	XXX	0	XXX
5999999999. T	otal - Preferred and Common Stocks					0	XXX	0	XXX
			•••••						
			· · · · · · · · · · · · · · · · · · ·						
6009999999 -	Totals					999.145	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	mus and Sto	ck Sold, Rec	reemed or c												
1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value			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	Adjusted	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	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-			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	Date	of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	` 13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	GRUPO TELEVISA S.A. SR UNSECURED 6.625%				Ì					ľ		İ	İ								
	9 03/18/25		.08/12/2022			685,660	666,000	793,539	774,540	0	(20,350)	0	(20,350)	0	754, 190	0	(88, 190)				2.A FE
	999. Subtotal - Bonds - Industrial and M	/liscellar	neous (Una	affiliated)		685,660	666,000	793,539	774,540	0	(20,350)	0	(20,350)	0	754, 190	0	(88, 190)		59,371	XXX	XXX
	997. Total - Bonds - Part 4					685,660	666,000	793,539	774,540	0	(20,350)	0	(20,350)	0	754, 190	0	(88, 190)	(88, 190)	59,371	XXX	XXX
	998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	999. Total - Bonds					685,660	666,000	793,539	774,540	0	(20,350)	0	(20,350)	0	754, 190	0	(88, 190)	(88, 190)	59,371	XXX	XXX
4509999	997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999	998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX	
5989999	997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999	998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999	5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999	599999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals				685.660	XXX	793.539	774.540	0	(20.350)	0	(20.350)	0	754 . 190	0	(88.190)	(88. 190)	59.371	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 **NONE** 

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 - Month End Depository Balances **NONE** 

## **SCHEDULE E - PART 2 - CASH EQUIVALENTS**

Show Investments Owned End of Current Quarter

		iow investments ow	med Liid of Current					
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	Total - U.S. Government Bonds	0000	Dato / toquilou	rate or interest	matanty Date	0	0	0
	Total - All Other Government Bonds					0	0	0
	Total - U.S. States, Territories and Possessions Bonds					0	0	0
	Total - U.S. Political Subdivisions Bonds					0	0	0
						0	U	0
0909999999.	Total - U.S. Special Revenues Bonds					0	0	0
	FORTUNE BRANDS HOME & SE CP 4(2) 144A  HP ENTERPRISE CORP CP 4(2) 144A		09/26/2022	3.800 3.550	10/24/2022 10/19/2022	2,992,713	0	1,579 2,574
	HP INC CP 4(2) 144A		09/23/2022	3.280	10/19/2022	3,263,193 801,049		2,5/4
	HP INC CP 4(2) 144A			3.650	10/24/2022	3,290,305		1,668
	ONE GAS INC CP 4(2) 144A		09/30/2022	3.450	10/11/2022	1,496,564		143
	REPUBLIC SERVICES INC CP		09/07/2022	2.850	10/04/2022	3,999,048	0	7,598
	VF CORPORATION CP 4(2)		09/08/2022	2.950	10/05/2022		0	
	VW CREDIT INC CP 4(2) 144A		09/29/2022	3.500	10/21/2022	944, 160	0	184
	VIRGINIA ELEC & PR CO CP 3(A) 3		09/22/2022	3.620	10/19/2022	1,809,716	0	1,638
	WASTE MANAGEMENT INC CP 4(2) 144A		09/20/2022	3.500	10/24/2022	2,993,284	0	3,201
10199999999.	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					21,909,927	0	20,356
1109999999.	Total - Industrial and Miscellaneous (Unaffiliated) Bonds					21,909,927	0	20,356
1309999999.	Total - Hybrid Securities					0	0	0
	Fotal - Parent, Subsidiaries and Affiliates Bonds					0	0	0
	Subtotal - Unaffiliated Bank Loans					0	0	0
	Total - Issuer Obligations					21,909,927	0	20,356
	Fotal - Residential Mortgage-Backed Securities					0	0	0
2439999999.	Total - Commercial Mortgage-Backed Securities					0	0	0
	Total - Other Loan-Backed and Structured Securities					0	0	0
	Total - SVO Identified Funds					0	0	0
	Total - Affiliated Bank Loans					0	0	0
	Total - Unaffiliated Bank Loans					0	0	0
2509999999.						21,909,927	0	20,356
	FEDERATED INVESTORS INC TREASURY OBLIGATION FUND		09/29/2022	0.000		773	1	11
8209999999.	Subtotal - Exempt Money Market Mutual Funds - as Identified by the SVO					773	1	11
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8609999999 -	Total Cash Equivalents					21,910,700	1	20,367