

HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2023 OF THE CONDITION AND AFFAIRS OF THE

Aetna Better Health of Michigan Inc.

NAIC Group Code 0001 (Current)	0001 NAIC Company Co	de <u>12193</u> Employer's ID	Number 20-1052897
		State of Domicile or Port of Entry	у
Country of Domícile	United States	of America	
Licensed as business type:	Health Maintenan	ce Organization	
Is HMO Federally Qualified? Yes[] No [X]			
Incorporated/Organized 04/22/200	4	Commenced Business	10/01/2004
Statutory Home Office 28588 Northwestern H			Southfield, MI, US 48034
(Street and	•	, ,	own, State, Country and Zip Code)
Main Administrative Office	28588 Northwestern H (Street and		
Southfield, MI, US 48034 (City or Town, State, Country and Zi	p Code)	(Area	800-831-1166 a Code) (Telephone Number)
Mail Address Attn: Stat Compliance; P.C). Box 818048	Cleve	veland, OH, US 44181-8048
(Street and Number or	P.O. Box)	(City or To	own, State, Country and Zip Code)
Primary Location of Books and Records	28588 Northwestern I (Street and		
Southfield, MI, US 48034 (City or Town, State, Country and Zip	· · · · · · · · · · · · · · · · · · ·	·	800-831-1166 a Code) (Telephone Number)
Internet Website Address	www.aetnabett	·	a dode) (Telephone Number)
	Kim E. Roth	emeaidi.com	215-775-6508
-	(Name)		(Area Code) (Telephone Number)
StatutoryReporting@aetna.cor (E-mail Address)	<u>n</u>		860-262-7767 (FAX Number)
	OFFICE	ERS	
Chief Executive Officer and President Tere Vice President and Secretary Rol	essa Deonne Smith bert Mark Kessler	Corporate Cont	ntroller Steven Matthew Conte
Derek Scott Blunt, Senior Investment Officer Peter Keller, Assistant Controller	Frank Ferris Chronister II Whitney Dorothy Lavoie Tracy Louise Smith, Vice F	I, Assistant Controller , Assistant Controller	Thorne Washburn Clark, Vice President and Assistant Secretary Bryan Sheppard Nazworth, Chief Financial Officer
Kimberly Sue Foltz Teressa Deonne Smith	DIRECTORS OF	R TRUSTEES	Bryan Sheppard Nazworth Harvey Douglas Turner
The officers of this reporting entity being duly sworn, each dall of the herein described assets were the absolute prope statement, together with related exhibits, schedules and expcondition and affairs of the said reporting entity as of the rep in accordance with the NAIC Annual Statement Instructions rules or regulations require differences in reporting not relate Furthermore, the scope of this attestation by the described (except for formatting differences due to electronic filing) of enclosed statement. Teressa Deonne Smith Chief Executive Officer and President	rty of the said reporting entity, in planations therein contained, annior tiorting period stated above, and is and Accounting Practices and prior accounting practices and prior officers also includes the relation	free and clear from any liens or nexed or referred to, is a full and of its income and deductions the Procedures manual except to the rocedures, according to the best ed corresponding electronic filing electronic filing may be requested to the second of	claims thereon, except as herein stated, and that this true statement of all the assets and liabilities and of the erefrom for the period ended, and have been completed be extent that: (1) state law may differ; or, (2) that state of their information, knowledge and belief, respectively, by with the NAIC, when required that is an exact convice.
State of Michigan County of Wayne Subscribed and sworn to before me this day of	State of Arizona County of Maricopa Subscribed and swom to before day of April MotARY PUBLIC (Seal)	re me this, 2023	State of Pennsylvania County of Montgomery Subscribed and sworn to before me this day of
	Notary Public, Marico Commissi My Commi	LAMBERT State of Arizona pa County on # 642322 ssion Expires v 21, 2027	Commonwealth of Pennsylvania - Notary Seal KIM E. ROTH, Notary Public Montgomery County My Commission Expires April 25, 2025 Commission Number 1141410

ROCHELLE D. JENKINS NOTARY PUBLIC, STATE OF MI COUNTY OF WAYNE MY COMMISSION EXPIRES Dec 25, 2024 ACTING IN COUNTY OF W W 1 a. Is this an original filing? Yes [X] No []

b. If no,

3. Number of pages attached......

ASSETS

1	7 10	OLIO	0 1011 151		
		1	Current Statement Date 2	3 Net Admitted Assets	4 December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
1.	Bonds	15,306,831	0	15,306,831	15,342,146
2.	Stocks:				
	2.1 Preferred stocks			0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$0				
	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 (\$9,149,946), cash equivalents				
	(\$172,134,720) and short-term				
	investments (\$0)		0	181.284.666	176.061.780
6.	Contract loans (including \$0 premium notes)				0
7.	Derivatives			0	0
8.	Other invested assets			0	0
9.	Receivables for securities			0	0
10.	Securities lending reinvested collateral assets			0	0
11.	Aggregate write-ins for invested assets			_	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)			196,591,497	
	Title plants less \$0 charged off (for Title insurers				
13.	only)	0	0	0	0
14.	Investment income due and accrued			113,608	
15.	Premiums and considerations:			110,000	
10.	15.1 Uncollected premiums and agents' balances in the course of collection	4 850 736	102 331	4 757 405	3 734 060
	15.2 Deferred premiums, agents' balances and installments booked but		102,001	4,707,400	
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$907,243) and	0	0	0	0
	contracts subject to redetermination (\$	12 010 700	0	13,019,789	0 560 976
16		13,019,709	0	13,019,709	9,509,670
16.	Reinsurance: 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				
47				511,413	0
	Amounts receivable relating to uninsured plans			675,542	
	Current federal and foreign income tax recoverable and interest thereon				
	Net deferred tax asset			2,953,164	
19.	Guaranty funds receivable or on deposit			0	
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets	•	_	0	•
00	(\$			0	0
	Net adjustment in assets and liabilities due to foreign exchange rates	0	0		0
23.	Receivables from parent, subsidiaries and affiliates				0
24.	Health care (\$4,229,641) and other amounts receivable			4,229,641	
25. 26.	Aggregate write-ins for other than invested assets Total assets excluding Separate Accounts, Segregated Accounts and			7,743,359	
27.	Protected Cell Accounts (Lines 12 to 25)				
28.	Accounts	235,951,755	5,356,337	230,595,418	0 223,935,886
	DETAILS OF WRITE-INS	,.,.,.	.,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,
1101.					
1101.					
1102.					
1198.	Summary of remaining write-ins for Line 11 from overflow page			0	0
1196.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0		0	0
2501.	Insurance provider assessment			7,743,359	
	·			0	
2502.	Prepaid expenses				0
2503.	Current state income tax receivable			0	236,357
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	8,139,033	395,674	7,743,359	7,979,716

LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$343,342 reinsurance ceded)		8,558,964		91,733,609
2.	Accrued medical incentive pool and bonus amounts		0,030,004		, ,
3.	Unpaid claims adjustment expenses		0		2,094,193
4.	Aggregate health policy reserves, including the liability of	2,017,000		2,017,000	2,001,100
	\$0 for medical loss ratio rebate per the Public				
	Health Service Act	4 .680 .747	0	4.680.747	4 . 402 . 846
5.	Aggregate life policy reserves			0	0
6.	Property/casualty unearned premium reserve			0	0
7.	Aggregate health claim reserves			0	0
8.	Premiums received in advance		0		15,083
9.	General expenses due or accrued		0		7,745,035
10.1	·	, ,		, ,	, ,
	(including \$0 on realized gains (losses))	0	0	0	0
10.2	Net deferred tax liability			0	0
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				0
13.	Remittances and items not allocated				768,359
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				25, 168, 478
16.	Derivatives			-, -,	0
17.	Payable for securities		0		
18.	Payable for securities lending				0
19.	Funds held under reinsurance treaties (with \$0				
13.	authorized reinsurers, \$				
	reinsurers and \$0 certified reinsurers)	681 742	0	681 742	443,091
20.	Reinsurance in unauthorized and certified (\$	301,112		331,712	
20.	companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				0
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$			10,002,012	
20.	current)		0	697 055	965 047
24	Total liabilities (Lines 1 to 23)				
25.	Aggregate write-ins for special surplus funds				0
26.	Common capital stock				
27.	Preferred capital stock				
28.	Gross paid in and contributed surplus				
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)				
32.	Less treasury stock, at cost:				
02.	32.10 shares common (value included in Line 26				
	\$	XXX	XXX	0	0
	32.2 9 shares preferred (value included in Line 27				
	\$0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	230,595,418	223,935,886
0	DETAILS OF WRITE-INS	7001	7001	200,000,	
2301.	Abandoned property liability	697 055	0	697 055	965.047
2301.	Abandoned property Trability				
2302.					
2398.	Summary of remaining write-ins for Line 23 from overflow page				0
2399.	Table (1' 0004 (1 1-0000 - 1 - 0000) (1' - 00 - 1 1)	007 055	0	697.055	965.047
1	· · · · · · · · · · · · · · · · · · ·			,	,
2501.			XXX		
2502.					
2503.	Common of complete with its fact in QE from profiler and				
2598.	Summary of remaining write-ins for Line 25 from overflow page			0	
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX		0
3001.					
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page				
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current Year To Date		Prior Year To Date	Prior Year Ended December 31	
		1 Uncovered	2 Total	3 Total	4 Total	
1.	Member Months				907,553	
2.	Net premium income (including \$0 non-health					
	premium income)	XXX	144,530,918	138,511,004	556 , 152 , 362	
3.	Change in unearned premium reserves and reserve for rate credits					
4.	Fee-for-service (net of \$ medical expenses)					
5.	Risk revenue					
6.	Aggregate write-ins for other health care related revenues					
7.	Aggregate write-ins for other non-health revenues					
8.	Total revenues (Lines 2 to 7)	XXX	144,530,918	141,322,115	568,531,858	
	Hospital and Medical:	7.055.400	75 400 050	70 000 754	000 070 000	
9.	Hospital/medical benefits					
10. 11.	Outside referrals			4,491,229	, ,	
12.	Emergency room and out-of-area				29,893,745	
13.	Prescription drugs				, ,	
14.	Aggregate write-ins for other hospital and medical					
15.	Incentive pool, withhold adjustments and bonus amounts					
16.	Subtotal (Lines 9 to 15)				450,766,049	
	Less:					
17.	Net reinsurance recoveries	0	447,581	305 , 193	1,699,566	
18.	Total hospital and medical (Lines 16 minus 17)	12,590,275	112,069,890	108,850,173	449,066,483	
19.	Non-health claims (net)	0	0	0	0	
20.	Claims adjustment expenses, including \$6,704,947 cost					
	containment expenses					
21.	General administrative expenses	0	17,532,134	17, 183, 174	65,237,011	
22.	Increase in reserves for life and accident and health contracts					
	(including \$0 increase in reserves for life only) .					
23.	Total underwriting deductions (Lines 18 through 22)					
24.	Net underwriting gain or (loss) (Lines 8 minus 23)					
25.	Net investment income earned	0	1,955,040	230,383	4,025,959	
26.	Net realized capital gains (losses) less capital gains tax of \$(4)	0	(9)	2	(10)	
27.	Net investment gains (losses) (Lines 25 plus 26)					
28.	Net gain or (loss) from agents' or premium balances charged off [(amount		1,000,002	200,000		
20.	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)					
31.	Federal and foreign income taxes incurred				4,731,561	
32.	Net income (loss) (Lines 30 minus 31)	XXX	4,751,513	7,070,883	22,068,912	
2004	DETAILS OF WRITE-INS					
0601.	Other income				2,450	
0602.						
0603.						
0698.	Summary of remaining write-ins for Line 6 from overflow page		0	0	0	
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	_	U	2,450	
0701.						
0702.						
0703.						
0798.	Summary of remaining write-ins for Line 7 from overflow page			0	0	
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	U	0	
1401.						
1402.						
1403						
1498.	Summary of remaining write-ins for Line 14 from overflow page			0	0	
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0	
2901.						
2902.						
2903						
2998.	Summary of remaining write-ins for Line 29 from overflow page		0	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	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	70,004,867	65,197,440	65,197,440
34.	Net income or (loss) from Line 32	4,751,513	7,070,883	22,068,912
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 \$	0	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38.	Change in net deferred income tax	1,029,182	0	477 , 121
39.	Change in nonadmitted assets	(1,878,271)	156,000	(1,238,606)
40	Change in unauthorized and certified reinsurance	0	0	0
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
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)		0	0
	44.3 Transferred to surplus			
45	Surplus adjustments:			
40.	45.1 Paid in	0	0	0
	45.2 Transferred to capital (Stock Dividend)			0
	45.3 Transferred from capital			0
46	Dividends to stockholders			(16,500,000
46.	Aggregate write-ins for gains or (losses) in surplus		0	
47.				
48.	Net change in capital & surplus (Lines 34 to 47)			
49.	Capital and surplus end of reporting period (Line 33 plus 48)	73,907,291	72,424,323	70,004,867
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	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	163,987,454	129,673,391	558,253,175
2.	Net investment income	1,948,259	224,332	4,005,292
3.	Miscellaneous income	0	0	2,450
4.	Total (Lines 1 to 3)	165,935,713	129,897,723	562,260,917
5.	Benefit and loss related payments	116,238,955	103,927,591	436,969,048
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	21,421,067	21,366,415	94,078,429
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$	0	0	7,718,481
10.	Total (Lines 5 through 9)	137,660,022	125,294,006	538,765,958
11.	Net cash from operations (Line 4 minus Line 10)	28,275,691	4,603,717	23,494,959
	10.000	25,210,001	.,,,,,,,,	20, 10 1,000
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	,	,	,
	12.2 Stocks			0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate			0
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(12)	3	(24)
	12.7 Miscellaneous proceeds	0	0	6,987,886
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	40,841	227,758	7,466,061
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	0	0	0
	13.2 Stocks			0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	6,987,886	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	6,987,886	0	0
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(6,947,045)	227,758	7,466,061
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			0
	16.3 Borrowed funds			0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			0
	16.5 Dividends to stockholders	0	0	16,500,000
	16.6 Other cash provided (applied)	(16,105,760)	(1,852,622)	11,983,055
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(16,105,760)	(1,852,622)	(4,516,945)
	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).	5,222,886	2,978,853	26,444,075
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	176,061,780	149,617,705	149,617,705
	19.2 End of period (Line 18 plus Line 19.1)	181,284,666	152,596,558	176,061,780

Note: Supplemental disclosures of cash flow information for non-cash transactions:		

EXHIBIT OF PREMIUMS. ENROLLMENT AND UTILIZATION

	1	Compreh	nensive	4	5	6	-LIVIEIN I 7	8	9	10	11	12	13	14
		(Hospital &	Medical)	Medicare			Federal Employees Health	Title XVIII	Title XIX		Disability	Long-Term		Other
	Total	Individual	Group	Supplement	Vision Only	Dental Only	Benefits Plan	Medicare	Medicaid	Credit A&H	Income	Care	Other Health	Non-Health
Total Members at end of:														
1. Prior Year	76,996	0	0	0	0	0	0	23,619	53,377	0	0	0	0	(
2. First Quarter	74,252	0	0	0	0	0	0	21,768	52,484	0	0	0	0	(
3. Second Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	(
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	(
Current Year Member Months	224,653	0	0	0	0	0	0	66,019	158,634	0	0	0	0	
Total Member Ambulatory Encounters for Period:														
7 Physician	177,751	0	0	0	0	0	0	128,835	48,916	0	0	0	0	
8. Non-Physician	169,641	0	0	0	0	0	0	126,632	43,009	0	0	0	0	
9. Total	347,392	0	0	0	0	0	0	255,467	91,925	0	0	0	0	
10. Hospital Patient Days Incurred	10,095	0	0	0	0	0	0	6,687	3,408	0	0	0	0	
11. Number of Inpatient Admissions	1,395	0	0	0	0	0	0	765	630	0	0	0	0	-
12. Health Premiums Written (a)	145,083,040	0	0	0	0	0	0	87,058,317	58,024,723	0	0	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	145,083,040	0	0	0	0	0	0	87,058,317	58,024,723	0	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	116,552,425	0 .	0	0	0	0	0	75,196,479	41,355,946	0	0	0	0	
Amount Incurred for Provision of Health Care Services	112,517,471	0	0	0	0	0	0	72,470,936	40,046,535	0	0	0	0	(

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

Aging Analysis 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	1,409,028	3,319	1,186	386	5,972	1,419,891			
0399999 Aggregate accounts not individually listed-covered	10, 186, 050	95,989	73,002	483	6, 193	10,361,717			
0499999 Subtotals	11,595,078	99,308	74, 188	869	12, 165	11,781,608			
0599999 Unreported claims and other claim reserves						76,364,420			
0699999 Total amounts withheld						0			
0799999 Total claims unpaid						88, 146, 028			
0899999 Accrued medical incentive pool and bonus amounts						4,606,144			

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAID - PRIOR YE	Claim	s Paid to Date	Liab End of Curr		5	6
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) individual	0	0	0	0	0	0
Comprehensive (hospital and medical) group	0	0	0	0	0	0
Medicare Supplement	0	0	0	0	0	0
4. Dental Only					0	0
5. Vision Only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare						55, 168, 907
8 Title XIX - Medicaid		23,894,308	13,400,885	18,694,770		
9. Credit A&H	0	0	0	0	0	0
10. Disability Income					0	0
11. Long-term care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)						
14. Health care receivables (a)					0	
15. Other non-health					0	
16. Medical incentive pools and bonus amounts					4,568,957	4.474.860
17. Totals (Lines 13 - 14 + 15 + 16)	37,057,294	70,132,559	35,282,937	57, 125,893		87,528,793

⁽a) Excludes \$0 loans or advances to providers not yet expensed.

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Better Health of Michigan, Inc. ("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 Department of Insurance and Financial Services ("Michigan Department") ("Michigan Accounting Practices"). The Michigan Department recognizes only statutory accounting practices prescribed or permitted by the State of Michigan 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 Michigan for the periods ended March 31, 2023 and December 31, 2022 is as follows:

		SSAP#	F/S Page	F/S Line #	2023		2022	
NET IN	NCOME							
(1)	Aetna Better Health of Michigan, Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$	4,751,513	\$	22,068,912
(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	\$	4,751,513	\$	22,068,912
SURPI	US							
(5)	Aetna Better Health of Michigan, Inc. State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$	73,907,291	\$	70,004,867
(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	\$	73,907,291	\$	70,004,867

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of these financial statements in conformity with Michigan 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 March 31, 2023. 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) 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 May 10, 2023, 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 March 31, 2023.

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. The Company did not have any loan-backed securities at March 31, 2023.

E. <u>Dollar Repurchase Agreements and/or Securities Lending Transactions</u>

(1) and (2): No significant change.

- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of March 31, 2023.
- (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at March 31, 2023.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at March 31, 2023.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at March 31, 2023.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at March 31, 2023.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at March 31, 2023.
- 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 March 31, 2023.
- O. through Q.: No significant change.
- R. The Company did not participate in any Qualified Cash Pools at March 31, 2023.
- 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. Derivative Instruments

The Company did not have any derivative instruments at March 31, 2023.

9. <u>Income Taxes</u>

No significant change.

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

The Company and Aetna Medicaid Administrators LLC ("AMA") are parties to an administrative services agreement, under which AMA and certain of its affiliates provides certain administrative services, including cash management and accounting and processing of premiums and claims. Effective January 1, 2023, the agreement was amended and the agreement was approved by State of Michigan. Under this amended agreement, the Company is obligated to pay AMA the cost of providing the aforementioned services.

- 11. <u>Debt</u>
 - A. The Company did not have any items related to debt, including capital notes at March 31, 2023.
 - B. The Company did not have any Federal Home Loan Bank agreements at March 31, 2023.
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at March 31, 2023.

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

No significant change.

- 14. Liabilities, Contingencies and Assessments
 - A. No significant change.
 - B. Assessments

Insurance Provider Assessment

Effective October 1, 2018 the Company is required to pay the annual Insurance Provider Assessment ("IPA"). The assessment for each HMO is based on the amount determined by the Michigan Department of Health and Human Services ("MDHHS") and applied to the prior year member months for the Medicaid and commercial lines of business. The portion of the assessment attributable to the Medicaid program is fully reimbursed by MDHHS. The Company recognized \$7,743,359 of net premium income and \$7,743,359 as general administrative expenses as of March 31, 2023 related to the IPA. The Company has \$7,743,359 as an aggregate write-in for other than invested assets and \$7,743,359 recorded as general expenses due and accrued on the Statutory Statements of Assets, Liabilities and Capital Surplus at March 31, 2023 related to the payments and reimbursements for 2022 assessment, effective July 2022.

C through F: No significant change.

15. Leases

No significant change.

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

No significant change.

- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
 - A. 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 March 31, 2023.
 - (4) The Company did not have any securitized financial assets at March 31, 2023.
 - (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 March 31, 2023 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
 - A. ASO Plans As of March 31, 2023, the Company has received payments totaling \$20,764,180 and paid a total of \$20,764,180 to the hospitals on behalf of the MDHHS for managed care Medicaid pass-through graduate medical education, hospital reimbursement adjustments, specialty network access and patient centered medical home administration programs, and Quality Assurance (QAS) payments for nursing facilities.

			(1)		(2)		(3)
			ASO Uninsured Plans		ed Portion of ly Insured Plans	Total ASO	
a.	Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$	_	\$	_	\$	_
b.	Total net other income or expenses (including interest paid to or received from plans)		_		_		_
c.	Net gain or (loss) from operations		_		_		_
d.	Total claim payment volume	\$	20,764,180	\$	_	\$	20,764,180

B and C: No significant change.

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

No significant change.

20. Fair Value Measurements

A.

- (1) The Company had no material assets and liabilities that are measured and reported at fair value in the financial statements as of March 31, 2023.
- (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 2023.
- (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 March 31, 2023.
- 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 March 31, 2023 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	\$186,880,341	\$187,441,551	\$ 9,790,039	\$177,090,302	\$ —	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 May 10, 2023 for the statutory statement issued on May 11, 2023.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through May 10, 2023 for the statutory statement issued on May 11, 2023.

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 ACA risk sharing provisions (YES/NO)? Yes [] No [X]
- (2) through (5): Not applicable.

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of December 31, 2022 were \$98,302,662. As of March 31, 2023, \$39,151,487 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$35,282,937 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$23,868,238 favorable prior-year development since December 31, 2022 to March 31, 2023. 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 \$18,516,049 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.
- B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.
- 26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

March 31, 2023

1. Liability carried for premium deficiency reserves

2. Date of the most recent evaluation of this liability

3. Was anticipated investment income utilized in the calculation?

\$1,622,270

3/31/2023 No

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring Domicile, as required by the Model Act?						Yes [] No [Х]
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 creporting entity?						Yes [] No [Х]
2.2	If yes, date of change:								
3.1	Is the reporting entity a member of an Insurance Holding Company S 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 q	uarter end?				Yes [X] No []
3.3	If the response to 3.2 is yes, provide a brief description of those chan Effective January 1, 2023, Aetna Card Solutions, LLC had a name che Pennsylvania, Inc. was merged into Aetna Life Insurance Company. Effective January 31, 2023, bswift Resources LLC was transferred to Aetna Financial Holdings, LLC dividended the ownership interests in interests to Aetna Health Holdings, LLC. FairCost LLC then became a Aetna Global Benefits (Asia Pacific) Limited sold its stake in India He Benefits (Singapore) Pte. Ltd sold the vast majority of its shares in Inexpectation that the remaining interests 4.867% will be transferred in LLC, Innovation Health Insurance Company, and Innovation Health PACO Holdings Inc. purchasing 50% of the Innovation Health joint ven Aetna Insurance Company, Sutter Health and Aetna Insurance Holdi LLC became 100% wholly owned subsidiaries as a result of Aetna Adinterests from Sutter Health. Effective February 3, 2021, CVS Health It is also 0.1% owned by CVS Health Ventures Fund GP, LLC Effect	nange to FairCos Effective Januar b swift LLC in cc FairCost LLC to co a direct subsidia halth Organisatio dian Health Orga a few months. Plan, Inc. became ture interests frong Company LLC CO Holdings Inc.	ry 3, 2023, MHNet of Floonnection with the sales of Aetna Inc., then Aetna Inc., then Aetna Inc. of Aetna Health Holdin Private Limited to a thing anisation Private Limited Effective February 21, 20 at 100% wholly owned sure and Sutter Health and purchasing 50% of the LP is 99.99% owned by	rida, Inc. was dis of bswift. On Fe nc. contributed ti ngs LLC. On Fe Ird-party buyer. A to a third-party l 023, Innovation H ibsidiaries as a n ch 28, 2023, Suttl Aetna Administr Sutter Health joi Aetna Life Insura	ssolved. bruary 1, 2 he owners! bruary 7, 2 Aetna Glob bruary with bruary with Hold esult of Ae er Health a ative Servi nt venture	023, nip 2023, pal the dings, tna and ces			
3.4	Is the reporting entity publicly traded or a member of a publicly traded	d group?					Yes [X] No []
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) cod	le issued by the	SEC for the entity/group.				000	00064803	
4.1	Has the reporting entity been a party to a merger or consolidation dur	ring the period co	overed by this statement	?			Yes [] No [Х]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	e of domicile (us	se two letter state abbrev	riation) for any er	ntity that ha	IS			
	1 Name of Entity		2 NAIC Company Code	3 State of Dom	icile				
5.	If the reporting entity is subject to a management agreement, includir in-fact, or similar agreement, have there been any significant change If yes, attach an explanation. On 1/1/23, the Contract Terms, Definitions, Administrative Services, Maintenance Expenses, and Administrative Fees sections of existing	es regarding the t	terms of the agreement of the series, Fees and Expenses, C	or principals invo	lved?	Yes [X] No [] N/A	\ []
6.1	State as of what date the latest financial examination of the reporting	entity was made	e or is being made				12/	/31/2020	
6.2	State the as of date that the latest financial examination report becan date should be the date of the examined balance sheet and not the d						12/	/31/2020	
6.3	State as of what date the latest financial examination report became the reporting entity. This is the release date or completion date of the date).	e examination re	port and not the date of t	the examination	(balance sl	heet	05/	23/2022	
6.4	By what department or departments? Michigan Department of Insurance and Financial Services								
6.5	Have all financial statement adjustments within the latest financial ex statement filed with Departments?	camination repor	t been accounted for in a	subsequent fina	ancial	Yes [] No [] N/A	\ [X]
6.6	Have all of the recommendations within the latest financial examination	ion report been o	complied with?			Yes [X] No [] N/A	۱]
7.1	Has this reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?						Yes [] No [Х]
7.2	If yes, give full information:								
8.1	Is the company a subsidiary of a bank holding company regulated by	the Federal Res	serve Board?				Yes [] No [Х]
8.2	If response to 8.1 is yes, please identify the name of the bank holding								
8.3	Is the company affiliated with one or more banks, thrifts or securities	firms?					Yes [] No [Х]
8.4	If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commission	e Office of the C	comptroller of the Curren	cy (OCC), the Fe	ederal Dep				
	1 Affiliate Name		2 _ocation (City, State)	3 FR		5 FDIC	6 SEC]	
	Allilate Natife		Location (City, State)					1	

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controlle similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	rsonal and professiona		Yes [X]	No []
9.11	(e) Accountability for adherence to the code. If the response to 9.1 is No, please explain:				
9.11	ii trie response to 9.1 is No, piease explain.				
9.2 9.21	Has the code of ethics for senior managers been amended?			Yes [X]	No []
	Added information about Signify Health, clarified who the Code applies to, clarified when colleagues need to notify Line, added information to the Social Media, Colleague Privacy, and Non-Discrimination, Harassment, Retaliation and other minor updates.	sections, fixed a hyper	link,		
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes []	No [X]
	FINANCIAL				
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement lf yes, indicate any amounts receivable from parent included in the Page 2 amount:				
	INVESTMENT				
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or or use by another person? (Exclude securities under securities lending agreements.)			Yes []	No [X]
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:		\$		0
13.	Amount of real estate and mortgages held in short-term investments:				
14.1 14.2	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes []	No [X]
	,,	1			2
		Prior Year-End Book/Adjusted		Book	ent Quarter k/Adjusted
14 21	Bonds	Carrying Value			ying Value
	Preferred Stock				0 0
	Common Stock				0
	Short-Term Investments				0
	Mortgage Loans on Real Estate				0
	All Other				0
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)				0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	.\$	0	\$	0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes []	No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.] No [] N/A []
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement da	ite:			-
	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,				
	16.3 Total payable for securities lending reported on the liability page		\$,	0

GENERAL INTERROGATORIES

17. 17.1	offices, vaults or safet custodial agreement w Outsourcing of Critical	y deposit boxes, w vith a qualified ban Functions, Custoo	Special Deposits, real estate, mere all stocks, bonds and other sk or trust company in accordancial or Safekeeping Agreements requirements of the NAIC Financial	securities, owne ce with Section of the NAIC Fi	ed throughout 1, III - Genera nancial Condit	the current year I Examination C ion Examiners H	held pursuant to a onsiderations, F. landbook?	Yes	[X]	No []
		1 Name of Custo	odian(s)			2 Custodian Addr	000			
	State Street Bank ar	nd Trust Company .	Julian(5)	02111-2900	t Financial Ce	nter; One Linco	In Street; Boston, MA			
17.2	For all agreements that location and a comple		th the requirements of the NAIC	Financial Con	dition Examine	ers Handbook, p	rovide the name,			
	1 Name(2 Location(s)			3 Complete Expla	nation(s)			
17.3 17.4	Have there been any of lf yes, give full information		name changes, in the custodian o:	n(s) identified in	17.1 during th	ne current quarte	r?	Yes	[] N	o [X]
	Old Custo	odian	2 New Custodian		3 of Change		4 Reason			
17.5	make investment deci	sions on behalf of	vestment advisors, investment mether reporting entity. For assets the ment accounts"; "handle secu	hat are manage						
		1		2						
	Derek S. Blunt as Se	Name of Firm	or Individual fficer	Affilia						
	17.5097 For those firm	ns/individuals listed	d in the table for Question 17.5, omore than 10% of the reporting of	do any firms/ind	dividuals unaff			Yes	:[]	No [X]
	17.5098 For firms/indi total assets u	viduals unaffiliated inder management	with the reporting entity (i.e. des aggregate to more than 50% of	signated with a the reporting e	"U") listed in t entity's investe	he table for Que d assets?	stion 17.5, does the	Yes	s []	No [X]
17.6	For those firms or inditable below.	viduals listed in the	e table for 17.5 with an affiliation	code of "A" (at	ffiliated) or "U"	(unaffiliated), pr	ovide the information for	the		
	1		2			3	4		5	
	Central Registration Depository Number		Name of Firm or Individual			Identifier (LEI)	Registered With		Investri Manage Agreen (IMA) F	ment nent Filed
18.1 18.2	Have all the filing requ	irements of the Pu	rposes and Procedures Manual	of the NAIC In	vestment Anal	ysis Office been	followed?			
19.	a. Documentation security is not a b. Issuer or obligo c. The insurer has	necessary to pernavailable. For is current on all cost an actual expecta	porting entity is certifying the foll nit a full credit analysis of the sec contracted interest and principal tion of ultimate payment of all co	curity does not payments.	exist or an NA est and principa	IC CRP credit ra	ating for an FE or PL	Yes	[]	No [X]
20.	a. The security wa b. The reporting er c. The NAIC Designon a current privity. d. The reporting er	s purchased prior to tity is holding caping pation was derived that the tity is not permitte is not permitte.	reporting entity is certifying the food January 1, 2018. Ital commensurate with the NAIC of from the credit rating assigned ld by the insurer and available for the share this credit rating of the PLGI securities?	C Designation r by an NAIC Cl or examination e PL security w	eported for the RP in its legal by state insura ith the SVO.	e security. capacity as a NF ance regulators.	RSRO which is shown	Yes	[]	No [X]
21.	FE fund: a. The shares were b. The reporting er c. The security had January 1, 2019 d. The fund only of e. The current reporting its legal capar	e purchased prior t titty is holding capi d a public credit rat r predominantly ho orted NAIC Design city as an NRSRO.	tal commensurate with the NAIC ing(s) with annual surveillance a lds bonds in its portfolio. ation was derived from the publication.	C Designation rassigned by an	eported for the NAIC CRP in i	security. ts legal capacity	as an NRSRO prior to			
			ual surveillance assigned by an N Schedule BA non-registered priva			he above criteria	a?	Yes	[]	No [X]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

domicile of the reporting entity? ...

3.

3.1

1.3 A&H expense percent excluding cost containment expenses ________13.7 % 2.1 Do you act as a custodian for health savings accounts? Yes [] No [X] 2.2 Yes [] No [X] Do you act as an administrator for health savings accounts? 2.3 2.4 Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

Yes [] No []

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of

SCHEDULE S - CEDED REINSURANCE

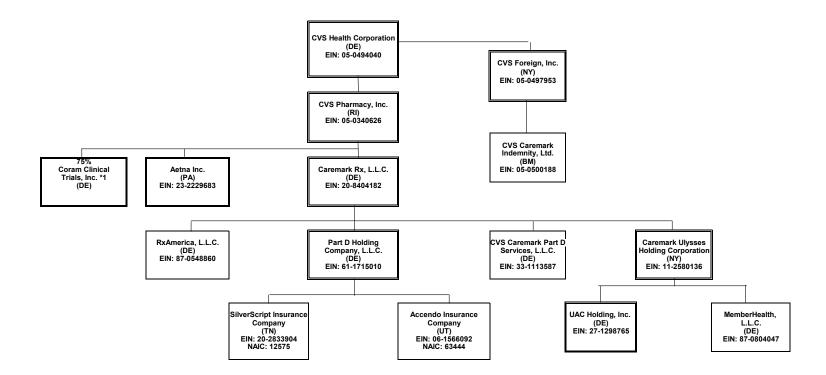
			SCHEDULE S - C Showing All New Reinsura				102		
1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5	6 Type of Reinsurance Ceded	7 Type of	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
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SCHEDULE 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 Property/ Casualty Total Columns 2 Active Renefite CHIP Title Deposit-Type Program Premiums States, etc. (a) Title XVIII Title XIX XXI Premiums sideration Premiums Through 8 Contracts Alabama0 .0 .0 ..0 .0 .0 ..0 ΑL .0 Alaska 3. Arizona ΑZ .0 .0 . 0 .0 . 0 .0 .0 .0 0 4. Arkansas AR .N. n n n n 0 0 n ٥ 0 5. California CA .N. .0 .0 .0 .0 .0 .0 .0 .0 0 Colorado .. .0 6. CO .N... .0 .0 .0 .0 .0 .0 .0 0 Connecticut СТ .0 .0 .0 .0 .N. .0 .0 .0 .0 .0 DE .0 .0 .0 .0 .0 .0 .0 0 9. District of Columbia DC .0 .0 . 0 .0 .0 .0 .0 .0 0 10. Florida N ٥ 0 ٥ 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 6,993,005 6,993,005 13. ldaho. .0 .0 ID .L. .0 .0 .0 .0 .0 14. Illinois .N. .0 .0 .0 .0 .0 .0 .0 .0 .0 IL 15. IN .0 .0 .0 .0 .0 .0 .0 .0 16. .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 20. Maine .. .0 .0 ME .N.. .0 .0 .0 .0 .0 .0 .0 21. Maryland . MD .N. .0 .0 .0 .0 .0 .0 .0 .0 .0 22. Massachusetts MA .0 .0 .0 .0 .0 .0 .0 .N. 23. Michigan .0 54,293,272 58,012,280 12,443 .0 112,317,995 0 0 24. Minnesota MN .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 27. Montana .. MT .N. .0 .0 .0 .0 .0 .0 .0 .0 0 28. Nebraska NE .0 .0 .0 .0 .0 .N. .0 .0 .0 .0 29 NV .0 .0 .0 .0 .0 .0 .0 .0 0 30. New Hampshire NH .N. .0 .0 .0 .0 .0 .0 .0 .0 0 31. New Jersey . 0 .0 0 .0 0 .0 .0 .0 0 32 New Mexico NM N ٥ ٥ ٥ ٥ ٥ ٥ Λ ٥ ٥ 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 ND .0 .0 .0 .0 .0 .0 .0 .0 .0 .N. 36. .0 .0 .0 .0 .0 .0 .0 .0 .0 ОН 37. Oklahoma 0 38 Oregon ... OR .0 25,772,040 .0 .0 . 0 .0 .0 25,772,040 0 39 Pennsylvania PΑ N n n 0 n 0 0 n ٥ 0 40. Rhode Island RI .N. .0 .0 .0 .0 .0 .0 .0 .0 .0 41. South Carolina0 SC .N. .0 .0 .0 .0 .0 .0 .0 .0 South Dakota 42. SD .0 .0 .0 .0 .0 .N. .0 .0 .0 .0 43. ΤN .0 .0 .0 .0 .0 .0 .0 0 44. .0 .0 .0 .0 .0 .0 0 ΤX .0 .0 45. Utah . UT N 0 0 0 0 0 0 0 0 0 46. Vermont ... VT N 0 0 0 0 0 0 0 0 0 47. Virginia VA N 0 0 0 0 0 0 0 0 0 48. Washington0 0 WA .N... .0 .0 .0 .0 .0 .0 .0 West Virginia 49. WV .0 .0 .0 .0 .0 .0 .0 .0 .0 .N. 50 WI .0 .0 .0 .0 .0 .0 .0 0 51. .N. .0 .0 .0 .0 .0 .0 .0 .0 0 Wyoming .. 52. American Samoa AS .0 .0 .0 .0 .0 .0 .0 .0 0 .N. 53 Guam GU N n n 0 n n 0 n ٥ 0 Puerto Rico 54. PR N. .0 .0 .0 . 0 .0 .0 .0 .0 0 U.S. Virgin Islands .. VI 55. ..N... .0 .0 .0 .0 .0 .0 .0 .0 .0 Northern Mariana 56. MP .0 .0 Islands .. .N. .0 .0 .0 .0 .0 0 57. Canada CAN .0 ..0 .0 .0 .0 .0 .0 .0 .0 ..N... 58. Aggregate Other . OT XXX .0 . 0 .0 0 .0 .0 59. Subtotal. .XXX. .0 . 87,058,317 . 58,012,280 12,443 .0 .0 .145,083,040 .0 .0 Reporting Entity
Contributions for Employe 60. Benefit Plans XXX . 0 .0 0 58,012,280 87,058,317 145,083,040 61 Totals (Direct Business) XXX 12,443 0 0 0 0 DETAILS OF WRITE-INS 58001 XXX. 58002 XXX 58003. XXX. 58998 Summary of remaining write-ins for Line 58 from overflow page Totals (Lines 58001 through XXX 0 . 0 . 0 .0 .0 0 0 58999. 58003 plus 58998)(Line 58 n Λ ٥ Λ ٨ ٨ Λ ۸ 0

above)	////	U	O	0	0	U	U	U	0	0	
(a) Active Status Counts:											
1. L - Licensed or Chartered - Lice	nsed insur	ance carrier or	domiciled RRC	Э	3 4. Q - C	Qualified - Qua	lified or accred	ited reinsurer		0	
2. R - Registered - Non-domiciled	RRGs				0 5. N - N	None of the abo	ove - Not allow	ed to write busi	ness in the sta	ite 54	
3 F - Fligible - Penorting entities	liaihle or s	innroyed to writ	a curnlue linae	in the state	Λ						

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



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

(1) Insurers/HMO's

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

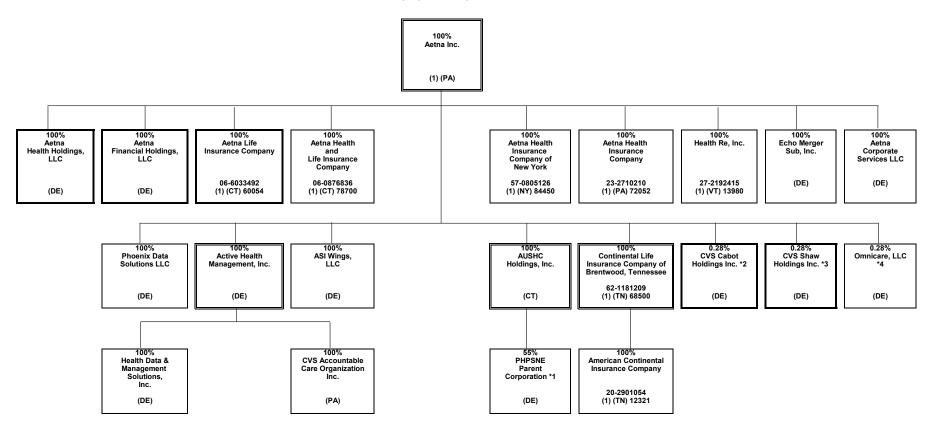
Bold borders indicate entity has subsidiaries shown on a separate page.

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

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

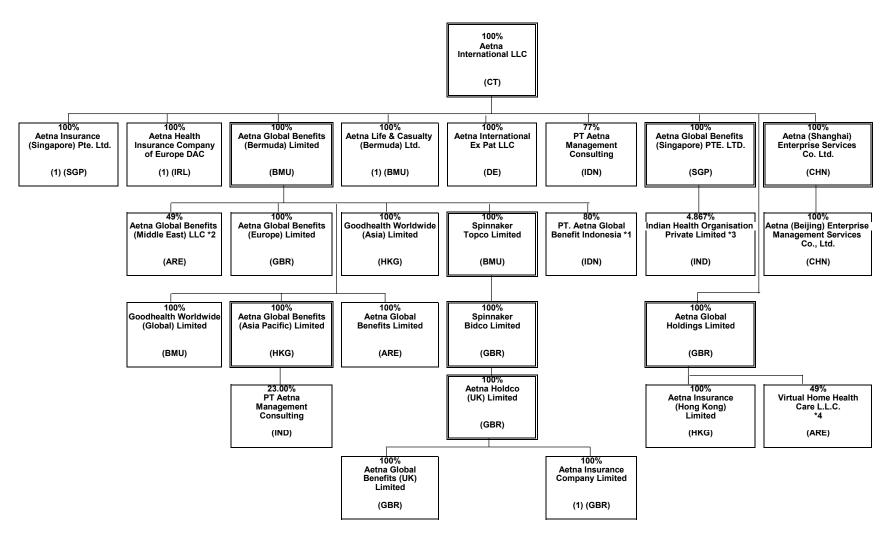
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



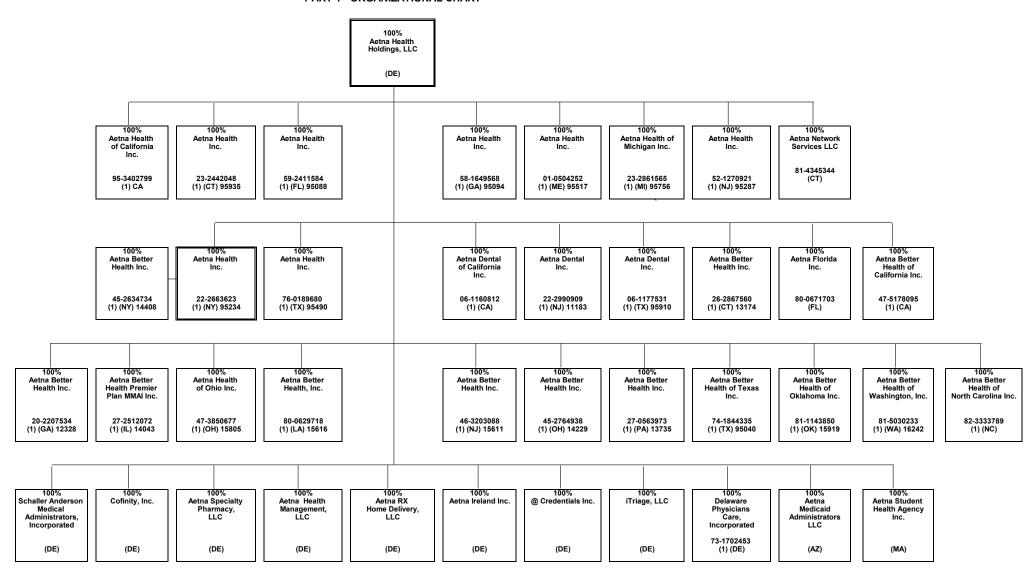
^{*1} PHPSNE Parent Corporation is also 45% owned by third parties.
*2 CVS Cabot Holdngs Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*3 CVS Shaw Holdngs Inc. is also 99.72% owned by Coram Clinical Trials, Inc.
*4 Omnicare, LLC is also owned by CVS Cabot Holdings Inc and CVS Shaw Holdngs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

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

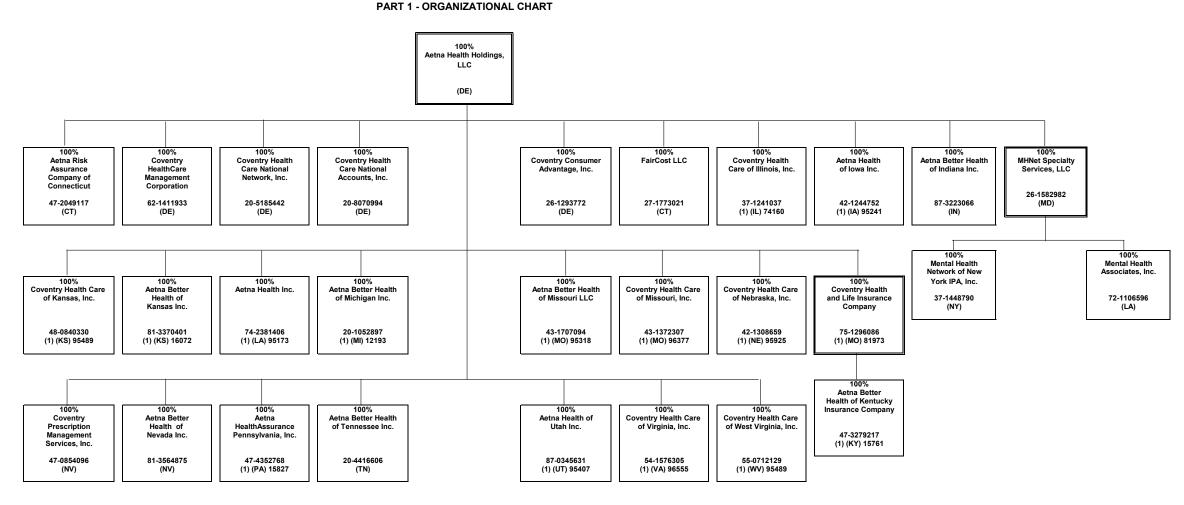


^{*1} PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.
*2 Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.
*3 Indian Health Organisation Private Limited is 95.132% owned by Phasorz Technologies Private Limited ("Medibuddy"), 0.001% owned by Satish Kannan (nominee on behalf of Medibuddy) and 4.887% owned by Aetna Global Benefits (Singapore) PTE. LTD.
*4 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee

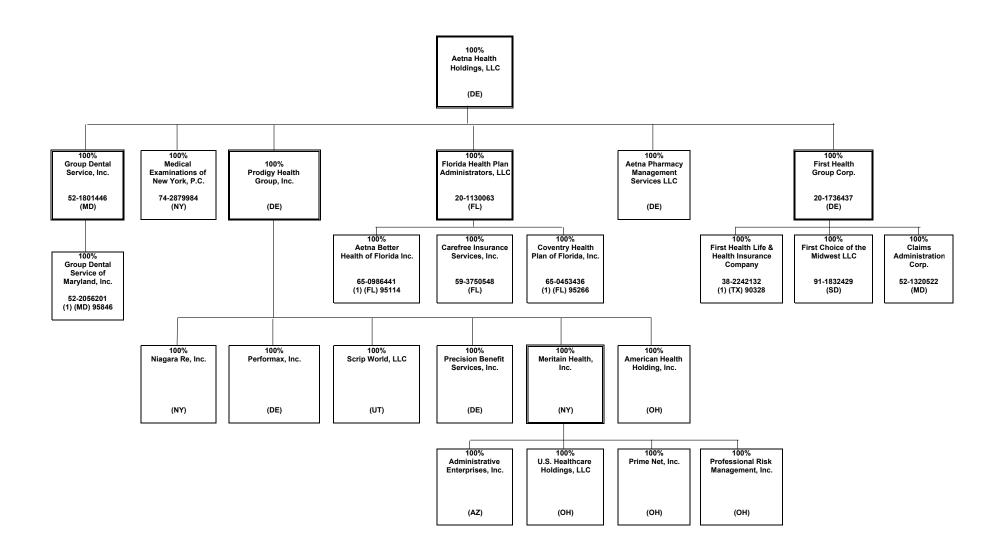
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



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

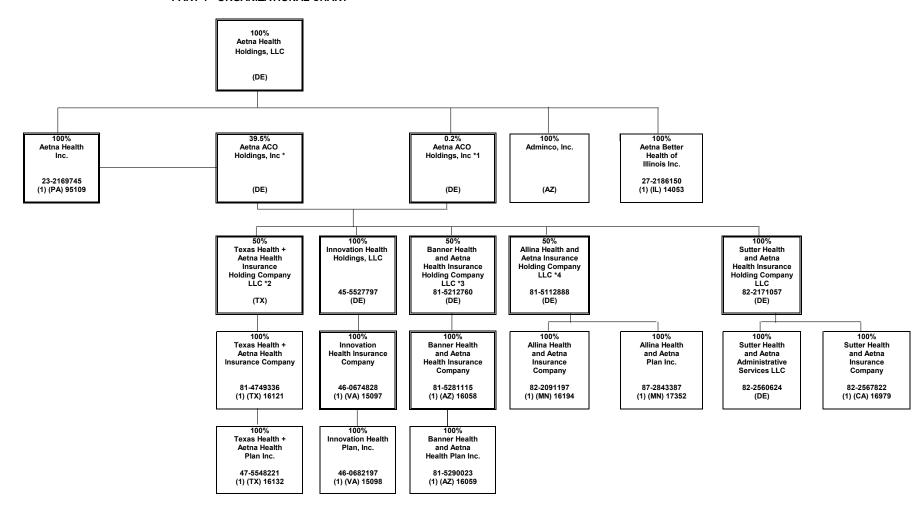


SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP PART 1 - ORGANIZATIONAL CHART



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

PART 1 - ORGANIZATIONAL CHART

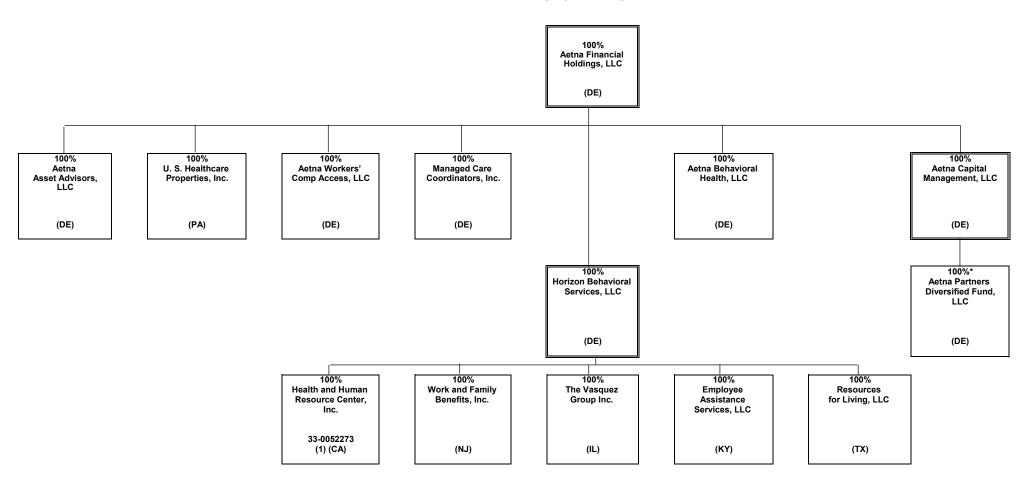


^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

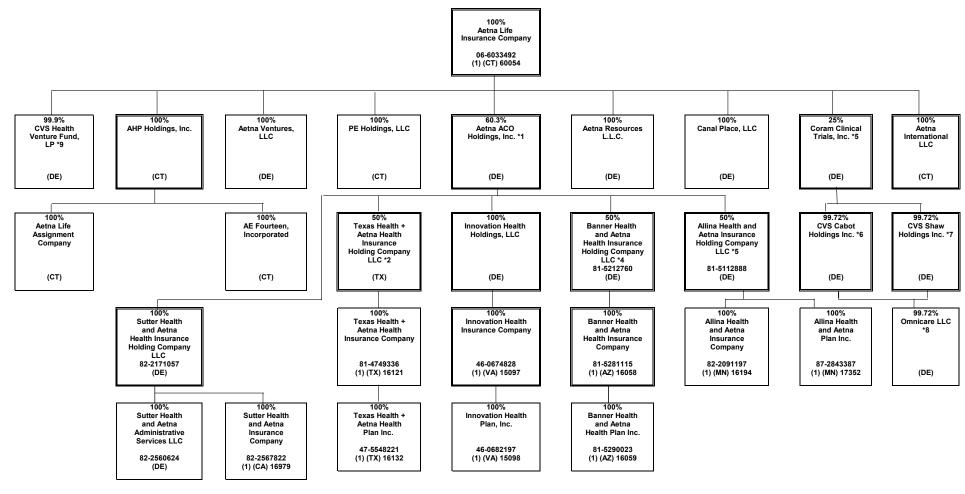
^{*3} Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.
*4 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

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



^{*} Aetna Capital Management, LLC is the managing member 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. Aetna Life Insurance Company is the largest investor in APDF and currently owns a majority of the non-managing member interests of APDF.

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



^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
*2 Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

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

^{*4} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.

^{*5} Coram Clinical Trials, Inc. is also 75% owned by CVS Pharmacy, Inc. *6 CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.

^{*7} CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.

^{*8} Remaining .28% owned by Astra Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.
*9 CVS Health Venture Fund, LP is also 0.1% owned by CVS Helath Ventures Fund GP, LLC

16

SCHEDULE Y

				FA		4 - DE I AI	L OF INSURANCE		TOLD	ING COMPANT	SISIEIVI				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Туре	lf			
											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)	*
. 0001	CVS HEALTH GROUP		05-0494040		0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	N0	0
. 0001	CVS HEALTH GROUP	63444	06-1566092				Accendo Insurance Company	UT	IA	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	12575	20-2833904				SilverScript Insurance Company	TN	IA	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	05-0340626				CVS Pharmacy, Inc.	RI	UIP	CVS Health Corporation	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-8404182				Caremark Rx, L.L.C	DE	NI A	CVS Pharmacy, Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	61-1715010				Part D Holding Company, L.L.C	DE	NI A	Caremark, Rx., L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	33-1113587				CVS Caremark Part D Services, L.L.C	DE	NI A	Caremark, Rx., L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-0548860				RxAmerica, L.L.C.	DE	NI A	Caremark, Rx., L.L.C	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	11-2580136				Caremark Ulysses Holding Corporation	NY	NI A	Caremark, Rx., L.L.C	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-0804047				MemberHealth, L.L.C.	DE	NI A	Caremark Ulysses Holding Corporation	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	05-0500188				CVS Caremark Indemnity, Ltd	BMU	IA	CVS Foreign, Inc	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	27-1298765				UAC Holding, Inc	DE	NI A	Caremark Ulysses Holding Corporation	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	05-0497953				CVS Foreign, Inc	NY	NI A	CVS Health Corporation	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials, Inc	DE	NI A	CVS Pharmacy, Inc	Ownership	75.000	CVS Health Corporation		11
. 0001	CVS HEALTH GROUP	00000	23-2229683	3060706	0001122304		Aetna Inc.	PA	UIP	CVS Pharmacy, Inc	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	30-0123754				Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	95-3402799				Aetna Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95935	23-2442048				Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95088	59-2411584				Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95094	58-1649568				Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95517	01-0504252				Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		
. 0001	CVS HEALTH GROUP	95756	23-2861565				Aetna Health of Michigan Inc	MI	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95287	52-1270921				Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95234	22-2663623				Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	14408	45-2634734				Aetna Better Health Inc	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95490	76-0189680				Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95040	74-1844335				Aetna Better Health of Texas Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	12328	20-2207534				Aetna Better Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1160812				Aetna Dental of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	11183	22-2990909				Aetna Dental Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95910	06-1177531				Aetna Dental Inc	TX	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	30-0123760				Aetna Rx Home Delivery, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	13-3670795				Aetna Health Management, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000	22-3187443				Aetna Ireland Inc	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	57-1209768				Aetna Specialty Pharmacy, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-1274723				Cofinity, Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	23-2671370				@Credentials Inc	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13735	27-0563973				Aetna Better Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13174	26-2867560				Aetna Better Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	47-5178095				Aetna Better Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	14043	27-2512072				Aetna Better Health Premier Plan MMAI Inc	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	15805	47-3850677				Aetna Health of Ohio Inc	0H	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	15616	80-0629718				Aetna Better Health, Inc	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	80-0671703				Aetna Florida Inc	FL	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	14229	45-2764938				Aetna Better Health Inc.	0H	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15611	46-3203088				Aetna Better Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15919	81-1143850				Aetna Better Health of Oklahoma Inc	0K	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	04-2708160	I	l	l	Aetna Student Health Agency Inc.	MA	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0

SCHEDULE Y

Schaller Anderson Medical Administrators, DE	ship	Ultimate Controlling Entity(ies)/Person(s) CVS Health Corporation	15 16 Is an SCA Filing Required? (Yes/No) *
Group Code Group Name Code Number RSSD CIK International) Out CVS HEALTH GROUP	of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000	Entity(ies)/Person(s) CVS Health Corporation	SCA Filing Re- quired? (Yes/No) *
Code Company Code Code Number RSSD CIK International) Exchange if Publicly Traded (U.S. or Parent, Subsidiaries Code Parent, Subsidiaries Code Code Number RSSD CIK International) Delaware Physicians Care, Incorporated Domiciliary to Code Reporting Directly Controlled by Code	(Ownership, Board, Management, Attorney-in-Fact, Influence, Other) is Owner- ship ship Percen- tage ship 100.000 ship 100.000 ship 100.000 ship 100.000 ship 100.000	Entity(ies)/Person(s) CVS Health Corporation	SCA Filing Re- quired? (Yes/No) *
Corpur Company Code Group Name Code Number RSSD CIK International) CVS HEALTH GROUP CV	Board,	Entity(ies)/Person(s) CVS Health Corporation	SCA Filing Re- quired? (Yes/No) *
Code Company Code Code Number RSSD CIK International) Exchange if Publicly Traded (U.S. or Parent, Subsidiaries Code Parent, Subsidiaries Code Code Number RSSD CIK International) Delaware Physicians Care, Incorporated Domiciliary to Code Reporting Directly Controlled by Code	Management, Attorney-in-Fact, Influence, Other) ship Provide Percen- tage ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000 ship. 100.000	Entity(ies)/Person(s) CVS Health Corporation	Filing Re- quired? (Yes/No) *
Group Code Group Name Code Number RSSD CIK International) Outs HEALTH GROUP	Attorney-in-Fact,	Entity(ies)/Person(s) CVS Health Corporation	Re- quired? (Yes/No) *
Group Name Code Number RSSD CIK International) Code Number RSSD CIK International) Code Number RSSD CIK International) Code Number RSSD CIK International) Delaware Physicians Care, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators LLC NIA. Aetna Health Holdings, LLC Owners Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators, Incorporated Schaller Anderson Medical Administrators LLC NIA. Aetna Health Holdings, LLC Owners Incorporated Schaller Anderson Medical Administrators LLC Schaller Anderson Med	Influence, Other) Percentage ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000	Entity(ies)/Person(s) CVS Health Corporation	quired? (Yes/No) *
Code Group Name Code Number RSSD CIK Internationally Or Affiliates tion Entity (Name of Entity/Person) .0001 .0001 .0008 .00000 .0000 .0000 .0000 .0000 .00000 .00000 .00000 .00000 </td <td>Other) tage ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000</td> <td>Entity(ies)/Person(s) CVS Health Corporation</td> <td>(Yes/No) *</td>	Other) tage ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000 ship. .100.000	Entity(ies)/Person(s) CVS Health Corporation	(Yes/No) *
0001 CVS HEALTH GROUP 00000 73-1702453 Delaware Physicians Care, Incorporated DE NIA. Aetna Health Holdings, LLC Owners Schaller Anderson Medical Administrators, Incorporated DE NIA. Aetna Health Holdings, LLC Owners Incorporated DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE NIA. Aetna Health Holdings DE N	ship .100.000 ship .100.000 ship .100.000 ship .100.000 ship .100.000	. CVS Health Corporation	· /
Schaller Anderson Medical Administrators, DE	ship		N0 0
0001	ship	CVS Health Corporation	
0001 CVS HEALTH GROUP 00000 86-0842559 Aetna Medicaid Adminstrators LLC AZ NIA Aetna Health Holdings, LLC Ownersl Ownersl Ownersl OWN HEALTH GROUP DE NIA Aetna Health Holdings, LLC Ownersl Ownersl Ownersl Ownersl OWN HEALTH GROUP DE NIA Aetna Health Holdings, LLC Ownersl Ow	ship		NO 0
0001	ship100.000	CVS Health Corporation	NO 0
0001 CVS HEALTH GROUP		CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
	ship	CVS Health Corporation	YES 3
	ship	CVS Health Corporation	NO 0
0001 CVS HEALTH GROUP		CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
Texas Health + Aetna Health Insurance Holding		. Ovo hourth corporation	
	ship50.000	. CVS Health Corporation	N0 7
Texas Health + Aetna Health Insurance Company Texas Health + Aetna Health Insurance			1
	ship	. CVS Health Corporation	NO 0
Texas Health + Aetna Health Insurance			1
. 0001 CVS HEALTH GROUP		. CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
. 0001 CVS HEALTH GROUP		CVS Health Corporation	YES 3
	ship	. CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
0001 CVS HEALTH GROUP		. CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
0001 CVS FEALTH GROUP 00000 86-0527428		CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
	ship	. CVS Health Corporation	NO 0
Continental Life Insurance Company of	•		
	ship100.000	. CVS Health Corporation	NO 0
Continental Life Insurance Company of			1
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	ship	. CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
Downersi Down Health GROUP Down De Downers Downers Downers Downers Downers De		CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 0
Could's France Company		CVS Health Corporation	NO 0
	ship	CVS Health Corporation	NO 11
1.0001 CVS FEALTH GROUP		CVS Health Corporation	NO 12
	ship	CVS Health Corporation	NO 13
	ship	CVS Health Corporation	NO 14
	ship	. CVS Health Corporation	NO 14
. 0001 CVS HEALTH GROUP		. CVS Health Corporation	NO 0
0001 CVS HEALTH GROUP	ship	. CVS Health Corporation	NO 0

SCHEDULE Y

				PA	KI 1/	4 - DETAI	L OF INSURANCE		HOLL	ING COMPANY	SYSIEW				
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											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	,
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	·) *
. 0001	CVS HEALTH GROUP	00000	23-2354500				U.S. Healthcare Properties, Inc	PA	NI A	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	38-3704481				Aetna Capital Management, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	11-3667142		0001314522		Aetna Partners Diversified Fund, LLC	DE	NI A	Aetna Capital Management, LLC	Ownership		CVS Health Corporation	NO	1
. 0001	CVS HEALTH GROUP	00000	20-0446676				Aetna Workers' Comp Access, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-0446713				Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2670015				Managed Care Coordinators, Inc	DE	NI A	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	59-3269144				Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	61-1193498				Employee Assistance Services, LLC	KY	NI A	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	33-0052273				Health and Human Resource Center, Inc	CA	IA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	36-3681261 22-3178125				The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	27-1773021				Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	78700	06-0876836				Aetna Health and Life Insurance Company	CT	NIA	Aetna Inc.	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	84450	57-0805126				Aetna Health Insurance Company of New York .	NY	IA	Aetna Inc.	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	06-1571642				Aetna International LLC	CT	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000	98-0211470				Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	30-0211470				Aetna Insurance (Singapore) PTE. LTD	SGP	IA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	86-1455140				Aetna International Ex Pat LLC	DE	NIA	Aetna International LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Bermuda) Limited	BMU	NI A	Aetna International LLC	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Global) Limited	BMU	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Europe) Limited	GBR	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Asia) Limited	HKG	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits Limited	ARE	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000					PT. Aetna Global Benefits Indonesia	IDN	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	CVS Health Corporation	NO	4
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Middle East) LLC	ARE	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	CVS Health Corporation	NO	5
							Aetna Global Benefits (Asia Pacific) Limited								
. 0001	CVS HEALTH GROUP	00000						HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Aetna International LLC	Ownership		CVS Health Corporation		
. 0001	CVS HEALTH GROUP	00000					Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Spinnaker Bidco Limited	GBR	NI A	Spinnaker Topco Limited	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000					Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Aetna Global Benefits (Asia Pacific)	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		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000					Aetna Insurance Company Limited	GBR		Aetna Holdco (UK) Limited	Ownership		CVS Health Corporation	NO	
. 0001	CVS REALIR GROUP	00000					Aetna Health Insurance Company of Europe DAC	ubn	IA	Aetha hordco (ok) Elilited	Owner Sirrp	100.000	CVS Reartif Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Actia ileartii ilisaranee company or Europe DAC	IRL	IA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	OTO TIETE ITI GITOGI						Aetna (Shanghai) Enterprise Services Co. Ltd.			Notific international EES	omor omp.		ove nearth corporation		
. 0001	CVS HEALTH GROUP	00000					(CHN	NI A	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
							Aetna (Beijing) Enterprise Management	-		Aetna (Shanghai) Enterprise Services Co.					
. 0001	CVS HEALTH GROUP	00000					Services Co., Ltd.	CHN	NIA	Ltd	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Singapore) PTE. LTD.	SGP	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
		1								Aetna Global Benefits (Singapore) PTE, LTD.					
. 0001	CVS HEALTH GROUP	00000					Indian Health Organisation Private Limited .	IND	NI A		Ownership	4.867	CVS Health Corporation	NO	2
. 0001	CVS HEALTH GROUP	00000	22-2578985				AUSHC Holdings, Inc.	CT	NI A	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Holdings Limited	GBR	NI A	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Insurance (Hong Kong) Limited	HKG	IA	Aetna Global Holdings Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1182176				PHPSNE Parent Corporation	DE	NI A	AUSHC Holdings, Inc	Ownership	55.000	CVS Health Corporation	NO	6

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SCHEDULE Y

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											Type	If			
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											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	/
. 0001	CVS HEALTH GROUP	00000	52-2182411				Active Health Management, Inc	DE	NI A	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-0970432				Health Data & Management Solutions, Inc	DE	NI A	Active Health Management, Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2604867				CVS Accountable Care Organization Inc	PA	NI A	Active Health Management, Inc	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	13980	27-2192415				Health Re, Inc.	VT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	81-0579372				Phoenix Data Solutions LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	51-0029326				ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP		47-4556274				Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-4547145				Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	85-3918720 85-3918567				CVS Cabot Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	12
. 0001		00000	31-1001351				CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	13
. 0001	CVS HEALTH GROUP	81973	75-1296086				Coventry Health and Life Insurance Company .	MO	IA	Aetna Health Holdings. LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS REALIR GROUP	018/3	75-1290000				Aetna Better Health of Kentucky Insurance	MU	IA	Coventry Health and Life Insurance Company	owner snip		CVS Hearth Corporation	NU	0
. 0001	CVS HEALTH GROUP	15761	47-3279217				Company	KY	IA	Coverity hearth and Life misurance company	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	52-1801446			•••••	Group Dental Service. Inc.	MD	NI A	Aetna Health Holdings. LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	95846	52-2056201			•••••	Group Dental Service of Maryland, Inc.	MD	IA	Group Dental Service. Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	81-4345344			•••••	Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95241	42-1244752				Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95925	42-1308659				Coventry Health Care of Nebraska. Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	0.0 12.2 0.00	00020					Aetna Risk Assurance Company of Connecticut			Total total to rounge, 220 iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii			STO TION TO STORY WITH THE STORY WIT		•
. 0001	CVS HEALTH GROUP	00000	47-2049117				Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95173	74-2381406				Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
							Coventry Prescription Management Services,								
. 0001	CVS HEALTH GROUP	00000	47-0854096				Inc	NV	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	16148	81-3564875				Aetna Better Health of Nevada Inc	NV	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	96555	54-1576305				Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	96377	43-1372307				Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership	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	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	95408	55-0712129				Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP		62-1411933				Coventry HealthCare Management Corporation	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15827 95489	47-4352768				Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95489	48-0840330 81-3370401				Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	160/2	81-3370401 20-1052897				Aetna Better Health of Kansas Inc	KS	RE	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95407	20-1052897 87-0345631				Aetna Health of Utah Inc.	MT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95407	87-0345631 20-4416606				Aetna Better Health of Tennessee Inc.	UI	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	74160	37-1241037				Coventry Health Care of Illinois, Inc	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVO TEAETH GROOT	/4100	37-1241037				Coventry Health Care National Accounts, Inc.	16		Aetha hearth hordings, LLC	Owner Strip		CVS Hearth Corporation	۱۷0	0
. 0001	CVS HEALTH GROUP	00000	20-8070994	l				DE	NIA	Aetna Health Holdings. LLC	Ownership		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		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	26-1293772				Coventry Consumer Advantage, Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-1736437				First Health Group Corp.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
							First Health Life & Health Insurance Company			, LEO					•
. 0001	CVS HEALTH GROUP	90328	38-2242132					TX	IA	First Health Group Corp.	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	91-1832429				First Choice of the Midwest LLC	SD	NI A	First Health Group Corp.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	52-1320522				Claims Administration Corp	MD	NI A	First Health Group Corp	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-1130063				Florida Health Plan Administrators, LLC	FL	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95114	65-0986441				Aetna Better Health of Florida Inc	FL	IA	Florida Health Plan Administrators, LLC	Ownership		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

SCHEDULE Y

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											of Control	Control			1
											(Ownership,	is		Is an	1
						Name of Securities			Relation-		Board.	Owner-		SCA	1 .
						Exchange		Domi-			Management.	ship		Filing	1
		NAIC				if Publicly Traded	Names of	ciliary	- 1		Attorney-in-Fact,	Provide		Re-	1
Group		Company	ID	Federal		(U.S. or	Parent. Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	1 .
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
	CVS HEALTH GROUP		59-3750548	ROOD		international	Carefree Insurance Services. Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	39-3/30346				Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership	49.000	CVS Health Corporation	NO	10
. 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
	CVS HEALTH GROUP	00000	37-1448790				Mental Health Network of New York IPA. Inc.	NY		MHNet Specialty Services, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		72-1106596				Mental Health Associates. Inc.	LA	NIA	MHNet Specialty Services, LLC	Owner Strip		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		81-5030233				Aetna Better Health of Washington, Inc.	WA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	OVS FILALITI GROOT	10242	01-3030233				Banner Health and Aetna Health Insurance	"\\		Aetha hearth hordings, LLC	Owner strip		OVS HEATTH COTPORATION	١٧٥	0
. 0001	CVS HEALTH GROUP	00000	81-5212760				Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	8
							Banner Health and Aetna Health Insurance			Banner Health and Aetna Health Insurance					
. 0001	CVS HEALTH GROUP	16058	81-5281115				Company	AZ	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
										Banner Health and Aetna Health Insurance					1
. 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
							Allina Health and Aetna Health Insurance								1
. 0001	CVS HEALTH GROUP	00000	81-5112888				Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	9
0004	CVS HEALTH GROUP	16194	00 0001107				Allies Health and Astron Insurance Comment	MN	1.4	Allina Health and Aetna Health Insurance	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	16 194	82-2091197				Allina Health and Aetna Insurance Company	MN	IA	Holding Company LLC	Ownersnip	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	17352	87-2843387				Allina Health and Aetna Health Plan Inc	MN	IA	Holding Company LLC	Ownership		CVS Health Corporation	NO	0
. 0001	OVS FILALITI GROOF	17002	07-2040007				Sutter Health and Aetha Insurance Holding	INIV		Indianing company LLC	Owner strip		OVS HEATTH COLPOTATION	١٧٠	0
. 0001	CVS HEALTH GROUP	00000	82-2171057				Company LLC	DE	NI A	Aetna ACO Holdings. Inc.	Ownership		CVS Health Corporation	NO	0
							Sutter Health and Aetna Administrative			Sutter Health and Aetna Insurance Holding					
. 0001	CVS HEALTH GROUP	00000	82-2560624				Services LLC	DE	NI A	Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
										Sutter Health and Aetna Insurance Holding					1
	CVS HEALTH GROUP		82-2567822				Sutter Health and Aetna Insurance Company	CA	I A	Company LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		82-3031812				Aetna Pharmacy Management Services LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP		82-3333789				Aetna Better Health of North Carolina Inc	NC	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	14053	27-2186150				Aetna Better Health of Illinois Inc	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-3223066				Aetna Better Health of Indiana Inc	IN	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					CVS Health Venture Fund, LP	DE	NI A	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	15
												0.000			
												0.000			
												0.000			
												0.000			
												0.000			
												0.000			
												0.000			
															1

Asterisk	Explanation
1	Aetna Capital Management, LLC is the managing member of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain other subsidiaries of CVS Health Group invest in this fund, which does
	Insurance Company is the largest investor in APDF and currently owns a majority of the non-managing member interests of APDF.
2	Indian Health Organisation Private Limited is 95.132% owned by Phasorz Technologies Private Limited ("Medibuddy"), 0.001% owned by Satish Kannan (nominee on behalf of Medibuddy) and 4.867% owned by Aetna Global Benefits (Singapore) PTE. LTD.
3	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).
	PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.
5	Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.
6	PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
7	Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.
8	Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health
9	Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.

Asterisk	Explanation
10	Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee
	Coram Clinical Trials, Inc. is 75% owned by CVS Pharmacy, Inc. and 25% owned by Aetna Life Insurance Company.
12	CVS Cabot Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
13	CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
	Omnicare, LLC is 0.28% owned by Aetna Inc. The Company is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership.
15	CVS Health Venture Fund, LP is also 0.1% owned by CVS Health Ventures Fund GP, LLC

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
Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO NO
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:	
The data for this supplement is not required to be filed.	
	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. Explanation:

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



OVERFLOW PAGE FOR WRITE-INS

NONE

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 reducilized		
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

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	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 the est plant and military dees		
9.	Total foreign exchange change in book value/rectated investment executed accrued attrests		
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	15,342,146	15,798,288
2.	Cost of bonds and stocks acquired		0
3.	Accrual of discount	7,289	29 , 133
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	0	0
6.	Deduct consideration for bonds and stocks disposed of	40,853	478 , 199
7.	Deduct amortization of premium	1,750	7,076
8.	Total foreign exchange change in book/adjusted carrying value		
9.	Deduct current year's other than temporary impairment recognized		0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	15,306,832	15,342,146
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	15,306,832	15,342,146

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.

During t	he Current Quarter fo			Designation				
	1	2	3	4	5	6	7	8
	Book/Adjusted	A i - iti	Diiti	Nam Tandina Astinita	Book/Adjusted	Book/Adjusted	Book/Adjusted	Book/Adjusted
	Carrying Value Beginning	Acquisitions During	Dispositions During	Non-Trading Activity During	Carrying Value End of	Carrying Value End of	Carrying Value End of	Carrying Value December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
The body nation	or current quarter	ourront quartor	ourront quartor	Curront Quartor	1 HOT QUALTO	Cocona quartor	Time Quarter	
BONDS								
50.150								
1. NAIC 1 (a)		755,500,597	759,949,015	1,829,441	185,686,457	0	0	188,305,434
2. NAIC 2 (a)		13,239,621	13,291,000	54,501	1,754,099	0	0	1,750,977
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)				0	0	0	0	0
5. NAIC 5 (a)						0	0	0
6. NAIC 6 (a)		0	0	0	0	0	0	0
7. Total Bonds	190,056,411	768,740,218	773,240,015	1.883.942	187,440,556	0	0	190,056,411
	- , - ,	, ,	- , ,	, , , , ,	, , , , , ,			- , - ,
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
11. NAIC 4			0	0	0	0	0	0
12. NAIC 5			0	0	0	0	0	0
13. NAIC 6		0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0

(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 ${f N}$ ${f O}$ ${f N}$ ${f E}$

Schedule DB - Part B - Verification - Futures Contracts

NONE

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open **N O N E**

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	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	174,716,575	145,799,029
2.	Cost of cash equivalents acquired		
3.	Accrual of discount	1,878,404	3,718,004
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	(12)	(24)
6.	Deduct consideration received on disposals	773,214,852	3,741,358,584
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)	172 , 134 , 720	174,716,575
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	172,134,720	174,716,575

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

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

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

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

NONE

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

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid **NONE**

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired **NONE**

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold. Redeemed or Otherwise Disposed of During the Current Quarter

					SHOW All LO	ng-renn bo	nds and Sto	ck Solu, Red	deemed or c												
1	2	3	4	5	6	7	8	9	10	Ch	ange In Bo	ok/Adjusted	Carrying Va	lue	16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in	Foreign					Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifie
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
										Unrealized	Year's	Temporary	,	Book	Carrying	Exchange	Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment		/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -		Disposal	(Loss) on	(Loss) on	(Loss) on	During	Maturity	strative
ification	Description	eign		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)			13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
out.orr	GOVT NATL MTGE ASSN 11 POOL BF1494			0.1 0.0.000	O LOOK	0.00.011	. a. valao	0001	7 4.40	(Decircuse)	71001011011	mzod	10)	Value	2410	2.opeca.	2.opeca.	2.opeca.		2010	
3617G7-UT-0	01/20/48		. 03/01/2023 .	Paydown		40,853	40,853	40,885	40,871	0	(18)	00	(18)	0	40,853	0	0	0	237	. 01/20/2048 .	1.A
010999999	99. Subtotal - Bonds - U.S. G	overnments				40,853	40,853	40,885	40,871	0	(18)	0	(18)	0	40,853	0	0	0	237	XXX	XXX
250999999	97. Total - Bonds - Part 4					40,853	40,853	40,885	40,871	0	(18)	0	(18)	0	40,853	0	0	0	237	XXX	XXX
250999999	98. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Bonds					40,853	40,853	40,885	40,871	0	(18)	0	(18)	0	40,853	0	0	0	237	XXX	XXX
	97. Total - Preferred Stocks -					0	XXX	0	0	0	0	U	0	0	0	0	0	0	0	XXX	XXX
	98. Total - Preferred Stocks -	Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	97. Total - Common Stocks -					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
	98. Total - Common Stocks -	Part 5				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
	99. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
599999999	99. Total - Preferred and Com	nmon Stocks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
												-									
					·		•••••														
600999999	99 - Totais					40,853	XXX	40,885	40,871	0	(18)) 0	(18)	0	40,853	0	0	0	237	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

NONE

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To NONE

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees **NONE**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Ba	lance at End of Ea	ch Month	9
					Dı	ter		
			Amount of	Amount of	6	7	8	
			Interest Received					
		Rate of	During Current	at Current				
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*
Citi Bank New Castle, DE		0.000	0	0	7,759,055	7,314,077		XXX.
Bank of America Charlotte, NC		0.000	0	0	605,932	636,425	1,372,001	XXX.
0199998. Deposits in 0 depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	8,364,987	7,950,502	9,149,946	XXX
0299998. Deposits in 0 depositories that do not								
exceed the allowable limit in any one depository (See								
instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	8,364,987	7,950,502	9,149,946	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
0599999. Total - Cash	XXX	XXX	0	0	8.364.987	7.950.502	9.149.946	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

		Show Investments O	whea Ena of Curren	it Quarter				
1	2	3	4	5	6	7 Book/Adjusted	8 Amount of Interest	9 Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0109999999. Total - U.S. Government Bond						0	0	
0309999999. Total - All Other Government						0	0	(
0509999999. Total - U.S. States, Territories						0	0	(
0709999999. Total - U.S. Political Subdivisi	ions Bonds					0	0	
0909999999. Total - U.S. Special Revenues	s Bonds					0	0	
AMCOR FLEXIBLES NA CP 4 2 144A			03/31/2023	5.100	05/01/2023	6,621,734	0	93
AMEREN ILLINOIS CO CP 3(A)3			03/27/2023	5.350	04/26/2023	7,521,929	0	5,58
AMERICAN HONDA FINANCE CP 3(a)3			03/23/2023	5.510	04/18/2023	4,659,827	0	6,41
AVANGRID INC CP 4(2) 144A			03/29/2023	5.200	04/25/2023	8,012,116	0	3,47
CABOT CORP CP 4(2) 144A			03/29/2023	5.200	04/19/2023	8,024,074	0	3,47
			03/17/2023	5.500	04/12/2023	5,075,436	0	11,63
EDISON INTL INC. CP 4(2) 144A			03/23/2023	5.700	04/24/2023	6,476,295	0	9,22
	144A		03/28/2023	5.250	04/25/2023	6,477,237	0	3,77
			03/31/2023	5.150	04/21/2023	7,079,683	0	1,01
			03/21/2023	5.550	04/06/2023	7,993,823	0	13,55
			03/27/2023	5.650	04/26/2023	7,520,353	0	5,90
			03/31/2023	5.350	05/01/2023	4,968,745	0	73
			03/31/2023	4.900	04/03/2023	4,998,639	0	68
			03/31/2023		04/04/2023	6,008,545	0	81
	A)3		03/31/2023	5.100	04/17/2023	6,979,142	0	98
			03/23/2023	5.550	04/26/2023	5,976,843	0	8,29
			03/27/2023	5.600	04/24/2023	7,683,390	0	5,97
			03/20/2023	5.650	04/17/2023	6,494,619	0	12,23
			03/21/2023		04/18/2023	3,930,467	0	6,78
	2) 144A		03/16/2023	5.280	04/10/2023	7,490,077	0	17,57
			03/28/2023	5.250	04/18/2023	4,971,637	0	2,90
			03/29/2023	5.350	04/26/2023	7,810,859	0	3,48
	(2) 144A		03/24/2023	5.250	04/12/2023	2,615,792	0	3,05
	l4A		03/20/2023	5.800	04/17/2023	7,979,338	0	15,42
			03/24/2023	5.400	04/24/2023	4,232,330 .	0	5,07
			03/21/2023	5.600	04/14/2023	6,985,820	0	11,95
			03/16/2023	5.350	04/17/2023	7,544,975 .	0	17,94
	and Miscellaneous (Unaffiliated) - Issuer Obligations					172,133,725	0	178,92
1109999999. Total - Industrial and Miscella	ineous (Unaffiliated) Bonds					172, 133, 725	0	178,92
1309999999. Total - Hybrid Securities						0	0	1
1509999999. Total - Parent, Subsidiaries ar						0	0	
1909999999. Subtotal - Unaffiliated Bank Lo	oans					0	0	
2419999999. Total - Issuer Obligations						172, 133, 725	0	178,92
2429999999. Total - Residential Mortgage-I						0	0	(
2439999999. Total - Commercial Mortgage-						0	0	
2449999999. Total - Other Loan-Backed an	nd Structured Securities	-				0	0	1
2459999999. Total - SVO Identified Funds						0	0	1
2469999999. Total - Affiliated Bank Loans						0	0	
2479999999. Total - Unaffiliated Bank Loan	ns					0	0	
2509999999. Total Bonds						172.133.725	0	178.92
	DBLIGATION FUND		03/31/2023	0.000			2	1
	rket Mutual Funds - as Identified by the SVO					995	2	1
8609999999 - Total Cash Equivalents						172.134.720	2	178.93