



QUARTERLY STATEMENT

AS OF JUNE 30, 2015
OF THE CONDITION AND AFFAIRS OF THE

Aetna Better Health of Michigan Inc.

NAIC Group Code 00001 (Current Period) , 00001 (Prior Period) NAIC Company Code 12193 Employer's ID Number 20-1052897

Organized under the Laws of Michigan , State of Domicile or Port of Entry Michigan

Country of Domicile United States

Licensed as business type: Life, Accident & Health [] Property/Casualty [] Hospital, Medical & Dental Service or Indemnity []
 Dental Service Corporation [] Vision Service Corporation [] Health Maintenance Organization [X]
 Other [] Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 04/22/2004 Commenced Business 10/01/2004

Statutory Home Office 1333 Gratiot, Ste 400 , Detroit, MI, US 48207
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1333 Gratiot, Ste 400 Detroit, MI, US 48207 313-465-1519
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 1333 Gratiot, Ste 400 Detroit, MI, US 48207
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1333 Gratiot, Ste 400 Detroit, MI, US 48207 313-465-1519
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address www.CoventryCaresMI.com

Statutory Statement Contact Frank F. Chronister 717-541-5742
(Name) (Area Code) (Telephone Number) (Extension)
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OFFICERS

Name	Title	Name	Title
<u>Pamela Sue Sedmak</u>	<u>President and Chief Executive Officer</u>	<u>Frank F. Chronister III</u>	<u>Corporate Controller</u>
<u>Robert M. Kessler</u>	<u>Vice President and Secretary</u>	<u>Debra J. Bacon</u>	<u>Chief Financial Officer</u>

OTHER OFFICERS

<u>Kevin J. Casey</u>	<u>Senior Investment Officer</u>	<u>Elaine R. Cofrancesco</u>	<u>Vice President and Treasurer</u>
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DIRECTORS OR TRUSTEES

<u>Debra J. Bacon</u>	<u>Ernestine Romero</u>	<u>Michael G. Murphy</u>	<u>Pamela S. Sedmak</u>
<u>Harvey Turner</u>	<u>Gregory S. Martino</u>		

State of

ss

County of

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Pamela Sue Sedmak
President and Chief Executive Officer

Frank F. Chronister III
Corporate Controller

Robert M. Kessler
Vice President and Secretary

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

b. If no:

1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

Subscribed and sworn to before me this _____ day of _____, _____

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	20,727,649	0	20,727,649	18,090,662
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	982,638	0	982,638	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$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 (\$3,139,101), cash equivalents (\$16,838,673) and short-term investments (\$1,383)	19,979,157	0	19,979,157	29,094,570
6. Contract loans (including \$0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	0	0	0	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	41,689,444	0	41,689,444	47,185,232
13. Title plants less \$0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	164,069	0	164,069	151,062
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	685,348	0	685,348	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	505,279	0	505,279	311,045
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	0	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	1,144,302	0	1,144,302	110,137
18.2 Net deferred tax asset	163,411	20,337	143,074	87,513
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$0)	886	886	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	15,595,621	0	15,595,621	0
24. Health care (\$1,391,804) and other amounts receivable	1,391,804	0	1,391,804	1,219,075
25. Aggregate write-ins for other-than-invested assets	54,207	2,392	51,815	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	61,394,371	23,615	61,370,756	49,064,064
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	61,394,371	23,615	61,370,756	49,064,064
DETAILS OF WRITE-INS				
1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Tax Refund Receivable	54,207	2,392	51,815	0
2502. Recoverable State Use Taxes	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	54,207	2,392	51,815	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$0 reinsurance ceded).....	28,425,288	0	28,425,288	19,217,486
2. Accrued medical incentive pool and bonus amounts	529,619	0	529,619	941,457
3. Unpaid claims adjustment expenses	330,903	0	330,903	233,638
4. Aggregate health policy reserves including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act.....	1,286,159	0	1,286,159	0
5. Aggregate life policy reserves	0	0	0	0
6. Property/casualty unearned premium reserve	0	0	0	0
7. Aggregate health claim reserves	0	0	0	0
8. Premiums received in advance	704,372	0	704,372	0
9. General expenses due or accrued	4,990,458	0	4,990,458	1,922,982
10.1 Current federal and foreign income tax payable and interest thereon (including \$0 on realized gains (losses))	0	0	0	0
10.2 Net deferred tax liability.....	0	0	0	0
11. Ceded reinsurance premiums payable	0	0	0	0
12. Amounts withheld or retained for the account of others	4,573	0	4,573	4,573
13. Remittances and items not allocated	40,274	0	40,274	0
14. Borrowed money (including \$0 current) and interest thereon \$0 (including \$0 current)	0	0	0	0
15. Amounts due to parent, subsidiaries and affiliates	0	0	0	2,830,271
16. Derivatives.....	0	0	0	0
17. Payable for securities	1,563,346	0	1,563,346	0
18. Payable for securities lending	0	0	0	0
19. Funds held under reinsurance treaties (with \$0 authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....	0	0	0	0
20. Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22. Liability for amounts held under uninsured plans	263,364	0	263,364	0
23. Aggregate write-ins for other liabilities (including \$0 current)	196,836	0	196,836	304,261
24. Total liabilities (Lines 1 to 23).....	38,335,192	0	38,335,192	25,454,668
25. Aggregate write-ins for special surplus funds	XXX	XXX	1,790,000	3,700,000
26. Common capital stock	XXX	XXX	10	10
27. Preferred capital stock	XXX	XXX	0	0
28. Gross paid in and contributed surplus	XXX	XXX	16,600,990	16,600,990
29. Surplus notes	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	4,644,564	3,308,396
32. Less treasury stock, at cost:				
32.1 .....0 shares common (value included in Line 26 \$0)	XXX	XXX	0	0
32.2 .....0 shares preferred (value included in Line 27 \$0)	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	23,035,564	23,609,396
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	61,370,756	49,064,064
DETAILS OF WRITE-INS				
2301. Abandoned Property Liability.....	196,836	0	196,836	678
2302. PCP- IPP.....	0	0	0	303,583
2303.	0	0	0	0
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	196,836	0	196,836	304,261
2501. Health Insurer Fee Accrual.....	XXX	XXX	1,790,000	3,700,000
2502.	XXX	XXX	0	0
2503.	XXX	XXX	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX	1,790,000	3,700,000
3001.	XXX	XXX	0	0
3002.	XXX	XXX	0	0
3003.	XXX	XXX	0	0
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
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.....	XXX	275,570	249,037	511,481
2. Net premium income (including \$ 0 non-health premium income).....	XXX	113,951,521	82,526,977	187,440,278
3. Change in unearned premium reserves and reserve for rate credits	XXX	0	0	0
4. Fee-for-service (net of \$ 0 medical expenses)	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	45,729	30,249	78,777
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	113,997,250	82,557,226	187,519,055
Hospital and Medical:				
9. Hospital/medical benefits	0	71,500,451	48,743,520	108,406,122
10. Other professional services	0	2,367,865	3,505,977	7,887,045
11. Outside referrals	0	0	0	0
12. Emergency room and out-of-area	0	5,428,086	5,557,892	11,385,222
13. Prescription drugs	0	11,897,021	10,180,440	21,331,324
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	884,496	858,749	1,661,688
16. Subtotal (Lines 9 to 15)	0	92,077,919	68,846,578	150,671,401
Less:				
17. Net reinsurance recoveries	0	213,504	73,508	96,481
18. Total hospital and medical (Lines 16 minus 17)	0	91,864,415	68,773,070	150,574,920
19. Non-health claims (net).....	0	0	0	0
20. Claims adjustment expenses, including \$ 2,533,140 cost containment expenses.....	0	3,197,217	870,051	4,769,571
21. General administrative expenses.....	0	19,150,750	9,244,040	23,198,280
22. Increase in reserves for life and accident and health contracts (including \$ 0 increase in reserves for life only).....	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22)	0	114,212,382	78,887,161	178,542,771
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(215,132)	3,670,065	8,976,284
25. Net investment income earned	0	248,103	216,207	398,488
26. Net realized capital gains (losses) less capital gains tax of \$ 14	0	(14)	(488)	(516)
27. Net investment gains (losses) (Lines 25 plus 26)	0	248,089	215,719	397,972
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ 0) (amount charged off \$ 0)]	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)	XXX	32,957	3,885,784	9,374,256
31. Federal and foreign income taxes incurred	XXX	726,916	1,885,625	3,215,273
32. Net income (loss) (Lines 30 minus 31)	XXX	(693,959)	2,000,159	6,158,983
DETAILS OF WRITE-INS				
0601.	XXX	0	0	0
0602. Other Revenue.....	XXX	45,729	30,249	78,777
0603.	XXX	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)	XXX	45,729	30,249	78,777
0701.	XXX	0	0	0
0702.	XXX	0	0	0
0703.	XXX	0	0	0
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.	0	0	0	0
1402.	0	0	0	0
1403.	0	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	0	0	0	0
2901.	0	0	0	0
2902.	0	0	0	0
2903.	0	0	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	23,609,396	21,774,201	21,774,201
34. Net income or (loss) from Line 32	(693,959)	2,000,159	6,158,983
35. Change in valuation basis of aggregate policy and claim reserves		0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ (6,077)	(11,287)	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)		0	0
38. Change in net deferred income tax	49,485	0	(261,982)
39. Change in nonadmitted assets	1,575	32,304	38,194
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock		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
44.2 Transferred from surplus (Stock Dividend)		0	0
44.3 Transferred to surplus		0	0
45. Surplus adjustments:			
45.1 Paid in		0	0
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital		0	0
46. Dividends to stockholders		0	(4,100,000)
47. Aggregate write-ins for gains or (losses) in surplus	80,354	0	0
48. Net change in capital and surplus (Lines 34 to 47)	(573,832)	2,032,463	1,835,195
49. Capital and surplus end of reporting period (Line 33 plus 48)	23,035,564	23,806,664	23,609,396
DETAILS OF WRITE-INS			
4701. Adjust surplus for intercompany adjustment	80,354	0	0
4702.		0	0
4703.		0	0
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)	80,354	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance.....	115,256,704	81,175,406	186,088,707
2. Net investment income	312,875	298,758	570,758
3. Miscellaneous income	45,729	799,163	78,777
4. Total (Lines 1 to 3)	115,615,308	82,273,327	186,738,242
5. Benefit and loss related payments	83,435,413	67,333,310	147,699,734
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	18,974,069	8,321,987	27,107,340
8. Dividends paid to policyholders		0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	1,761,094	3,498,390	3,981,321
10. Total (Lines 5 through 9)	104,170,576	79,153,687	178,788,395
11. Net cash from operations (Line 4 minus Line 10)	11,444,732	3,119,640	7,949,847
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	93,415	118,492	1,749,536
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	1,563,346	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,656,761	118,492	1,749,536
13. Cost of investments acquired (long-term only):			
13.1 Bonds	2,808,182	0	2,201,128
13.2 Stocks	1,000,002	0	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	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	3,808,184	0	2,201,128
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)	(2,151,423)	118,492	(451,592)
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	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	4,100,000
16.6 Other cash provided (applied).....	(18,408,722)	4,628,814	2,993,441
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	(18,408,722)	4,628,814	(1,106,559)
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)	(9,115,413)	7,866,946	6,391,696
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	29,094,570	22,702,874	22,702,874
19.2 End of period (Line 18 plus Line 19.1)	19,979,157	30,569,820	29,094,570

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	42,906	1,998	.0	.0	.0	.0	.0	.0	40,908	.0
2. First Quarter	44,347	2,232	.0	.0	.0	.0	.0	.0	42,115	.0
3. Second Quarter	50,169	2,181	.0	.0	.0	.0	.0	3,194	44,794	.0
4. Third Quarter .....	.0									
5. Current Year	0									
6. Current Year Member Months	275,570	13,334	0	0	0	0	0	4,886	257,350	0
Total Member Ambulatory Encounters for Period:										
7. Physician	104,656	2,649						1,394	100,613	
8. Non-Physician	5,285	279						21	4,985	
9. Total	109,941	2,928	0	0	0	0	0	1,415	105,598	0
10. Hospital Patient Days Incurred	31,389	37						7,631	23,721	
11. Number of Inpatient Admissions	3,635	10						120	3,505	
12. Health Premiums Written (a).....	114,240,040	1,721,078						6,801,862	105,717,100	
13. Life Premiums Direct.....	.0									
14. Property/Casualty Premiums Written .....	.0									
15. Health Premiums Earned	114,240,040	1,721,078						6,801,862	105,717,100	
16. Property/Casualty Premiums Earned .....	.0									
17. Amount Paid for Provision of Health Care Services	83,377,424	668,862						2,000,289	80,708,273	
18. Amount Incurred for Provision of Health Care Services	92,077,919	867,229						6,412,023	84,798,667	

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

UNDERWRITING AND INVESTMENT EXHIBIT
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)	116,063	496,696	16,817	158,593	132,880	189,379
2. Medicare Supplement .....					.0	.0
3. Dental only .....					.0	.0
4. Vision only .....					.0	.0
5. Federal Employees Health Benefits Plan .....					.0	.0
6. Title XVIII - Medicare		2,000,289		4,528,186	.0	.0
7. Title XIX - Medicaid	17,070,386	63,480,485	2,710,066	21,011,629	19,780,452	19,028,108
8. Other health .....					.0	.0
9. Health subtotal (Lines 1 to 8).....	17,186,449	65,977,470	2,726,883	25,698,408	19,913,332	19,217,487
10. Health care receivables (a)				1,391,804	.0	.0
11. Other non-health .....					.0	.0
12. Medical incentive pools and bonus amounts	68,370	1,227,964	128,183	401,435	196,553	941,456
13. Totals (Lines 9-10+11+12)	17,254,819	67,205,434	2,855,066	24,708,039	20,109,885	20,158,943

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies

A. Accounting practices

The accompanying statutory financial statements of Aetna Better Health of Michigan, Inc. (the "Company"), a wholly-owned subsidiary of Aetna Health Holdings, LLC, whose ultimate parent is Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Insurance Department ("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 capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan for the periods ending June 30, 2015 and December 31, 2014 is as follows:

A. Accounting Practices

	<u>State of Domicile</u>	<u>2015</u>	<u>2014</u>
<u>NET INCOME</u>			
(1) Company state basis (Page 4, Line 32, Columns 2 & 4)	\$ (693,959)	\$6,158,983
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:
(3) State Permitted Practices that increase/(decrease) NAIC SAP:
(4) NAIC SAP (1-2-3=4)	\$ (693,959)	\$6,158,983
<u>SURPLUS</u>			
(5) Company state basis (Page 3, Line 33, Columns 3 & 4)	\$23,035,564	\$23,609,396
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:
(7) State Permitted Practices that increase/(decrease) NAIC SAP:
(8) NAIC SAP (5-6-7=8)	\$23,035,564	\$23,609,396

B. Use of estimates in the preparation of the financial statements

The preparation of these financial statements in conformity with Pennsylvania 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.

2. Accounting changes and corrections of errors

The Company did not have any accounting changes or corrections of errors in the period ending June 30, 2015.

3. Business combinations and goodwill

No significant change.

4. Discontinued operations

No significant change.

5. Investments

A. – C. No significant change.

D. Loan-Backed Securities

(1) Prepayment assumptions for single class and multi-class mortgage backed/asset backed securities were obtained from industry market sources.

- (2) The Company had no other-than-temporary impairment (“OTTI”) losses during the first quarter of 2015 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R, *Loan-Backed and Structured Securities* (“SSAP No. 43R”).
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date June 30, 2015.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at June 30, 2015.
- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at June 30, 2015 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.

E. Repurchase Agreements and/or Securities Lending Transactions

- (1) The Company did not have any repurchase agreements at June 30, 2015.
- (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 June 30, 2015.
- (4) Through (7): No significant change.

F., G. and H. No significant change.

I. The Company did not have any working capital finance investments at June 30, 2015.

J. The Company did not have any offsetting and netting of financial assets or liabilities at June 30, 2015.

K. No significant change.

6. Joint ventures, partnerships, and limited liability companies

No significant change.

7. Investment income

No significant change.

8. Derivative instruments

No significant change.

9. Income taxes

No significant change.

10. Information concerning parent, subsidiaries, affiliates, and related parties

No significant change.

11. Debt

A. The Company did not have any items related to debt, including capital notes at June 30, 2015.

B. The Company did not have any Federal Home Loan Bank agreements at June 30, 2015.

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 June 30, 2015.

13. Capital and surplus, shareholders' dividend restrictions and quasi-reorganizations

No significant change.

14. Contingencies

No significant change.

15. Leases

No significant change.

16. Information about financial instruments with off-balance sheet risk and financial instruments with concentrations of credit risk

No significant change.

17. Sale, transfer and servicing of financial assets and extinguishments of liabilities

A. Transfers of receivables reported as sales

No significant change.

B. Transfer and servicing of financial assets

(1) No significant change.

(2) and (3): The Company did not have any servicing assets or liabilities at June 30, 2015.

(4) The Company did not have any securitized financial assets at June 30, 2015.

(5) Through (7): No significant change.

C. Wash sales

(1) The Company did not have any wash sales for the period ending June 30, 2015.

18. Gain or loss to the reporting entity from uninsured plans and the uninsured portion of partially insured plans

No significant change.

19. Direct premium written/produced by managing general agents/third party administrators

No significant change.

20. Fair value measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at June 30, 2015.

C. Certain of the Company's financial instruments are measured at fair value in our balance sheets. 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 established by U.S. generally accepted accounting principles. 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 our 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, we use these quoted market prices to determine the fair value of financial assets and liabilities and classify 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, we estimate 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, we determine 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.

The carrying values and estimated fair values of the Company's financial instruments at June 30, 2015 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds, Short Term, and Cash Equivalent	\$ 38,907,611	\$ 38,550,343	\$ 3,433,931	\$ 35,473,681	\$	\$

There were no materials realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during the period ending June 30, 2015.

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.

21. Other items

No significant change.

22. Events subsequent

A. Type I - Recognized subsequent events

Subsequent events have been considered through August 14, 2015 for the statutory statement issued on August 14, 2015.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized subsequent events

Subsequent events have been considered through August 14, 2015 for the statutory statement issued on August 14, 2015.

The Company had no known reportable nonrecognized 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 ("ACA")

- (1) Did the reporting entity write accident and health insurance premium which is subject to the ACA risk sharing provisions (YES/NO)? Yes

Line items below where the amount is zero are due to no activity as of the reporting date.

- (2) Impact of Risk Sharing Provisions of the ACA on Admitted Assets, Liabilities and Revenue and Expenses for the Current Year:

	AMOUNT
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	\$
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	\$
3. Premium adjustments payable due to ACA Risk Adjustment Operations (Revenue & Expense)	\$
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	\$
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$

- b. Transitional ACA Reinsurance Program
- Assets
1. Amounts recoverable for claims paid due to ACA Reinsurance \$
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability) \$
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance \$
- Liabilities
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium \$
5. Ceded reinsurance premiums payable due to ACA Reinsurance \$
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance \$
- Operations (Revenue & Expense)
7. Ceded reinsurance premiums due to ACA Reinsurance \$
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments \$
9. ACA Reinsurance contributions – not reported as ceded premium \$
- c. Temporary ACA Risk Corridors Program
- Assets
1. Accrued retrospective premium due to ACA Risk Corridors \$
- Liabilities
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors \$
- Operations (Revenue & Expense)
3. Effect of ACA Risk Corridors on net premium income (paid/received) \$
4. Effect of ACA Risk Corridors on change in reserves for rate credits \$

(3) Roll-forward of prior year ACA risk-sharing provisions for the following assets (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance.

		Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
		1	2	3	4	Prior Year	Prior Year	To Prior Year	To Prior Year		Cumulative	Cumulative
						Accrued Less	Accrued Less						Balance	Balance	Balance from	Balance from
Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	7	8	9	10			
a.	Permanent ACA Risk Adjustment Program											
	1. Premium adjustments receivable	\$	\$	\$	\$	\$ 0	\$ 0	\$		A	\$ 0	\$ 0
	2. Premium adjustments (payable)	\$	\$	\$	\$	\$ 0	\$ 0	\$		B	\$ 0	\$ 0
	3. Subtotal ACA Permanent Risk Adjustment Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0		\$ 0	\$ 0
b.	Transitional ACA Reinsurance Program											
	1. Amounts recoverable for claims paid	\$	\$	\$	\$	\$ 0	\$ 0	\$		C	\$ 0	\$ 0
	2. Amounts recoverable for claims unpaid (contra liability)	\$	\$	\$	\$	\$ 0	\$ 0	\$		D	\$ 0	\$ 0
	3. Amounts receivable relating to uninsured plans	\$	\$	\$	\$	\$ 0	\$ 0	\$		E	\$ 0	\$ 0
	4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	\$	\$	\$	\$	\$ 0	\$ 0	\$		F	\$ 0	\$ 0
	5. Ceded reinsurance premiums payable	\$	\$	\$	\$	\$ 0	\$ 0	\$		G	\$ 0	\$ 0
	6. Liability for amounts held under uninsured plans	\$	\$	\$	\$	\$ 0	\$ 0	\$		H	\$ 0	\$ 0
	7. Subtotal ACA Transitional Reinsurance Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0		\$ 0	\$ 0
c.	Temporary ACA Risk Corridors Program											
	1. Accrued retrospective premium	\$	\$	\$	\$	\$ 0	\$ 0	\$		I	\$ 0	\$ 0
	2. Reserve for rate credits or policy experience rating refunds	\$	\$	\$	\$	\$ 0	\$ 0	\$		J	\$ 0	\$ 0
	3. Subtotal ACA Risk Corridors Program	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0		\$ 0	\$ 0
d.	Total for ACA Risk Sharing Provisions	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	0		\$ 0	\$ 0

25. Change in incurred claims and claims adjustment expense

Reserves as of June 30, 2015 were \$28,954,906. As of June 30, 2015, \$17,254,819 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$2,855,066 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on comprehensive, Federal Employees Health Benefits Plan and Medicare lines of insurance. Therefore, there has been a \$49,058 favorable prior year development since December 31, 2014 to June 30, 2015. The resulting development does not consider health care receivables. 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.

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

No significant change.

31. Anticipated salvage and subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No []
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
See Attachment
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] NA []
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2013
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.12/31/2009
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).09/30/2010
- 6.4 By what department or departments?
.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] NA [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] NA []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No
- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

- 9.2 Has the code of ethics for senior managers been amended? Yes No

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes No

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes No

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$14,958,417

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes No

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$

13. Amount of real estate and mortgages held in short-term investments: \$

- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes No

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$	\$
14.22 Preferred Stock	\$	\$
14.23 Common Stock	\$	\$
14.24 Short-Term Investments	\$	\$
14.25 Mortgage Loans on Real Estate	\$	\$
14.26 All Other	\$	\$
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26).....	\$0	\$0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$

- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No

- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes No

If no, attach a description with this statement.

GENERAL INTERROGATORIES

- 16 For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 - 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 - 16.3 Total payable for securities lending reported on the liability page \$

17. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*? Yes No

17.1 For all agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian Address
State Street Bank and Trust.....	225 Franklin Street, Boston, MA 02110.....

17.2 For all agreements that do not comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes No

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address

18.1 Have all the filing requirements of the *Purposes and Procedures Manual* of the NAIC Securities Valuation Office been followed? Yes No

18.2 If no, list exceptions:
.....

GENINTPT1 - Attachment

General Interrogatories - Part 1 - Line 3.3

On April 21, 2015, Coventry Health Care of Louisiana, Inc. changed its name to Aetna Health Inc. (LA).

On April 24, 2015, Aetna Better Health of Iowa Inc. was formed.

On May 1, 2015, Coventry Health Care of Texas, Inc. merged into Aetna Health Inc. (TX).

On May 27, 2015, bSwift LLC changed its name to bswift LLC

On June 3, 2015, Aetna HealthAssurance Pennsylvania, Inc. was formed.

On June 26, 2015, Echo Merger Sub, Inc. was formed.

On June 26, 2015, Echo Merger Sub, LLC was formed.

On June 29, 2015, HealthCare USA of Missouri L.L.C. changed its name to Aetna Better Health of Missouri LLC.

Aetna Life Insurance Company's ownership interest in Aetna Multi-Strategy 1099 Fund changed to 75%.

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent.....	82.8 %
1.2 A&H cost containment percent	2.2 %
1.3 A&H expense percent excluding cost containment expenses.....	17.4 %
2.1 Do you act as a custodian for health savings accounts?.....	Yes [] No [X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.....	\$ _____
2.3 Do you act as an administrator for health savings accounts?.....	Yes [] No [X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.....	\$ _____

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
NONE								

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

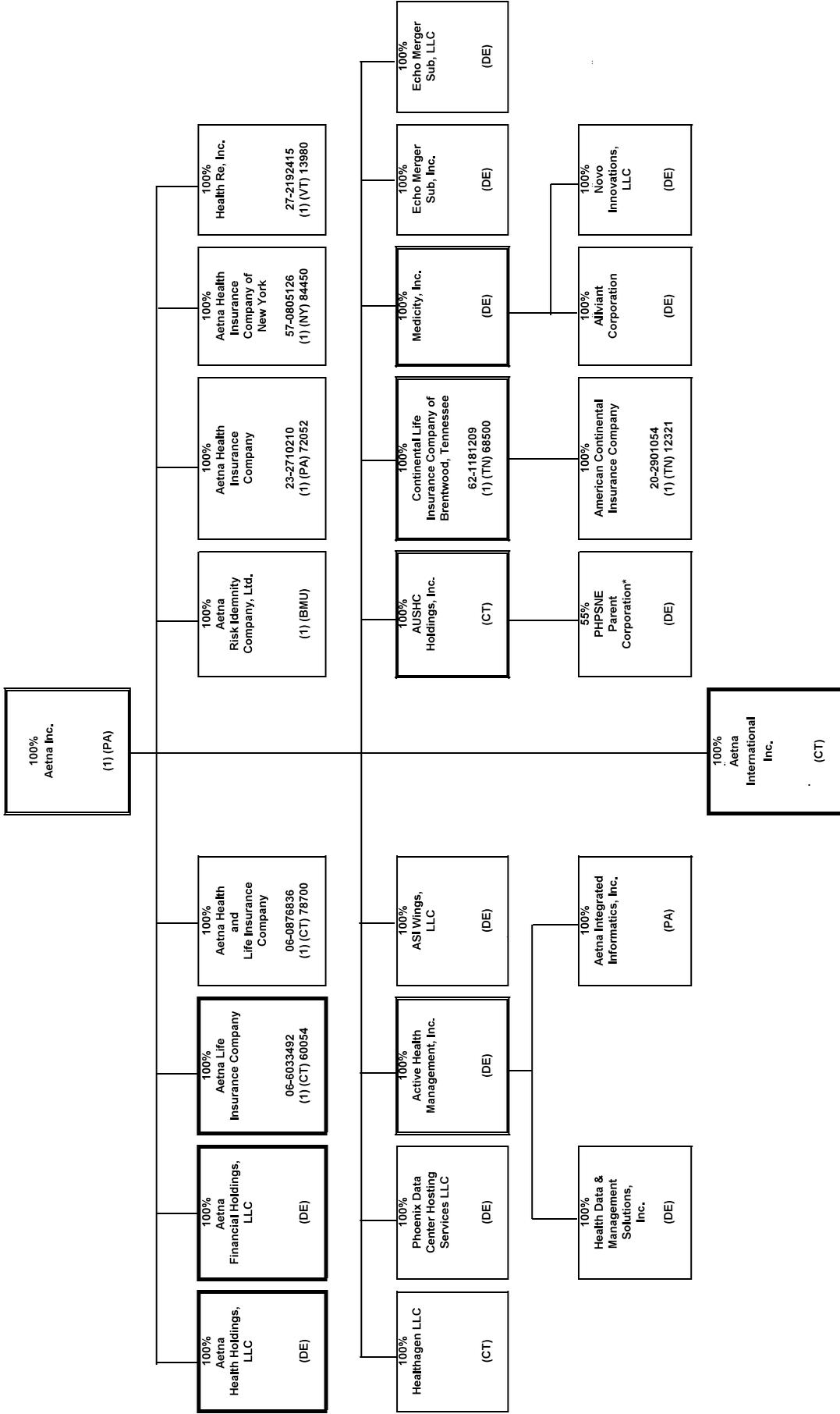
States, Etc.	1 Active Status	Direct Business Only							9 Deposit-Type Contracts	
		2 Accident & Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life & Annuity Premiums & Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 Through 7		
1. Alabama	AL	N							0	
2. Alaska	AK	N							0	
3. Arizona	AZ	N							0	
4. Arkansas	AR	N							0	
5. California	CA	N							0	
6. Colorado	CO	N							0	
7. Connecticut	CT	N							0	
8. Delaware	DE	N							0	
9. Dist. Columbia	DC	N							0	
10. Florida	FL	N							0	
11. Georgia	GA	N							0	
12. Hawaii	HI	N							0	
13. Idaho	ID	N							0	
14. Illinois	IL	N							0	
15. Indiana	IN	N							0	
16. Iowa	IA	N							0	
17. Kansas	KS	N							0	
18. Kentucky	KY	N							0	
19. Louisiana	LA	N							0	
20. Maine	ME	N							0	
21. Maryland	MD	N							0	
22. Massachusetts	MA	N							0	
23. Michigan	MI	L	1,721,078	6,801,862	105,717,100				114,240,040	
24. Minnesota	MN	N							0	
25. Mississippi	MS	N							0	
26. Missouri	MO	N							0	
27. Montana	MT	N							0	
28. Nebraska	NE	N							0	
29. Nevada	NV	N							0	
30. New Hampshire	NH	N							0	
31. New Jersey	NJ	N							0	
32. New Mexico	NM	N							0	
33. New York	NY	N							0	
34. North Carolina	NC	N							0	
35. North Dakota	ND	N							0	
36. Ohio	OH	N							0	
37. Oklahoma	OK	N							0	
38. Oregon	OR	N							0	
39. Pennsylvania	PA	N							0	
40. Rhode Island	RI	N							0	
41. South Carolina	SC	N							0	
42. South Dakota	SD	N							0	
43. Tennessee	TN	N							0	
44. Texas	TX	N							0	
45. Utah	UT	N							0	
46. Vermont	VT	N							0	
47. Virginia	VA	N							0	
48. Washington	WA	N							0	
49. West Virginia	WV	N							0	
50. Wisconsin	WI	N							0	
51. Wyoming	WY	N							0	
52. American Samoa	AS	N							0	
53. Guam	GU	N							0	
54. Puerto Rico	PR	N							0	
55. U.S. Virgin Islands	VI	N							0	
56. Northern Mariana Islands	MP	N							0	
57. Canada	CAN	N							0	
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX		1,721,078	6,801,862	105,717,100	0	0	0	114,240,040	0
60. Reporting entity contributions for Employee Benefit Plans	XXX								0	
61. Total (Direct Business)	(a) 1		1,721,078	6,801,862	105,717,100	0	0	0	114,240,040	0
DETAILS OF WRITE-INS										
58001	XXX									
58002	XXX									
58003	XXX									
58998 Summary of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0	0
58999 Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX		0	0	0	0	0	0	0	0

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and other Alien.

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

PART 1 - ORGANIZATIONAL CHART

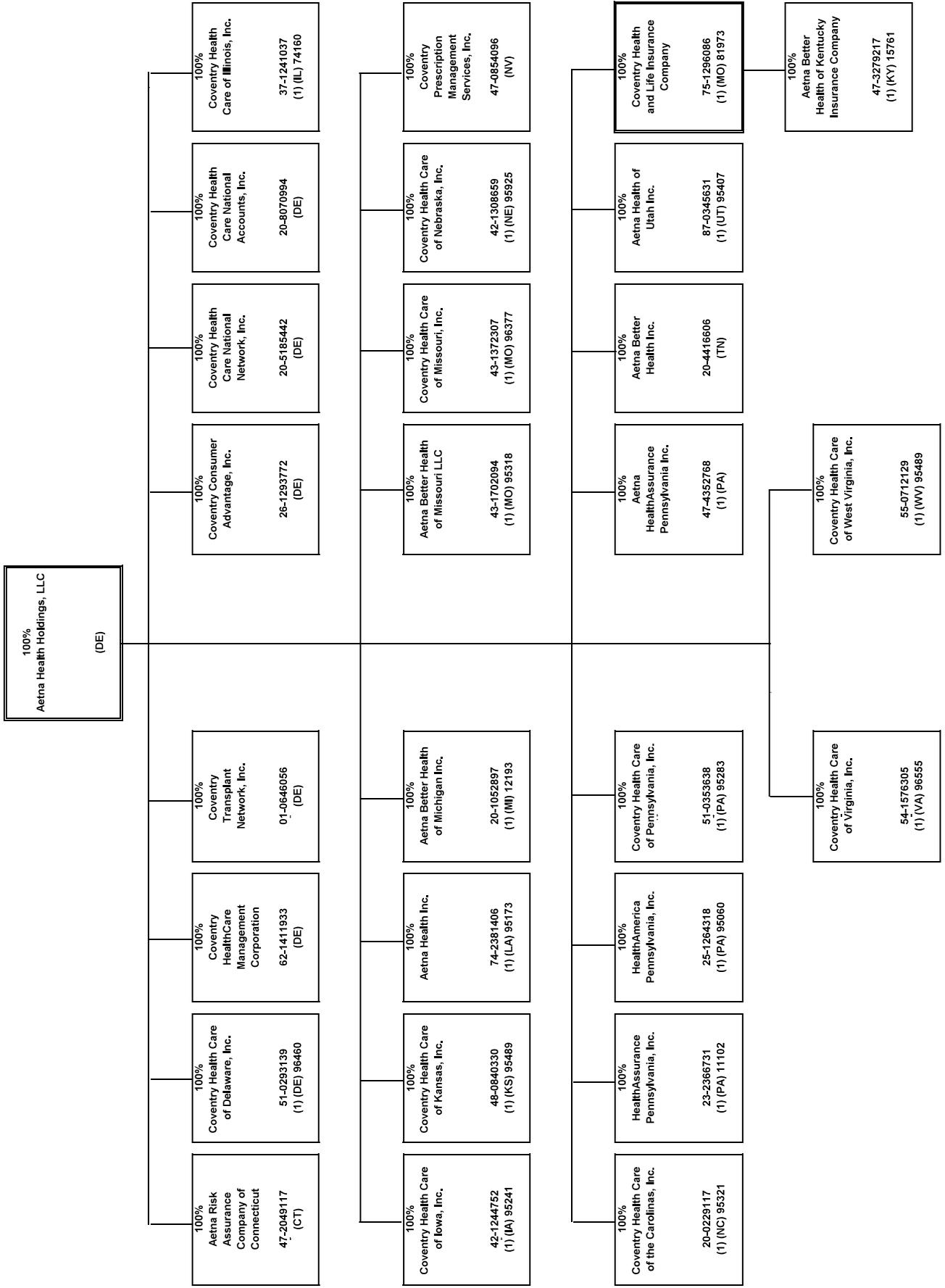


(1) Insurers/HMO's Percentages are rounded to the nearest whole percent and based on ownership of voting rights. Double borders indicate entity has subsidiaries shown on the same page. Bold borders indicate entity has subsidiaries shown on a separate page.

*55% is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

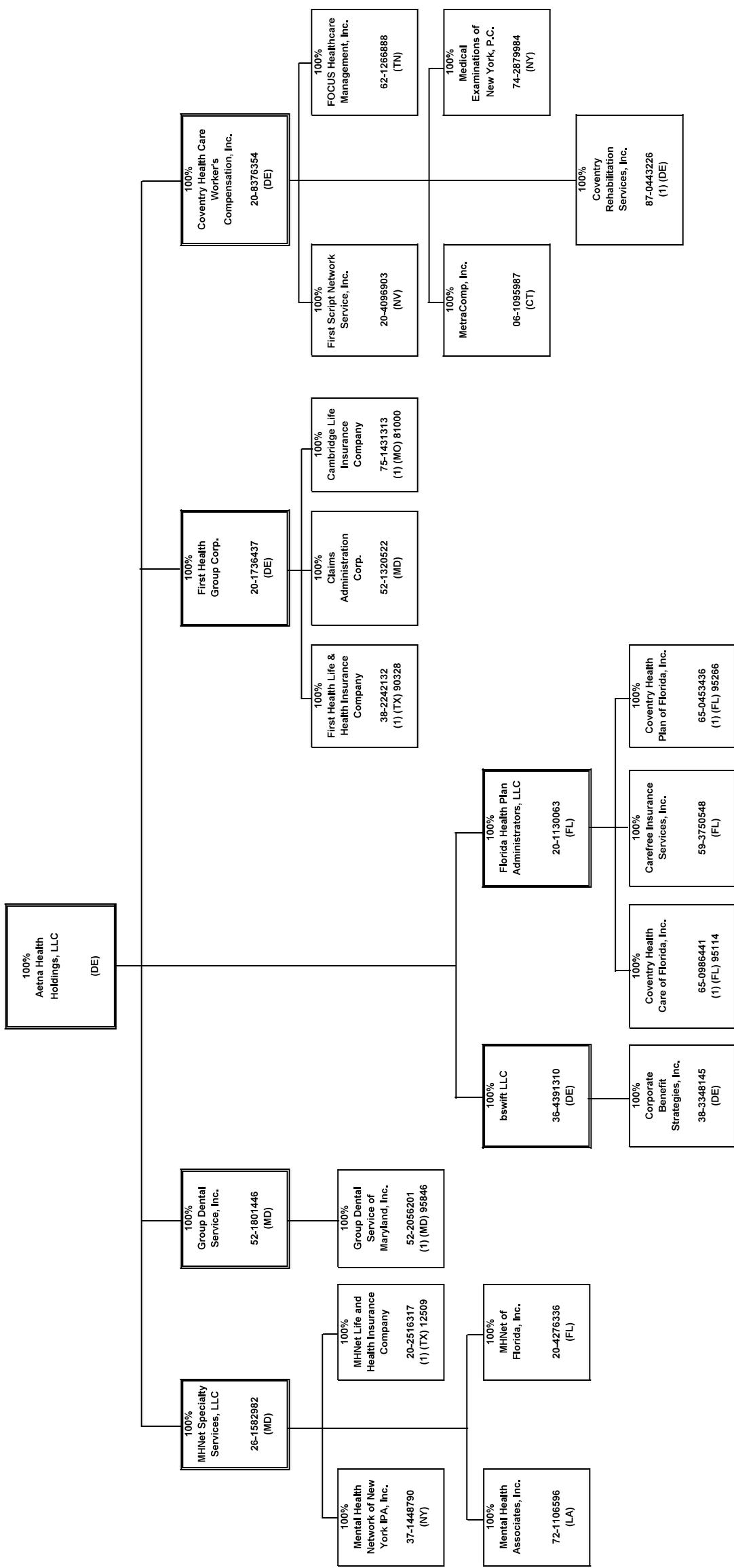
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



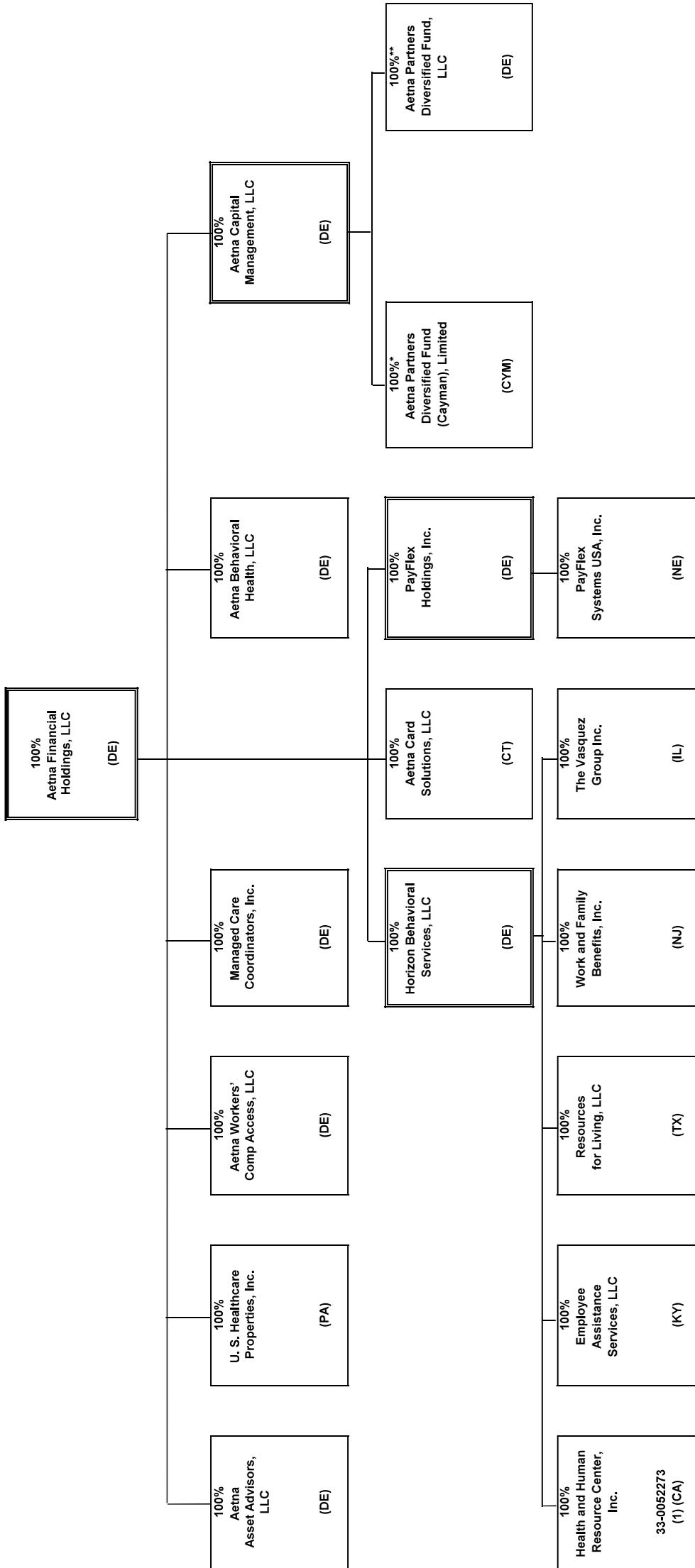
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



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

PART 1 - ORGANIZATIONAL CHART

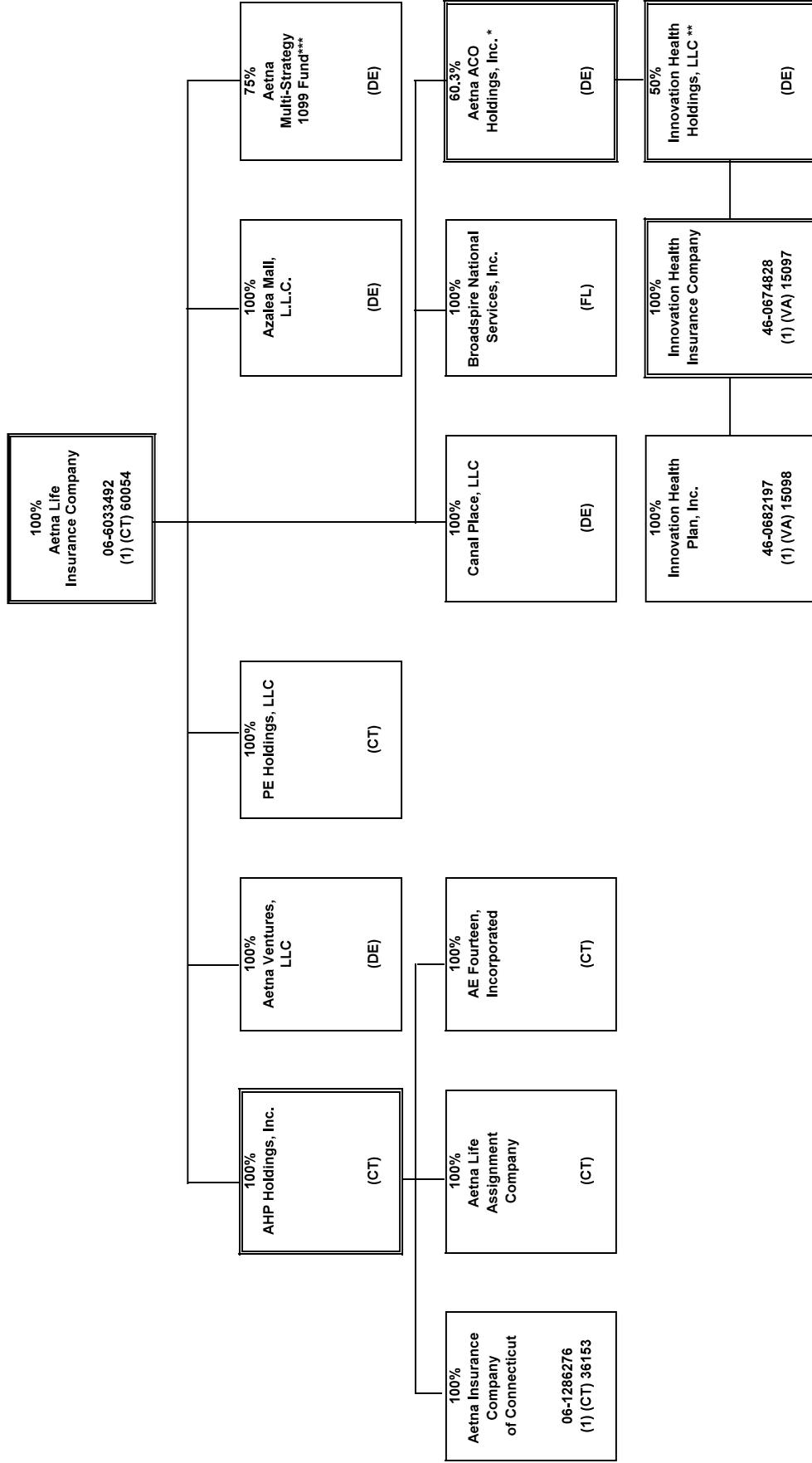


* Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.

** Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

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

PART 1 - ORGANIZATIONAL CHART



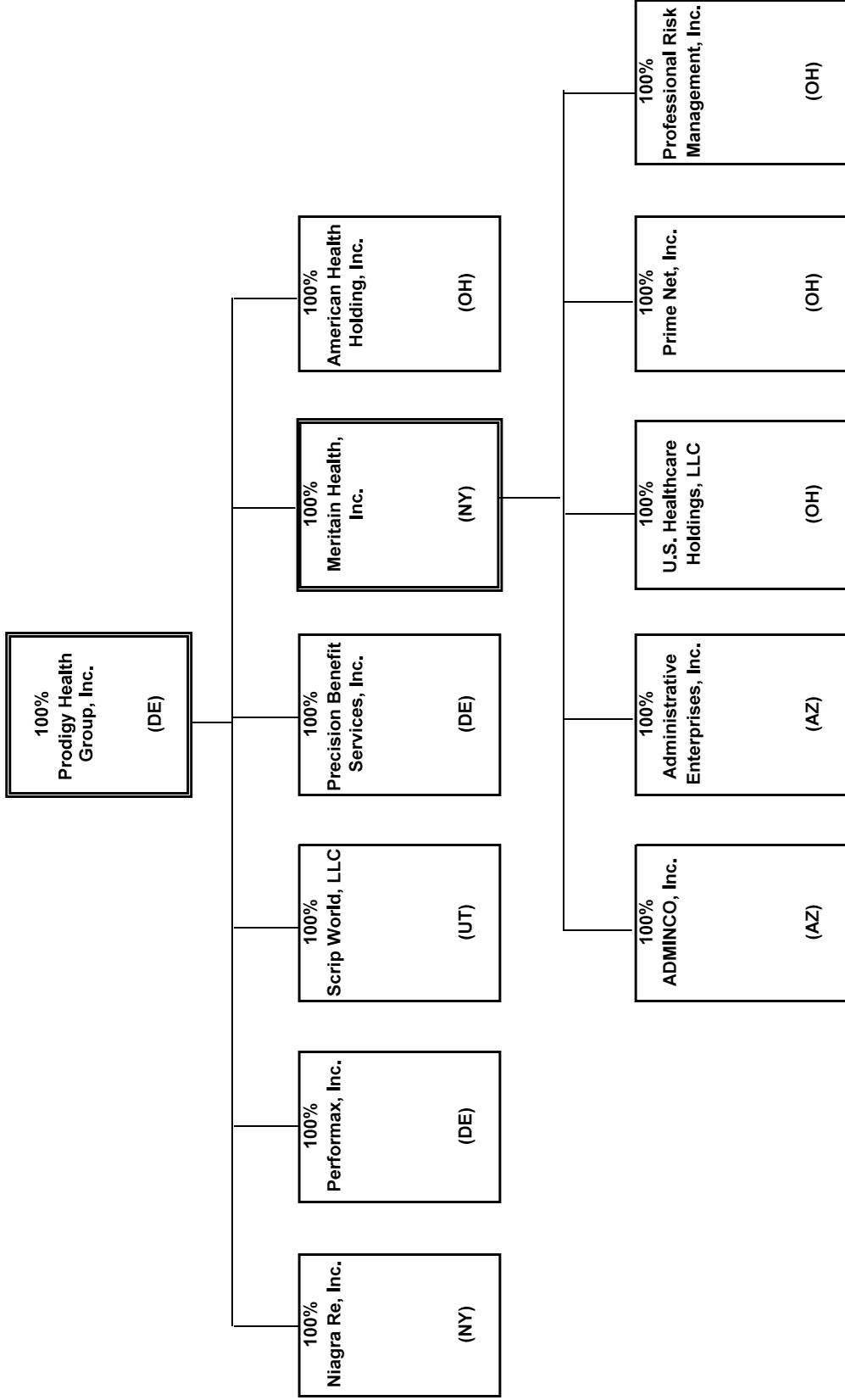
* Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 198 shares and Aetna Health Holdings, LLC owns 1 share.

** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.

***75% is invested and owned by Aetna Life Insurance Company and 25% is invested and owned by external accredited investors.

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

PART 1 - ORGANIZATIONAL CHART



STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC	00000	23-2229683	3060706	1122304	N	Aetna Inc	PA	UIP			0.0		0
00001	AETNA INC	00000	30-0123754				Aetna Health Holdings, LLC	DE	UDP	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	45-4901541				Aetna ACO Holdings, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	0.2	Aetna Inc	4
00001	AETNA INC	00000	45-5527797				Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc	Ownership	50.0	Aetna Inc	7
00001	AETNA INC	15097	46-0674828				Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	15098	46-0682197				Innovation Health Plan, Inc	VA	IA	Innovation Health Insurance Company	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	95-3402799				Aetna Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95935	23-2442048				Aetna Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95088	59-2411584				Aetna Health Inc	FL	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95094	58-1649568				Aetna Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95517	01-0504252				Aetna Health Inc	ME	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95756	23-2861565				Aetna Health Inc	MI	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95287	52-1270921				Aetna Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95234	22-2663623				Aetna Health Inc	NY	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	14408	45-2634734				Aetna Better Health Inc	NY	IA	Aetna Health Inc. (NY)	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95109	23-2169745				Aetna Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	45-4901541				Aetna ACO Holdings, Inc	DE	NIA	Aetna Health Inc. (PA)	Ownership	39.5	Aetna Inc	4
00001	AETNA INC	95490	76-0189680				Aetna Health Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95040	74-1844335				Aetna Better Health of Texas Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	12328	20-2207534				Aetna Better Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	06-1160812				Aetna Dental of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	11183	22-2990909				Aetna Dental Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95910	06-1177531				Aetna Dental Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	30-0123760				Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	13-3670795				Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	22-3187443				Aetna Ireland Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	57-1209768				Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-1274723				Cofinity, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	23-2671370				@Credentials Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	57-0640344				Strategic Resource Company	SC	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	13735	27-0563973				Aetna Better Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	13174	26-2867560				Aetna Better Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	14043	27-2512072				Aetna Better Health Inc	IL	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	47-3850677				Aetna Better Health of Iowa Inc	IA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	15616	80-0629718				Aetna Better Health, Inc	LA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	80-0671703				Aetna Better Health Inc	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	14229	25-2764938				Aetna Better Health Inc	OH	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	15611	46-3203088				Aetna Better Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	04-2708160				Aetna Student Health Agency Inc	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	73-1702453				Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	01-0826783				Schaller Anderson Medical Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC.	00000	86-0842559	0	0		Aetna Medicaid Administrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	45-2944270	0	0		iTriage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	16-1471176	0	0		Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	20-0438576	0	0		Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	52-2200070	0	0		Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	87-0632355	0	0		Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	31-1368946	0	0		American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	16-1264154	0	0		Meritain Health, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	86-0537707	0	0		ADMINCO, Inc.	AZ	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	86-0527428	0	0		Administrative Enterprises, Inc.	AZ	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	34-1670299	0	0		Prime Net, Inc.	OH	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	34-1348032	0	0		Professional Risk Management, Inc.	OH	NIA	Meritain Health, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	68500	62-1181209	0	0		Continental Life Insurance Company of Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	12321	20-2901054	0	0		American Continental Insurance Company	TN	IA	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	60054	06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership	60.3	Aetna Inc.	4
00001	AETNA INC.	00000	06-1270755	0	0		AHP Holdings, Inc.	CT	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	36153	06-1286276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	06-1028469	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	06-1373153	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	20-3678339	0	0		PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	06-1423207	0	0		Azalea Mall, L.L.C.	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	00000	0	0		Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	20-3180700	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	59-2108747	0	0		Broadspire National Services, Inc.	FL	NIA	Aetna Life Insurance Company	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	00000	0	0		Aetna Multi-Strategy 1099 Fund	DE	NIA	Aetna Life Insurance Company	Ownership	75.0	Aetna Inc.	9
00001	AETNA INC.	00000	41-2035961	0	0		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	26-2030792	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	23-2354500	0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	11-3667142	0	1314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.0	Aetna Inc.	1
00001	AETNA INC.	00000	00000	0	1460020		Aetna Partners Diversified Fund (Cayman), Limited	CYM	NIA	Aetna Capital Management, LLC	Ownership	100.0	Aetna Inc.	2
00001	AETNA INC.	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc.	0
00001	AETNA INC.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc.	0

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	61-1193498	0	0		Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	33-0052273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	22-3178125	0	0		Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	27-1773021	0	0		Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	78700	06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	98-0166872	0	0		Aetna Risk Indemnity Company, LTD	BMU	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	06-1571642	0	0		Aetna International Inc.	CT	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	98-0211470	0	0		Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Health Services (UK) Limited	GBR	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Insurance (Singapore) Pte. Ltd	SGP	IA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Benefits (Europe) Limited	BGR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Benefits Limited PT. Aetna Global Benefits	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.0	Aetna Inc	5
00001	AETNA INC	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.0	Aetna Inc	6
00001	AETNA INC	00000		0	0		Aetna Global Benefits (Asia Pacific) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.0	Aetna Inc	0

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STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		InterGlobal Japan Corporation Limited	JPN	NIA	Aetna Holdco (UK) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Asia Pacific) Limited	Ownership	0.0	Aetna Inc	3
00001	AETNA INC	00000		0	0		Aetna Health Insurance Company of Europe Limited	IRL	IA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna (Shanghai) Enterprise Services Co. Ltd.	CHN	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna (Beijing) Enterprise Management Services Co., Ltd.	CHN	NIA	Aetna (Shanghai) Enterprise Services Co. Ltd.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Benefits (Singapore) PTE. LTD	SGP	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Singapore) PTE, LTD	Ownership	100.0	Aetna Inc	3
00001	AETNA INC	00000	22-2578985	0	0		AUSHC Holdings, Inc	CT	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Aetna Global Holdings Limited	GBR	NIA	Aetna International Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Healthagen International Limited	GBR	NIA	Aetna Global Holdings Limited Healthagen International	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Futrix Limited	NZL	NIA	Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000		0	0		Futrix Inc	NZL	NIA	Futrix Limited	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	06-1182176	0	0		PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc	Ownership	55.0	Aetna Inc	8
00001	AETNA INC	00000	52-2182411	0	0		Active Health Management, Inc	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	47-0970432	0	0		Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	23-2604867	0	0		Aetna Integrated Informatics, Inc	PA	NIA	Active Health Management, Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	13980	27-2192415	0	0		Health Re, Inc	VT	IA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	81-0579372	0	0		Phoenix Data Center Hosting Services, LLC	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	46-2469464	0	0		Healthagen LLC	CT	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	51-0029326	0	0		ASI Wings, L.L.C.	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	33-0807547	0	0		Medicity, Inc	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	0	0	0		Echo Merger Sub, Inc	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	0	0	0		Echo Merger Sub, LLC	DE	NIA	Aetna Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	27-0259978	0	0		Novo Innovations, LLC	DE	NIA	Medicity Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	27-1170966	0	0		Allviant Corporation	DE	NIA	Medicity Inc	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	81973	75-1296086	0	0		Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	15761	47-3279217	0	0		Aetna Better Health of Kentucky Insurance Company	KY	IA	Coventry Health and Life Insurance Company	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	96460	51-0293139	0	0		Coventry Health Care of Delaware, Inc	DE	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	52-1801446	0	0		Group Dental Service, Inc	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0

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STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC	95846	52-2056201	0	0		Group Dental Service of Maryland, Inc	MD	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95283	51-0353638	0	0		Coventry Health Care of Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95241	42-1244752	0	0		Coventry Health Care of Iowa, Inc	IA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95925	42-1308659	0	0		Coventry Health Care of Nebraska, Inc	NE	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	47-2049117	0	0		Aetna Risk Assurance Company of Connecticut Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95173	74-2381406	0	0		Aetna Health Inc	LA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95060	25-1264318	0	0		HealthAmerica Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	47-0854096	0	0		Coventry Prescription Management Services, Inc	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	96555	54-1576305	0	0		Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	01-0646056	0	0		Coventry Transplant Network, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95318	43-1702094	0	0		Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc	WV	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95321	20-0229117	0	0		Coventry Health Care of the Carolinas, Inc	NC	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95489	48-0840330	0	0		Coventry Health Care of Kansas, Inc	KS	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc	MI	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95407	87-0345631	0	0		Aetna Health of Utah Inc	UT	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-4416606	0	0		Aetna Better Health Inc	TN	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	74160	37-1241037	0	0		Coventry Health Care of Illinois, Inc	IL	IA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-8070994	0	0		Coventry Health Care National Accounts, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-5185442	0	0		Coventry Health Care National Network, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE Y
PART 1A – DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Name of Parent Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/ Person(s)	*
00001	AETNA INC	00000	20-8376354	0	0		Coventry Health Care Workers' Compensation, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-4096903	0	0		First Script Network Service, Inc.	NV	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	06-1095987	0	0		MetraComp, Inc.	CT	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	74-2879984	0	0		Medical Examinations of New York, P.C.	NY	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc.	TN	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	87-0443226	0	0		Coventry Rehabilitation Services, Inc.	DE	NIA	Coventry Health Care Workers' Compensation, Inc.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-1736437	0	0		First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	90328	38-2242132	0	0		First Health Life & Health Insurance Company	TX	IA	First Health Group Corp.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	52-1320522	0	0		Claims Administration Corp.	MD	NIA	First Health Group Corp.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	81000	75-1431313	0	0		Cambridge Life Insurance Company	MO	IA	First Health Group Corp.	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-1130063	0	0		Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95114	65-0986441	0	0		Coventry Health Care of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	95266	65-0453436	0	0		Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	59-3750548	0	0		Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	36-4391310	0	0		bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	38-3348145	0	0		Corporate Benefit Strategies, Inc.	DE	NIA	bswift LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	72-1106596	0	0		Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0
00001	AETNA INC	00000	20-4276336	0	0		MHNet of Florida, Inc.	FL	NIA	MHNet Specialty Services, LLC	Ownership	100.0	Aetna Inc	0

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Asterisk	Explanation
1	Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing membership interests.
2	Aetna Life Insurance Company owns the Class C participating shares.
3	Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.
4	Aetna ACO Holdings, Inc. is owned by Aetna Life Insurance Company (60%), Aetna Health Inc. (PA) (39%) and Aetna Health Holdings, LLC (1%).
5	Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Suhatsyah Rivai, Aetna's Nominee.
6	Aetna Global Benefits (Bermuda) Limited owns 49% and 51% is owned by Euro Gulf LLC, Aetna's Nominee.
7	Aetna ACO Holdings Inc. owns 50% and 50% is owned by Innovation Health System Foundation, an unaffiliated company.
8	55% is owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
9	75% is invested and owned by Aetna Life Insurance Company and 25% is invested and owned by external accredited investors.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

RESPONSE

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

.....NO.....

Explanation:

1.

Bar Code:

1.



OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Current year change in encumbrances	NONE	0
4. Total gain (loss) on disposals	0	0
5. Deduct amounts received on disposals	0	0
6. Total foreign exchange change in book/adjusted carrying value	0	0
7. Deduct current year's other-than-temporary impairment recognized	0	0
8. Deduct current year's depreciation	0	0
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts	0	0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B – VERIFICATION

Mortgage Loans

	1 Year To Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	0	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	NONE	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and mortgage interest points and commitment fees	0	0
9. Total foreign exchange change in book value/recorded investment excluding accrued interest	0	0
10. Deduct current year's other-than-temporary impairment recognized	0	0
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance	0	0
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts	0	0
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA – VERIFICATION

Other Long-Term Invested Assets

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	0
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	0	0
2.2 Additional investment made after acquisition	0	0
3. Capitalized deferred interest and other	NONE	0
4. Accrual of discount	0	0
5. Unrealized valuation increase (decrease)	0	0
6. Total gain (loss) on disposals	0	0
7. Deduct amounts received on disposals	0	0
8. Deduct amortization of premium and depreciation	0	0
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other-than-temporary impairment recognized	0	0
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7+8+9-10)	0	0
12. Deduct total nonadmitted amounts	0	0
13. Statement value at end of current period (Line 11 minus Line 12)	0	0

SCHEDULE D – VERIFICATION

Bonds and Stocks

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	18,090,662	17,803,957
2. Cost of bonds and stocks acquired	3,808,183	2,201,125
3. Accrual of discount	1,864	3,706
4. Unrealized valuation increase (decrease)	(17,364)	0
5. Total gain (loss) on disposals	0	(690)
6. Deduct consideration for bonds and stocks disposed of	93,415	1,749,536
7. Deduct amortization of premium	79,643	167,900
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other-than-temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	21,710,287	18,090,662
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	21,710,287	18,090,662

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	29,068,377	90,389,326	87,270,548	(4,925)	29,068,377	32,182,230	0	28,917,146
2. NAIC 2 (a).....	3,839,499	1,558,621	0	(12,645)	3,839,499	5,385,475	0	3,852,121
3. NAIC 3 (a).....	0	0	0	0	0	0	0	0
4. NAIC 4 (a).....	0	0	0	0	0	0	0	0
5. NAIC 5 (a).....	0	0	0	0	0	0	0	0
6. NAIC 6 (a).....	0	0	0	0	0	0	0	0
7. Total Bonds	32,907,876	91,947,947	87,270,548	(17,570)	32,907,876	37,567,705	0	32,769,267
PREFERRED STOCK								
8. NAIC 1.....	0	0	0	0	0	0	0	0
9. NAIC 2.....	0	0	0	0	0	0	0	0
10. NAIC 3.....	0	0	0	0	0	0	0	0
11. NAIC 4.....	0	0	0	0	0	0	0	0
12. NAIC 5.....	0	0	0	0	0	0	0	0
13. NAIC 6.....	0	0	0	0	0	0	0	0
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds & Preferred Stock	32,907,877	91,947,947	87,270,548	(17,572)	32,907,877	37,567,705	0	32,769,267

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$16,840,056 ; NAIC 2 \$0 ;
NAIC 3 \$0 ; NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

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SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
9199999	1,383	XXX	1,383	0	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	3,244	54,632
2. Cost of short-term investments acquired	3,143,877	408,992
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease).....	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	3,145,738	460,380
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).....	1,383	3,244
11. Deduct total nonadmitted amounts.....	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	1,383	3,244

Schedule DB - Part A - Verification

NONE

Schedule DB - Part B - Verification

NONE

Schedule DB - Part C - Section 1

NONE

Schedule DB - Part C - Section 2

NONE

Schedule DB - Verification

NONE

SCHEDULE E - VERIFICATION

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	14,675,361	6,968,528
2. Cost of cash equivalents acquired	160,373,787	251,855,715
3. Accrual of discount	39,525	35,117
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals.....	0	0
6. Deduct consideration received on disposals	158,250,000	244,184,000
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)	16,838,673	14,675,361
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	16,838,673	14,675,361

Schedule A - Part 2

NONE

Schedule A - Part 3

NONE

Schedule B - Part 2

NONE

Schedule B - Part 3

NONE

Schedule BA - Part 2

NONE

Schedule BA - Part 3

NONE

STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments									
912828-XJ-4	US TREASURY NOTE/BOND 0.625% 06/30/17		06/30/2015	MIZUHO SECURITIES USA		1,249,561	1,250,000	0	1
0599999 - Bonds - U.S. Governments						1,249,561	1,250,000	0	XXX
Bonds - Industrial and Miscellaneous (Unaffiliated)									
423074-BB-8	HEINZ H J CO SR UNSECURED 1.600% 06/3		06/23/2015	CHASE SECURITIES		999,370	1,000,000	0	2FE
655664-AP-5	NORDSTROM INC SR UNSECURED 4.000% 10/1		06/30/2015	CITIGROUP		559,251	525,000	4,725	2FE
3899999 - Bonds - Industrial and Miscellaneous (Unaffiliated)						1,558,621	1,525,000	4,725	XXX
8399997 - Subtotals - Bonds - Part 3						2,808,182	2,775,000	4,725	XXX
8399999 - Subtotals - Bonds						2,808,182	2,775,000	4,725	XXX
Common Stocks - Industrial and Miscellaneous									
369604-10-3	GENL ELEC CO		05/07/2015	Strategas Securities, LLC	36,983.000	1,000,002		0	L
9099999 - Common Stocks - Industrial and Miscellaneous (Unaffiliated)						1,000,002	XXX	0	XXX
9799997 - Subtotals - Common Stocks - Part 3						1,000,002	XXX	0	XXX
9799999 - Subtotals - Common Stocks						1,000,002	XXX	0	XXX
9899999 - Subtotals- Preferred and Common Stocks						1,000,002	XXX	0	XXX
9999999 Totals						3,808,183	XXX	4,725	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues0

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STATEMENT AS OF JUNE 30, 2015 OF THE Aetna Better Health of Michigan Inc.

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 Foreign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest/Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)
										11 Unrealized Valuation Increase/(Decrease)	12 Current Year's (Amortization)/Accretion	13 Current Year's Other Than Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.							
Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions																					
31297P-Z2-0...	FED HOME LOAN MTGE CORP GOLD POOL NO 5		06/01/2015	Paydown		1,521	1,521	1,540	1,539	0	(17)	0	(17)	0	1,521	0	0	0	41	05/01/2035	1
31306Y-R3-7...	FREDDIE MAC GOLD POOL CONVENTIONAL 15 YE		06/01/2015	Paydown		41,495	41,495	43,316	43,118	0	(1,624)	0	(1,624)	0	41,495	0	0	0	384	12/01/2027	1
31326U-H9-8...	FED HOME LOAN MTGE CORP GOLD POOL NO 3		06/01/2015	Paydown		15,938	15,938	16,486	16,457	0	(519)	0	(519)	0	15,938	0	0	0	214	06/01/2042	1
3132HL-F4-0...	FED HOME LOAN MTGE CORP GOLD POOL NO 3		06/01/2015	Paydown		11,415	11,415	12,043	12,014	0	(599)	0	(599)	0	11,415	0	0	0	185	08/01/2042	1
31407H-3F-1...	FED NATL MTGE ASSN POOL NO 6.000% 07/0		06/01/2015	Paydown		2,614	2,614	2,577	2,578	0	37	0	37	0	2,614	0	0	0	75	07/01/2036	1
31407T-JK-7...	FED NATL MTGE ASSN POOL NO 6.000% 10/0		06/01/2015	Paydown		144	144	145	145	0	(1)	0	(1)	0	144	0	0	0	4	10/01/2035	1
3199999 - Bonds - U.S. Special Revenue and Special Assessment and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and Their Political Subdivisions						73,128	73,128	76,107	75,851	0	(2,723)	0	(2,723)	0	73,128	0	0	0	903	XXX	XXX
8399997 - Subtotals - Bonds - Part 4						73,128	73,128	76,107	75,851	0	(2,723)	0	(2,723)	0	73,128	0	0	0	903	XXX	XXX
8399999 - Subtotals - Bonds						73,128	73,128	76,107	75,851	0	(2,723)	0	(2,723)	0	73,128	0	0	0	903	XXX	XXX
9999999 Totals						73,128	XXX	76,107	75,851	0	(2,723)	0	(2,723)	0	73,128	0	0	0	903	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues 0.

Schedule DB - Part A - Section 1

NONE

Schedule DB - Part B - Section 1

NONE

Schedule DB - Part D - Section 1

NONE

Schedule DB - Part D - Section 2

NONE

Schedule DL - Part 1

NONE

Schedule DL - Part 2

NONE

