

HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2017

NAIC Gr	oup Code 0001	0001NAI	C Company Co	de <u>15611</u> Employ	/er's ID Number4	6-3203088
Organized under the Laws of	(Current) Ne	(Prior) w Jersey		State of Domicile or Por	t of Entry	NJ
Country of Domicile			United State	s of America		
Licensed as business type:		He	ealth Maintenar	ice Organization		
Is HMO Federally Qualified? Ye				· · · · · · · · · · · · · · · · · · · 		
Incorporated/Organized		13		Commenced Busine	SS	01/01/2015
				oonnended baane		
Statutory Home Office	3 Independence (Street and			(9	Princeton , NJ, U Dity or Town, State, Coun	
Main Administrative Office		3	Independence	Way, Suite 400		
Р	rinceton, NJ, US 08540		(Street and	i Number)	855-232-35	96
	wn, State, Country and Z				(Area Code) (Telepho	
Mali Address	1425 Union Meeting F			<u></u>	Blue Bell , PA, US	
	(Street and Number of	r P.O. Box)		(0	City or Town, State, Coun	try and Zip Code)
Primary Location of Books and R	ecords		Independence (Street and	Way, Suite 400		
	rinceton , NJ, US 08540 wn, State, Country and Z			· · · · ·	855-232-35 (Area Code) (Telepho	
internet Website Address	•			122 007	(rica obde) (relepind	
	<u></u>			uia.com	0.15.77	
Statutory Statement Contact	Stev	(Name)	te			'5-6508 lephone Number)
Aetna	.HMOReporting@aetna. (E-mail Address)	com			860-262-77 (FAX Numb	
	(OFFIC		(
Chief Executive Officer and	President	Laurie Ann Bruba			al Officer and Controller	Steven Matthew Conte
Vice President and	Secretary	Robert Mark Kes	sler			
Debra Jean Bacon, Chief	Financial Officer #			ER a Investment Officer a, Vice President	John Patrick Marone	ey, Vice President and Treasurer #
Debra Jean	Bacon	DI	RECTORS O Laurie Anr	R TRUSTEES	Mary	Louise Elizabeth Osborne
above, all of the herein described this statement, together with relat of the condition and affairs of the completed in accordance with thi (2) that state rules or regulations belief, respectively. Furthermore	assets were the absolu ad exhibits, schedules a said reporting entity as e NAIC Annual Stateme require differences in n e, the scope of this attes formatting differences du	te property of the nd explanations to of the reporting p int instructions an eporting not relate station by the dest	said reporting therein contained period stated a ad Accounting F ed to accounting scribed officers	entity, free and clear from ad, annexed or referred to bove, and of its income Practices and Procedure by practices and procedure also includes the related	n any liens or claims ther o, is a full and true staten and deductions therefrom s manual except to the e unes, according to the be d corresponding electroni	nd that on the reporting period state reon, except as herein stated, and the nent of all the assets and liabilities ar for the period ended, and have bee xtent that: (1) state law may differ, o st of their information, knowledge ar ic filing with the NAIC, when require asted by various regulators in lieu of the state of the state of the state of the state of the state asted by various regulators in lieu of the state o
Laurie Ann Brub	aker	·	Robert Ma	ark Kessier		Steven Matthew Conte
Chief Executive Officer a	ind President		Vice Presiden	t and Secretary	Principa	Financial Officer and Controller
State of Arizona County of Maricopa		State of County of			State of F County of M	-
Subscribed and sworn to before r	ne this	Subscribed	and sworn to be	efore me this	Subscribed an	d sworn to before me this
2 day of FEDRUAN	2018	🖂 day	of Febru	Lary 2018	26th day of	February, 2018
marial	0	1	mag	Alana	, U	
NOTARY PUBLIC (Seal)	Well	NOTARY	JFLULA JBLIC (Seal)	Maina	NOTARY PUE	RUC (Seal)
NOTAGE FOREIO (GEEI)		HUMAL	JELO (Geal)		NOTATI 1 DE	
JANESN N Notary Public, S Maricopa My Commiss February	tate of Arizona County ion Expires		otary Public. Maricos My Commis	NEWHOUSE State of Arizona Sa County saion Expires y 08, 2019	N KIM E. Whitpain Tow	ALTH OF PENNSYLVANIA IOTARIAL SEAL ROTH, Notary Public mship, Montgomery County on Expires April 25, 2021

	AS	SETS			
	-	1	Current Year	3	Prior Year 4
			1000 - CC 2000 - D-1000 - CC	Net Admitted Assets	Net Admitted
1	Bonds (Schedule D)	Assets	Nonadmitted Assets		Assets
				104, 157, 525	
2.	Stocks (Schedule D): 2.1 Preferred stocks	0	0	0	0
	2.1 Preferred stocks		0	0	0
3.	Mortgage loans on real estate (Schedule B):	0	0		
э.	3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate (Schedule A):	0			
	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	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$				
5.	(\$21,025,588 , Schedule E - Part 2) and short-term				
	investments (\$0, Schedule DA)	24 602 257	0	24 602 257	15 207 315
6	Contract loans, (including \$			1	
6. 7	Derivatives (Schedule DB)				
7.	Other invested assets (Schedule BA)				
8.	Receivables for securities				
9.	Securities lending reinvested collateral assets (Schedule DL)				
10.					
11.	Aggregate write-ins for invested assets Subtotals, cash and invested assets (Lines 1 to 11)				
12.			0	120,029,702	
13.	Title plants less \$0 charged off (for Title insurers only)	0	0	0	
				1	
14.	Investment income due and accrued		0		
15.	Premiums and considerations: 15.1 Uncollected premiums and agents' balances in the course of collection	0 704 401		0 704 401	0 041 500
			0		
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	
	15.3 Accrued retrospective premiums (\$0) and	0			,
	contracts subject to redetermination (\$0)	0	0	0	(
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers		0	0	
	16.2 Funds held by or deposited with reinsured companies		0	0	(
. –	16.3 Other amounts receivable under reinsurance contracts		0	0	(
17.	Amounts receivable relating to uninsured plans		0	0	(
	Current federal and foreign income tax recoverable and interest thereon		0		
	Net deferred tax asset		0		1,282,959
19.	Guaranty funds receivable or on deposit		0	0	(
20.	Electronic data processing equipment and software	0	0	0	(
21.	Furniture and equipment, including health care delivery assets				
	(\$		0	0	
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	(
23.	Receivables from parent, subsidiaries and affiliates				(
24.	Health care (\$				4,085,629
25.	Aggregate write-ins for other than invested assets	0	0	0	(
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	136 024 758	1 404 906	134 619 762	110 562 226
27.	From Separate Accounts, Segregated Accounts and Protected Cell	100,024,700			
21.	Accounts	0	0	0	(
28.	Total (Lines 26 and 27)	136,024,758	1,404,996	134,619,762	119,562,326
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	
	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	
1199.	,				
1199. 2501.					
2501.					
2501. 2502.					
2501.	Summary of remaining write-ins for Line 25 from overflow page			0	

ASSETS

LIABILITIES, CAPITAL AND SURPLUS

	-	1	Current Year	3	Prior Year
			2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$0 reinsurance ceded)			and a manufacture and a state of the state o	
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses		0		
4.	Aggregate health policy reserves, including the liability of				
	\$0 for medical loss ratio rebate per the Public	1.0000000000000000000000000000000000000			
	Health Service Act				
5.	Aggregate life policy reserves	CALCULATION OF THE PERSON AND THE ACTIVITY OF A			0
6.	Property/casualty unearned premium reserves			0	0
7.	Aggregate health claim reserves				0
8.	Premiums received in advance				0
9.	General expenses due or accrued	4,104,583	0	4, 104,583	
10.1	· · ·				4 470 705
	(including \$0 on realized capital gains (losses))	0 [0	_
			0		0
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				0
13.	Remittances and items not allocated		0		
14.	Borrowed money (including \$0 current) and				
	interest thereon \$0 (including				
	\$0 current)				
15.	Amounts due to parent, subsidiaries and affiliates				
16.	Derivatives				0
17.	Payable for securities				0
18.		0	0	0	0
19.	Funds held under reinsurance treaties (with \$0				
	authorized reinsurers, \$0 unauthorized		0	0	0
	reinsurers and \$	0		0	0
20.	Reinsurance in unauthorized and certified (\$0)				
	companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				0
22.	Liability for amounts held under uninsured plans		0	0	0
23.	Aggregate write-ins for other liabilities (including \$0	100 604	0	100 604	0.007
~	current)				
24.					
25.					0
26.				0	0
27.		XXX	XXX		
28.	Gross paid in and contributed surplus			21,000,000	
29. 20				0	0
30.		XXX	XXX		14,333,748
31.	Unassigned funds (surplus)				14,000,740
32.	Less treasury stock, at cost: 32.10 shares common (value included in Line 26				
	\$	VVV	VVV	0	0
	32.20 shares preferred (value included in Line 27	XXX	XXX		0
	\$	xxx	XXX	0	0
22	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX		
				134,619,762	119,562,326
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	134,019,702	119,302,320
0201	DETAILS OF WRITE-INS Escheat Payable		0		
	2				
2302.					
	Cummon of annoising units ing for Ling 00 from suggiture and		0	0	
		108,694	0	0 108,694	3,907
	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above) Estimated Health Insurer Fee Accrual				3,907
		XXX			0
		XXX			
2502.		VVV		1	
2502. 2503.		XXX	XXX	^	0
2502. 2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2502. 2503. 2598. 2599.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX XXX	XXX XXX	2,827,000	0 0
2502. 2503. 2598. 2599. 3001.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX XXX		2,827,000	0
2502. 2503. 2598. <u>2599.</u> 3001. 3002.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX XXX XXX		2,827,000	0
2502. 2503. 2598. 2599. 3001. 3002. 3003.	Summary of remaining write-ins for Line 25 from overflow page Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX XXX	XXX	2,827,000	

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AN	Current Y		Prior Year
		1 Uncovered	2 Total	3 Total
1.	Member Months	XXX		
2.	Net premium income (including \$0 non-health premium income)			169,907,625
3.	Change in unearned premium reserves and reserve for rate credits			
4.	Fee-for-service (net of \$0 medical expenses)	XXX	0	0
5.	Risk revenue	xxx	0	0
6.	Aggregate write-ins for other health care related revenues	xxx	0	0
7.	Aggregate write-ins for other non-health revenues		0	0
8.	Total revenues (Lines 2 to 7)			137,983,073
	Hospital and Medical:			
9.	Hospital/medical benefits			
10.	Other professional services	0	6,363,608	
11.	Outside referrals	9,083,479	9,083,479	5,726,725
12.	Emergency room and out-of-area	2,284,559	9,847,239	
13.	Prescription drugs	4,392,049		
14.	Aggregate write-ins for other hospital and medical	0	0	0
15.	Incentive pool, withhold adjustments and bonus amounts	0		
16.	Subtotal (Lines 9 to 15)			
	Less:			
17.	Net reinsurance recoveries	0	0	0
18.	Total hospital and medical (Lines 16 minus 17)	40,807,114		
19.	Non-health claims (net)	0	0	0
20.	Claims adjustment expenses, including \$	0		7,403,303
21.	General administrative expenses	0		11,093,993
22.	Increase in reserves for life and accident and health contracts (including \$0			
	increase in reserves for life only)	0		0
23.				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)			
25.	Net investment income earned (Exhibit of Net Investment Income, Line 17)			
26.	Net realized capital gains (losses) less capital gains tax of \$			
27.	Net investment gains (losses) (Lines 25 plus 26)	0	1,971,768	
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered		1,011,100	
20.	(instruction agents of premium balances charged on [(amount recovered (amount charged off \$0)]	0	0	0
29.	Aggregate write-ins for other income or expenses	0	<mark>(531, 155)</mark>	(459,999)
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)			
31.	Federal and foreign income taxes incurred		7,268,555	9,707,933
32.	Net income (loss) (Lines 30 minus 31)	XXX	16,249,689	16,081,913
	DETAILS OF WRITE-INS			
0601.				
0602.		xxx		
0603		XXX		
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0
0699.	Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.		XXX		
0702.		XXX		
0703		XXX		
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0
0799.	Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.				
1402.				
1403.				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.	Regulatory Fines	0	<mark>(531, 155)</mark>	(459,999)
2902.				
2903		~		^
				0 (459,999)
2998. 2999.	Summary of remaining write-ins for Line 29 from overflow page Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0 (531, 155)	_

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES	1	2
		Current Year	Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year		12,290,501
34.	Net income or (loss) from Line 32		
35.	Change in valuation basis of aggregate policy and claim reserves		0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		0
38.	Change in net deferred income tax		1,283,121
39.	Change in nonadmitted assets		(321,787)
40	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		0
42.	Change in surplus notes		0
43.	Cumulative effect of changes in accounting principles		0
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)		0
	44.3 Transferred to surplus		0
45.	Surplus adjustments:		
40.	45.1 Paid in	0	
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		0
46.	Dividends to stockholders	(14,000,000)	
47.	Aggregate write-ins for gains or (losses) in surplus		
48.	Net change in capital and surplus (Lines 34 to 47)		
49.	Capital and surplus end of reporting period (Line 33 plus 48)	36,287,613	35,333,748
43.	DETAILS OF WRITE-INS	00,207,010	00,000,740
4701	Prior Period Adjustment to Change in Non-Admitted Assets		0
4701. 4702.	Prior Period Adjustment to Change in Net Deferred Tax		0
			0
4703.	Prior Period Adjustment to Change in Current Federal and Foreign Income Tax Payable and Interest Thereon		0
4798.	Summary of remaining write-ins for Line 47 from overflow page		0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	(1,040,943)	0

CASH FLOW

			0
		1	2
		Current Year	Prior Year
	Cash from Operations	2000 BILL 1	
1.	Premiums collected net of reinsurance		
2.	Net investment income		
3.	Miscellaneous income	0	(4,083,220
4.	Total (Lines 1 through 3)	243,080,494	167,024,666
5.	Benefit and loss related payments		
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	
7.	Commissions, expenses paid and aggregate write-ins for deductions		16,403,39
8.	Dividends paid to policyholders	0	
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses)	9,024,883	7,787,41
10.	Total (Lines 5 through 9)	215,665,065	118,464,76
11.	Net cash from operations (Line 4 minus Line 10)	27,415,429	48,559,90
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	29,713,159	
	12.2 Stocks		
	12.3 Mortgage loans	0	
	12.4 Real estate		
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
10			
13.	Cost of investments acquired (long-term only): 13.1 Bonds	60 000 005	72 050 75
	13.2 Stocks		
	13.3 Mortgage loans		
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		70.050.75
	13.7 Total investments acquired (Lines 13.1 to 13.6)		73,950,75
14.	Net increase (decrease) in contract loans and premium notes		
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(38,515,056)	(40,453,16
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	4,584,569	10,465,99
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(9,415,431)	16,465,99
	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)	(20,515,058)	24,572,73
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	45,207,315	
	19.2 End of year (Line 18 plus Line 19.1)	24,692,257	45,207,31

Note: Supplemental disclosures of cash flow information for non-cash transactions:	
20.0001. Bond Exchanges	 0

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

(4)											
		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
		Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health
1.	Net premium income	242.076.966	0	0	0	0	0	0	242.076.966	0	0
2.	Change in unearned premium reserves and reserve for rate credit	(8,320,664)	0	0	0	0	0	0	(8,320,664)	0	0
3.	Fee-for-service (net of \$0 medical expenses)	0	0	0	0			0			XXX
4.	Risk revenue			ر		لا		0			XXX
	Aggregate write-ins for other health care related revenues					بر					XXX
6.	Aggregate write-ins for other non-health care related revenues	 0	xxx	XXX	XXX	xxx	XXX	XXX	xxx	xxx	0
7.	Total revenues (Lines 1 to 6)	233,756,302	0	0	0		0	0	233,756,302	0	0
8.	Hospital/medical benefits			v		v	۰ ۱	0		ر ۱	XXX
9.	Other professional services		0	0	0	0 0	0	0		0	XXX
10.	Outside referrals			ر ۱		بر ۱	ر ۵	0		ر ۱	XXX
11.	Emergency room and out-of-area	9,817,239	0	0	0	0	0	0	9,847,239	0	XXX
12.	Prescription drugs		0	0	0	و 0	0	0	18,931,246	0	XXX
13.	Aggregate write-ins for other hospital and medical	0	0	0	0	0	0	0		0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	449.348	0	0	0	0 0	0	0	449.348	0	XXX
15.	Subtotal (Lines 8 to 14)		0	0	0	بو 0	0	0		0	XXX
16.	Net reinsurance recoveries		0	 ۱		بو	0	0			XXX
17.	Total medical and hospital (Lines 15 minus 16)		0	ر ۱			0	0		0	XXX
18.	Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX		XXX	
	Claims adjustment expenses including	v						~~~~			
10.	\$		0	0	0	0	0	0		0	0
20.	General administrative expenses		0	0	0	0 0	0	0	16,966,129	0	0
20.	Increase in reserves for accident and health contracts	0,000,120	0	0	0		0	0		0	XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
	Total underwriting deductions (Lines 17 to 22)								211.678.671		0
	Total underwriting gain or (loss) (Line 7 minus Line 23)	22.077.631		بر		لا			22,077,631	0	D
	DETAILS OF WRITE-INS	22,011,031	v	U	v	0	0	0	22,011,031	0	0
											XXX
0502.											XXX
0503.											XXX
	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	o	0	0	o	
	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	XXX
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0									0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301. 1302.											XXX XXX
1302.							1				XXX
	Summary of remaining write-ins for Line 13 from overflow page	0	Λ	0	<u>م</u>		0	0		<u>م</u>	XXX
1300	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)			v		v	<u>ر</u>	v	U	U	XXX
1099.	Totals (Lines 1301 tillu 1303 plus 1390) (Line 13 above)	U	U	0	V	0	0	U	U	U	~~~

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)	0	0	0	0
2. Medicare Supplement	0	0	0	0
3. Dental only	0	0	0	0
4. Vision only		0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0
6. Title XVIII - Medicare	0	0	0	0
7. Title XIX - Medicaid		0		
8. Other health	0	0	0	0
9. Health subtotal (Lines 1 through 8)	242,409,193	0		
10. Life	0	0	0	0
11. Property/casualty	0	0	0	0
12. Totals (Lines 9 to 11)	242,409,193	0	332,227	242,076,966

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

Image: Problem in the set of the		1	2	3	4	5	6	7	8	9	10
Total Concontantive (Medical & Mackaio Medical Detail Orly Encloyee Heading Mackaio This Mackaio Other Health Other Mackaio 1.1 Present Joint 1.6 0		,		0		J		,	U	5	10
Total Complemente Supplement Detail Circle Valion Oper Jeaming Para XXIII Medicate Medicate Medicate Medicate XXIII Medicate Medicate XXIII Medicate Medicate Other Health Medicate Other Health Medicate 1. Payment during IP year: 176 (942,587 0								Title	Title		
1. Permetric during the year: 1.1 <td></td> <td>1-12-11-12-1</td> <td>Comprehensive</td> <td>Medicare</td> <td>144 14 14 14 14 14 14 14 14 14 14 14 14</td> <td>CONTRACTOR CONTRACTOR</td> <td></td> <td>XVIII</td> <td></td> <td>General Constant Constant Co</td> <td>Other</td>		1-12-11-12-1	Comprehensive	Medicare	144 14 14 14 14 14 14 14 14 14 14 14 14	CONTRACTOR CONTRACTOR		XVIII		General Constant Constant Co	Other
1.1 Direct 178,942,87 0 0 0 0 0 178,942,87 0 1.2 Reinsurne essund 0		Total	(Hospital & Medical)	Supplement	Dental Only	Vision Only	Benefits Plan	Medicare	Medicaid	Other Health	Non-Health
1 2. Persuance assumed 0	 Payments during the year: 										
1 A Beinsurance acodd 0	1.1 Direct		0	0	0	0	0	0		0	0
1 A Mat 176, 942, 587 0		0	0	0	0	0	0	0	0	0	0
2. Pair metcal incentive pools and bonuses 647, 16 0	1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3. Claim tability December 31, current year from Pat 22: 3.1 Direct 36,574,961 0			0	0	0	0	0	0		0	0
3.1 Direct 36,574,961 0	2. Paid medical incentive pools and bonuses		0	0	0	0	0	0		0	0
3 2 Reinsurance assumed 0	3. Claim liability December 31, current year from Part 2A:										
33 Reinsurance coded 0			0	0	0	0	0	0		0	0
3.4 Net 38, 574, 961 0 0 0 0 0 38, 574, 961 0 4.1 Direct 0	3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4. Claim reserve December 31, ourrent year from Part 2D: 4.2 Reinsurance assumed 0 <t< td=""><td>3.3 Reinsurance ceded</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></t<>	3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4 1 Dired 0	3.4 Net		0	0	0	0	0	0		0	0
4 1 Dired 0	4. Claim reserve December 31, current year from Part 2D:										
4.3 Peinsurance coded 0		0	0	0	0	0	0	0	0	0	0
4 A Net 0 </td <td>4.2 Reinsurance assumed</td> <td>0</td>	4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
5. Accured medical inontive pools and bonuses, current yer	4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
year 402,172 0		0	0	0	0	0	0	0	0	0	0
year 402,172 0	5. Accrued medical incentive pools and bonuses, current										
7. Amounts recoverable from reinsurers December 31, prior year from Part 2A: 0<	year		0	0	0	0	0	0		0	0
current year 0 <t< td=""><td></td><td>(2,891,511)</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>(2,891,511)</td><td>0</td><td>0</td></t<>		(2,891,511)	0	0	0	0	0	0	(2,891,511)	0	0
8. Claim liability December 31, prior year from Part 2A: 34,047,085 0											
8.1 Direct 34,047,085 0		0	0	0	0	0	0	0	0	0	
8.2 Reinsurance caded 0											
8.3 Reinsurance ceded 0			0	0	0	0	0	0		0	0
8.4 Net		0	0	0	0	0	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D: 9.1 Direct 0		0	0	0	0	0	0	0	0	0	
9.1 Direct 0	8.4 Net		0	0	0	0	0	0		0	
9.2 Reinsurance assumed	Claim reserve December 31, prior year from Part 2D:										
9.3 Reinsurance ceded		0	0	0	0	0	0	0	0	0	0
9.4 Net 0 </td <td></td> <td>0</td>		0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year 600,000 0 <td></td> <td>0</td>		0	0	0	0	0	0	0	0	0	0
11. Amounts recoverable from reinsurers December 31, prior year		0	0	0	0	0	0	0	0	0	0
prior year 0		600,000	0	0	0	0	0	0	600,000	0	0
12. Incurred Benefits: 182,361,974 0		0	0	0	0	0	0	0	0	0	0
12.2 Reinsurance assumed 0 </td <td></td>											
12.2 Reinsurance assumed 0 </td <td>12.1 Direct</td> <td></td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td></td> <td>0</td> <td>0</td>	12.1 Direct		0	0	0	0	0	0		0	0
12.3 Reinsurance ceded 0	12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	
12.4 Net		0	0	0	0	0	0	0	0	0	C
		182,361.974	0	0	0	0	0	0	182,361.974	0	0
	13. Incurred medical incentive pools and bonuses	449,348	0	0	0	0	0	0	449,348	0	0

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct		0	0	0	0	0	0	3, <mark>356,1</mark> 58	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
1.4 Net	3,356,158	0	0	0	0	0	0	3,356,158	0	0
2. Incurred but Unreported:										
2.1 Direct		0	0	0	0	0	0		0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
2.4 Net		0	0	0	0	0	0		0	0
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	0	0	0	0	0	0	0	0
4. TOTALS:										
4.1 Direct		0	0	0	0	0	0		0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	36,574,961	0	0	0	0	0	0	36,574,961	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Olaima Daid D	Numine the Mann		nd Claim Liability	5	6
	Claims Paid L	During the Year	December 31 o	d Current Year		Estimated Claim
Line of Business	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred	Claims Incurred In Prior Years (Columns 1 + 3)	Reserve and Claim Liability December 31 of Prior Year
					(00.000.000)	
1. Comprehensive (hospital and medical)	0	0	0	0	0	0
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare	0	0	0	0	0	0
7 Title XIX - Medicaid		154 , 177 ,607	1, 141,880		23,906,860	34,047,085
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)		154 , 177 ,607	1, 141,880		23,906,860	34,047,085
10. Healthcare receivables (a)	0	1,593,261	0	0	0	4,484,772
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	647, 176	0		0	
13. Totals (Lines $9 - 10 + 11 + 12$)	22,764,980	153,231,522	1,141,880	35,835,253	23,906,860	30, 162, 313

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

	Cumulative Net Amounts Paid				
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013	,				
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

	Sum of Cumulative N	let Amount Paid and Cla C	aim Liability, Claim Res outstanding at End of Ye	erve and Medical Incent ear	ive Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014					
4. 2015	XXX				
5. 2016	XXX				
6. 2017	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

	1	2	3	4	5	6	7	8	9	10
Yoors in which					Claim and Claim Adjustment Expense			Unpaid Claims	Total Claims and Claims Adjustment	
Years in which Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2013										
2. 2014										
3. 2015										
4. 2016										
5. 2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health	Claims - Medicare Supple	ement
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		Cu	mulative Net Amounts	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Medicare Suppleme					
	Sum of Cumulative N	let Amount Paid and Cla	aim Liability, Claim Res	erve and Medical Incenti ear	ve Pool and Bonuses
		C	outstanding at End of Ye	ear	
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013	,				
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX				
6. 2017	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which Premiums were Earned and Claims					Adjustment Expense			Unpaid Claims	Claims Adjustment Expense Incurred	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment		(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2013										
2	. 2014										
3											
4	. 2016										
5	. 2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid	Health Claims	- Dental Only
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		Cu	mulative Net Amounts	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013	,				
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Dental Only					
	Sum of Cumulative N	let Amount Paid and Cla	aim Liability, Claim Res	erve and Medical Incenti ear	ve Pool and Bonuses
		C	outstanding at End of Ye	ar	
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014					
4. 2015					
5. 2016					
6. 2017	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which Premiums were Earned and Claims				(Col 3/2)	Adjustment Expense			Unpaid Claims	Claims Adjustment	
				Claim Adjustment	(Col. 3/9)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense mer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2013										
2	2014										
3.	2015										
4.	2016										
5.	2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

	Cumulative Net Amounts Paid				
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Vision Only											
	Sum of Cumulative N	let Amount Paid and Cla	aim Liability, Claim Res	erve and Medical Incenti ear	ve Pool and Bonuses						
		C	outstanding at End of Ye	ar							
	1	2	3	4	5						
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017						
1. Prior											
2. 2013											
3. 2014											
4. 2015											
5. 2016											
6. 2017	XXX	XXX	XXX	XXX							

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which				(0,1,0,0)	Adjustment Expense			Unpaid Claims	Claims Adjustment	(0.1.0/1)
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2013										
2	2014										
3.	2015										
4	2016										
5.	2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

	Cumulative Net Amounts Paid				
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013	,				
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

		Section B	 Incurred 	Health Cl	aims - Fed	eral Emplo	oyees Health	Benefits Pla	an Premiur	m
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	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017		
1. Prior							
2. 2013							
3. 2014							
4. 2015							
5. 2016							
6. 2017	XXX	XXX	XXX	XXX			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2013										
2. 2014										
4. 2016										
5. 2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid	Health Claims	- Title XV	Ш
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	Cumulative Net Amounts Paid				
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016	XXX	XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Title XVIII											
	Sum of Cumulative N	et Amount Paid and Cl	aim Liability, Claim Res	erve and Medical Incenti ear	ve Pool and Bonuses						
		C	outstanding at End of Ye	ear							
	1	2	3	4	5						
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017						
1. Prior											
2, 2013											
3. 2014											
4. 2015		XXX									
5. 2016	XXX	XXX									
6. 2017	XXX	XXX	XXX	XXX							

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	1
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	1 1
Premium	ns were Earned and Claims			Claim Adjustment	(Col. 3/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2013											
2. 2014											1
3. 2015											
4. 2016											(
											(1
5. 2017											

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Title XIX

			Cu	mulative Net Amounts F	Paid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1.	Prior	0	0	0	0	0
2.	2013	0	0	0	0	<u>0</u>
3.	2014	XXX	0	0	0	0
4.	2015	XXX	XXX			
5.	2016	XXX	XXX		<u></u>	
6.	2017	XXX	XXX	XXX	XXX	153,232

Section B	Incurred	Health (Claims -	Title XIX
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	Sum of Cumulative N	let Amount Paid and Cla C	aim Liability, Claim Rese Outstanding at End of Ye	erve and Medical Incenti ar	ve Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0
2. 2013	0	0	0	0	0
3. 2014		0	0	0	(5)
4. 2015	XXX	XXX			
5. 2016					
6. 2017	XXX	XXX	XXX	XXX	189,067

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2013	0	0	0	0.0	0	0.0	0	0	0	0.0
2.	2014	0	0	0	0.0	0	0.0	(5)	0	(5)	<mark>0.0</mark>
3.	2015								1	43,954	
4.	2016								20		
5.	2017	233,756	153,232	10,270	6.7	163,502	69.9	35,835	627	199,964	85.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Other
--

		Cu	mulative Net Amounts	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior					
2. 2013					
3. 2014	XXX				
4. 2015	XXX	XXX			
5. 2016		XXX	XXX		
6. 2017	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Other										
	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year									
			Dutstanding at End of Ye	ear						
	1	2	3	4	5					
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017					
1. Prior										
2, 2013										
3. 2014										
4. 2015	XXX									
5. 2016										
6. 2017	XXX	XXX	XXX	XXX						

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

	1	2	3	4	5	6	7	8	9	10
					Claim and Claim				Total Claims and	
Years in which Premiums were Earned and Claims					Adjustment Expense			Unpaid Claims	Claims Adjustment	
			Claim Adjustment	(Col. 3/2)	Paymonts	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
were Incurred	Premiums Earned	Claims Payment	ense	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1. 2013										
2. 2014										
3. 2015										
4. 2016										
5. 2017										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

			Cu	mulative Net Amounts F	Paid	2
		1	2	3	4	5
	Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1.	Prior	0	0	0	0	0
2.	2013	0	0	0	0	0
3.	2014	XXX	0	0	0	0
4.	2015	XXX	XXX		38,950	
5.	2016	XXX	XXX	XXX		
6.	2017	XXX	XXX	XXX	XXX	153,232

Section B - Incurred Health	n Claims - Grand Total
-----------------------------	------------------------

	Sum of Cumulative N	let Amount Paid and Cla O	aim Liability, Claim Rese utstanding at End of Ye	erve and Medical Incenti ear	ve Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2013	2014	2015	2016	2017
1. Prior	0	0	0	0	0
2. 2013	0	0	0	0	0
3. 2014		0	0	0	<mark>(</mark> 5)
4. 2015		XXX			
5. 2016			XXX		
6. 2017	XXX	XXX	XXX	XXX	189,067

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2013	0	0	0	0.0	0	0.0	0	0	0	<mark>0.0</mark>
2	2. 2014	0	0	0	<u>0.0</u>	0	0.0	(5)	0	(5)	0.0
3	3. 2015								1	43,954	
4	4. 2016										
5	5. 2017	233,756	153,232	10,270	6.7	163,502	69.9	35,835	627	199,964	85.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	2	3	4	5	6	7	8	9
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
1. Unearned premium reserves	0	0	0	0	0	0	0	0	0
2. Additional policy reserves (a)		0	0	0	0	0	0	0	0
3. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
4. Reserve for rate credits or experience rating refunds (including									
\$		0	0	0	0	0	0	40,245,216	0
5. Aggregate write-ins for other policy reserves		0	0	0	0	0	0	0	0
6. Totals (gross)		0	0	0	0	0	0		0
7. Reinsurance ceded		0	0	0	0	0	0	0	0
8. Totals (Net)(Page 3, Line 4)	40,245,216	0	0	0	0	0	0	40,245,216	0
9. Present value of amounts not yet due on claims		0	0	0	0	0	0	0	0
10. Reserve for future contingent benefits	0	0	0	0	0	0	0	0	0
11. Aggregate write-ins for other claim reserves		0	0	0	0	0	0	0	0
12. Totals (gross)	0	0	0	0	0	0	0	0	0
13. Reinsurance ceded		0	0	0	0	0	0	0	0
14. Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
0501									
0502									
0503.									
0598. Summary of remaining write-ins for Line 5 from overflow page		0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0
1101									
1102.									
1103									
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0

(a) Includes \$ _____0 premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) UNDERWRITING AND INVESTMENT EXHIBIT

		Claim Adjustme		3	4	5
		1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent (\$0 for occupancy of		1.4			
	own building)	0		482,284		
2.	Salary, wages and other benefits					
3.	Commissions (less \$0		2011 11 120	202 LL		
	ceded plus \$0 assumed)	0	0	0	0	0
4.	Legal fees and expenses					
5.	Certifications and accreditation fees	0	0	0	0	0
6.	Auditing, actuarial and other consulting services	0	285,546	1,252,017	<u>35, 180</u>	
7.	Traveling expenses	0				
8.	Marketing and advertising	0		217,695	17	
9.	Postage, express and telephone	0				
10.	Printing and office supplies	0				
11.	Occupancy, depreciation and amortization		0	0	700	
12.	Equipment	0				
13.	Cost or depreciation of EDP equipment and software	0			2,257	
14.	Outsourced services including EDP, claims, and other services					2,532,364
15.						
16.	Insurance, except on real estate	0				
17.	Collection and bank service charges				10,978	
18.	Group service and administration fees	0	0	0	0	
19.		0	0		0	
20.	Reimbursements from fiscal intermediaries	0	0		0	
21.		0				
22.	Real estate taxes	0	0		0	
23.	Taxes, licenses and fees:					
	23.1 State and local insurance taxes	0	0	2, 186, 132	0	
	23.2 State premium taxes	0	0		0	
	23.3 Regulatory authority licenses and fees	0	0	.5,641,272	0	5,641,272
	23.5 Other (excluding federal income and real estate taxes)	0	0	0	0	
24.	Investment expenses not included elsewhere	0	0		0	(
25.	Aggregate write-ins for expenses	6,712	2,679	102,153	0	111,544
26.	Total expenses incurred (Lines 1 to 25)		3,889,358	16,966,129		(a)29,014,222
27.	Less expenses unpaid December 31, current year			4,104,583	0	4,752,444
28.	Add expenses unpaid December 31, prior year				0	4,404,359
29.	Amounts receivable relating to uninsured plans, prior year	0	0	0	0	
30.	Amounts receivable relating to uninsured plans, current year	0	0	0	0	(
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	7,912,857	3,891,244	1 6,715,163	146,873	28,666,137
	DETAILS OF WRITE-INS					
2501.	Miscellaneous	6,712	2,679		0	
2502.	Loss adjustment expense	0	0		0	
2503.						
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25			102,153		111,544

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) EXHIBIT OF NET INVESTMENT INCOME

			1	1021111	2
		 Collect	ed During Year	Earne	d During Year
1. 1.1	U.S. government bonds	 (a)			
	Bonds exempt from U.S. tax				
1.2	Other bonds (unaffiliated)	• •	1,316,591		
1.3	Bonds of affiliates		0		
2.1	Preferred stocks (unaffiliated)		0		
2.11	Preferred stocks of affiliates	(D)	0		0
2.2	Common stocks (unaffiliated)		0		0
2.21	Common stocks of affiliates		0		0
3.	Mortgage loans	(c)	0		0
4.	Real estate	(d)	0		0
5	Contract Loans		0		0
6	Cash, cash equivalents and short-term investments	 v - <i>i</i>			
7	Derivative instruments	(f)	0		0
8.	Other invested assets		0		0
9.	Aggregate write-ins for investment income	 	1		1
10.	Total gross investment income		1,924,373		2,276,177
11.	Investment expenses	 			
12.	Investment taxes, licenses and fees, excluding federal income taxes	 		(g)	4,307
13.	Interest expense	 		(h)	0
14.	Depreciation on real estate and other invested assets	 		(i)	0
15.	Aggregate write-ins for deductions from investment income	 			0
16.	Total deductions (Lines 11 through 15)	 			
17.	Net investment income (Line 10 minus Line 16)				2,129,304
	DETAILS OF WRITE-INS				
0901.	Miscellanies Income	 	1		1
0902.		 			
0903.		 			
0998.	Summary of remaining write-ins for Line 9 from overflow page	 	0		0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)		1		1
1501.					
1502.		 			
1503.					
1598.	Summary of remaining write-ins for Line 15 from overflow page	 			0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)	 			0

(a) Includes \$		accrual of discount less \$
(b) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued dividends on purchases.
(c) Includes \$	0	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
(d) Includes \$	0	for company's occupancy of its own buildings; and excludes \$0 interest on encumbrances.
(e) Includes \$	134,296	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
(f) Includes \$	0	accrual of discount less \$0 amortization of premium.
	0 I and Separate Acco	investment expenses and \$0 investment taxes, licenses and fees, excluding federal income taxes, attributable to unts.
(h) Includes \$	0	interest on surplus notes and \$0 interest on capital notes.
(i) Includes \$	0	depreciation on real estate and \$0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
			Total Dealized Capital	Change in	Change in Unrealized
	Realized Gain (Loss)	Other Realized			Foreign Exchange
					Capital Gain (Loss)
U.S. Government bonds		(308,752)	(322,517)	0	0
		(000,702)	(0	0	0
Other bonds (unaffiliated)	214, 105	0	214, 105	0	0
Bonds of affiliates	0	0		0	0
		0	0	0	0
Preferred stocks of affiliates	0	0	0	0	0
Common stocks (unaffiliated)	0	0	0	0	0
Common stocks of affiliates	0	0	0	0	0
Mortgage loans	0	0	0	0	0
Real estate	0	0	0	0	0
	0	0	0	0	0
	20	0	20	0	0
		0	0	0	0
		0	0	0	0
Aggregate write-ins for capital gains (losses)	0	0	0	0	0
	200,360	(308,752)	(108,392)	0	0
	200,000	(000,702)	(100,002)	•	v
DETAILS OF WAITE-INS					
Summony of romaining write inc for Line 0 from					
	0	0	0	0	0
	0	0	0	0	0
	Bonds exempt from U.S. tax	Bonds exempt from U.S. tax 0 Other bonds (unaffiliated) 214, 105 Bonds of affiliates 0 Preferred stocks (unaffiliated) 0 Preferred stocks of affiliates 0 Common stocks of affiliated) 0 Common stocks of affiliates 0 Mortgage loans 0 Real estate 0 Contract loans 0 Other invested assets 0 Aggregate write-ins for capital gains (losses) 0 Total capital gains (losses) 200,360 DETAILS OF WRITE-INS 0 Summary of remaining write-ins for Line 9 from overflow page 0 Totals (Lines 0901 thru 0903 plus 0998) (Line 9, 0	Realized Gain (Loss) On Sales or Maturity Other Realized Adjustments U.S. Government bonds (13,765) (308,752) Bonds exempt from U.S. tax 0 0 Other bonds (unaffiliated) 214,105 0 Bonds of affiliates 0 0 0 Preferred stocks (unaffiliated) 0 0 0 Preferred stocks of affiliates 0 0 0 Common stocks of affiliates 0 0 0 Common stocks of affiliates 0 0 0 Mortgage loans 0 0 0 0 Real estate 0 0 0 0 Cash, cash equivalents and short-term investments 220 0 0 Derivative instruments 0 0 0 0 Aggregate write-ins for capital gains (losses) 0 0 0 0 Detrails of write-ins for Line 9 from overflow page 0 0 0 0 Other realing ont thru 0903 plus 0998) (Line 9, 0 0 0 0	Realized Gain (Loss) On Sales or Maturity Other Realized Adjustments Total Realized Capital Gain (Loss) (Columns 1 + 2) U.S. Government bonds (13,765) (308,752) (322,517) Bonds exempt from U.S. tax 0 0 0 Dotter bonds (unaffiliated) 214,105 0 214,105 Bonds of affiliates 0 0 0 0 Preferred stocks (unaffiliated) 0 0 0 0 Preferred stocks (unaffiliates) 0 0 0 0 Common stocks (unaffiliates) 0 0 0 0 Common stocks (unaffiliates) 0 0 0 0 Common stocks (unaffiliates) 0 0 0 0 Mortgage loans 0 0 0 0 Real estate 0 0 0 0 Derivative instruments 0 0 0 0 Derivative instruments 0 0 0 0 Derivative instruments 0 0	U.S. Government bonds (13,765) (On Sales or Maturity Bonds exempt from U.S. tax Other Realized (Columns 1 + 2) Change in Unrealized Capital Gain (Loss) U.S. Government bonds (13,765) (308,752) (308,752) (322,577) 0 Bonds exempt from U.S. tax 0 0 0 0 Bonds of affiliated) 214,105 0 0 0 Bonds of affiliates 0 0 0 0 0 Prefered stocks (unaffiliated) 0 0 0 0 0 Prefered stocks of affiliates 0 0 0 0 0 Common stocks (unaffiliated) 0 0 0 0 0 Corrat loans 0 0 0 0 0 Cash cash equivalents and short-term investments 0 0 0 0 Othal cash equivalents for capital gains (losses) 0 0 0 0 Othal cash equivalents for capital gains (losses) 0 0 0 0 Othal cash equivalents for capital gains (losses) 0 0 0 0 Other invested assets 0 0 0 0 0 Other invested assets 0 0 0 0 0 <t< td=""></t<>

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) EXHIBIT OF NON-ADMITTED ASSETS

	EXHIBIT OF NON-ADMITTE	DASSETS		
		1	2	3 Oberes in Tatal
		Current Year Total	Prior Year Total	Change in Total Nonadmitted Assets
		Nonadmitted Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
1.	Bonds (Schedule D)	0	0	0
2.	Stocks (Schedule D):			6 8 0
PH LOGI	2.1 Preferred stocks	0	0	0
	2.2 Common stocks		0	0
3.	Mortgage loans on real estate (Schedule B):			
0.	3.1 First liens	0	0	0
	3.2 Other than first liens	0		0
		0		
4.	Real estate (Schedule A):	0	0	0
	4.1 Properties occupied by the company			0
	4.2 Properties held for the production of income		0	0
	4.3 Properties held for sale	0	0	0
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)	0	0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities	0	0	0
10.	Securities lending reinvested collateral assets (Schedule DL)		0	0
11.	Aggregate write-ins for invested assets		0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0	0
13.	Title plants (for Title insurers only)			0
14.	Investment income due and accrued		0	0
15.	Premiums and considerations:			
10.	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
			0	0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due		0	0
10	15.3 Accrued retrospective premiums and contracts subject to redetermination	0	0	
16.	Reinsurance:			
	16.1 Amounts recoverable from reinsurers		0	0
	16.2 Funds held by or deposited with reinsured companies	0	0	0
	16.3 Other amounts receivable under reinsurance contracts		0	0
17.	Amounts receivable relating to uninsured plans	0	0	0
18.1	Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2	Net deferred tax asset	0	0	0
19.	Guaranty funds receivable or on deposit	0	0	0
20.	Electronic data processing equipment and software	0	0	0
21.	Furniture and equipment, including health care delivery assets	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23.	Receivable from parent, subsidiaries and affiliates		0	0
24.	Health care and other amounts receivable			(1,005,853)
25.	Aggregate write-ins for other than invested assets			
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28.	Total (Lines 26 and 27)	1,404,996	2,000,596	595,600
20.	DETAILS OF WRITE-INS	1,101,000	2,000,000	000,000
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Prior Period Adjustment to Change in Non-Admitted Health Care Receivables	0	1,601,453	
2502.	· · ·			,,
2502.				
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	٥
2598. 2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	1,601,453	1,601,453
2000.		U	1,001,400	1,001,400

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

		Total Members at End of					6
	Source of Enrollment	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	Current Year Member Months
1.	Health Maintenance Organizations			40,407	42,582	45,655	482,008
2.	Provider Service Organizations	0	0	0	0	0	0
3.	Preferred Provider Organizations	0	0	0	0	0	0
4.	Point of Service	0	0	0	0	0	0
5.	Indemnity Only	0	0	0	0	0	0
6.	Aggregate write-ins for other lines of business	0	0	0	0	0	0
7.	Total	33,335	36,991	40,407	42,582	4 5,655	482,008
	DETAILS OF WRITE-INS						
0601.							
0602.							
0603.							
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies and going concern

A. Accounting practices

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

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of New Jersey for the years ending December 31, 2017 and 2016 is as follows:

		SSAP #	F/S Page	F/S Line #	2017	2016
(1) (2)	Net income The Company's state basis State prescribed practice	xxx	xxx	XXX	\$16,249,689	\$16,081,913
(3)	that are an increase/ (decrease) from NAIC SAP State permitted practice	N/A	N/A	N/A	-	-
(4)	that are an increase/ (decrease) from NAIC SAP NAIC SAP	N/A	N/A	N/A	- \$16,249,689	- \$16,081,913
(5) (6)	Surplus The Company's state basis State prescribed practice that are an increase/	XXX	XXX	xxx	\$36,287,613	\$35,333,748
(7)	(decrease) from NAIC SAP State permitted practice that are an increase/	N/A	N/A	N/A	-	-
(8)	(decrease) from NAIC SAP NAIC SAP	N/A	N/A	N/A _	\$36,287,613	- \$35,333,748

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

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

C. Accounting policies

The Company applies the following significant accounting policies:

(1) Cash, cash equivalents and short-term investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Shortterm investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and shortterm investments approximates fair value.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker

quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at December 31, 2017 and 2016. Bonds include all investments whose maturity is greater than one year when purchased.

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

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

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

- (3) The Company did not own any common stock at December 31, 2017 or 2016.
- (4) The Company did not own any preferred stock at December 31, 2017 or 2016.
- (5) The Company did not have any mortgage loans at December 31, 2017 or 2016.
- (6) <u>Securities lending</u>

The Company engages in securities lending by lending certain securities from its investment portfolio to other institutions for short periods of time. Borrowers must post cash collateral in the amount of 102% to 105% of the fair value of a loaned security. The fair value of the loaned securities is monitored on a daily basis, with additional collateral obtained or refunded as the fair value of the loaned securities fluctuates. The collateral is retained and invested by a lending agent according to the Company's guidelines to generate additional investment income for the Company. Pursuant to Statements of Statutory Accounting Principles ("SSAP") No. 103R - *Transfers and Servicing of Financial Assets and Extinguishments of Liabilities* ("SSAP") No. 103R"), collateral required under the Company's securities lending program is carried on the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus as both a receivable and payable. Also pursuant to SSAP No. 103R, if the collateral received from a counterparty is less than 100 percent at the reporting date, the difference between the actual collateral and 100 percent is nonadmitted. Collateral value is measured and compared to the loaned securities in aggregate by counterparty. The Company did not have any loaned securities at December 31, 2017 and 2016.

- (7) The Company did not have any investments in any subsidiaries or affiliated companies at December 31, 2016 or 2015.
- (8) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2017 or 2016.
- (9) The Company did not have any derivatives at December 31, 2017 or 2016.

(10) Aggregate health policy reserves and related expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts. The Company had no PDR at December 31, 2017 or 2016.

Unearned premium reserves ("UEP") are recognized for premiums that were collected by the Company that have not been earned as of the statement date. The Company had no UEP at December 31, 2017 or 2016.

The Company is required to make premium rebate payments to the State of New Jersey if specific minimum annual medical loss ratios ("MLR") were not met in the prior year. The Company's results for full years 2017 and 2016 included estimates of \$40,245,216 and \$31,924,552, respectively, of minimum MLR rebates, which were included in aggregate health policy reserves in the Statutory Statement of Liabilities and Capital and Surplus. In April of 2016, the Company received notice from the State of New Jersey, Department of Human Services, that it would not be required to pay the fiscal year 2015 MLR rebate.

(11) Hospital and medical costs and claims adjustment expenses and related reserves

Hospital and medical costs consist principally of fee-for-service medical claims and capitation costs. Claims unpaid and aggregate health claim reserves include the Company's estimate of payments to be made on claims reported but not yet paid and for health care services rendered to enrollees but not yet reported to the Company as of the Statutory Statements of Assets and Liabilities, Capital and Surplus date. Such estimates are developed using actuarial principles and assumptions, which consider, among other things, historical and projected claim submission and processing payment patterns, medical cost trends, historical utilization of health care services, claim inventory levels, medical inflation, contract requirement changes in membership and product mix, seasonality and other relevant factors. The Company reflects changes in estimates in hospital and medical costs in the Statutory Statements of Revenue and Expenses in the period they are determined. Capitation costs, which are recorded in hospital and medical expenses in the Statutory Statements of Revenue and Expenses, represent contractual monthly fees paid to participating physicians and other medical providers for providing medical care, regardless of the medical services provided to the enrollee.

The Company uses the triangulation method to estimate reserves for claims incurred but not reported. The method of triangulation makes estimates of completion factors that are then applied to the total paid claims (net of coordination of benefits) to date for each incurral month. This provides an estimate of the total projected incurred claims and total amount outstanding or claims incurred but not reported (claims unpaid). For the most current dates of service where there is insufficient paid claim data to rely solely on the triangulation method, the Company examines cost and utilization trends as well as environmental factors, plan changes, provider contracts, changes in membership and/or benefits, and historical seasonal patterns to estimate the reserve required for these months.

Claims adjustment expenses, which include cost containment expenses, represent the costs incurred related to the claim settlement process such as costs to record, process and adjust claims. These expenses are included in the Company's management agreement with an affiliate described in Note 10.

(12) The Company did not modify its capitalization policy from the prior period.

(13) Pharmaceutical rebate receivables

The Company estimates pharmaceutical rebate receivables based upon historical payment trends, actual utilization and other variables. Pharmaceutical rebates for a quarter are billed to the vendor within one month of the completion of the quarter with any adjustment to previously recorded amounts reflected at the time of billing. The Company reports pharmaceutical rebate receivables as health care receivables. Pharmacy rebate receivables not in accordance with SSAP No. 84 – *Health Care and Government Insured Plan Receivables* or are over 90 days past due are nonadmitted. All rebates are processed and settled with an affiliated entity.

(14) Premiums and amounts due and unpaid

Premium revenue for prepaid health care products is recognized as income in the month in which enrollees are entitled to health care services.

Nonadmitted amounts consist of all premiums due and unpaid greater than 90 days past due, with the exception of amounts due under government insured plans, which may be admitted assets under certain circumstances.

(15) Investment income due and accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2017 and 2016, the Company did not have any nonadmitted investment income due and accrued.

(16) Covered and uncovered expenses and related liabilities

Covered expenses and related liabilities represent costs for health care expenses for which a member is not responsible in the event of the insolvency of the Company. Uncovered expenses and related liabilities represent costs to the Company for health care services that are the obligation of the Company and for which a member may also be liable in the event of the Company's insolvency.

(17) Fees Paid to the Federal Government by Health Insurers

SSAP No. 106 – Affordable Care Act Section 9010 Assessment ("SSAP No. 106") required (1) that the health insurer fee be recognized in full on January 1 of the fee year (the calendar year in which the assessment must be paid to the federal government), in the operating expense category of insurance taxes, licenses and fees, excluding federal income taxes and (2) that in each data year preceding a fee year a reporting entity pro-ratably accrue by reclassifying from unassigned funds (surplus) to aggregate write-ins for special surplus funds an amount equal to its estimated subsequent fee year assessment. This reclassification has no impact on total capital and surplus and is reversed in full on January 1 of the fee year. See Note 22 for disclosure of all amounts related to the health insurer fee for the Company.

(18) <u>Accounting for the Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010's (collectively, "Health Care Reform") Reinsurance, Risk Adjustment and Risk Corridor (the "3Rs") pursuant to SSAP No. 107 – Risk-Sharing Provisions of the Affordable Care Act ("SSAP No. 107") and INT 15-01: ACA Risk Corridors Collectability ("INT 15-01")</u>

Reinsurance

Health Care Reform established a temporary reinsurance program that expired at the end of 2016. Under this program, all issuers of major medical commercial insurance products and self-insured plan sponsors were required to contribute funding in amounts set by the U.S. Department of Health and Human Services ("HHS"). A portion of the funds collected were utilized to reimburse issuers' high claims costs incurred for qualified individual members. The expense related to this required funding was reflected in insurance, taxes, licenses and fees for all of the Company's insurance products with the exception of products associated with qualified individual members; this expense for qualified individual members was reflected as a reduction of premium revenue. When annual claim costs incurred by the Company's qualified individual members exceeded a specified attachment point, the Company was entitled to certain reimbursements from this program. The Company recorded amounts recoverable for claims paid and unpaid and ceded claim benefit recoveries to reflect its estimate of these recoveries. At December 31, 2017 and 2016, the Company did not record a payable or a receivable under the temporary three-year reinsurance program.

Risk Adjustment

Health Care Reform established a permanent risk adjustment program to transfer funds from qualified individual and small group insurance plans with below average risk scores to plans with above average risk scores. Based on the risk of the Company's qualified plan members relative to the average risk of members of other qualified plans in comparable markets, the Company estimates its ultimate risk adjustment receivable or payable for the current calendar year and reflects the impact as an adjustment to its premium revenue. At December 31, 2017 and 2016, the Company did not record a payable or a receivable under the risk adjustment program.

Risk Corridor

Health Care Reform established a temporary risk sharing program that expired at the end of 2016 for qualified individual and small group insurance plans. Under this program the Company made (or received) a payment to (or from) HHS based on the ratio of allowable costs to target costs (as defined by Health Care Reform). The Company recorded a risk corridor receivable or payable as an adjustment to premium revenue based on the Company's estimate of the ultimate risk sharing amount for the current calendar year. In October 2015, HHS announced that 2014 Health Care Reform risk corridor receivables would be funded at 12.6% to the extent HHS fully collected risk corridor payables. In November 2015, INT 15-01 was issued as guidance to address the accounting for risk corridor receivables. In conjunction with this guidance, the Company recorded a risk corridor receivable that coincided with the portion of the

2014 Health Care Reform risk corridor receivables that were considered collectible. The Company did not record any risk corridor receivables for the 2016 and 2015 program years or any amount in excess of HHS's announced pro-rated funding amount for the 2014 program year because payments from HHS are uncertain. The Company currently has not recorded any risk corridor receivables for the 2017 and 2016 program years.

The Company expects to perform an annual final reconciliation and settlement with HHS of the 3Rs in each subsequent year.

(19) Federal and state income taxes

The Company is included in the consolidated federal income tax return of its parent company, Aetna and Aetna's other wholly-owned subsidiaries pursuant to the terms of a tax sharing agreement. In accordance with a written tax sharing agreement with an affiliate, the Company's current federal and state income tax provisions are generally computed as if the Company were filing a separate federal and state income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent realized in the consolidated return. Pursuant to this agreement, the Company has the enforceable right to recoup federal and state income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income taxes.

Income taxes are accounted for under the asset and liability method. Deferred income tax assets ("DTAs") and liabilities ("DTLs") represent the expected future tax consequences of temporary differences generated by statutory accounting as defined in SSAP No. 101 - *Income Taxes* ("SSAP No. 101"). DTAs and DTLs are measured using enacted tax rates expected to apply to taxable income in the years in which those temporary differences are expected to be recovered or settled. DTAs and DTLs are computed by means of identifying temporary differences which are measured using a balance sheet approach whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

Pursuant to SSAP No. 101, gross DTAs are first reduced by a statutory valuation allowance adjustment to an amount that is more likely than not to be realized ("adjusted gross DTAs"). Adjusted gross DTAs are then admitted in an amount equal to the sum of paragraphs a. b. and c. below:

- a. Federal income taxes paid in prior years that can be recovered through loss carrybacks for existing temporary differences that reverse during a timeframe corresponding with Internal Revenue Service ("IRS") tax loss carryback provisions.
- b. The amount of adjusted gross DTAs, after the application of paragraph a. above, expected to be realized within the applicable period and that is no greater than the applicable percentage as determined using the applicable Realization Threshold Limitation Table. The applicable period refers to the number of years in which the DTA will reverse in the Company's tax return and the applicable percentage refers to the percentage of the Company's statutory capital and surplus as required to be shown on the statutory balance sheet adjusted to exclude any net DTAs, electronic data processing equipment and operating system software and any net positive goodwill ("Stat Cap ExDTA").

The Realization Threshold Limitation Tables allow DTAs to be admitted based upon either realization within 3 years and 15% percent of Stat Cap ExDTA, 1 year and 10% of Stat Cap ExDTA, or no DTA admitted pursuant to this paragraph b. In general, the Realization Threshold Limitation Tables allow the Company to admit more DTAs if total DTAs as reported by the Company are a smaller percentage of statutory capital and surplus.

c. The amount of gross DTAs, after the application of paragraphs a. and b. above, can be offset against existing gross DTLs. In applying this offset, the Company considers the character (i.e. ordinary versus capital) of the DTAs and DTLs such that offsetting would be permitted in the tax return under existing enacted federal income tax laws and regulations and the reversal patterns of temporary differences.

Changes in DTAs and DTLs are recognized as a separate component of gains and losses in surplus ("Change in net deferred income tax") except to the extent allocated to changes in unrealized gains and losses. Changes in DTAs and DTLs allocated to unrealized gains and losses are netted against the related changes in unrealized gains and losses and are reported as "Change in net unrealized capital gains (losses)", also a separate component of gains and losses in surplus.

State income tax expense is recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. For the years ended December 31, 2017 and 2016, the Company incurred state income tax expense of \$2,186,132 and \$2,307,906, respectively. The Company had state income tax payables of \$3,515,038 and \$1,328,906 at December 31, 2017 and 2016, respectively, which was recorded as general expenses due or accrued in the Statutory Statements of Liabilities.

(20) Reinsurance

In the normal course of business, the Company seeks to reduce the loss that may arise from catastrophes or other events that cause unfavorable underwriting results and to help balance its risks and capital by reinsuring certain levels of risk with other insurance enterprises. The reinsurance coverage does not relieve the Company of its primary obligations. Reinsurance premiums and reserves related to reinsured business are accounted for on a basis consistent with those used in accounting for the original policies issued and the terms of the reinsurance contracts. Premiums ceded for medical losses and the related unpaid reserves have been reported as reductions of these items. The reinsurance agreements are more fully discussed in Note 23.

D. Going concern

As of March 1, 2018, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting changes and corrections of errors

The Company had an increase to nonadmitted health care receivables of \$1,601,453 on the statutory financial statements as of December 31, 2016. As a result, net deferred tax increased by \$564,596 and current federal and foreign income tax payable and interest there on increased by \$4,086. These adjustments were included as write-ins on the Statutory Statements of Revenue and Expenses (Continued) page.

The Company did not have any corrections of errors in the year ended December 31, 2016.

The Company did not have any accounting changes in the years ended December 31, 2017 and 2016.

3. Business combinations and goodwill

The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the period ending December 31, 2017 and 2016.

4. Discontinued operations

The Company did not have any discontinued operations in the period ending December 31, 2017.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2017 or 2016.
- B. The Company did not have any debt restructuring in the years ending December 31, 2017 and 2016.
- C. The Company did not have any reverse mortgages at December 31, 2017 or 2016.

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 OTTI losses during 2017 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*.
- (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 December 31, 2016.
- (4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2017 is as follows:
 - a. The aggregate amount of unrealized losses:
- 1. Less than 12 months \$(28,745)
- 2. 12 months or longer

- b. The aggregate related fair value of securities with unrealized losses:
- 1. Less than 12 months \$4,970,607
- 2. 12 months or longer
- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and have 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 December 31, 2016 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - The Company did not have any repurchase agreements or loaned securities transactions at December 31, 2017.
 - (2) The Company did not pledge any of its assets as collateral, which are classified as securities pledged to creditors as of December 31, 2017.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of December 31, 2017.
 - (4) The Company did not have securities lending transactions administered by an affiliated agent which is "one line" reported at December 31, 2017.
 - (5) The Company did not have any repurchase agreements, loaned securities or dollar repurchase agreements at December 31, 2017.
 - (6) The Company has not accepted collateral that is not permitted by contract or custom to sell or repledge as of December 31, 2017.
 - (7) The Company did not have any collateral for transactions that extend beyond one year from the reporting date.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at December 31, 2017 or 2016.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at December 31, 2017 or 2016.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at December 31, 2017 or 2016.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at December 31, 2017 or 2016.
- J. The Company did not have any real estate at December 31, 2017 or 2016.
- K. The Company did not have any low-income housing tax credits at December 31, 2017.

L. Restricted Assets

(1) Restricted assets (including pledged):

	1	2	3	4	5	6	7
Restricted	Total gross (admitted & nonadmitted) restricted from	Total gross (admitted & nonadmitted) restricted	Increase	Total current year	Total current year admitted	Percentage gross (admitted & nonadmitted) restricted	Percentage admitted restricted to total
Asset Category	current year	from prior year	(decrease) (1 minus 2)	nonadmitted restricted	restricted (1 minus 4)	to total assets	admitted assets
a. Subject to contractual obligation for which liability is not shown	-	-	-	-	-	-	-
b. Collateral held under security lending agreements	-	_	-	-	-	-	-
c. Subject to repurchase agreements	-	-	-	-	-	-	-
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-
e. Subject to dollar repurchase agreements			_	_		_	_
f. Subject to dollar reverse repurchase agreements		-					
g. Placed under option contracts	-	-	-	-	-	-	-
h. Letter stock or securities restricted as to sale - excluding FHLB capital							
stock i. FHLB capital	-	<u>-</u>	-	-	-	-	-
stock j. On deposit with states	- \$23,866,534	<u>-</u> \$17,545,935	- \$6,320,599	-	\$23,866,534	- 17.546%	- 17.729%
 k. On deposit with other regulatory bodies 	-	-	ψ0,020,000		φ23,800,334 -		
I. Pledged as collateral to FHLB (including assets backing funding							
agreements) m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-
n. Other restricted assets	-	-	_	-	-	-	-
o. Total restricted assets	\$23,866,534	\$17,545,935	\$6,320,599	-	\$23,866,534	17.546%	17.729%

- (2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2017.
- (3) The Company did not have any other restricted assets at December 31, 2017.
- (4) The Company did not have any collateral received and reflected within its financial statements at December 31, 2017.
- M. The Company did not have any working capital finance investments at December 31, 2017.

- N. The Company did not have any offsetting and netting of financial assets or liabilities at December 31, 2017.
- O. The Company did not have any structured notes at December 31, 2017.
- P The Company did not have any 5* securities at December 31, 2017.
- Q The Company did not have any short sales at December 31, 2017.
- R The Company did not have any prepayment penalty and acceleration fees at December 31, 2017.

6. Joint ventures, partnerships, and limited liability companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2017 or 2016.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2017 or 2016.

7. Investment income

- A. There was no investment income due and accrued excluded from surplus at December 31, 2017 or 2016, except in bonds where collection of interest was uncertain.
- B. There was no amount excluded at December 31, 2017 or 2016.

8. Derivative instruments

The Company did not have any derivative instruments at December 31, 2017 or 2016.

9. Income taxes

Α.

 The components of the net DTAs recognized in the Company's Statutory Statements of Assets, Liabilities, Surplus and Other Funds are as follows:

	D	ecember 31, 2017	,
	Ordinary	Capital	Total
(a) Gross DTAs	\$ 955,518	\$103,512	\$1,059,030
(b) Statutory valuation allowance adjustment(c) Adjusted gross DTAs(d) DTAs nonadmitted	955,518	103,512	1,059,030
(e) Subtotal net admitted DTAs (f) DTLs	955,518	103,512 (61,956)	1,059,030 (61,956)
(g) Net admitted DTAs/(DTLs)	\$955,518	\$41,556	\$997,074
	D	ecember 31, 2016	3
	Ordinary	Capital	Total
(a) Gross DTAs	\$1,236,023	\$95,951	\$1,331,974
(b) Statutory valuation allowance adjustment(c) Adjusted gross DTAs(d) DTAs nonadmitted	1,236,023	95,951	1,331,974
(e) Subtotal net admitted DTAs (f) DTLs	1,236,023	95,951 (49,015)	1,331,974 (49,015)
(g) Net admitted DTAs/(DTLs)	\$1,236,023	\$46,936	\$1,282,959
		Change	
	Ordinary	Capital	Total
(a) Gross DTAs(b) Statutory valuation allowance adjustment	\$(280,505)	\$7,561	\$(272,944)
 (c) Adjusted gross DTAs (d) DTAs nonadmitted 	(280,505)	7,561	(272,944)
(e) Subtotal net admitted DTAs (f) DTLs	(280,505)	7,561 (12,941)	(272,944) (12,941)
(g) Net admitted DTAs/(DTLs)	\$(280,505)	\$(5,380)	\$(285,885)

2. The amount of admitted gross DTAs admitted under each component of SSAP No. 101:

	De	ecember 31, 20	17
	Ordinary	Capital	Total
 (a) Federal income taxes paid in prior years recoverable through loss carrybacks (b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application 	\$948,913	\$64,421	\$1,013,334
of the threshold limitations (the lesser of 2(b)1 and 2(b)2 below)	6,604	-	6,604
 Adjusted gross DTAs expected to realized following the balance sheet date Adjusted gross DTAs allowed per limitation 	6,604	-	6,604
threshold	XXX	XXX	5,293,581
 Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs DTAs admitted as the result of application of 	2	39,091	39,093
SSAP No. 101	\$955,518	\$103,512	\$1,059,030
	D	ecember 31, 20	16
	Ordinary	Capital	Total
 (a) Federal income taxes paid in prior years recoverable through loss carrybacks (b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 	\$1,236,023	\$10,416	\$1,246,439
and 2(b)2 below)	-	74,943	74,943
 Adjusted gross DTAs expected to realized following the balance sheet date Adjusted gross DTAs allowed per limitation 	-	74,943	74,943
threshold	XXX	XXX	5,107,618
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs		10,592	10,592
 (d) DTAs admitted as the result of application of SSAP No. 101 	\$1,236,023	\$95,951	\$1 ,331,974
	<u> </u>		¢1,001,011
	Ordinary	Change Capital	Total
 (a) Federal income taxes paid in prior years recoverable through loss carrybacks (b) Adjusted gross DTAs expected to be realized (excluding the amount of DTAs) after application of the threshold limitations (the lesser of 2(b)1 	\$(287,110)	\$54,005	\$(233,105)
and 2(b)2 below) 1. Adjusted gross DTAs expected to realized	6,604	(74,943)	(68,340)
following the balance sheet date 2. Adjusted gross DTAs allowed per limitation	6,604	(74,943)	(68,340)
threshold	XXX	XXX	185,963
(c) Adjusted gross DTAs (excluding the amount of DTAs from 2(a) and 2(b) above) offset by gross DTLs	2	28,499	28,501
 (d) DTAs admitted as the result of application of SSAP No. 101 	\$(280,505)	¢7 561	\$(272.044)
SSAP NO. TOT	\$(280,505)	\$7,561	\$(272,944)
_	2017		2016
(a) Ratio percentage used to determine recovery period and threshold limitation amount(b) Amount of adjusted capital and surplus used to	448%		757%
determine recovery period threshold limitation in 2(b)2 above	\$35,290,539	\$3	4,050,789

3.

4. The impact of tax planning strategies is as follows:

	D	ecember 31, 20	17
	Ordinary	Capital	Total
 (a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage 			
 Adjusted gross DTAs amount from Note 9A1(c) Percentage of adjusted DTAs by tax character attributable to the impact 	\$955,518	\$103,512	\$1,059,030
of tax planning strategies 3. Net admitted adjusted gross DTAs	0%	0%	0%
 amount from Note 9A1(e) Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax 	\$955,518	\$103,512	\$1,059,030
planning strategies	0%	0%	0%
	D	ecember 31, 20	16
	Ordinary	Capital	Total
 (a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage 1. Adjusted gross DTAs amount from Note 9A1(c) 2. Percentage of adjusted DTAs by tax 	\$1,236,023	\$95,951	\$1,331,974
character attributable to the impact of tax planning strategies 3. Net admitted adjusted gross DTAs	0%	6%	6%
amount from Note 9A1(e) 4. Percentage of net admitted adjusted DTAs by tax character admitted because of the impact of tax	\$1,236,023	\$95,951	\$1,331,974
planning strategies	0%	6%	6%
		Change	
	Ordinary	Capital	Total
 (a) Determination of adjusted gross DTAs and net admitted DTAs, by tax character as a percentage Adjusted gross DTAs amount from 			
 Adjusted gross DTAs amount from Note 9A1(c) Percentage of adjusted DTAs by tax 	\$(280,505)	\$7,561	\$(272,944)
character attributable to the impact of tax planning strategies	0%	<mark>(6)</mark> %	<mark>(</mark> 6)%
 Net admitted adjusted gross DTAs amount from Note 9A1(e) Percentage of net admitted adjusted DTAs by tax character admitted 	\$(280,505)	\$7,561	\$(272,944)
because of the impact of tax planning strategies	0%	(6)%	(6)%
(b) Does the Company's tax-planning strategies i	nclude the use of r	einsurance? Ye	s No <u>_X_</u>

B. There are no DTLs that were not recognized at December 31, 2017 or 2016.

C. Current income taxes incurred consist of the following major components:

	December 31,		_
	2017	2016	Change
1. Current income tax			
(a) Federal	\$7,268,555	\$9,707,933	\$(2,439,378)
(b) Foreign	-	-	-
(c) Subtotal	7,268,555	9,707,933	(2,439,378)
(d) Federal income tax on net capital gains	49,144	8,892	40,252
(f) Other	-	-	-
(g) Federal and foreign income taxes incurred	\$7,317,699	\$9,716,825	\$(2,399,126)
	Decem	ber 31,	
--	-------------------------	-------------------------	------------------------
	2017	2016	Change
2. DTAs:(a) Ordinary			
Claims unpaid Premium taxes - nonadmitted	\$660,469 295,049	\$1,096,323 139,700	\$(435,854) 155,349
Total ordinary DTAs (b) Statutory valuation allowance adjustment	955,518	1,236,023	(280,505)
(c) Nonadmitted ordinary DTAs		-	-
(d) Admitted ordinary DTAs	955,518	1,236,023	(280,505)
(e) Capital Investments - impairment	103,512	95,951	7,561
Total capital DTAs (f) Statutory valuation allowance	103,512	95,951	7,561
adjustment (g) Nonadmitted capital DTAs		-	-
(h) Admitted capital DTAs	103,512	95,951	7,561
(i) Admitted DTAs	1,059,030	1,331,974	(272,944)
3. DTLs: (a) Ordinary			
Investments Ordinary DTLs			-
(b) Capital			
Investments Capital DTLs	<u>61,956</u> 61,956	<u>49,015</u> 49,015	12,941 12,941
(c) Total DTLs	61,956	49,015	12,941
4. Net admitted DTAs	\$997,074	\$1,282,959	\$(285,885)

The change in net deferred income taxes is comprised of the following:

	Dece	_	
	2017	2016	Change
Total DTAs Total DTLs Net DTAs/(DTLs) Tax effect of unrealized gains (losses) Change in net deferred income tax	\$1,059,030 (61,956) 997,074	\$1,331,974 (49,015) 1,282,959	\$(272,944) (12,941) (285,885) - - \$(285,885)

There were no valuation allowance adjustments to gross DTAs at December 31, 2017 and 2016. The Company bases its estimates of the future realization of DTAs primarily on historic taxable income and existing DTLs.

D. The (benefit) provision for federal income taxes is different from that which would be obtained by applying the statutory federal income tax rate to income before income taxes. The items causing this difference were as follows:

	December 31, 2017	Effective tax rate	December 31, 2016	Effective tax rate
(Benefit) provision computed at				
statutory rate	\$8,248,585	35.0%	\$9,029,558	35.0%
Health Insurer Fee	-	0.0%	361,962	1.4%
Transfer pricing adjustment	(1,164,419)	(4.9)%	(786,382)	(3.0)%
Tax-exempt interest	(79,487)	(0.3)%	(31,467)	(0.1)%
Change in nonadmitted assets	208,460	0.9%	(112,625)	(0.4)%
Prior year true-up	100,331	0.4%	(10,358)	0.0%
Change in valuation allowance	-	0.0%	(177,984)	(0.7)%
Impact on deferred tax for	664 716	2.00/		0.09/
enacted rate change	664,716	2.8%	-	0.0% 0.0%
Prior period adjustment Other	(564,595) 189,993	(2.4)% 0.8%	- 161,000	0.6%
Total	\$7,603,584	32.3%	\$8,433,704	32.7%
lotal	\$7,003,304	32.370	\$0,433,704	32.170
Federal and foreign income				
tax (benefit) expense incurred	\$7,317,699	31.1%	\$9,715,825	37.7%
Change in net deferred			(1.000,10.1)	(= -)(
income taxes	285,885	1.2%	(1,283,121)	(5.0)%
Total statutory income taxes	\$7,603,584	32.3%	\$8,433,704	32.7%

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices as compared to what would be charged to an unrelated entity, which results in a permanent deduction for tax reporting purposes.

On December 22, 2017, the Tax Cuts and Jobs Act of 2017 (the "TCJA") was enacted, which among other items, reduces the federal corporate tax rate to 21% effective January 1, 2018. We re-measured our deferred income taxes for the year-ended December 31, 2017 and recognized incremental tax expense (benefit) related to the change in our net deferred tax asset/liability.

Ε.

- 1. At December 31, 2017 and 2016, Company had no net capital loss or net operating loss carryforwards for tax purposes.
- The amount of federal income taxes incurred that are available for recoupment in the event of future net losses are:

Year	Ordinary	Capital	Total
2017	\$7,171,291	\$54,005	\$7,225,296
2016	8,742,200	9,772	8,751,972
2015	N/A	644	644
Total	\$15,913,491	\$64,421	\$15,977,912

 The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2017 and 2016.

F.

1. At December 31, 2016, the Company's Federal Income Tax Return was consolidated with the following entities:

Aetna Inc. @ Credentials Inc. Active Health Management Inc. Adminco, Inc. Administrative Enterprises, Inc. AE Fourteen Incorporated Aetna ACO Holdings, Inc. Aetna Better Health Inc. (Connecticut) Aetna Better Health Inc. (Georgia) Aetna Better Health Inc. (Illinois) Actna Better Health Inc. (Illinois)	American Health Holding, Inc. AUSHC Holdings, Inc. Broadspire National Services, Inc. bswift, LLC Carefree Insurance Services, Inc. Claims Administration Corporation Cofinity, Inc. Continental Life Insurance Company of Brentwood, Tennessee Corporate Benefit Strategies, Inc.

Aetna Better Health Inc. (Pennsylvania) Aetna Better Health Inc. (Tennessee) Aetna Better Health of California Inc. Aetna Better Health of Iowa Inc. Aetna Better Health of Kansas, Inc. Aetna Better Health of Kentucky Insurance Company Aetna Better Health of Michigan, Inc. Aetna Better Health of Missouri LLC Aetna Better Health of Nevada Inc. Aetna Better Health of North Carolina, Inc. Aetna Better Health of Oklahoma Inc. Aetna Better Health of Texas, Inc. Aetna Better Health of Washington, Inc. Aetna Better Health, Inc. (Louisiana) Aetna Dental Inc. (New Jersey) Aetna Dental Inc. (Texas) Aetna Dental of California Inc. Aetna Florida Inc. (fka Aetna Better Health Inc. (Florida)) Aetna Health and Life Insurance Company Aetna Health Inc. (Connecticut) Aetna Health Inc. (Florida) Aetna Health Inc. (Georgia) Aetna Health Inc. (Louisiana) Aetna Health Inc. (Maine) Aetna Health Inc. (Michigan) Aetna Health Inc. (New Jersey) Aetna Health Inc. (New York) Aetna Health Inc. (Pennsylvania) Aetna Health Inc. (Texas) Aetna Health Insurance Company Aetna Health Insurance Company of New York Aetna Health of California, Inc. Aetna Health of Iowa Inc. (fka Aetna Health Inc. (lowa)) Aetna Health of Utah, Inc. Aetna HealthAssurance Pennsylvania, Inc. Aetna Insurance Company of Connecticut Aetna Integrated Informatics, Inc. Aetna International Inc. Aetna Ireland Inc. Aetna Life & Casualty (Bermuda) Ltd. Aetna Life Assignment Company Aetna Life Insurance Company Aetna Risk Assurance Company of. Connecticut, Inc. Aetna Student Health Agency Inc. AHP Holdings, Inc. Allviant Corporation American Continental Insurance Company

Coventry Health Care National Network, Inc. Coventry Health Care of Florida, Inc. Coventry Health Care of Illinois, Inc. Coventry Health Care of Kansas, Inc. Coventry Health Care of Missouri, Inc. Coventry Health Care of Nebraska, Inc. Coventry Health Care of Virginia, Inc. Coventry Health Care of West Virginia, Inc. Coventry Health Care Workers' Compensation, Inc. Coventry Health Plan of Florida, Inc. Coventry HealthCare Management Corporation Coventry Prescription Management Services, Inc. Coventry Rehabilitation Services, Inc. Coventry Transplant Network, Inc. Delaware Physicians Care, Incorporated Echo Merger Sub, Inc. First Health Group Corp. First Health Life and Health Insurance Company First Script Network Services, Inc. Florida Health Plan Administrators, LLC FOCUS Healthcare Management, Inc. Group Dental Service of Maryland, Inc. Group Dental Service, Inc. Health and Human Resource Center, Inc. Health Data & Management Solutions, Inc. Health Re, Incorporated HealthAssurance Pennsylvania, Inc. Managed Care Coordinators, Inc. Medicity Inc. Mental Health Associates, Inc. Mental Health Network of New York IPA, Inc. Meritain Health, Inc. MetraComp, Inc. MHNet Life and Health Insurance Co. MHNet of Florida, Inc. Niagara Re. Inc. PayFlex Holdings, Inc. PayFlex Systems USA, Inc. Performax, Inc. Precision Benefit Services, Inc. Prime Net, Inc. Prodigy Health Group, Inc. Professional Risk Management, Inc. Resources for Living, LLC Schaller Anderson Medical Administrators, Incorporated Strategic Resource Company The Vasquez Group Inc. U.S. Health Care Properties, Inc. Work and Family Benefits, Inc.

- 2. As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.
- 10. Information concerning Parent, subsidiaries, affiliates, and other related parties
 - A., B. and C.

The Company paid \$14,000,000 as an dividend to its parent on December 20, 2017. The New Jersey Department approved this dividend on December 18, 2017. The Company did not pay any dividends in 2016. The Company did not receive any capital contributions in 2017. The Company received a capital contribution in the amount of \$6,000,000 from its parent on May 13, 2016. The New Jersey Department approved this transaction on May 13, 2016.

D. Amounts due to and due from affiliates shown in the accompanying Statutory Statements of Assets, Liabilities, Capital and Surplus include the Company's net receipts and disbursements processed by affiliates and transactions related to its administrative services agreement with Aetna Medicaid Administrators LLC ("AMA"), indirectly a wholly-owned subsidiary of Aetna. At December 31, 2017 and 2016, the Company reported \$8,471,292 and \$1,460,707, respectively, as amounts due to AMA related to this agreement. The Company also reported \$7,142,845 and \$9,320,439 due to Aetna at December 31, 2017 and 2016, respectively.

- E. At December 31, 2017 and 2016, the Company did not have any guarantees or undertakings with its affiliates or parent company.
- F. As of and for the years ended December 31, 2017 and 2016, the Company had the following significant transactions with affiliates:

The Company and AMA are parties to an administrative services agreement, under which AMA provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company will remit a percentage of its earned premium revenue, as applicable, to AMA as a fee. For these services, the Company was charged \$21,089,699 and \$12,417,803 for the years ended December 31, 2017 and 2016, respectively. The agreement also provides for interest on all intercompany balances. There was no interest earned (incurred) on amounts due from (to) affiliates for the years ended December 31, 2017 and 2016.

The Company has an insolvency agreement with Aetna Health Insurance Company ("AHIC"), a whollyowned subsidiary of Aetna. This agreement provides that in the event that the Company ceases operations or becomes insolvent, AHIC will continue to pay benefits for any members confined as inpatients on the date of insolvency until their discharge. This agreement also provides that AHIC will continue benefits for any member until the end of the contract period for which premium has been paid, but for no longer than thirty-one days. AHIC will also make available to members, for a period of thirtyone days, replacement insurance policies.

As explained in Note 1, the Company participates in a tax sharing agreement with Aetna and Aetna's other subsidiaries. All federal income tax receivables/payables are due from/due to Aetna.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is Aetna.
- H. At December 31, 2017, the Company did not own shares of any upstream intermediate of Aetna.
- I. At December 31, 2017, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity that exceeded 10% of the Company's admitted assets.
- J. At December 31, 2017, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2017, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2017, the Company did not hold any investments in a downstream noninsurance holding company.

M and N.

At December 31, 2017, the Company did not have any SCA investments.

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at December 31, 2017.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2017.
- 12. <u>Retirement plans, deferred compensation, postemployment benefits and compensated absences and other</u> <u>postretirement benefit plans</u>

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at December 31, 2017 or 2016.

- 13. Capital and surplus, shareholders' dividend restrictions and guasi-reorganizations
 - (1) The Company had 10,000 shares of common stock with no par value authorized, with 100 shares issued and outstanding at December 31, 2017 and 2016.
 - (2) The Company did not have any preferred stock authorized or outstanding at December 31, 2017 and 2016.
 - (3) Dividend restrictions

Under the laws of the State of New Jersey, the Company shall not pay out dividends without the prior written approval of the New Jersey Department. The New Jersey Department may disapprove the dividend request for a period of 30 days after the receipt of notification.

Pursuant to New Jersey statute, no domestic insurer shall pay an extraordinary distribution to its shareholders until: (a) thirty days after the New Jersey Department has received notice of the declaration thereof and has not within such period disapproved such payment, or (b) the New Jersey Department approves such payment within the 30-day period. An extraordinary dividend or distribution is any dividend or distribution of cash or other property, whose fair market value together with that of other dividends or distributions made within the preceding twelve months exceeds the greater of: (a) 10% of the Company's surplus as regards to policyholders as of the 31st day of December next preceding, but shall not include pro rata distributions of any class of the Company's own securities.

- (4) The Company paid \$14,000,000 as an dividend to its parent on December 20, 2017. The New Jersey Department approved this dividend on December 18, 2017. The Company did not pay any dividends in 2016.
- (5) At December 31, 2017 and 2016, there was no portion of the Company's profits that may be paid as ordinary dividends to stockholders.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus was being held at December 31, 2017 or 2016, except as noted in Note 21.
- (7) Not applicable to the Company.
- (8) The Company did not hold any stock for any special purposes at December 31, 2017 or 2016.
- (9) Changes in the balances of special surplus funds from the prior year are due to the accrual of estimated ACA health insurer fees reclassified from unassigned funds or surplus to aggregate write-ins for special surplus funds as discussed more fully in Note 1.C and Note 22.
- (10) At December 31, 2017 and 2016, there was no portion of unassigned funds or surplus that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2017 or 2016.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.

14. Contingencies

- A. The Company did not have any contingent commitments at December 31, 2017 or 2016.
- B. The Company did not have any contingent assessments at December 31, 2017 or 2016.
- C. The Company did not have any gain contingencies at December 31, 2017 or 2016.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2017 or 2016.
- E. The Company did not have any joint and several liability arrangements at December 31, 2017 or 2016.
- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books. The Company has coverage for certain litigation exposures (\$10,000,000 per claim and in the aggregate including defense costs) through an unaffiliated insurance company.

15. Leases

The Company did not have any material lease obligations at December 31, 2017 or 2016.

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

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2017 or 2016.

- 17. Sale, transfer and servicing of financial assets and extinguishments of liabilities
 - A. <u>Transfers of receivables reported as sales</u>
 - (1) The Company did not have any transfers of receivables as sales for the years ending December 31, 2017 and 2016.

B. <u>Transfer and servicing of financial assets</u>

- (1) The Company's policy for requiring collateral or other security for security lending transactions as required in SSAP No. 103R is discussed in Note 1. Excludes repurchase and reverse repurchase transactions as discussed in Notes 5.F. through 5.I. The Company did not have any loaned securities at December 31, 2017 and 2016.
- (2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2017 or 2016.

- (4) The Company did not have any securitized financial assets at December 31, 2017 or 2016.
- (5) The Company did not have any transfers of financial assets at December 31, 2017 or 2016.
- (6) The Company did not have any transfers of receivables with recourse at December 31, 2017 or 2016.
- (7) The Company did not have any repurchase or reverse repurchase agreements at December 31, 2017 or 2016.

C. <u>Wash sales</u>

- (1) The Company did not have any wash sales for the years ending December 31, 2017 or 2016.
- 18. Gain or loss to the HMO from uninsured plans and the uninsured portion of partially insured plans
 - A. The Company did not serve as an Administrative Services Only for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2017.
 - B. The Company did not serve as an Administrative Services Contract plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2017.
 - C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2017.

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

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2017 and 2016.

20. Fair value measurements

A. and B.

The Company had no material assets or liabilities measured and reported at fair value at December 31, 2017 or 2016.

- C. Certain of the Company's financial instruments are measured at fair value in the financial statements. 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 December 31, 2017 and 2016 were as follows:

December 31, 2017

	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash						
equivalents	\$125,638,358	\$125,163,113	\$38,949,542	\$86,688,816	3 73	
Total	\$125,638,358	\$125,163,113	\$38,949,542	\$86,688,816	-	-
December 31, 2016	<u>6</u>					

	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash						
equivalents	\$109,115,546	\$109,032,365	\$27,370,078	\$81,745,468	-	-
Total	\$109,115,546	\$109,032,365	\$27,370,078	\$81,745,468) - 6	-

The valuation methods and assumptions used by the Company in estimating the fair value of debt securities are discussed in Note 1.

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2017 or 2016. There were no transfers between the Company's Level 1 or 2 financial assets during 2017 or 2016.

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

D. The Company did not have any financial instruments where it was not practicable to estimate the fair value.

21. Other items

A. Extraordinary items

The Company did not have any extraordinary items for the years ended December 31, 2017 and 2016.

B. <u>Troubled debt restructuring: debtors</u>

The Company did not have any troubled debt restructuring in the years ended December 31, 2017 and 2016.

C. Other disclosures and unusual items

(1) Minimum capital and surplus

Under the laws of the State of New Jersey, the Company is required to maintain a minimum capital and surplus equal to the greater of (1) \$1,000,000 adjusted annually by the Consumer Price Index; (2) 2% of the annual premium revenues as reported by the Company on its most recent annual financial statement filed with the Commissioner of Health and Commissioner of Banking and Insurance for the first \$150,000,000 of premium reported and 1% of the annual premium in excess of the first \$150,000,000 of premium reported; (3) an amount equal to the sum of three months of uncovered health care expenditures; or (4) an amount equal to the sum of 8% of the annual health care expenditures (not including those expenditures paid on a capitated basis and those made on a managed hospital payment basis) plus 4% of the annual hospital expenditures paid on a managed hospital payment basis. At December 31, 2017 and 2016, the Company's capital and surplus exceeded all such requirements.

The NAIC and the State of New Jersey adopted risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory

action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2017 and 2016, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

(2) Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010 (as amended, collectively, "Health Care Reform" or "ACA"), has made broad-based changes to the U.S. health care system. On January 20, 2017, the President signed an executive order that gives the regulatory agencies that enforce the ACA the authority to interpret regulations issued under the ACA in a way that limits fiscal burdens on states and financial or regulatory burdens on individuals, providers, health insurers and others. The practical implications of that order are unclear, and the future of the ACA is uncertain. While we anticipate continued efforts in 2018 and beyond to modify, repeal or replace the ACA, the Company expects aspects of the ACA to continue to significantly impact the Company's business operations and operating results, including the Company's pricing, medical benefit ratios and the geographies in which the Company's products are available. Health Care Reform has presented the Company with business opportunities, but also with financial and regulatory challenges. Most of the ACA's key components were phased in during or prior to 2014, including Public Exchanges, required minimum MLRs in commercial and Medicare products, the individual coverage mandate, guaranteed issue, rating limits in individual and small group products, significant new industry-wide fees, assessments and taxes, enhanced premium rate review and disclosure processes, reduced Medicare Advantage payment rates to insurers, and linking Medicare Advantage payments to a plan's CMS quality performance ratings or "star ratings." The effects of these changes are reflected in the Company's operating results. If the ACA is not amended, repealed or replaced, certain of its components will continue to be phased in until 2022.

The Company expects to continue to dedicate significant resources and incur significant expenses during 2018 to comply with Health Care Reform as currently enacted and implement and comply with changes in Health Care Reform as well as state level health care reform. While most of the significant aspects of Health Care Reform became effective during or prior to 2014, parts of Health Care Reform continue to evolve through the promulgation of executive orders, regulations and guidance. Additional changes to Health Care Reform and those regulations and guidance at the federal and/or state level are likely, and those changes are likely to be significant. Growing state and federal budgetary pressures make it more likely that any changes, including changes at the state level in response to changes to, or repeal or replacement of, Health Care Reform and/or changes in the funding levels and/or payment mechanisms of federally supported benefit programs, will be adverse to us. Given the inherent difficulty of foreseeing the nature and scope of future changes to Health Care Reform and how states, businesses and individuals will respond to those changes, the Company cannot predict the impact to the Company of future changes to Health Care Reform and/or states' responses to such changes, in the aggregate, could have a significant adverse effect on the Company's business operations and financial results.

Potential repeal of Health Care Reform, ongoing legislative, regulatory and administrative policy changes to Health Care Reform, the results of congressional and state level elections, pending litigation challenging aspects of the law or funding for the law and federal budget negotiations continue to create uncertainty about the ultimate impact of Health Care Reform. Examples of recent administrative policy, legislative and regulatory changes include: the January 2018 suspension of the health insurer fee for 2019 and delay of the "Cadillac" tax on high-cost employer-sponsored health Care Reform's individual mandate and related penalties; the January 20, 2017 and October 2017 executive orders relating to Health Care Reform; the federal government's October 12, 2017 curtailment of payments related to the Cost-Sharing Subsidy Program; the November 2016 HHS announcement that risk corridor collections for the 2015 program year would be applied first to amounts owed to plans for the 2014 program year; and the May 2016 final regulations relating to Health Care Reform's non-discrimination requirements. The pending litigation challenging Health Care Reform includes challenges by various states of the federal government's decision to curtail payments related to the Cost-Sharing Subsidy Program. The time frame for conclusion and final outcome and ultimate impact of this litigation are uncertain.

As described above, the availability of funding for Health Care Reform's temporary risk corridor program is an example of this uncertainty. The Company continues to believe that receipt of any risk corridor payment from HHS for the 2016 or 2015 program year and receipt of such payments in excess of the announced prorated amount for the 2014 program year are uncertain. At December 31, 2017, the Company had no receivable for the remaining 2014 program year prorated amount that had not been collected from HHS and had no receivable for either of the 2015 or 2016 program years. 2016 was the last program year for Health Care Reform's risk corridor program. On-going uncertainty regarding the funding of Health Care Reform-related programs and subsidies can be expected to create additional instability in the marketplace.

In addition to efforts to amend, repeal or replace Health Care Reform and the related regulations, the federal and state governments also continue to enact and seriously consider many other broad-based legislative and regulatory proposals that have had a material impact on or could materially impact various aspects of the health care and related benefits system and the Company's business. The Company

cannot predict whether pending or future federal or state legislation or court proceedings, including future U.S. Congressional appropriations, will change various aspects of the health care and related benefits system or Health Care Reform or the impact those changes will have on the Company's business operations or operating results, but the effects could be materially adverse.

In addition, Health Care Reform ties a portion of each Medicare Advantage plans' reimbursement to the achievement of favorable CMS quality performance measures ("star ratings"). Since 2015, only Medicare Advantage plans with an overall star rating of four or more stars (out of five stars) are eligible for a quality bonus in their basic premium rates. As a result, the Company's Medicare Advantage plans' operating results in 2018 and going forward will be significantly affected by their star ratings.

(3) Medicaid

The Company's Medicaid plan products also are heavily regulated by CMS and state Medicaid agencies, which have the right to audit the Company's performance to determine compliance with CMS contracts and regulations. The Company's Medicaid products and Children's Health Insurance Program ("CHIP") contracts also are subject to complex federal and state regulations and oversight by state Medicaid agencies regarding the services the Company provides to Medicaid enrollees, payment for those services, network requirements (including mandatory inclusion of specified high-cost providers), and other aspects of these programs, and by external review organizations which audit Medicaid plans on behalf of the state Medicaid agencies. The laws, regulations and contractual requirements applicable to the Company and other participants in Medicaid, including requirements that the Company submit encounter data to the applicable state agency, are extensive, complex and subject to change. The Company has invested significant resources to comply with these standards, and the Company's Medicaid program compliance efforts will continue to require significant resources. CMS and/or state Medicaid agencies may fine the Company, withhold payments to the Company, seek premium and other refunds, terminate the Company's existing contracts, elect not to award the Company new contracts or not to renew the Company's existing contracts, prohibit the Company from continuing to market and/or enroll members in or refuse to automatically assign members to one or more of the Company's Medicaid products, exclude the Company from participating in one or more Medicaid programs and/or institute other sanctions and/or civil monetary penalties against the Company if it fails to comply with CMS or state regulations or the Company's contractual requirements. The Company cannot predict whether pending or future federal or state legislation or court proceedings will change various aspects of the Medicaid program, nor can it predict the impact those changes will have on its business operations or financial results, but the effects could be materially adverse.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2017 or 2016.
- E. The Company did not have any transferable and non-transferable state tax credits for the years ending December 31, 2017 or 2016.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2017 or 2016.
- G. The Company did not have any retained assets at December 31, 2017 or 2016.
- H. The Company did not have any insurance-linked securities ("ILS") contracts at December 31, 2017 or 2016.

22. Events subsequent

A. Type I - Recognized subsequent events

Subsequent events have been considered through February 27, 2018 for the statutory statement issued on March 1, 2018.

The Company had no known reportable recognized subsequent events.

B. <u>Type II - Nonrecognized subsequent events</u>

Subsequent events have been considered through February 27, 2018 for the statutory statement issued on March 1, 2018.

On January 1, 2018, the Company will be subject to an annual fee under Section 9010 of the Federal Affordable Care Act ("ACA"). This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1 of the year the fee is due. As of December 31, 2017, the Company has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2018, and estimates their portion of the annual health insurance industry fee to be payable on September 30, 2018 to be \$2,827,000. This amount is reflected in special surplus. This assessment is expected to impact risk based capital ("RBC") by 8%. Reporting the ACA assessment as of December 31, 2017, would not have triggered an RBC action level.

In December 2015, the Consolidated Appropriation Act was enacted, which included a one year suspension of the annual fee for 2017. Accordingly, there was no annual health insurance industry fee payable on September 30, 2017 and there were no amounts reflected in the Company's aggregate write-ins for special surplus funds related to this payable at December 31, 2016 as a result. There was also no resulting impact to the Company's RBC to assess as of December 31, 2016 as a result of this suspension.

In January 2018, the annual fee was suspended for 2019.

		Current year	Prior year
A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010		
	of the Federal Affordable Care Act (YES/NO)?	Yes	
В.	ACA fee assessment payable for upcoming year	\$2,827,000	-
C.	ACA fee assessment paid	-	\$1,034,176
D.	Premium written subject to ACA 9010 assessment	\$242,409,193	-
Ε.	Total Adjusted Capital before surplus adjustment		
	(Five-Year Historical Line 14)	\$36,287,613	
F.	Total Adjusted Capital after surplus adjustment		
	(Five-Year Historical Line 14 minus 22B above)	\$33,460,613	
G.	Authorized Control Level after surplus adjustment		
	(Five-Year Historical Line 15)	\$7,885,411	
Η.	Would reporting the ACA assessment as of		
	December 31, 2017, have triggered an RBC		
	action level (YES/NO)?	No	

23. Reinsurance

The Company and Berkley Life and Health Insurance Company ("Berkley") entered into an excess loss reinsurance agreement for Medicaid only members. Under this agreement, Berkley is liable for 90% of covered expenses in excess of the specific deductible of \$350,000 per covered member, with a maximum reimbursement of \$2,000,000 per member per agreement year. The Company paid reinsurance premiums of \$332,227 and \$233,974 in 2017 and 2016, respectively.

A. <u>Ceded Reinsurance Report</u>

Section 1 – General Interrogatories

- Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?
 Yes () No (X)
 If yes, give full details.
- (2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business? Yes () No (X) If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than nonpayment of premium or other similar credit?

Yes () No (X)

a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate.
 \$ N/A

b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability for these agreements in this statement?

\$<u>N/A</u>

- (2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes () No (X) If yes, give full details.
- Section 3 Ceded Reinsurance Report Part B
 - (1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the insurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate.
 - (2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? Yes () No (X) If yes, what is the amount of reinsurance credit, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$ N/A
- B. The Company did not have uncollectible reinsurance at December 31, 2017 or 2016.
- C. The Company did not have any commutation of ceded reinsurance at December 31, 2017 or 2016.
- D. The Company's certified reinsurer's rating has not been downgraded or its status subject to revocation at December 31, 2017 or 2016.
- 24. Retrospectively rated contracts and contracts subject to redetermination

A. and B.

The Company did not have any retrospectively rated contracts in 2017 or 2016.

C. Contracts subject to redetermination

The Company did not have any contracts subject to redetermination in 2017 or 2016.

D. Medical loss ratio rebates required pursuant to the Public Health Service Act

The Company did not have any medical loss ratios required pursuant to the Public Health Service Act in 2017 or 2016.

E. Risk Sharing Provisions of the Affordable Care Act

The Company did have any accident and health insurance premium that is subject to the ACA risk sharing provisions at December 31, 2017 or 2016.

25. Change in incurred claims and claims adjustment expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ended December 31, 2017 and 2016.

	2017	2016
Balance, January 1	\$35,197,827	\$34,997,788
Health care receivable	4,484,772	-
Balance, January 1, net of health care receivable	30,713,155	34,997,788
Incurred related to:		
Current year	199,985,580	120,343,792
Prior years	(5,273,038)	(23,025,342)
Total incurred	194,712,542	97,318,450
Paid related to:		
Current year	165,115,733	91,864,475
Prior years	24,278,131	9,738,708
Total paid	189,393,864	101,603,183
Balance, December 31, net of health care receivable	36,031,733	30,713,055
Health care receivable	1,593,261	4,484,772
Balance, December 31	\$37,624,994	\$35,197,827

In 2017, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$5,273,038 from \$35,197,827 in 2016 to \$29,924,789 in 2017. In 2016, reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years decreased by \$23,025,342 from \$34,997,788 in 2015 to \$11,972,446 in 2016. The lower than anticipated health care cost trend rates observed in 2017 and 2016 for claims incurred in 2016 and 2015 were generally due to the result of ongoing analysis of recent loss development trends. The Company considers historical trend rates together with knowledge of recent events that may impact current trends when developing estimates of current trend rates. Original estimates are increased or decreased as additional information becomes known regarding individual claims. Historical health care cost trend rates are not necessarily representative of current trends.

Net coordination of benefits are implicit in the claims incurred but not reported calculation and could not be specifically identified.

26. Intercompany pooling arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2017 or 2016.

27. Structured settlements

Not applicable to health entities.

28. Health care receivables

A. <u>Pharmaceutical rebate receivables</u>

The Company receives pharmaceutical rebates through an arrangement with AHM. AHM has contractual agreements with pharmaceutical companies for rebates, which cover the Company's membership as well as the membership of other Aetna affiliates. The Company receives those rebates from AHM (either directly or through intercompany arrangements with other Aetna affiliates) that relate to the Company's membership. The Company estimates pharmaceutical rebate receivables based upon the historical payment trends, actual utilization and other variables. Actual rebates collected are applied to the collection periods below, using a first in, first out methodology. The Company had admitted pharmaceutical rebate receivables of \$188,265 and \$90,000 at December 31, 2017 and 2016, respectively. (Refer to the Company's accounting practices related to pharmaceutical rebate receivables in Note 1).

The following table discloses the quarterly revenue and subsequent cash collections relating to the pharmaceutical rebates discussed in Note 10.

Quarter	Estimated pharmacy rebates as reported on financial statements	Pharmacy rebates as invoiced/ confirmed	Actual rebates collected within 90 days of invoicing/ confirmation	Actual rebates collected within 91 to 180 days of invoicing/ confirmation	Actual rebates collected more than 180 days after invoicing/ confirmation
12/31/2017	\$188,265	_	_	_	-
9/30/2017	\$167,256	\$188,265	-	-	-
6/30/2017	\$123,402	\$167,256	\$56,431	-	-
3/31/2017	\$121,508	\$122,973	\$41,655	\$76,683	-
12/31/2016	\$90,000	\$121,539	\$38,196	\$82,387	\$225
9/30/2016	\$118,036	\$119,859	\$59,095	\$58,710	-
6/30/2016	\$129,308	\$131,595	\$32,523	\$87,075	\$9,498
3/31/2016	\$77,444	\$78,804	\$48,364	\$19,269	\$7,011
12/31/2015	\$75,683	\$76,529	\$35,174	\$28,527	\$12,603
9/30/2015	\$58,260	\$59,203	\$17,924	\$36,856	\$4,158
6/30/2015	\$37,709	\$37,585	\$15,380	\$20,000	\$678
3/31/2015	\$8,920	\$8,746	\$5,557	\$3,002	\$187

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2017 or 2016.

29. Participating policies

The Company did not have any participating policies at December 31, 2017 or 2016.

30. Premium deficiency reserves

		December 31, 2017
1.	Liability carried for premium deficiency reserves	\$0
2.	Date of the most recent evaluation of this liability	12/31/2017
3.	Was anticipated investment income utilized in the calculation?	No

31. Anticipated salvage and subrogation

See discussion of hospital and medical costs and claims adjustment expenses and related reserves in Note 1.

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?			Yes [X] No []	
1.2	If yes, did the reporting entity register and file with its domiciliary State Ins such regulatory official of the state of domicile of the principal insurer in t providing disclosure substantially similar to the standards adopted by the its Model Insurance Holding Company System Regulatory Act and mode subject to standards and disclosure requirements substantially similar to	the Holding Company System, a registration statement e National Association of Insurance Commissioners (NAIC) in el regulations pertaining thereto, or is the reporting entity	Yes [)	(] No [] N/A []
1.3	State Regulating?			New Je	rsey	
2.1	Has any change been made during the year of this statement in the charter reporting entity?			Yes [] No [X]	
2.2	If yes, date of change:					
3.1	State as of what date the latest financial examination of the reporting entit	ty was made or is being made.		12/31/	2015	
3.2	State the as of date that the latest financial examination report became av entity. This date should be the date of the examined balance sheet and r			12/31/	2015	
3.3	State as of what date the latest financial examination report became avail domicile or the reporting entity. This is the release date or completion da examination (balance sheet date).	te of the examination report and not the date of the	-	06/26/	2017	
3.4	By what department or departments? New Jersey Department of Banking and Insurance					
3.5	Have all financial statement adjustments within the latest financial examin statement filed with Departments?	nation report been accounted for in a subsequent financial	Yes [] No [] N/A [X	1
3.6	Have all of the recommendations within the latest financial examination re	eport been complied with?	Yes [] No [] N/A [X]
4.1		es of the reporting entity), receive credit or commissions for or ness measured on direct premiums) of: of new business?				
4.2	During the period covered by this statement, did any sales/service organiz receive credit or commissions for or control a substantial part (more than premiums) of:	20 percent of any major line of business measured on direct	filiate,] No [X]	
		of new business?				
5.1	Has the reporting entity been a party to a merger or consolidation during t	he period covered by this statement?		Yes [] No [X]	
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	domicile (use two letter state abbreviation) for any entity that h	as			
	1 Name of Entity	2 3 NAIC Company Code State of Domicile				
6.1	Has the reporting entity had any Certificates of Authority, licenses or regis revoked by any governmental entity during the reporting period?			Yes [] No [X]	
6.2	If yes, give full information:					
7.1	Does any foreign (non-United States) person or entity directly or indirectly			Yes [] No [X]	
7.2	If yes, 7.21 State the percentage of foreign control;			C).0	%
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the er attorney-in-fact; and identify the type of entity(s) (e.g., individual, con	ntity is a mutual or reciprocal, the nationality of its manager or				
	1 Nationality	2 Type of Entity				

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) GENERAL INTERROGATORIES

8.1 8.2				Yes []	No [X]		
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities firms? If response to 8.3 is yes, please provide below the names and location (city and staregulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] a	ate of the main office) of any affiliates e Comptroller of the Currency (OCC),	regulate the Fed	d by a feo eral Dep	leral	Yes []	No [X]
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC			
9.	What is the name and address of the independent certified public accountant or ac	counting firm retained to conduct the	annual a	udit?					
10.1	requirements as allowed in Section 7H of the Annual Financial Reporting Model R law or regulation?	Regulation (Model Audit Rule), or subs	tantially	similar st	ate	Yes [1	No [X]
10.2	If the response to 10.1 is yes, provide information related to this exemption:								
10.3 10.4		the Annual Financial Reporting Model	Regulat	ion as		Yes []	No [X]
10.5					es [X	1 No [1	N/A	r 1
10.6						1	'		
11.	What is the name, address and affiliation (officer/employee of the reporting entity o firm) of the individual providing the statement of actuarial opinion/certification? William R. Jones, FSA, MAAA; 151 Farmington Avenue, RE2R; Hartford, CT 0615	56			-				
12.1						Yes []	No [X]
	12.11 Name of real estate holding					_			
	12.12 Number of parcels involved	J				0			
12.2	12.13 Total book/adjusted carryin If, yes provide explanation:	ng value				5			0
13. 13.1	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY: What changes have been made during the year in the United States manager or the	e United States trustees of the report	ng entity	r?					
13.2	Does this statement contain all business transacted for the reporting entity through	its United States Branch on risks whe	rever lo	cated?		Yes []	No [1
13.3	, , , ,					Yes [
13.4] No []	N/A	[]
14.1	Are the senior officers (principal executive officer, principal financial officer, principal similar functions) of the reporting entity subject to a code of ethics, which includes (a) Honest and ethical conduct, including the ethical handling of actual or apparent relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports	the following standards? conflicts of interest between personal	and pro			Yes [)	[]	No []
	 (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons i 								
	(e) Accountability for adherence to the code.								
14.11	If the response to 14.1 is No, please explain:								
14.2						Yes [)		No [1
14.21	If the response to 14.2 is yes, provide information related to amendment(s).								
	No substantive changes were made. Minor changes include: 1) Changes to reflect Join Us, We Join You") and mission statement (i.e., "to build a healthier world"); 2 abuse; 3) The addition of explicit reference to the UK Modern Slavery Act of 2015 Updates to the list of awards and recognitions received by the Company; and 5) A replaced the previous section on "Diversity at Aetna".	A clarification of the difference between in the list of laws applicable to govern new section on "Diversity and Inclusi	een frau ment co on at Ae	d, waste ntracting tna" that	and ; 4)				
14.3	Have any provisions of the code of ethics been waived for any of the specified offic	ers?				Yes []	No [X]
14.31	If the response to 14.3 is yes, provide the nature of any waiver(s).								

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) GENERAL INTERROGATORIES

15.1		entity the beneficiary of a Letter of Credit that is unrelated to rei		e issuing or confirming bank is not on		Yes [1 N	X I o	1
15.2	If the response t	to 15.1 is yes, indicate the American Bankers Association (ABA ter of Credit and describe the circumstances in which the Letter	A) Routing Number	and the name of the issuing or confirm	ning	100 [1	017	1
	1 American Bankers	2		3		3	4]
	Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances T	hat Can Trigger the Letter of Credit		Am	nount		
		BOARD OF	DIRECTORS	6					
16.	Is the purchase thereof?	or sale of all investments of the reporting entity passed upon e	ither by the board of	f directors or a subordinate committee	0	Yes [X	(1 N	0 [1
17.	Does the reporti thereof?	ng entity keep a complete permanent record of the proceeding	s of its board of dire	ectors and all subordinate committees				-	
18.		g entity an established procedure for disclosure to its board of s officers, directors, trustees or responsible employees that is i				Yes [X] N	0 []
		FINA	NCIAL						
19.	Has this stateme	ent been prepared using a basis of accounting other than Statu nciples)?	tory Accounting Pri	nciples (e.g., Generally Accepted		Yes [1 N	ΛĨΩ	1
20.1	Total amount loa	aned during the year (inclusive of Separate Accounts, exclusive	e of policy loans):	20.11 To directors or other officers		\$			0
				20.12 To stockholders not officers		.\$			0
				20.13 Trustees, supreme or grand (Fraternal Only)		¢			0
20.2	Total amount of	loans outstanding at the end of year (inclusive of Separate Act	counts, exclusive of						
	policy loans):			20.21 To directors or other officers		\$			0
				20.22 To stockholders not officers		\$			0
				20.23 Trustees, supreme or grand (Fraternal Only)		\$			0
21.1	Were any assets	s reported in this statement subject to a contractual obligation t	o transfer to anothe	er party without the liability for such					
	obligation being	g reported in the statement?				Yes [] N	o [X]
21.2	If yes, state the	amount thereof at December 31 of the current year:		21.21 Rented from others		\$			0
				21.22 Borrowed from others 21.23 Leased from others		\$			0
				21.23 Leased from others 21.24 Other					
22.1	Does this staten	nent include payments for assessments as described in the An iation assessments?	nual Statement Inst	ructions other than guaranty fund or					
22.2			22	.21 Amount paid as losses or risk adj	ustment	\$			0
			22	.22 Amount paid as expenses		_\$			0
			22	.23 Other amounts paid		.\$			0
23.1		ng entity report any amounts due from parent, subsidiaries or a							
23.2	If yes, indicate a	ny amounts receivable from parent included in the Page 2 amo	ount:			\$			0
		INVES	STMENT						
24.01	Were all the sto the actual poss	cks, bonds and other securities owned December 31 of curren session of the reporting entity on said date? (other than securiti	t year, over which th es lending program	ne reporting entity has exclusive contro s addressed in 24.03)	ol, in	Yes [X	(] N	0 []
24.02		nd complete information relating thereto							
24.03	whether collate	ding programs, provide a description of the program including v ral is carried on or off-balance sheet. (an alternative is to refer	ence Note 17 where	this information is also provided)					
24.04	Does the Compo Instructions?	any's security lending program meet the requirements for a cor	nforming program as	s outlined in the Risk-Based Capital	Yes [] No []	N/A [X]
24.05	If answer to 24.0	04 is yes, report amount of collateral for conforming programs.							0
24.06	If answer to 24.0	04 is no, report amount of collateral for other programs.				_\$			0
24.07	Does your secur outset of the co	rities lending program require 102% (domestic securities) and ontract?	105% (foreign secu	rities) from the counterparty at the	Yes [] No []	N/A [X]
24.08	Does the report	ng entity non-admit when the collateral received from the coun	terparty falls below	100%?	Yes [] No []	N/A [X]
24.09	Does the reporti conduct securi	ng entity or the reporting entity 's securities lending agent utiliz ties lending?	e the Master Securi	ties lending Agreement (MSLA) to	Yes [] No []	N/A [X]

GENERAL INTERROGATORIES

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

	24.101 Total fair value of reinvested collateral assets repo	orted on Schedule DL, Parts 1 and 2.	\$	
		ollateral assets reported on Schedule DL, Parts 1 and 2		
		e liability page.		
5.1	Were any of the stocks, bonds or other assets of the reporting entity owned control of the reporting entity, or has the reporting entity sold or transferrer force? (Exclude securities subject to Interrogatory 21.1 and 24.03)	ed any assets subject to a put option contract that is currently in	Yes [X] No []
5.2	If yes, state the amount thereof at December 31 of the current year:	25.21 Subject to repurchase agreements		
		25.23 Subject to dollar repurchase agreements		
		25.24 Subject to reverse dollar repurchase agreements		
		25.25 Placed under option agreements	\$	
		25.26 Letter stock or securities restricted as to sale -		

•
•
0
0
,534
0
0
0
0

25.3 For category (25.26) provide the following:

25.

25.

	1 Nature of Restriction	2 Description	3 Amo	3 punt
26.1	Does the reporting entity have any hedging transactions reported on Sch	edule DB?	Yes [] No [X]
26.2	If yes, has a comprehensive description of the hedging program been ma If no, attach a description with this statement.	ade available to the domiciliary state? Yes [] No [] N/A [X
27.1	Were any preferred stocks or bonds owned as of December 31 of the cur issuer, convertible into equity?		Yes [] No [X]
27.2	If yes, state the amount thereof at December 31 of the current year		\$	
28.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mo offices, vaults or safety deposit boxes, were all stocks, bonds and other custodial agreement with a qualified bank or trust company in accordan Outsourcing of Critical Functions, Custodial or Safekeeping Agreements	securities, owned throughout the current year held pursuant to a ce with Section 1, III - General Examination Considerations, F.	Yes [X] No []
		• ••• • •• •• •• •• •• •		

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

1	2
Name of Custodian(s)	Custodian's Address
State Street Bank and Trust Company	State Street Financial Center; One Lincoln Street; Boston, MA 02111-2900

28.02 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	2	3
1	Name(s)	Location(s)	Complete Explanation(s)
	All agreements comply		
- L			

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?... Yes [] No [X] 28.04 If yes, give full and complete information relating thereto:

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

GENERAL INTERROGATORIES

28.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	
n J. Casey as Sr. Investment Officer	A

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. Yes [] No [X] designated with a "U") manage more than 10% of the reporting entity's assets?.

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?..... Yes [] No [X]

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

Г	1	2	3	4	5
					Investment
					Management
- I	Central Registration				Agreement
	Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
	V/A	Kevin J. Casey	N/A	Not registered	NO
			·		

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?

If yes, complete the following schedule: 29.2

1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
29.2999 - Total		0

Yes [] No [X]

29.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation

Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or 30. statement value for fair value.

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds			
30.2 Preferred stocks	0	0	0
30.3 Totals	125, 163, 113	125,638,358	475,245

30.4 Describe the sources or methods utilized in determining the fair values:

	Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information, or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short-term investments are carried at amortized cost which approximated fair value. The carrying value of cash equivalents approximated fair value.			
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes [X] N	No []
31.2	If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes [X] N	No []
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:			
32.1 32.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Yes [X] N	No []

GENERAL INTERROGATORIES

33.	By self-designating 5*GI securities, the reporting entity is certifying the following elements of each self-designa a. Documentation necessary to permit a full credit analysis of the security does not exist. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5*GI securities?		Yes []	No [X]
	OTHER			
34.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?		\$	0
34.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the to service organizations and statistical or rating bureaus during the period covered by this statement.	otal payments to trade a	associations,	
	1 Name	2 Amount Paid]	
35.1	Amount of payments for legal expenses, if any?		\$	
35.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total paym during the period covered by this statement.	nents for legal expense	S	
	1 Name	2 Amount Paid		
36.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departm	ents of government, if	any?\$	0
36.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total paym connection with matters before legislative bodies, officers or departments of government during the period co		nt.	

1	2
Name	Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

.1	Does	the reporting entity have any unect medicale supplement insulance in lorce:		
.2	If yes	, indicate premium earned on U.S. business only.		_\$
.3		t portion of Item (1.2) is not reported on the Medicare Supplement Insurance E	xperience Exhibit?	\$
	1.31	Reason for excluding		
.4	Indica	ate amount of earned premium attributable to Canadian and/or Other Alien not	t included in Item (1.2) above	.\$
.5		ate total incurred claims on all Medicare Supplement Insurance.		\$
.6	Indivi	idual policies:	Most current three years:	
			1.61 Total premium earned	
			1.62 Total incurred claims 1.63 Number of covered lives	
			All years prior to most current three years:	
			1.64 Total premium earned	
			1.65 Total incurred claims	
			1.66 Number of covered lives	
7	Grou	p policies:	Most current three years:	
			1.71 Total premium earned	
			1.72 Total incurred claims 1.73 Number of covered lives	
			All years prior to most current three years:	
			1.74 Total premium earned	
			1.75 Total incurred claims	
			1.76 Number of covered lives	
•	Healt	th Test:		
			1 2 Current Year Prior Year	
	2.1	Premium Numerator		
	2.2	Premium Denominator		
	2.3	Premium Ratio (2.1/2.2)	1.0001.000	
	2.4	Reserve Numerator		
	2.5	Reserve Denominator		
	2.6	Reserve Ratio (2.4/2.5)		
.1 .2	retu	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [] No [X
.2	retui	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [] No [X
	retur If yes Have	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	
2	retui If yes Have depe	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits? g, give particulars: e copies of all agreements stating the period and nature of hospitals', physician	physicians, dentists, or others that is agreed will be	Yes [X] No [
.2	retui If yes Have depe	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits? s, give particulars: e copies of all agreements stating the period and nature of hospitals', physician endents been filed with the appropriate regulatory agency?	physicians, dentists, or others that is agreed will be	Yes [X] No [Yes [] No [X
.1	retui If yes Have depe If not Does	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [X] No [Yes [] No [X
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered?	Yes [X] No [Yes [] No [X Yes [X] No [
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be as', and dentists' care offered to subscribers and agreements include additional benefits offered?	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be as', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be as', and dentists' care offered to subscribers and agreements include additional benefits offered?	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 1 2	retur If yes Have depe If not Does If no,	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 3	retui If yes Have dependent If not Doess If no, Maxir Desc hold agree	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other and their dependents against the risk of insolvency including ith providers to continue rendering services, and any other	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 3	retui If yes Have depe If not Does If no, Maxir Maxir Desc hold agre The C	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [X] No [Yes [] No [X Yes [X] No [\$
2 1 2 3	retui If yes Have depe If not Does If no, Maxir Desc hold agre The C Does	the reporting entity received any endowment or gift from contracting hospitals, rrned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [X] No [Yes [] No [X Yes [X] No [\$
2 1 2 3	retui If yes Have depe If not Does If no, Maxir Desc hold agre The C Does	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be	Yes [X] No [Yes [] No [X Yes [X] No [\$
2 1 2 1	retuil If yes Have dependent If not Doess If no, Maxir Dessc hold agree The C Doess If no,	the reporting entity received any endowment or gift from contracting hospitals, rrned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other ind their dependents against the risk of insolvency including th providers to continue rendering services, and any other rent. ate basis? 8.1 Number of providers at start of reporting year	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 2 1 1 2 2 3 3 1 1 2 2	retui If yes Have depe If not Doess If no, Maxir Desc hold agre The C Doess If no, Provid	the reporting entity received any endowment or gift from contracting hospitals, rrned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other and their dependents against the risk of insolvency including ith providers to continue rendering services, and any other rent ate basis? 8.1 Number of providers at start of reporting year 8.2 Number of providers at end of reporting year	Yes [X] No [Yes [] No [X Yes [X] No [.\$
2 1 2 3 1 2	retui If yes Have depe If not Doess If no, Maxir Desc hold agre The C Doess If no, Provid	the reporting entity received any endowment or gift from contracting hospitals, rned when, as and if the earnings of the reporting entity permits?	physicians, dentists, or others that is agreed will be is', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other and their dependents against the risk of insolvency including ith providers to continue rendering services, and any other rent ate basis? 8.1 Number of providers at start of reporting year 8.2 Number of providers at end of reporting year	Yes [X] No [Yes [] No [X Yes [X] No [.\$

GENERAL INTERROGATORIES

10.1	Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in it	s provider contracts?	Yes [] No [X]
10.2	If yes:	10.21 Maximum amount payable bonuses	\$		0
		10.22 Amount actually paid for year bonuses	\$		0
		10.23 Maximum amount payable withholds	\$		0
		10.24 Amount actually paid for year withholds	\$		0
11.1	Is the reporting entity organized as:	11.12 A Medical Group/Staff Model, 11.13 An Individual Practice Association (IPA), or, . 11.14 A Mixed Model (combination of above)?	Yes [Ycs [Yes [] No[)] No[)] No[)	(]
11.2	Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirement	its?	Yes [X] No []
11.3	If yes, show the name of the state requiring such minimum capital and surplus.			New Je	rsey
11.4	If yes, show the amount required.		\$	15,770	,822
11.5	Is this amount included as part of a contingency reserve in stockholder's equity?		Yes [] No [X	1
11.6	If the amount is calculated, show the calculation				
	See Notes to Financial Statement - Note 21, Other Items, C., Other Disclosures.				

12. List service areas in which reporting entity is licensed to operate:

1	
Name of Service Area	
Atlantic, Bergen, Burlington, Camden, Cape May, Cumberland, Essex, Gloucester, Hudson, Hunterdon, Mercer, Middlesex, Monmouth, Morris,	
Ocean, Passaic, Salem, Somerset, Sussex, Union and Warren	

13.1	Do you act as a custodian for health savings accounts?	Ye	es []	No	[X]]
13.2	If yes, please provide the amount of custodial funds held as of the reporting date	\$					0
13.3	Do you act as an administrator for health savings accounts?	Ye	es []	No	[X]]
13.4	If yes, please provide the balance of funds administered as of the reporting date.	\$					<u>0</u>
	Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?]	No []	N	/A [X]

1	2	3	4	Assets Supporting Reserve Credit		
	NAIC			5	6	7
	Company	Domiciliary	Reserve	Letters of	Trust	
Company Name	Code	Jurisdiction	Credit	Credit	Agreements	Other

15. Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1 Direct Premium Written	\$ 0
15.2 Total Incurred Claims	\$ 0
15.3 Number of Covered Lives	 0

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurarantee)
Universal Life (with or without secondary gurarantee)
Variable Universal Life (with or without secondary gurarantee)

28.1

		1 2017	2 2016	3 2015	4 2014	5 2013
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)		119,562,326		5,004,332	
2.	Total liabilities (Page 3, Line 24)					
3.	Statutory minimum capital and surplus requirement	15,770,822	9,038,188	7,321,166	0	
4.	Total capital and surplus (Page 3, Line 33)	contract rest to a strategy of		AND A REPORT OF A REPORT OF A	5,003,444	
	Income Statement (Page 4)					
5.	Total revenues (Line 8)				0	
6.	Total medical and hospital expenses (Line 18)				0	
7.	Claims adjustment expenses (Line 20)				0	
8.	Total administrative expenses (Line 21)	16,966,129		4,248,288		
9.	Net underwriting gain (loss) (Line 24)			(4,045,344)	(164)	
0.	Net investment gain (loss) (Line 27)			(78,585)	3,980	
1.	Total other income (Lines 28 plus 29)			0	0	
2.	Net income or (loss) (Line 32)				3,122	
	Cash Flow (Page 6)					
3.	Net cash from operations (Line 11)	27.415.429	48,559,906		0	
0.	Risk-Based Capital Analysis					
4.	Total adjusted capital	36 287 613	35 333 748	12 290 501	0	
4 . 5.	Authorized control level risk-based capital					
5.	Enrollment (Exhibit 1)					
6.	Total members at end of period (Column 5, Line 7)	45 655		18 578	0	
	Total members months (Column 6, Line 7)			136,592	0	
17.	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
8.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)					1
9.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)				0.0	
0.	Cost containment expenses	3.4	3.3			
1.	Other claims adjustment expenses	1.7	2.1			
2.	Total underwriting deductions (Line 23)					
3.	Total underwriting gain (loss) (Line 24)			(5.9)		
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
4.	Total claims incurred for prior years (Line 13, Col. 5)	23,906,860		0	0	
5.				0	0	
	Investments In Parent, Subsidiaries and Affiliates					
6.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	
7.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	
8.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	
9.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	
D.	Affiliated mortgage loans on real estate		0	0	0	
1.	All other affiliated	0	0	0	0	
2.	Total of above Lines 26 to 31				0	
3.	Total investment in parent included in Lines 26 to 31 above.	0	0	0	0	
-	If a party to a merger, have the two most recent years of t	hie exhibit been restated	-	-	-	

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories 1 **Direct Business Only** 2 3 4 5 6 8 9 Federal Employees Health Life & Annuity Benefits Accident & Premiums & Property/ Total Active Health Medicare Medicaid Plan Other Casualty Columns 2 Deposit-Type States, etc Statu Premiums Title XVIII Title XIX Premiums Through 7 nsideration Premiums Contracts Alabama 0 0 1. AL N 0 0 0 0 0 0 Alaska 2. AK N 0 0 0 0 0 0 0 0 3. Arizona AZ 0 0 .0 ۵ 0 0 .0 0 N 4. Arkansas 0 0 0 0 0 0 AR N 0 .0 5. California CA N 0 0 0 0 0 0 0 0 6. Colorado 0 .0 CO _N .0 _0 0 .0 _0 0 7. Connecticut .O 0 D D ۵ D N D 0 СТ 8. Delaware DE Ν 0 0 0 0 0 0 0 0 District of Columbia 9. DC Ν 0 0 0 0 0 0 0 0 10. Florida D 0. 0 D D D. 0 D N FL 11. Georgia Ν 0 0 0 0 0 0 0 0 GA 12. Hawaii н Ν 0 0 0 0 0 0 0 0 13. Idaho .0 0. 0 O. .0 0 ID _N. .0 .0 14. Illinois Ω <u>0</u> .0 ۵ ۵ D .0 D N IL 15. Indiana IN Ν 0 0 0 0 0 0 0 0 16. lowa_ IA Ν 0 0 0 0 0 0 0 0 17. Kansas 0 0 .0 0. O 0. .0 0 KS N 18. Kentucky 0. 0. 0 0 0 .0 0 0 KY Ν 19. Louisiana LA Ν 0 0 0 0 0 0 0 0 20. Maine .0 D ME _N .0 .O 0 .0 0_ 0 21. Maryland D _N 0 0. 0 D ۵ ۵. .0 MD 22 Massachusetts Ν 0 0 0 0 0 0 0 0 MA 23. Michigan М N 0 .0 .0 0_ .0 0. .0 0 24. Minnesota .0 D D ۵. .0 D .0 .0 MN _N Mississippi 25 D D .0 D 0 0 0 0 MS Ν 26. Missouri MO Ν 0 0 0 0 0 0 0 0 27. Montana 0 0 MT _N 0 0. 0 .0 0 0 28. Nebraska 0 0 0 D ۵ D 0 ۵ NE 29 Nevada NV Ν 0 ٥ 0 0 0 0 0 0 New Hampshire 30. NH _N 0 .0 .0 0_ 0 0. .0 0 New Jersey 31. 0 0 242.409.193 D D .0 242,409,193 D NJ 32. New Mexico 0 0. 0 0 0 .0 0 NM Ν 0 33. New York NY Ν 0 0 0 0 0 0 0 0 34. North Carolina .0 D. D NC N .0 0. .D 0. D 35 North Dakota .0 D O D N 0 .0 .O .0 ND 36 Ohio Ν 0 0 0 0 0 0 0 0 OH 37. Oklahoma OK N 0 .0 0 .0 0 .0 0 0 38. Oregon_ 0 .0 .0 D 0 0. .0 0 OR _N 39 Pennsylvania 0 0 0 0 0 0 0 0 PA Ν 40. Rhode Island RI N 0 .0 0 0 0 0 0 0 41. South Carolina .0 0. .0 0_ 0 0. 0 SC _N .0 South Dakota 42 D D SD Ν 0 0 0 0 0 0 43. Tennessee ΤN Ν 0 0 0 0 0 0 0 0 44. Texas ΤХ _N .0 .0 0 0 0 0 0 0 45. Utah .O 0. 0 0. UT N D .D .0 D 46 Vermont VT 0 <u>0</u> .0 D 0 O. .0 D Ν 47. Virginia VA Ν 0 0 0 0 0 0 0 0 48. Washington WA .0 .0 _N 0 0 0 .0 0 0 49. West Virginia 0 .0 wv N .0 D 0 0. .0 0 50. Wisconsin wı Ν 0 0 0 0 0 0 0 0 51. Wyoming WY Ν 0 0 0 0 0 0 0 0 American Samoa 52. 0 <u>0</u> 0 0 0 0. 0 N .0 AS 53 Guam 0 .O .0 D D D D GU Ν 0 54. Puerto Rico Ν 0 0 0 0 0 0 0 0 PR 55. U.S. Virgin Islands ... VI _N 0 .0 0 0 0 0 0 0 56. Northern Mariana MP 0 0 0 0 0 0 0 0 N Islands . 57. Canada CAN 0 0 0 0 0 0 0 0 Ν 58. Aggregate other от XXX 0 0 0 0 0 0 0 0 Subtotal 59. 242,409,193 242,409,193 XXX 0 0 0 0 0 0 60. Reporting entity contributions for Employee 0 0 0 0 0 Benefit Plans XXX 0 0 0 242,409,193 0 0 242,409,193 0 61 Total (Direct Business) 0 0 0 a) DETAILS OF WRITE-INS 58001. XXX 58002 XXX 58003 XXX Summary of remaining write-ins for Line 58 from 58998. overflow page _____ Totals (Lines 58001 through .0 0 .0 .0 0 0 0 .0 XXX 58999. 58003 plus 58998)(Line 58 XXX 0 0 0 0 0 0 0 0 above)

(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. Explanation of basis of allocation by states, premiums by state, etc.

All Premiums are written within the State of New Jersey (a) Insert the number of L responses except for Canada and Other Alien.

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



*Aetna Global Benefits Indonesia is 80% owned by Aetna Global Benefits (Bermuda) Limited and 20% is owned by Suhatsyah Rivai, Aetna's Nominee. **Aetna Global Benefits (Middle East) LLC is 49% owned by Aetna Global Benefits (Bermuda) Limited and 51% is owned by Euro Gulf LLC, Aetna's Nominee.

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

****PT Asuransi Aetna Asia is 77% owned by Aetna International Inc. and 23% owned by PT Asuransi Central Asia.

and total 1% owned by Aetna Global Benefits (Bermuda) Limited (1 Share); Mr. Sansanapongpherchar (1 Share); Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share); Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 ******* Minor Health Entreprise Co, Ltd is 1 share owned by Aetna Global Benefits (Bermuda) Ltd

PART 1 - ORGANIZATIONAL CHART



PART 1 - ORGANIZATIONAL CHART



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

PART 1 - ORGANIZATIONAL CHART



*100% owned through Aetna's nominees

PART 1 - ORGANIZATIONAL CHART



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

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

*** Texas Health + Aetna Health Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Texas Health Resources.

**** Texas Health + Aetna Health Plan Inc. became a direct subsidiary of Texas Health + Aetna Health Insurance Company February 2017.

***** Banner Health and Aetna Health Insurance Holding Company LLC is 51% owned by Aetna ACO Holdings Inc. and 49% owned by Banner Health.

****** Allina Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Allina Health.

*******Sutter Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Sutter Health Plan Products Organization, LLC.





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

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

PART 1 - ORGANIZATIONAL CHART



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

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

*** Texas Health + Aetna Health Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Texas Health Resources.

**** Texas Health + Aetna Health Plan Inc. became a direct subsidiary of Texas Health + Aetna Health Insurance Company February 2017.

***** Banner Health and Aetna Health Insurance Holding Company LLC is 51% owned by Aetna ACO Holdings Inc. and 49% owned by Banner Health.

****** Allina Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Allina Health.

******Sutter Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Sutter Health Plan Products Organization, LLC.

PART 1 - ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) OVERFLOW PAGE FOR WRITE-INS



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HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2017

NAIC Gr	pup Code0001	0001NAI	C Company Co	de <u>15611</u> Employ	yer's ID Number4	6-3203088				
Organized under the Laws of	(Current) Ne	(Prior) w Jersey	,	, State of Domicile or Por	t of Entry	NJ				
Country of Domicile			United State	s of America						
Licensed as business type:		н	ealth Maintenar	nce Organization						
Is HMO Federally Qualified? Ye				Y						
Incorporated/Organized		13		Commenced Busine	\$\$	01/01/2015				
				Commenced Busine						
Statutory Home Office		May, Suite 400 I Number)		(Princeton , NJ, U City or Town, State, Coun					
Main Administrative Office		3	Independence	Way, Suite 400						
Р	rinceton, NJ, US 08540		(Street and	i Number)	855-232-35	96				
	vn, State, Country and 2				(Area Code) (Telepho					
Mali Address	1425 Union Meeting				Blue Bell , PA, US					
	(Street and Number of	r P.O. Box)		(0	City or Town, State, Coun	try and Zip Code)				
Primary Location of Books and R	ecords		Independence (Street and	e Way, Suite 400 d Number)						
	rinceton , NJ, US 08540 wn, State, Country and 2			· · · · ·	855-232-35 (Area Code) (Telepho					
internet Website Address				ine com	(vica obde) (relepine					
	<u></u>			malcom	0.15.75					
Statutory Statement Contact	Stev	(Name)	te			'5-6508 lephone Number)				
Aetna	HMOReporting@aetna. (E-mail Address)	com			860-262-77 (FAX Numb					
	(OFFIC	TERS	(********					
Chief Executive Officer and	President	Laurie Ann Bruba			al Officer and Controller	Steven Matthew Conte				
Vice President and	Secretary	Robert Mark Kes	sler							
Debra Jean Bacon, Chief	Financial Officer #			IER or Investment Officer	John Patrick Marone	ey, Vice President and Treasurer #				
Debra Jean	Bacon	DI	RECTORS O	R TRUSTEES	Mary	Louise Elizabeth Osborne				
above, all of the herein described this statement, together with relat of the condition and affairs of the completed in accordance with the (2) that state rules or regulations belief, respectively. Furthermore	assets were the absolu ed exhibits, schedules a said reporting entity as a NAIC Annual Stateme require differences in r e, the scope of this attest ormatting differences du	te property of the nd explanations i of the reporting int instructions ar eporting not relation station by the des	said reporting therein contain period stated a ed Accounting F ed to accountli scribed officers	entity, free and clear froi ed, annexed or referred t bove, and of its income Practices and Procedure ng practices and procedi also includes the relate	m any liens or claims the: o, is a full and true staten and deductions therefrom s manual except to the e urres, according to the be d corresponding electron.	nd that on the reporting period state reon, except as herein stated, and the nent of all the assets and liabilities ar for the period ended, and have bee xtent that: (1) state law may differ, o st of their information, knowledge ar ic filing with the NAIC, when require asted by various regulators in lieu of manual data and the state of the state of the state of the manual data and the state of the state o				
Laurie Ann Brub	aker	·	Robert Mi	ark Kessler		Steven Matthew Conte				
Chief Executive Officer a	ind President		Vice Presiden	t and Secretary	Principa	Financial Officer and Controller				
State of Arizona County of Maricopa		State of County of			State of F County of	-				
Subscribed and sworn to before r	ne this	Subscribed	and sworn to b	efore me this	Subscribed an	d sworn to before me this				
2 day of Ebruan	2018	🛁 day	of Febru	Wary , 2018	26th day of	February, 2018				
mariaho	0	1	Dava.	Alana	1					
NOTARY PUBLIC (Seal)	And and a second	NOTARY	JBLIC (Seal)	VANNA	NOTARY PUE	BLIC (Seal)				
			, <u>, , , , , , , , , , , , , , , , , , </u>							
JANESN N Notary Public, S Maricopa My Commiss February	tate of Arizona County ion Expires		otary Public. Maricos My Commis	NEWHOUSE state of Arizona pa County ssion Expires y 08, 2019	N KIM E. Whitpain Tow	ALTH OF PENNSYLVANIA IOTARIAL SEAL ROTH, Notary Public mship, Montgomery County on Expires April 25, 2021				
	SUMMARY INVE	STIVIEI	1 30	Admitted Assets as Reported						
----	--	---	--------------------	-----------------------------	--	--------------------------------------	-----------------	--	--	--
		Gross Investm	ent Holdings		in the Annua		_			
	Investment Categories	1 Amount	2 Percentage	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total (Col. 3 + 4) Amount	6 Percentage			
1.	Bonds:	Amount	reroontage	Amount	Anodin	Vinodin	reroontage			
	1.1 U.S. treasury securities		30.283		0	39,013,908				
	1.2 U.S. government agency obligations (excluding mortgage-backed securities):	taka kendulan kendula	100							
	1.21 Issued by U.S. government agencies	0	0.000	0	0	0	0.000			
	1.22 Issued by U.S. government sponsored agencies	0	0.000	۵	0	۵	0.0.000			
	 Non-U.S. government (including Canada, excluding mortgaged-backed securities) Securities issued by states, territories, and possessions and political 	1 <mark>,998,0</mark> 47	1.551	1,998,047	0	1,998,047	1.551			
	subdivisions in the U.S. : 1.41 States, territories and possessions general obligations	<u>9,681,706</u>		<u>9,681,706</u>	0	<u>9,681,706</u>				
	1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations	1,507,178	1.170	1,507, 1 78		1,507,178	1.170			
	1.43 Revenue and assessment obligations	0	0.000	0	0	0	0.000			
	1.44 Industrial development and similar obligations	0	0.000	۵۵	0	0				
	 Mortgage-backed securities (includes residential and commercial MBS): 									
	1.51 Pass-through securities:	0	0.000	0			0.000			
	1.511 Issued or guaranteed by GNMA		0.000	00	0 0	00	0.000			
	1.512 Issued or guaranteed by FNMA and FHLMC 1.513 All other		0.000		0	1,036,440	0.000			
	1.52 CMOs and REMICs:									
	1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA	0		0	0	0				
	1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by									
	agencies shown in Line 1.521	0 	0.000 	0 497 662	0		0.000			
2.	Other debt and other fixed income securities (excluding short-term):	9,407,000	1.304		V	9,407,003				
۷.	 2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid 									
	securities)									
	2.2 Unaffiliated non-U.S. securities (including Canada)		<u>5.82</u> 0	7,498,490	0	7,498,490	5.820			
	2.3 Affiliated securities	0	0.000	0	0	0	0.000			
3.	Equity interests:									
	3.1 Investments in mutual funds	0	0.000	0	0	۵	0.000			
	3.2 Preferred stocks:	0	0.000	0	0	0	0.000			
	3.21 Affiliated	<u>u</u>	0.000	U	0	0	0.000			
	3.3 Publicly traded equity securities (excluding preferred stocks):			y						
	3.31 Affiliated	0		0	0	0				
	3.32 Unaffiliated	0	0.000	0	0	0				
	3.4 Other equity securities:									
	3.41 Affiliated	0	0.000	۵۵	0	۵				
	3.42 Unaffiliated	0	0.000	۵	0	۵	0.000			
	3.5 Other equity interests including tangible personal property under lease:									
	3.51 Affiliated	0	0.000	0	0	0	0.000			
	3.52 Unaffiliated	0	0.000	۵0	0	۵	0.000			
4.	Mortgage loans:	0	0.000	0	0	0	0.000			
	4.1 Construction and land development 4.2 Agricultural	<u>0</u>	0.000 0.000	0 0	0 0	0 0	0.000			
	•	0	0.000	0	0	0	0.000			
	4.4 Multifamily residential properties	0	0.000	0		و 0				
	4.5 Commercial loans	0	0.000	0	0	0	0.000			
	4.6 Mezzanine real estate loans	0	0.000	0	0	0	0.000			
5.	Real estate investments:									
	5.1 Property occupied by company	0	0.000	۵	0	۵	0.000			
	5.2 Property held for production of income (including \$0 of property acquired in satisfaction of									
	debt)	0	0.000	0	0	0	0.000			
	5.3 Property held for sale (including \$0									
	property acquired in satisfaction of debt)	0	<mark>0.000</mark>	0	0	0	0.000			
6.	Contract loans	0	<mark>0.000</mark>	0	0	0	0.000			
7.	Derivatives	0	0.000	0	0	0	0.000			
8.	Receivables for securities	0	0.000	0	0	0				
	Securities Londing (Line 10) Accest Page reinvested colleteral)	. 0		0	XXX	XXX	XXX			
9.				24 602 257	0	24 602 257	10 167			
	Cash, cash equivalents and short-term investments Other invested assets		19.167 0.000	24,692,257	0 0	24,692,257	19.167 0.000			

Schedule A - Verification - Real Estate

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Schedule B - Verification - Mortgage Loans

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year
2.	Cost of acquired:
	2.1 Actual cost at time of acquisition (Part 2, Column 8)
	2.2 Additional investment made after acquisition (Part 2, Column 9)
3.	Capitalized deferred interest and other:
	3.1 Totals, Part 1, Column 16
	3.2 Totals, Part 3, Column 12
4.	Accrual of discount
5.	Unrealized valuation increase (decrease):
	5.1 Totals, Part 1, Column 13
	5.2 Totals, Part 3, Column 9
6.	Total gain (loss) on disposals, Part 3, Column 19
7.	Deduct amounts received on disposals, Part 3, Column 16
8.	Deduct amortization of premium and depreciation
9.	Total foreign exchange change in book/adjusted carrying value:
	9.1 Totals, Part 1, Column 17
	9.2 Totals, Part 3, Column 14
10.	Deduct current year's other than temporary impairment recognized:
	10.1 Totals, Part 1, Column 15
	10.2 Totals, Part 3, Column 11
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)
12.	Deduct total nonadmitted amounts
13.	Statement value at end of current period (Line 11 minus Line 12)

SCHEDULE D - VERIFICATION BETWEEN YEARS

Bonds and Stocks

Dealth from the prime by December 24 of endowing	65 700 770
Accrual of discount	
Unrealized valuation increase (decrease):	
4.1. Part 1, Column 12	
4.2. Part 2, Section 1, Column 150	
4.3. Part 2, Section 2, Column 130	
4.4. Part 4, Column 11	0
Total gain (loss) on disposals, Part 4, Column 19	
Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	
Deduct amortization of premium	
Total foreign exchange change in book/adjusted carrying value:	
8.1. Part 1, Column 150	
8.2. Part 2, Section 1, Column 190	
8.3. Part 2, Section 2, Column 160	
8.4. Part 4, Column 15	0
Deduct current year's other than temporary impairment recognized:	
9.1. Part 1, Column 14	
9.2. Part 2, Section 1, Column 170	
9.3. Part 2, Section 2, Column 140	
9.4. Part 4, Column 13	
Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	
Deduct total nonadmitted amounts	0
Statement value at end of current period (Line 10 minus Line 11)	
	4.1. Part 1, Column 12. 0 4.2. Part 2, Section 1, Column 15. 0 4.3. Part 2, Section 2, Column 13. 0 4.4. Part 4, Column 11. 0 Total gain (loss) on disposals, Part 4, Column 19. 0 Deduction consideration for bonds and stocks disposed of, Part 4, Column 7. 0 Deduct amortization of premium 0 Total foreign exchange change in book/adjusted carrying value: 0 8.1. Part 1, Column 15. 0 8.2. Part 2, Section 2, Column 16. 0 8.3. Part 2, Section 2, Column 16. 0 8.4. Part 4, Column 15. 0 Deduct current year's other than temporary impairment recognized: 0 9.1. Part 1, Column 14. 308,084 9.2. Part 2, Section 1, Column 17. 0 9.3. Part 2, Section 1, Column 17. 0 9.4. Part 4, Column 13. 668 Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) 668 Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) 668

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) **SCHEDULE D - SUMMARY BY COUNTRY**

	00	Long-Term Bonds and St				
n	escriptio		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS	1.	United States		38,949,543		39,450,000
Governments	2.	Canada		0	0	0
(Including all obligations guaranteed	3.	Other Countries	1,998,047	1,957,370	1,996,600	2,000,000
by governments)	4.	Totals	41,011,956	40,906,913	40,868,147	41,450,000
U.S. States, Territories and Possessions						
(Direct and guaranteed)	5.	Totals	9,681,706	9,943,826	9,840,385	8,440,000
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6.	Totals	1,507,178	1,573,091	1,529,731	1,355,000
U.S. Special Revenue and Special Assessment Obligations and all Non- Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7.	Totals	0	0	0	0
	8.	United States				
Industrial and Miscellaneous, SVO	8. 9.	Canada		1,008,685		
Identified Funds and Hybrid	9. 10.	Other Countries	6,498,693	6,464,582	6,497,795	6,500,000
Securities (unaffiliated)	11.	Totals	51,936,685	52,188,940	51,839,333	52,250,000
Parent, Subsidiaries and Affiliates	12.	Totals	0	0	0	0
	13.	Total Bonds	104, 137, 525	104,612,770	104,077,596	103,495,000
PREFERRED STOCKS	14.	United States	0	0	0	,
Industrial and Miscellaneous	15.	Canada	0	0	0	
(unaffiliated)	16.	Other Countries	0	0	0	
	17.	Totals	0	0	0	
Parent, Subsidiaries and Affiliates	18.	Totals	0	0	0	
	19.	Total Preferred Stocks	0	0	0	
COMMON STOCKS	20.	United States	0	0	0	
Industrial and Miscellaneous	21.	Canada	0	0	0	
(unaffiliated)	22.	Other Countries	0	0	0	
	23.	Totals	0	0	0	
Parent, Subsidiaries and Affiliates	24.	Totals	0	0	0	
	25.	Total Common Stocks	0	0	0	
	26.	Total Stocks	0	0	0	
	27.	Total Bonds and Stocks	104,137,525	104,612,770	104,077,596	

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SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

8	Quality and	Maturity Distributi	on of All Donus O	when December a	n, al DUUN Aujus	t Book/Adjusted Carrying values by Major Types of Issues and NAIC Designation				10	1	
NAIC Designation	1 1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	5 Over 20 Years	No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 10.7	Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments			and the second					I CARL IN THE OWNER			1 Contractor	
1.1 NAIC 1			0	0	0	XXX						C
1.2 NAIC 2	0	0	0	0	0	XXX	0		0		0	C
1.3 NAIC 3	0	0	0	0	0	XXX	0		0		0	(C
1.4 NAIC 4	0	0	0	0	0	XXX	0		0		0	(C
1.5 NAIC 5	0	0	0	0	0	XXX	0		0		0	/C
1.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(C
1.7 Totals	20,401,686	18,612,222	0	0	0	XXX	39,013,908	31.2	32,237,071	29.6	39,013,908	C
2. All Other Governments												
2.1 NAIC 1	0	1,998,047	0	0	0	XXX	1,998,047		1,996,925		1,998,047	
2.2 NAIC 2	0	0	0	0	0	XXX	0		0		0	(C
2.3 NAIC 3	0	0	0	0	0	XXX	0		0		0	((
2.4 NAIC 4	0	0	0	0	0	XXX	0		0		0	/C
2.5 NAIC 5	0	0	0	0	0	XXX	0		0		0	(C
2.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	/ C
2.7 Totals	0	1,998,047	0	0	0	XXX	1,998,047	1.6	1,996,925	1.8	1,998,047	C
3. U.S. States, Territories and Possessions etc.,												
Guaranteed												
3.1 NAIC 1	0	0		0	0	XXX	8,138,616	<u>6.5</u>	0			
3.2 NAIC 2	0		0	0	0	XXX	1,543,090		0		1,543,090	(Q
3.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	<u></u> 0.0	0	(C
3.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(Q
3.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(C
3.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	/ C
3.7 Totals	0	1,543,090	8,138,616	0	0	XXX	9,681,706	7.7	0	0.0	9,681,706	C C
4. U.S. Political Subdivisions of States, Territories and												1
Possessions, Guaranteed												
4.1 NAIC 1	0	0	1,350,554		0		1,507,178	1.2	9,061,257	8.3	1,507,178	۰ 0
4.2 NAIC 2	0	0	0	0	0	XXX	0	<u>0.0</u>	0	<u>0.0</u>	0	(0
4.3 NAIC 3	0	0	0	0	0	XXX	0	<u>0</u> .0	0	<u>0.0</u>	0	·0
4.4 NAIC 4	0	0	0	0	0	XXX	0	<u>0</u> .0	0	<u>0.0</u>	0	(0
4.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	C
4.6 NAIC 6	. 0	0	0	0	0	XXX	0	0.0	0	0.0	0	(C
4.7 Totals	0	0	1,350,554	156,624	0	XXX	1,507,178	1.2	9,061,257	8.3	1,507,178	0
5. U.S. Special Revenue & Special Assessment												
Obligations, etc., Non-Guaranteed	•	0	0	0	0	VVV		0.0	0	0.0		
5.1 NAIC 1	0	0	0	U	0		U	0.0	0	0.0	0	
5.2 NAIC 2	0	0	0	U	0	XXX XXX	U	0.0	0	0.0	0	
	0	0	0	U	0	XXX	U	0.0	0	0.0	0	
5.4 NAIC 4	0	0	U	0	0	XXX	0 ^	0.0	0	0.0	0	[0
5.5 NAIC 5	0	0	0	U	0	XXX	U	0.0	0	0.0	0	. [}
5.6 NAIC 6	. 0	0	0	0	0		0		0		0	
5.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	(

SCHEDULE D - PART 1A - SECTION 1 (Continued) Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	1	2	3	4	5	6	7	8	9	10	11	12
NAIC Designation	1 Year or Less	Over 1 Year	Over 5 Years Through 10 Years	Over 10 Years	Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 10.7	Total from Col. 7 Prior Year	% From Col. 8 Prior Year	Total Publicly Traded	Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)	I Year or Less	I nrough 5 Years	Inrough TU Years	Inrough 20 Years	Over 20 Years	Date	Total Current Year	Line TU.7	Prior Year	Prior Year	Traded	Placed (a)
6.1 NAIC 1	21,516,465		4,837,795	0	0	xxx	52,860,376	42.2			35,310,400	17.549.976
6.2 NAIC 2		17,601,719	2,498,711	0	0	XXX	20,100,430		6,099,376	5.6	16,612,193	3,488,237
6.3 NAIC 3	0		2,430,711	0	0	XXX		0.0		0.0		
6.4 NAIC 4		0	0	0	0	XXX		0.0	0	0.0	0	0
6.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.7 Totals	21.516.465	44,107,835	7,336,506	0	0	XXX	72,960,806	58.3	65,737,112	60.3	51,922,593	21,038,213
7. Hybrid Securities	21,010,100	11,101,000	1,000,000	Ŭ	•		12,000,000	00.0	00,101,112	0.0	01,012,000	21,000,210
7.1 NAIC 1	0	0	0	0	0		0	0.0	0	0.0	0	0
7.2 NAIC 2	0	0	0	0	0	XXX		0.0	0	0.0	0	0
7.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
8.1 NAIC 1	0	0	0	.0	0	XXX	0	0.0	0	0.0	0	0
8.2 NAIC 2	0	0	0	0	0	XXX			0	.0.0	0	0
8.3 NAIC 3	0	0	0	.0	0	XXX	0	0.0	0	0.0	0	0
8.4 NAIC 4	0	0	0	0	0	XXX			0	.0.0	0	0
8.5 NAIC 5	0	0	0	0	0	XXX	0		0		0	0
8.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX	0	0		0		0	0
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX	0	0		0	0.0	0	0
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX	0	0		0	0.0	0	0
9.4 NAIC 4			XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX	0	0		0	0.0	0	0
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

	duality and	Waturity Distribut	ion of All Donus C	A A	31, at BOOK/Adjuste	cu barrying valu		011050005 010 14/	to Designations	10	44	10
NAIC Designation	1 Year or Less	Over 1 Year Through 5 Years	Over 5 Years Through 10 Years	Over 10 Years Through 20 Years	o Over 20 Years	No Maturity Date	Total Current Year	Col. 7 as a % of Line 10.7	Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
10. Total Bonds Current Year								1.000				
10.1 NAIC 1	(d)41,918,151	47,116,385		156,624	0	0	103,518,125		XXX	XXX		
10.2 NAIC 2	(d)0	19,144,809	2,498,711	0	0	0			XXX	XXX		3,488,237
10.3 NAIC 3	(d)0	0	0	0	0	0	0		XXX	XXX	0	0
10.4 NAIC 4	(d)0	0	0	0	0	0	0		XXX	XXX	0	0
10.5 NAIC 5	(d)0	0	0	0	0	0	(c)0		XXX	XXX	0	0
10.6 NAIC 6	(d) 0	0	0	0	0	0	(c) 0	0.0	XXX	XXX	0	0
10.7 Totals	41.918.151				0	0	(b)125, 161,645		XXX	XXX		
10.8 Line 10.7 as a % of Col. 7	33.5	52.9		0.1	0.0	0.0		XXX	XXX	XXX	83.2	16.8
11. Total Bonds Prior Year								7000	7000	7000		
11.1 NAIC 1	44,017,931	45,035,126	13,879,932	0	0	0	XXX	XXX	102,932,989	94.4	64,273,603	
11.2 NAIC 2	0	4,975,988		0	0	0	XXX	XXX	6,099,376	5.6	5,100,547	998,829
11.3 NAIC 3	0	1,010,000	1, 120,000	0	0	00	XXX	XXX	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.0		000,020
11.4 NAIC 4	0	0	0	0	0	0	XXX	XXX	0	0.0	0	0
11.5 NAIC 5	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.6 NAIC 6	0	0	0	0	0	0	XXX	XXX	(c) 0	0.0	0	0
11.7 Totals	44,017,931	50,011,114	15,003,320	0	0	0	XXX	XXX	(b)109,032,365	100.0	69,374,150	
11.8 Line 11.7 as a % of Col. 9	40.4	45.9			0.0	0.0		XXX	100.0	XXX	63.6	36.4
12. Total Publicly Traded Bonds	1.01	10.0	10.0	0.0	0.0	0.0	~~~	~~~~	100.0	~~~	00.0	00.4
12.1 NAIC 1				156,624	0	0	85,968,149		64,273,603	58.9		XXX
12.2 NAIC 2	20,007,000	15,656,572	2,498,711	150,024	0	00	18,155,283	14.5	5,100,547	4.7	18,155,283	
12.3 NAIC 3	0	10,000,072		0	0	00	10, 100, 200	0.0		0.0		XXX
12.4 NAIC 4	0	0	0	0	0	00	0	0.0	0	0.0	0	XXX
12.5 NAIC 5	0	0	0	0	0	0	0	0.0	0	0.0	0	XXX
12.6 NAIC 6	0	0	0		0		0	0.0	0	0.0	0	XXX
12.7 Totals		60,273,296			0	0		83.2		63.6		
12.8 Line 12.7 as a % of Col. 7	25.8	57.9			0.0	0.0	100.0	XXX	05,574,150	03.0	100.0	XXX
12.9 Line 12.7 as a % of Col. 7	ZJ.0											
Section 10	21.5	48.2	13.4	0.1	0.0	0.0	83.2	XXX	XXX	xxx	83.2	XXX
13. Total Privately Placed Bonds												
13.1 NAIC 1		2,499,661	0	0	0	0					XXX	
13.2 NAIC 2	0	3,488,237	0	0	0	0		2.8		0.9	XXX	3,488,237
13.3 NAIC 3	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.4 NAIC 4	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.5 NAIC 5	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.6 NAIC 6	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
13.7 Totals			0	0	0	0		16.8			XXX	
13.8 Line 13.7 as a % of Col. 7		28.5	0.0	0.0	0.0	0.0		XXX	XXX	XXX	XXX	100.0
13.9 Line 13.7 as a % of Line 10.7, Col. 7,		20.0										
Section 10	12.0	4.8	0.0	0.0	0.0	0.0	16.8	XXX	XXX	XXX	XXX	16.8
a) Includes \$21,038,213 freely tradab	le under SEC Bule 1	44 or qualified for res	ale under SEC Bule	144A								

(b) Includes \$ _____0 current year, \$ _____0 prior year of bonds with Z designations and \$ _____0, current year \$ _____0 prior year of bonds with Z* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z*" means the SVO could not evaluate the obligation because valuation procedures for the security class are under regulatory review.

(c) Includes \$ _____0 current year, \$ _____0 prior year of bonds with 5* designations and \$ ______0, current year \$ _____0 prior year of bonds with 6* designations. "5*" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

SCHEDULE D - PART 1A - SECTION 2 Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

	Ivialu	ny Distribution of		nber 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues								
	1	2	3	4	5	6	7	8	9	10	11 Tatal Datista	12
Distribution by Time	1 Voor or Loos	Over 1 Year	Over 5 Years	Over 10 Years	Over 20 Years	No Maturity Date	Total Current Vers	Col. 7 as a % of	Total from Col. 7	% From Col. 8	Total Publicly Traded	Total Privately Placed
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Total Current Year	Line 10.6	Prior Year	Prior Year	Traded	Placed
1. U.S. Governments	00 101 000	10 0 10 000				1001			00 007 074			
1.1 Issuer Obligations			0	0	0	XXX						0
1.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
1.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
1.5 Totals	20,401,686	18,612,222	0	0	0	XXX	39,013,908	31.2	32,237,071	29.6	39,013,908	0
2. All Other Governments												
2.1 Issuer Obligations	0	1,998,047	0	0	0	XXX	1,998,047	1.6		1.8	1,998,047	0
2.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0		<u>0.0</u>	0	0
2.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	<u>0.0</u>		<u>0.0</u>	0	0
2.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
2.5 Totals	0	1,998,047	0	0	0	XXX	1,998,047	1.6	1,996,925	1.8	1,998,047	0
3. U.S. States, Territories and Possessions, Guaranteed												
3.1 Issuer Obligations	0	1,543,090		0	0	XXX			0			0
3.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	۵.۵	0		0	0
3.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.5 Totals	0	1,543,090	8,138,616	0	0	XXX	9,681,706	7.7	0	0.0	9,681,706	0
4. U.S. Political Subdivisions of States, Territories and												
Possessions, Guaranteed												
4.1 Issuer Obligations	0	0	1,350,554		0	XXX	1,507,178			8.3	1,507,178	0
4.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.5 Totals	0	0	1,350,554	156,624	0	XXX	1,507,178	1.2	9,061,257	8.3	1,507,178	0
5. U.S. Special Revenue & Special Assessment Obligations												
etc., Non-Guaranteed												
5.1 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6. Industrial and Miscellaneous												
6.1 Issuer Obligations			6,300,066	0	0	XXX				57.0		
6.2 Residential Mortgage-Backed Securities		0	0	0	0	XXX	0				0	0
6.3 Commercial Mortgage-Backed Securities	0	0	1,036,440	0	0	XXX	1,036,440					0
6.4 Other Loan-Backed and Structured Securities	492.346	8,995,318	0	0	0	XXX	9,487,664	7.6		2.3	9,487,664	0
6.5 Totals	21,516,465	44, 107, 835	7.336.506	0	0		72,960,806	58.3	65,737,112	60.3	51,922,593	21.038.213
7. Hybrid Securities	21,010,100	.1,107,000	7,000,000	, view of the second se	, v		.2,000,000	00.0	50,101,112	00.0	51,022,000	21,000,210
7.1 Issuer Obligations	٥	0	0	0	0	xxx	0		0		0	0
7.2 Residential Mortgage-Backed Securities	0	0	0	0	U	XXX					0 0	0 ^
7.3 Commercial Mortgage-Backed Securities	0	0	0	0	0 0	XXX	0				0	0 0
7.4 Other Loan-Backed and Structured Securities	0	0	0	0 0	0	XXX	0	0.0		0.0	0	0 0
7.5 Totals	0	0	0	0	0		0	0.0		0.0	0	0
8. Parent, Subsidiaries and Affiliates	0	U	U	U	U	~~~	V	0.0	V	0.0	V	U
	0			_		NVVV			_			~
8.1 Issuer Obligations		0	0	0	0	XXX	0	0.0		0.0	0	0
8.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
8.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
8.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0		0.0	0	0
8.5 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

SCHEDULE D - PART 1A - SECTION 2 (Continued) Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

	Ivialui	ity Distribution of	All Burlus Owned	December 31, a	ber 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues							
	1	2	3	4	5	6	7	8	9	10	11	12
	a series as a series of the series	Over 1 Year	Over 5 Years	Over 10 Years	generative service of the	No Maturity		Col. 7 as a % of	Total from Col. 7	% From Col. 8	Total Publicly	Total Privately
Distribution by Type	1 Year or Less	Through 5 Years	Through 10 Years	Through 20 Years	Over 20 Years	Date	Total Current Year	Line 10.6	Prior Year	Prior Year	Traded	Placed
9. SVO Identified Funds			10.74									
9.1 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0		0	0
9.2 Bond Mutual Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.3 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Total Bonds Current Year												
10.1 Issuer Obligations	41,425,805	57,265,876	15,789,236		0	XXX			XXX			21,038,213
10.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
10.3 Commercial Mortgage-Backed Securities	0	0	1,036,440	0	0	XXX	1,036,440	0.8	XXX	XXX	1,036,440	0
10.4 Other Loan-Backed and Structured Securities			0	0	0	XXX	9,487,664		XXX		9,487,664	0
10.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
10.6 Totals	41,918,151	66,261,194	16,825,676		0	0		100.0	XXX	XXX	104, 123, 432	21,038,213
10.7 Line 10.6 as a % of Col. 7	33.5	52.9	13.4	0.1	0.0	0.0	100.0	XXX	XXX	XXX	83.2	16.8
11. Total Bonds Prior Year												
11.1 Issuer Obligations	43,322,587	48,206,598	13,962,412	0	0	XXX	XXX	XXX	105,491,597			39,658,215
11.2 Residential Mortgage-Backed Securities		0	0	0	0	XXX	XXX	XXX		0.0	0	
11.3 Commercial Mortgage-Backed Securities	0	0	1,040,908	0	0	XXX	XXX	XXX	1,040,908	1.0	1,040,908	0
11.4 Other Loan-Backed and Structured Securities		1,804,516	0	0	0	XXX	XXX	XXX	2,499,860	2.3	2,499,860	0
11.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0	0.0	0	0
11.6 Totals		50,011,114	15,003,320	0	0	0	XXX	XXX	109,032,365			39,658,215
11.7 Line 11.6 as a % of Col. 9	40.4	45.9	13.8	0.0	0.0	0.0	XXX	XXX	100.0	XXX	63.6	36.4
12. Total Publicly Traded Bonds												
12.1 Issuer Obligations	26,375,490	51,277,978	15,789,236	156,624	0	XXX	93, 599, 328	74.8		60.4	93,599,328	XXX
12.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	.0	0.0	0	0.0	0	XXX
12.3 Commercial Mortgage-Backed Securities	0	0	1,036,440	0	0	XXX	1,036,440	0.8	1,040,908		1,036,440	XXX
12.4 Other Loan-Backed and Structured Securities			0	0	0	XXX	9,487,664		2,499,860	2.3		XXX
12.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	XXX
12.6 Totals					0	0						XXX
12.7 Line 12.6 as a % of Col. 7			16.2	0.2	0.0	0.0		XXX	XXX	XXX	100.0	XXX
12.8 Line 12.6 as a % of Line 10.6, Col. 7, Section 10	21.5	48.2	13.4	0.1	0.0	0.0	83.2	XXX	XXX	XXX	83.2	XXX
13. Total Privately Placed Bonds												
13.1 Issuer Obligations	15,050,315		0	0	0	XXX						21,038,213
13.2 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	.0	0.0	0	0.0	XXX	
13.3 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
13.4 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	<mark>0</mark>	XXX	0
13.5 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0		0
13.6 Totals	15,050,315		0	0	0	0					XXX	21,038,213
13.7 Line 13.6 as a % of Col. 7		_28.5	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	XXX	100.0
13.8 Line 13.6 as a % of Line 10.6, Col. 7, Section 10	12.0	4.8	0.0	0.0	0.0	0.0	16.8	XXX	XXX	XXX	XXX	16.8

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4 Other Short-term	5 Investments in Parent,
	Total	Bonds	Mortgage Loans	Investment Assets (a)	Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year			0	0	0
2. Cost of short-term investments acquired			0	0	0
3. Accrual of discount	0	0	0	0	0
4. Unrealized valuation increase (decrease)	0	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0	0
6. Deduct consideration received on disposals			0	0	0
7. Deduct amortization of premium	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0	0
10. Book adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0	0	0	0
11. Deduct total nonadmitted amounts	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards **NONE**

Schedule DB - Part B - Verification - Futures Contracts

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

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

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

ΝΟΝΕ

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

		1	2	3 Money Market	4
		Total	Bonds	Mutual funds	Other (a)
1.	Book/adjusted carrying value, December 31 of prior year	43,321,797	43,321,797	0	0
2.	Cost of cash equivalents acquired				0
3.	Accrual of discount			0	0
4.	Unrealized valuation increase (decrease)	0	0	0	0
5.	Total gain (loss) on disposals			0	0
6.	Deduct consideration received on disposals				0
7.	Deduct amortization of premium	0	0	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)			1,468	0
11.	Deduct total nonadmitted amounts	0	0	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	21,025,588	21,024,120	1,468	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

Schedule A - Part 1 - Real Estate Owned **NONE**

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

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

Schedule B - Part 1 - Mortgage Loans Owned **NONE**

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

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid **NONE**

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned NONE

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

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

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

		-						Ig-Term DOND											-	
1	2	Coo	des	6	7	F	air Value	10	11	Change	e in Book/Adj	usted Carryin	g Value			In	nterest		Da	ites
~		3 4	5	2 2222	8	8	9			12	13	14	15	16	17	18	19	20	21	22
			5			0	3			12	10			10		10	10	20	- 1	
						• •							Total							
													Foreign							
												0	•							
		F										Current	Exchange							
		0										Year's	Change							
		Ŭ									0									
		r				Rate					Current	Other-	in							
		Ce				Used to			Book/	Unrealized	Year's	Than-	Book/				Admitted			Stated
												_								
		0 1				Obtain			Adjusted	Valuation	(Amor-	Temporary	Adjusted		Effective		Amount	Amount		Contractual
CUSIP		d g	Bond	NAIC	Actual	Fair	Fair	Par	Carrying	Increase/	tization)	Impairment	Carrying	Rate	Rate	When	Due and	Received		Maturity
		~ 9																		
Identification	Description	e n	Char	Des.	Cost	Value	Value	Value	Value	(Decrease)	Accretion	Recognized	Value	of	of	Paid	Accrued	During Year	Acquired	Date
912828-28-5	us treasury note/bond	SD.		1			3,438,344		3 464 848	0		.443	0	0.750	1.304	FA				
	us Treasury Note/Bond			4												FA				
					12, 178,670		12, 193, 301		12, 179, 223	U	9, 143			1.625	1.706	FA		0	08/31/2017	
912828-K2-5	us treasury note/bond	SD		1	2,789,063		2,794,977		2,796,026	0			0	0.750	1.105				04/30/2015	04/15/2018
912828-L4-0	us treasury note/bond	SD		1	9,922,270			10,000,000	9,979,556	0	28,765	0	0	1.000	1.265	MS			09/09/2015	09/15/2018
	us treasury note/bond	SD		1	6 918 240	.99.3280				0		0	0		1.278	AO	13, 125			10/15/2018
												05.000				····				
	us treasury note/bond	-+			2,968,025		2,969,275			U	3,225		U	1.375	1.483	JU		20,625	01/23/2017	01/15/2020
912828-XA-3	us treasury note/bond	SD		1						0	1,457	0	0	1.000	1.185	MN		<u>6,</u> 500	06/08/2015	
0100000 Sub	total - Bonds - U.S. Governments - Issue	er Obligatio	one		38.871.547	XXX	38,949,543	39,450,000	39,013,909	٥	106.352	308,084	٥	XXX	XXX	XXX	145, 166	235,625	XXX	XXX
		or obligatio	0110							U			U							
0599999. Tota	al - U.S. Government Bonds				38,871,547	XXX	38,949,543	39,450,000	39,013,909	0	106,352	308,084	0	XXX	XXX	XXX	145, 166	235,625	XXX	XXX
500630-0X-2	KOREA DEV BANK SR UNSECURED	D		1FF	1,996,600	97 8690	1 957 370	2 000 000	1 998 047	0	1 122	0	0	1 375	1 433	MS	8 326	27,500	09/06/2016	09/12/2019
		leaver Ot "	antio																	
0699999. Sub	ototal - Bonds - All Other Governments -	issuer Obli	gations		1,996,600	XXX	1,957,370	2,000,000	1,998,047	0	1,122	0	0	XXX	XXX	XXX	8,326	27,500	XXX	XXX
1099999 Tot	al - All Other Government Bonds				1,996,600	XXX	1.957.370	2,000,000	1,998,047	0	1,122	0	0	XXX	XXX	XXX	8,326	27,500	XXX	XXX
				457									v							
34153Q-AS-5	FLORIDA ST BRD OF EDUCATION REF-CAP OUTLAY-SER E	-+		JFE		120 . 6840				0	(2, 133)	۵	0	5.000	1.910	JD	2,000		10/30/2017	
	FLORIDA ST BRD OF EDUCATION REF CAPITAL OUTLAY SER	1																		
341530-D0-6	C	1 1		1FE	7,700,708	121.2290	7,831,393	6,460,000	7,556,512	0	(133, 112)	0	0		2.480	. D		323,000	11/28/2016	06/01/2025
452152-KZ-3	ILLINOIS STATE GENERAL OBLIGATION UNLTD			2FE	1,555,440	102.2100	1,533,150	1,500,000	1,543,090	0	(12,350)	0	0	5.000	2.484	MS	25,000		08/29/2017	03/01/2019
		-+			1,000,440	102.2100	1,000,100	1,500,000	1,040,090			y			<u></u> <u>2</u> .404	MO	20,000		00/23/2011	
1199999. Sub	total - Bonds - U.S. States, Territories ar	nd Possess	sions - Iss	uer																
Ob	igations				9,840,385	XXX	9,943,826	8,440,000	9,681,706	0	(147,595)	0	0	XXX	XXX	XXX	53,917	372,500	XXX	XXX
										U		U	U							
1799999. Tot	al - U.S. States, Territories and Possessi	ions Bonds	;		9,840,385	XXX	9,943,826	8,440,000	9,681,706	0	(147,595)	0	0	XXX	XXX	XXX	53,917	372,500	XXX	XXX
	EL PASO TEX REF SER A				1.373.294	.117.9370	1,409,347	1, 195,000	1.350.554	0	(21,080)	0	0		2 020	EA				
		-+										v			2.830	n				
	WELD ONTY CO REORG SCH DIST #R-8	. .	-	1FE		102.3400				0		0	0	3.000	3.201	JU		<u>4</u> ,080	01/11/2017	12/01/2030
1899999, Sub	total - Bonds - U.S. Political Subdivision	s - Issuer C	Obligation	s	1,529,731	XXX	1,573,091	1,355,000	1,507,178	0	(20,892)	0	0	XXX	XXX	XXX	22,972	63,830	XXX	XXX
	al - U.S. Political Subdivisions Bonds			-		XXX				-		-	-	XXX	XXX	XXX			XXX	XXX
					1,529,731		1,573,091	1,355,000	1,507,178	0	(20,892)	0	0				22,972	63,830		
3199999. Tota	al - U.S. Special Revenues Bonds				0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
	AT&T CORP SR UNSECURED		1		1,498,860	.101.1150	1,516,719			0		0	0			NR.				
		-+	· [!									L	······							
	ACTIVISION BLIZZARD SR UNSECURED	-+	- 1	2FE				1,000,000		0	136	L0	0	2.300	2.326	MS		11,500	06/05/2017	09/15/2021
02665W-BM-2	AMERICAN HONDA FINANCE SR UNSECURED			1FE	1,997,160		1,990,898		1,997,952	0		0	0			FA				02/14/2020
	ANHEUSER-BUSCH INBEV FIN SR UNSECURED	1	1	1FE	1,000,690	100.5990	1,005,994	1,000,000	1,000,344	0	(180)	0	0	2.650	2.631	FA	11,042		01/27/2016	02/01/2021
037833-0X-4	APPLE INC SR UNSECURED		1		1,499,265	.99.5530		1,500,000	1,499,469	0			0	1.900	1.917	EA		14.092		
		-+								U		L	u			···				
	BROADCOM CRP / CAYMN FI SR UNSECURED		. 1	2FE			3,470,198			0	2,518	۵	0	3.000	3.089	JJ	48,417	51,333	01/11/2017	01/15/2022
14042R-BS-9	CAPITAL ONE NA SR UNSECURED		2					1,000,000	999,973	0		0	0	1.850	1.851	MS	5,550			
14042R-FH-9	CAPITAL ONE NA SR UNSECURED		2	2FE	1,998,800	99,6990	1,993,986	2,000,000	1,999,140	٥	340	٥	٥	2.350	2.371		19,714	23,500	01/26/2017	01/31/2020
20826F-AD-8	CONOCOPHILLIPS COMPANY SR UNSECURED	- 	1	JFE	1,759,240	103.1840	2.063.682		1,802,722	^			<u></u>			LIN.				
			· · · · · · · · · · · · · · · · · · ·							U		L	<u>v</u>			MTV				
24422E-TJ-8	DEERE JOHN CAP CORP SR UNSECURED			1FE	1,496,970		1,476,614	1,500,000	1,498,239	0		٩	0	1.250	1.317	AU	4,271	20,313		10/09/2019
254709-AM-0	DISCOVER FINANCIAL SVS SR UNSECURED		2	2FE	1,498,665	102.4560	1,536,846	1,500,000	1,498,711	0		0	0	4. 100	4.111	FA				
26875P-AL-5	EOG RESOURCES INC SR UNSECURED		1	2FE	973, 110	100.2120	1,002,124	1,000,000	985,015	0	6,320	0	0	2.450	3,144	AO	6,125	24,500	01/29/2016	04/01/2020
31677Q-BG-3	FIFTH THIRD BANCORP SR UNSECURED	T	2	1FE				1,000,000		0	145	<u>م</u>	0			n				
		-+	<u>د</u>							<u>v</u>		·	·							
37045X-AW-6	GENERAL MOTORS FINL CO SR UNSECURED	-+	- []	2FE		101.2860	2,025,726	2,000,000	1,993,392	0	1,332	۵	0	3.450	3.533	AU	15,525	69,000	01/11/2017	04/10/2022
38141G-WC-4	GOLDMAN SACHS GROUP SR UNSECURED		. 1	1FE	1,521,030	100.3920	1,505,883	1,500,000	1,519,828	0	(1,202)	0	0	3.000	2.581	AO			10/13/2017	04/26/2022
459200-JQ-5	IBM CORP SR UNSECURED			1FE	1,997,380	100, 1810	2,003,626	2,000,000	1,997,822	0	442	0	0	2,500	2.528	JJ	21,389	25,000	01/24/2017	01/27/2022
594918-BV-5	MICROSOFT CORP SR UNSECURED			1FE				1,000,000		0		0	0	1.850	1.873	EA				
		-†	·									·	·v			·				
637071-AJ-0	NATIONAL OILWELL INC SR UNSECURED		- []	2FE	1,106,963		1,221,334	1,250,000	1,142,477	0	19,089	۵	0	2.600	4.573	JU				12/01/2022
68389X-BK-0	ORACLE CORP SR UNSECURED		1	1FE		98.3550		1,000,000		0		0	0	1.900	1.935	MS				
878237-AG-1	TECH DATA CORP SR UNSECURED	1	1	2FE	1,497,720	100,5470	1,508,205	1,500,000	1,498,076	0	356	0	0	3.700	3,733	FA	20,967	30,063	01/24/2017	02/15/2022
902494-BF-9	TYSON FOODS INC SR UNSECURED	·†····†	1	2FE				1,000,000		^		<u>^</u>	0			EA				
		-+	·									L	······			FA				
91159H-HL-7	US BANCORP SR UNSECURED		. 2	1FE		100.0150				0	14	L0	0	2.350	2.353	JJ	4,961	11,750	01/26/2016	01/29/2021
91159H-HM-5	US BANCORP SUBORD INATED		2	1FE	1,998,460		1,985,732		1,998,633	0		0	0	3. 100	3.109	A0			04/21/2016	04/27/2026
78012K-ZG-5	Royal Bank of Canada SR Unsecured	A		1FE	999,770	100.8690	1,008,685	1,000,000	999,797	0		0	0	2.750	2.755		11,458	13,826	01/25/2017	02/01/2022
									1,500,404							110				
00913R-AA-4	AIR LIQUIDE FINANCE SR UNSECURED	·+			1,500,705		1,478,336	1,500,000		0	(233)	·	·····.	1.375	1.359	Git		20,625		
606822-AL-8	Mitsubishi ufj fin Grp Sr Unsecured	D		1FE	1,000,000	100.6030	1,006,034	1,000,000	1,000,000	0	D	0	0	2.998	2.998	FA	10,743	14,990		
80281L-AF-2	SANTANDER UK GROUP HLDGS SR UNSECURED	D	2	2FE	1,000,000	101.3420	1,013,424	1,000,000	1,000,000	0	0	0	0	3.571	3.571	JJ	16,962		01/03/2017	01/10/2023
82481L-AA-7	SHIRE ACQ INV IRELAND DA SR UNSECURED	D		2FE	1,998,380	99,0760	1,981,520	2,000,000	1,999,033	ñ	532	0	0	1.900	1.928	MS	10,344	38,000	09/19/2016	09/23/2019
		······										9								
82620K-AH-6	SIEMENS FINANCIERINGSMAT SR UNSECURED	U		1FE				1,000,000		0		0	0	1.300	1.344	MO				

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	1	Code	96	6	7	-	Fair Value	10	11			usted Carryin	a Value			1	nterest		De	ates
	2	3	4	5	, v	1	8	q	10		12	13	14	15	16	17	18	19	20	21	22
		5					°	J. J			12	10	14	Total	10		10	15	20		~~
														Foreign							
			E										Current	Exchange							
													Year's	Change							
			2				Rate					Current	Other-	in							
		0					Used to			Book/	Unrealized	Year's	Than-	Book/				Admitted			Stated
							Obtain				Valuation	(Amor-				Effective		Amount	Amount		
CUSIP		0		Bond	NAIC	Actual	Fair	Fair	Par	Adjusted	Increase/	tization)	Temporary Impairment	Adjusted	Rate	Rate	When	Due and	Amount Received		Contractual Maturity
Identification	Description	d	g	Char				Value		Carrying		,		Carrying	of					Acculted	
	Description	e	n		Des.	Cost	Value	value	Value	Value	(Decrease)	Accretion	Recognized	Value	01	of	Paid	Accrued	During Year	Acquired	Date
	total - Bonds - Industrial and Miscellane	eous (U	Inaffilia	ated) - Is	ssuer		2004								2004	2004	1000			2004	2004
	igations			-		41,313,466	XXX	41,708,700	41,750,000	41,412,582	0	56,519	0	0	XXX	XXX	XXX	342,929	760,075	XXX	XXX
12635F-AT-1	CSAIL COMMERCIAL MORTGAGE TR SERIES 2015-C3 OLASS A4	8		4		1,045,938	104.3020	1,043,022	1,000,000	1,036,440	0	(4,468)	0	0	3.718	3. 165	MON			10/28/2015	08/15/2048
3499999. Sub	total - Bonds - Industrial and Miscellane	eous (U	Inaffili	ated) -																	
Co	mmercial Mortgage-Backed Securities					1,045,938	XXX	1,043,022	1,000,000	1,036,440	0	(4,468)	0	0	XXX	XXX	XXX	3,099	37, 182	XXX	XXX
	ALLY AUTO RECEIVABLES TRUST SERIES 17-1 CLASS A3			4	1FE	1,999,825		1,989,569	2,000,000	1,999,870	0		0	0	1.700	1.709	MON			01/24/2017	06/15/2021
	BANK OF AMERICA CREDIT CARD TR SERIES 2017-A1																				
	CLASS A1			4	1FE	2,499,281		2,487,717	2,500,000		0		0	۵	1.950	1.968					
	CITIBANK OREDIT CARD ISS TRISER 2016-A1 OLASS A1 NISSAN MASTER OWNER TRISER 2016-A OLASS A2			4	1FE 1FF	2,499,866		2,482,889 2,477,043	2,500,000 2,500,000	2,499,891 2,488,441	D		0	۵	1.750 1.540	1.752		5, 104 1,712	41,441 38,499		11/19/2021 06/15/2021
	total - Bonds - Industrial and Miscellane		Inaffili	ated) - C		2,400,507		2,411,040	2,00,000						1.040	1.002	MM1	1,712		01/03/2011	00/ 13/ 2021
	in-Backed and Structured Securities	5003 (0	/ncannin	aiou) - C		9,479,929	XXX	9,437,218	9,500,000	9,487,663	0	7,740	0	0	XXX	XXX	XXX	10,494	144,221	XXX	XXX
3899999. Tot	al - Industrial and Miscellaneous (Unaffi	liated)	Bonds	S		51,839,333	XXX	52, 188, 940	52,250,000	51,936,685	0	59,791	0	0	XXX	XXX	XXX	356,522	941,478	XXX	XXX
4899999. Tot	al - Hybrid Securities					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
5599999. Tot	al - Parent, Subsidiaries and Affiliates B	londs				0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
6099999. Sub	total - SVO Identified Funds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7799999. Tot	al - Issuer Obligations					93,551,729	XXX	94, 132, 530	92,995,000	93,613,422	0	(4,494)	308,084	0	XXX	XXX	XXX	573,310	1,459,530	XXX	XXX
7899999. Tot	al - Residential Mortgage-Backed Secu	rities				0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
7999999. Tot	al - Commercial Mortgage-Backed Secu	urities				1,045,938	XXX	1,043,022	1,000,000	1,036,440	0	(4,468)	0	0	XXX	XXX	XXX	3,099	37, 182	XXX	XXX
	al - Other Loan-Backed and Structured	Securit	ies			9,479,929	XXX	9,437,218	9,500,000	9,487,663	0	7,740	0	0	XXX	XXX	XXX	10,494	144,221	XXX	XXX
	al - SVO Identified Funds					0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
8399999 - To	tal Bonds					104,077,596	XXX	104,612,770	103,495,000	104,137,525	0	(1,222)	308,084	0	XXX	XXX	XXX	586,903	1,640,933	XXX	XXX

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned NONE

Schedule D - Part 2 - Section 2 - Common Stocks Owned NONE

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4	5	6	7	8	9 Paid for Accrued
CUSIP			Date		Number of Shares			Interest and
Identification	Description	Foreign	Acquired	Name of Vendor	of Stock	Actual Cost	Par Value	Dividends
	US TREASURY NOTE/BOND 1.625% 08/31/22	roroign	08/31/2017	MIZUHO SECURITIES USA	OF OLOGIN	12,451,172	12,500,000	561
912828-V3-1	US TREASURY NOTE/BOND 1.375% 01/15/20			JEFFRIES		2 990 625		
0599999, Subt	otal - Bonds - U.S. Governments					15,441,797	15,500,000	1.587
341530-AS-5	FLORIDA ST BRD OF EDUCATION REF-CAP OUTLAY-SER E 5.000% 06/01/26		10/30/2017	PIPER, JAFFRAY & HOPWOOD		584,237	480,000	10,000
452152-KZ-3	ILLINDIS STATE GENERAL OBLIGATION UNLTD 5.000% 03/01/19			BRANCH BANK AND TRUST			1,500,000	
1799999. Subt	otal - Bonds - U.S. States, Territories and Possessions					2,139,677	1,980,000	47,083
949323-JX-8	WELD CNTY CO REORG SCH DIST #R-8 3.000% 12/01/30		01/11/2017	G K Baum				0
	otal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					156,437	160,000	0
	AT&T CORP SR UNSECURED 3.200% 03/01/22			CITIGROUP			1,500,000	0
00507V-AH-2	ACTIVISION BLIZZARD SR UNSECURED 2.300% 09/15/21			Tax Free Exchange			1,000,000	
02007P-AC-7	ALLY AUTO RECEIVABLES TRUST SERIES 17-1 CLASS A3 1.700% 06/15/21		01/24/2017					<u>0</u>
	AMERICAN HONDA FINANCE SR UNSECURED 2.000% 02/14/20			MIZUHO SECURITIES USA			2,000,000	0
	APPLE INC SR UNSECURED 1.900% 02/07/20			CHASE SECURITIES			1,500,000	0
05522R-CW-6	BANK OF AMERICA CREDIT CARD TR SERIES 2017-A1 CLASS A1 1.950% 08/15/22		03/23/2017	BANC AMERICA				0
	BROADCOM CRP / CAYINI FI SR UNSECURED 3.000% 01/15/22			BANC AMERICA		3,485,720		0
	CAPITAL ONE NA SR UNSECURED 2.350% 01/31/20			MORGAN STANLEY		1,998,800		0
254709-AM-0	DISCOVER FINANCIAL SVS SR UNSECURED 4. 100% 02/09/27			BANC AMERICA		1,498,665	1,500,000	0
37045X-AW-6	GENERAL MOTORS FINL CO SR UNSECURED 3.450% 04/10/22			BANC AMERICA			2,000,000 1,500,000	
	GOLDMAN SACHS GROUP SR UNSECURED 3.000% 04/26/22			DAIN RAUSCHER INC-69211				
	IBW CORP SH UNSECURED 2.500% 01/2/722			URIN HAUSUHER INC-05211				
65474V-AL-5	NICHUSUFI CUHP SH UNSECUHED 1.850% 02/06/20			NSOU SECTING				2.246
878237-AG-1	TECH DATA CORP SR UNSECURED 3,700% 02/15/22		01/03/2017	BANC AMERICA			1,500,000	
	TYSON FOODS INC SR UNSECURED 2.250% 08/23/21			BANC AMERICA				
	1130N POUS INC SH ONSECONED 2.250% 08/25/21	٨		DAIN RAUSCHER INC-69211				0
	MITSUBISHI UFJ FIN GRP SR UNSECURED 2.998% 02/22/22	n		NORGAN STANLEY		1.000.000	1.000.000	
80281L-AF-2	SANTANDER UK GROUP HLOGS SR UNSECURED 3.571% 01/10/23	D		GOLDMAN SACHS & CO		1,000,000	1.000.000	0
3899999. Subt	otal - Bonds - Industrial and Miscellaneous (Unaffiliated)					31,962,891	32,000,000	47,324
8399997. Tota	- Bonds - Part 3					49,700,802	49,640,000	95,994
8399998. Tota	- Bonds - Part 5					19,526,361	16,945,000	197,334
8399999. Tota	- Bonds					69,227,163	66,585,000	293, 328
8999997. Tota	- Preferred Stocks - Part 3					0	XXX	0
8999998. Tota	- Preferred Stocks - Part 5					0	XXX	0
8999999. Tota	- Preferred Stocks					0	XXX	0
9799997. Tota	- Common Stocks - Part 3					0	XXX	0
9799998. Tota	- Common Stocks - Part 5					0	XXX	0
	- Common Stocks					0	XXX	0
	- Preferred and Common Stocks					0	XXX	0
9999999 - Tota	ls					69,227,163	XXX	293,328

SCHEDULE D - PART 4

Showing All Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

	0	0			0		0			1					10	47	10	10	00	04
1. I	2	3	4	D	D		8	9	10				Carrying Value		16	17	18	19	20	21
1 1										11	12	13	14	15				1		
										1 /				Total				1	Deed	
1 1										1 /		Current	Total	Foreign				1	Bond	
									Dalara Maran	1 /		Year's	Change in	Exchange	Book/	Francisco		1	Interest/	Ontered
									Prior Year	l'	Current	Other-		Change in	Adjusted	Foreign		1	Stock	Stated
										Unrealized	Year's	_ Than-	Adjusted	Book/	Carrying	Exchange			Dividends	Con-
CUSIP		_			Number of				Adjusted	Valuation	(Amor-	Temporary	Carrying	Adjusted	Value at	Gain		Total Gain	Received	tractual
Identi-			Disposal		Shares of	Con-	Destruction		Carrying	Increase/	tization)/	Impairment		Carrying	Disposal		Gain (Loss)	(Loss) on	During	Maturity
fication		eign	Date	of Purchaser	Stock	sideration	Par Value	Actual Cost	Value	Decrease	Accretion	Recognized	(11+12-13)	Value	Date	Disposal	on Disposal	Disposal	Year	Date
	FED HOME LN MTGE CORP UNSECURED 1.350%		10/10/0017	JEFFRIES		4,940,000	5,000,000	4,929,360	4 000 405		20,000	0	22,002		4,952,509		(12,509)	(12,509)	71 010	11/26/2019
313409-11-0	11/26/19			Strategas Securities.		4,940,000			4,929,425	0	23,083			0	4,902,009	0	(12,009)	(12,009)	/1,813	11/20/2019
912828-K2-5	US TREASURY NOTE/BOND 0.750% 04/15/18									0				0	2, 196, 283	0	(1,096)		19 129	04/15/2018
	US TREASURY NOTE/BOND 1.000% 05/15/18			JEFFRIES		1,347,047	1,350,000	1,342,829	1,345,833		1,374	0	1,374	0	1,347,207	0	(160)	(160)		05/15/2018
0599999. S	Subtotal - Bonds - U.S. Governments					8,482,235	8,550,000	8,463,596	8,462,439	0	34,226	668	33,558	0	8,495,999	0	(13,765)	(13,765)	98,829	XXX
	ACTIVISION BLIZZARD SR UNSECURED 2.300%									/										
00507V-AG-4	09/15/21 GOLDWAN SACHS GROUP INC SR UNSECURED		06/05/2017	Tax Free Exchange			1,000,000			0		0		0		0	0	0		09/15/2021
	2.350% 11/15/21		10/12/2017	FIRST BOSTON CORP		1.491.252	1.500.000		1.502.476	0			(456)	0	1.502.020		(10.769)	(10,769)	27 209	
	ubtotal - Bonds - Industrial and Misce	ellane				2,490,180	2,500,000	2.501.450	2.501.305	0	(358)		(358)	0	2,500,948	0	(10,769)		53 564	
	otal - Bonds - Part 4	onune		iatou)		10,972,415	11.050.000	10,965,046	10,963,744	0	33,868			0	10,996,947	0	(24,534)		152, 393	
	otal - Bonds - Part 5					19,739,672	16,945,000	19,526,361	0	0	(11,563)	0 0	(11,563)	0	19,514,798	0	224,874	224,874	268,955	
	otal - Bonds					30,712,087	27,995,000	30,491,407	10,963,744	0	22,305	668	21,637	0	30,511,745	0	200,340	200,340	421,348	XXX
8999997. T	otal - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8999998. T	otal - Preferred Stocks - Part 5					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8999999. T	otal - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799997. T	otal - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799998. T	otal - Common Stocks - Part 5					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9799999. T	otal - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
9899999. T	otal - Preferred and Common Stocks	s				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
			ŧ			<u> </u>				f/		+	+				+	¦ł		ł
			t							f/		t					†	/t		1
9999999 - 1	fotals					30,712,087	XXX	30,491,407	10.963.744	0	22,305	668	21.637	0	30.511.745	0	200.340	200.340	421.348	XXX
						35,112,001		35,401,407	.5,500,144		22,000	000	21,007	v	30,011,140		200,010	200,010	421,040	

SCHEDULE D - PART 5

Showing All Long-Term Bonds and Stocks ACQUIRED During Year and Fully DISPOSED OF During Current Year

				0		Long-Term Bonds	and Stocks													
1	2	3	4	5	6	7	8	9	10	11		hange in Boo	k/Adjusted C	arrying Value	Э	17	18	19	20	21
		1000		121.12			270		100-0		12	13	14	15	16			5251292		
														19962198	Total					
													Current	Total	Foreign					
							Par Value						Year's	Change in	Exchange	i i i i i i i i i i i i i i i i i i i			Interest	
							(Bonds)			Book/		Current	Other-		Change in	Foreign			and	Paid for
							or			Adjusted	Unrealized	Year's	Than-	Adjusted	Book/	Exchange	Realized		Dividends	Accrued
CUSIP							Number of			Carrying	Valuation	(Amort-	Temporary	Carrying	Adjusted	Gain	Gain	Total Gain	Received	Interest
Identi-		For-	Date		Disposal	Name of	Shares		Consid-	Value at	Increase/	ization)/	Impairment	Valu (12 +	Carrying	(Loss) on	(Loss) on	(Loss) on	During	and
fication	Description	eian		Name of Vendor	Date	Purchaser		Actual Cost	eration	Disposal	(Decrease)	Accretion	Recognized		Value	Disposal	Disposal	Disposal	Year	Dividends
	FLORIDA ST BRD OF EDUCATION REF-CAP													, í						
	OUTLAY-SER E 5.000% 06/01/26		10/30/2017	PIPER, JAFFRAY & HOPWOOD	11/08/2017 _	LOOP CAPITAL MARKETS	3,020,000	3,675,823	3,707,201	3,673,825	0	(1,998)	0	(1,998)	0	0				62,917
	WASHINGTON STATE OF REF-SER R-2017A															Ι.				
	5.000% 08/01/26 WASHINGTON STATE OF SER 2017-A 5.000%		02/17/2017	Oppenheimer & CO	03/24/2017 _	OPPENHEIMER & CO	2,500,000	3,015,550	3,031,500		0		0	(4,890)	0	0				7,639
93974D-YB-8			01/04/2017	MORGAN STANLEY	01/18/2017	Various	5,000,000	6,052,350	6,125,938	6,049,286	0	(3,064)	0	(3,064)	0	0	76.652	76.652	129,514	121,528
	ubtotal - Bonds - U.S. States, Ter	ritorie				1411040	10,520,000	12,743,723	12,864,639	12,733,771	0	(9,952)	0	(9,952)		0	130,868	130,868	216.345	
	WELD ONTY CO REORG SCH DIST #R-8			00010110			10,020,000	12,110,120	12,001,000	12,100,111		(0,002)		(0,002)		, i i i i i i i i i i i i i i i i i i i	100,000	100,000	210,010	102,001
	3.000% 12/01/30		_01/11/2017 _	GK Baum	07/10/2017 _	RAMIREZ		723,520			0			55	0	0				0
	WELD ONTY CO REORG SCH DIST #R-8																			
	5.000% 12/01/36		01/11/2017		01/17/2017 _	G K Baum	1, 185,000	1,361,778	1,369,362	1,361,778	0	0	0	0	0	0		7,584	0	0
	ubtotal - Bonds - U.S. Political Su	bdivis	sions of Stat	tes, Territories and Posses	ssions		1,925,000	2,085,298	2,093,273	2,085,353	0	55	0	55	0	0	7,920	7,920	1,497	0
	Lynchburg va econ dev auth ref centra Hlth ser a 5.000% 01/01/47		07/14/2017	BARCLAY INVESTMENTS	07/17/2017	BAROLAY INVESTMENTS	1,500,000	1,679,400	1.684.530	1,679,400		0	0	0	0		5,130	5,130		
	ubtotal - Bonds - U.S. Special Rev			BAINCAT INVESTIGATIO			1,500,000	1,679,400	1,684,530								5,130			0
3199999.3	HOSPITALITY PROP TRUST SR UNSECURED	Venue	15			1	1,000,000	1,0/9,400	1,004,000	1,0/9,400	0	U	U	0	0	v	5,150	5, 130	0	
	4.500% 06/15/23		01/10/2017	CITIGROUP	08/09/2017	WACHOVIA	1,500,000	1,518,225	1,589,685	1,516,582	0	(1.643)	0	(1.643)	0	0	73, 103	73, 103	44,813	5,250
	KROGER CO SR UNSECURED 2.800%											,,		,					,	
501044-DH-1				MIZUHO SECURITIES USA		GOLDMAN SACHS & CO	1,500,000	1,499,715		1,499,692	0	(23)	D	(23)	0	0		7,853	6, <mark>3</mark> 00	
	ubtotal - Bonds - Industrial and Mi	scella	aneous (Una	affiliated)			3,000,000	3,017,940	3,097,230	3,016,274	0	(1,666)	0	(1,666)	0	0	80,956	80,956	51, 113	
8399998. T							16,945,000	19,526,361	19,739,672	19,514,798	0	(11,563)	0	(11,563)	0	0	224,874	224,874	268,955	197,334
8999998. T	otal - Preferred Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0
9799998. T	otal - Common Stocks							0	0	0	0	0	0	0	0	0	0	0	0	0
9899999. T	otal - Preferred and Common Sto	cks						0	0	0	0	0	0	0	0	0	0	0	0	0
																	.			+
																+	+			+
								 								1	t			1
9999999 - T	otals							19.526.361	19,739,672	19,514,798	0	(11,563)	<u>^</u>	(11.563)	0	^	224,874	224.874	268,955	197,334
9999999 - 1	Uldis							19,526,361	19,739,672	19,514,798	0	(11,563)	U	(11,563)	0	0	224,8/4	224,8/4	208,955	197,334

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies **NONE**

> Schedule D - Part 6 - Section 2 NONE

Schedule DA - Part 1 - Short-Term Investments Owned

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

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated **NONE**

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

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

Schedule DB - Part B - Section 2 - Futures Contracts Terminated **NONE**

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **NONE**

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

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

> Schedule DL - Part 1 - Reinvested Collateral Assets Owned **NONE**

> Schedule DL - Part 2 - Reinvested Collateral Assets Owned **NONE**

SCHEDULI	= E -	PAR	1 1 - CAS			
1	2	3 Rate of		5 Amount of Interest Accrued December 31	6	7
Depository	Code	Interest	Year	of Current Year	Balance	*
Bank of AmericaBank of America		0.000	0	0		XXX
0199998 Deposits in 0 depositories which do not exceed the allowable limit in any one depository (See instructions) - open depositories	xxx	XXX	0	0	0	xxx
0199999. Totals - Open Depositories	XXX	XXX	0	0	3,666,669	XXX
0299998 Deposits in 0 depositories which do not exceed the allowable limit in any one depository (See instructions) - suspended depositories	xxx	xxx	0	0	0	xxx
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	3,666,669	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	XXX
0599999 Total - Cash	XXX	XXX	0	0	3,666,669	XXX

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

	1.	January	1,180,415	4.	ApriL		7.	July	1,394,321	10.	October	
	2.	February	(301,522)	5.	May	(157,595)	8.	August	(255, 335)	11.	November	1,714,977
L	3.	March	18, 123, 927	6.	June	354, 199	9.	September	2,829,543	12.	December	3,666,669

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned December 31 of Current Year

1	2	3	a December 31 of C	5	6	7	8	0
	E E	3	7	J	0	Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
	- U.S. Government Bonds					0	0	0
	- All Other Government Bonds					0	0	0
1799999. Total	- U.S. States, Territories and Possessions Bonds					0	0	0
2499999. Total	- U.S. Political Subdivisions Bonds					0	0	0
3199999. Total	- U.S. Special Revenues Bonds					0	0	0
	ALBEMARLE CORP OP 4(2) 144A			2.000	01/09/2018		0	148
	AMERICAN ELEC POWER OP 4-2 144A				01/11/2018		0	
	CONCAST COPP OP 4(2) 144A			1.700 1.900	01/02/2018		U	
			12/29/2017	1.800			0	
	otal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					21,024,120	0	3,313
	- Industrial and Miscellaneous (Unaffiliated) Bonds					21,024,120	0	3,313
4899999. Total	- Hybrid Securities					0	0	0
5599999. Total	- Parent, Subsidiaries and Affiliates Bonds					0	0	0
	otal - SVO Identified Funds					0	0	0
7799999. Total	- Issuer Obligations					21,024,120	0	3,313
7899999. Total	- Residential Mortgage-Backed Securities					0	0	0
7999999. Total	- Commercial Mortgage-Backed Securities					0	0	0
	- Other Loan-Backed and Structured Securities					0	0	0
	- SVO Identified Funds					0	0	0
8399999. Total						21,024,120	0	3,313
	FEDERATED INVESTORS INC THEASURY OBLIGATION FUND		12/29/2017	0.000	XXX	1,468	<u>4</u>	0
8599999. Subto	otal - Exempt Money Market Mutual Funds - as Identified by the SVO					1,468	4	0
								<u>†</u>
								<u> </u>
8899999 - Tota	I Cash Equivalents					21,025,588	4	3,313
0000000 - TUla						21,020,000	4	3,313

ANNUAL STATEMENT FOR THE YEAR 2017 OF THE Aetna Better Health Inc. (a New Jersey corporation) SCHEDULE E - PART 3 - SPECIAL DEPOSITS

	50	1	ULE E - PART 3 - SPE	Deposit	s For the Policyholders	All Other Spe	cial Deposito
		1.0.2510	2	3	4	5	6
	States, Etc.	Type of Deposit	Purpose of Deposit	Book/Adjusted Carrying Value	Fair Value	Book/Adjusted Carrying Value	Fair Value
1.	Alabama	Doposit					0
2.	AlaskaAK			0	0	0	0
3.	ArizonaAZ			0	0	0	0
4.	ArkansasAR			0	0	0	0
5.	CaliforniaCA			0	0	0	0
6.	ColoradoCO			0	0	0	0
7.	ConnecticutCT			0	0	0	0
8. 9.	DelawareDE District of ColumbiaDC			0	0 0	0 0	0
9. 10.	Florida			0	0	0	0
11.	GeorgiaGA			0	0	0	0
12.	HawaiiHI			0	0	0	0
13.	IdahoID			0	0	0	0
14.	IllinoisJL			0	0	0	0
15.	IndianaIN			0	0	0	0
16.	lowaIA			0	0	0	0
17.	KansasKS			0	0	0	0
18.	KentuckyKY			0	0 0	0	0
19. 20	LouisianaLA MaineME			0 0	0	0 0	0
20. 21.	MaineME MarylandMD			0	0	0	00 م
21.	Massachusetts			0	0	0	0
23.	MichiganMI			.0			0
24.	MinnesotaMN			0	0	0	0
25.	MississippiMS			0	0	0	0
26.	MissouriMO			0	0	0	0
27.	MontanaMT			0	0	0	0
28.	NebraskaNE			0	0	0	0
29.	NevadaNV			0	0	0	0
30.	New HampshireNH	 D	RSD by INS CODE NJAC 11:24-11.4		0	0	0
31. 32.	New JerseyNJ New MexicoNM	В	ראש איז איז עעב NJAU וו:24−11.4	23,866,534 0	23,786,966 0	0 0	0 0
32. 33.	New York			0	0	0	0 0
34.	North CarolinaNC			0	0	0	
35.	North DakotaND			0	0		0
36.	OhioOH			0	0	0	0
37.	OklahomaOK			0	0	0	0
38.	OregonOR			0	0	0	0
39.	PennsylvaniaPA			0	0	0	0
40.	Rhode IslandRI			0	0	0	0
41.	South CarolinaSC			0	0	0	0
42.	South DakotaSD TennesseeTN			0 0	0	0 0	0
43. 44.	TennesseeTN TexasTX			0	0	0	0 0
44. 45.	UtahUT			0	0	0	0 0
46.	Vermont VT					0	0
47.	VirginiaVA			0	0	0	0
48.	WashingtonWA			0	0	0	0
49.	West Virginia			0	0	0	0
50.	WisconsinWI			0	0	0	0
51.	WyomingWY			0	0	0	0
52.	American SamoaAS			0	0	0	0
53.	GuamGU Puerto RicoPR			0	0	0 0	0
54. 55.	Puerto RicoPR U.S. Virgin IslandsVI			0	0	0	0 ^
55. 56.	Northern Mariana IslandsMP			0	0	0	0
57.	CanadaCAN					0	0
58.	Aggregate Alien and OtherOT	XXX	XXX	0	0	0	0
	Subtotal	XXX	XXX	23,866,534	23,786,966	0	0
	DETAILS OF WRITE-INS						
5801.		 					
5802.		 					
5803.		 					
5898.	Summary of remaining write-ins for	100		-	_		
E000	Line 58 from overflow page	XXX	XXX	0	0	0	0
5699.	Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	xxx	XXX	0	0	0	0
				-			-

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HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2017

NAIC Gr	oup Code 0001	0001NAI	C Company Co	de <u>15611</u> Employ	/er's ID Number4	6-3203088
Organized under the Laws of	(Current) Ne	(Prior) w Jersey		State of Domicile or Por	t of Entry	NJ
Country of Domicile			United State	s of America		
Licensed as business type:		He	ealth Maintenar	ice Organization		
Is HMO Federally Qualified? Ye				· · · · · · · · · · · · · · · · · · · 		
Incorporated/Organized		13		Commenced Busine	SS	01/01/2015
				oonnended baane		
Statutory Home Office	3 Independence (Street and			(9	Princeton , NJ, U Dity or Town, State, Coun	
Main Administrative Office		3	Independence	Way, Suite 400		
Р	rinceton, NJ, US 08540		(Street and	i Number)	855-232-35	96
	wn, State, Country and Z				(Area Code) (Telepho	
Mali Address	1425 Union Meeting F			<u></u>	Blue Bell , PA, US	
	(Street and Number of	r P.O. Box)		(0	City or Town, State, Coun	try and Zip Code)
Primary Location of Books and R	ecords		Independence (Street and	Way, Suite 400		
	rinceton , NJ, US 08540 wn, State, Country and Z			· · · · ·	855-232-35 (Area Code) (Telepho	
internet Website Address	•				(rica obde) (relepind	
	<u></u>			uia.com	0.15.77	
Statutory Statement Contact	Stev	(Name)	te			'5-6508 lephone Number)
Aetna	.HMOReporting@aetna. (E-mail Address)	com			860-262-77 (FAX Numb	
	(OFFIC		(
Chief Executive Officer and	President	Laurie Ann Bruba			al Officer and Controller	Steven Matthew Conte
Vice President and	Secretary	Robert Mark Kes	sler			
Debra Jean Bacon, Chief	Financial Officer #			ER a Investment Officer a, Vice President	John Patrick Marone	ey, Vice President and Treasurer #
Debra Jean	Bacon	DI	RECTORS O Laurie Anr	R TRUSTEES	Mary	Louise Elizabeth Osborne
above, all of the herein described this statement, together with relat of the condition and affairs of the completed in accordance with the (2) that state rules or regulations belief, respectively. Furthermore	assets were the absolu ad exhibits, schedules a said reporting entity as e NAIC Annual Stateme require differences in n e, the scope of this attes formatting differences du	te property of the nd explanations to of the reporting p int instructions an eporting not relate station by the dest	said reporting therein contained period stated a ad Accounting F ed to accounting scribed officers	entity, free and clear from ad, annexed or referred to bove, and of its income Practices and Procedure by practices and procedure also includes the related	n any liens or claims ther o, is a full and true staten and deductions therefrom s manual except to the e unes, according to the be d corresponding electroni	nd that on the reporting period state reon, except as herein stated, and the nent of all the assets and liabilities ar for the period ended, and have bee xtent that: (1) state law may differ, o st of their information, knowledge ar ic filing with the NAIC, when require asted by various regulators in lieu of manual data and the state of the s
Laurie Ann Brub	aker	·	Robert Ma	ark Kessier		Steven Matthew Conte
Chief Executive Officer a	ind President		Vice Presiden	t and Secretary	Principa	Financial Officer and Controller
State of Arizona County of Maricopa		State of County of			State of F County of M	-
Subscribed and sworn to before r	ne this	Subscribed	and sworn to be	efore me this	Subscribed an	d sworn to before me this
2 day of FEDRUAN	2018	🖂 day	of Febru	Lary 2018	26th day of	February, 2018
marial	0	1	mag	Alana	, U	
NOTARY PUBLIC (Seal)	Well	NOTARY	JFLULA JBLIC (Seal)	Maina	NOTARY PUE	RUC (Seal)
NOTAGE FOREIO (GEEI)		homain	JELO (Geal)		NOTATI 1 DE	
JANESN N Notary Public, S Maricopa My Commiss February	tate of Arizona County ion Expires		otary Public. Maricos My Commis	NEWHOUSE State of Arizona Sa County saion Expires y 08, 2019	N KIM E. Whitpain Tow	ALTH OF PENNSYLVANIA IOTARIAL SEAL ROTH, Notary Public mship, Montgomery County on Expires April 25, 2021

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals	0	0	0	0	0	0
Group Subscribers:						
0299998. Premiums due and unpaid not individually listed	0	0	0	0	0	0
0299999. Total group	0	0	0	0	0	0
0399999. Premiums due and unpaid from Medicare entities	0	0	0	0	0	0
0499999. Premiums due and unpaid from Medicaid entities	853, 1 94	460,585	40,736	2,439,916	0	3,794,431
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	853, 194	460,585	40,736	2,439,916	0	3,794,431

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days 188,265	31 - 60 Days	61 - 90 Days	Over 90 Days 313,211	Nonadmitted 313,211	Admitted 188,265
UTO		0				100,203
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed 0199999. Total Pharmaceutical Rebate Receivables	188.265	0	0	313,211	313.211	188,265
Various Providers	581,078	56,561	69.132	385,014	1,091,785	100,200
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed	0	00,001	0, 102	000,014	0	0
0299999. Total Claim Overpayment Receivables	581,078	56,561	69,132	385,014	1,091,785	0
0399998. Aggregate Loans and Advances to Providers Not Individually Listed	0	0	0	0	0	0
0399999. Total Loans and Advances to Providers	0	0	0	0	0	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed	0	0	0	0	0	0
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed	0	0	0	0	0	0
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Receivables Not Individually Listed	0	0	0	0	0	0
0699999. Total Other Receivables	0	0	0	0	0	0
0799999 Gross health care receivables	769,343	56,561	69,132	698,225	1,404,996	188,265

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

	Health Care Receivables Collected During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5	6
	1 On Amounts Accrued Prior to January 1 of	2 On Amounts Accrued	3 On Amounts Accrued	4	Receivables in	Estimated Health Care Receivables Accrued as of December 31
Type of Health Care Receivable	Current Year	During the Year	Prior Year	During the Year	(Columns 1 + 3)	of Prior Year
1. Pharmaceutical rebate receivables			11,459	490,018		
2. Claim overpayment receivables		2,905,277	170,950	920 <mark>,</mark> 834		4, 160, 576
3. Loans and advances to providers	0	0	0	0	0	0
4. Capitation arrangement receivables	0	0	0	0	0	0
5. Risk sharing receivables	0	0	0	0	0	0
6. Other health care receivables	0	0	0	0	0	0
7. Totals (Lines 1 through 6)	970,076	3,275,452	182,409	1,410,852	1,152,486	4,484,772

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims									
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total			
Claims Unpaid (Reported)	1 - 30 Days	31 - 00 Days	01 - 90 Days	91 - 120 Days	Over 120 Days	Total			
Aging estimated based on claims in process of adjudication as of 12/31/17	0	0	0	0	0	0			
0199999. Individually listed claims unpaid	0	0	0	0	0	0			
0299999. Aggregate accounts not individually listed- uncovered	671,873	38,459	(2,152)	3,628	444	712,252			
0399999. Aggregate accounts not individually listed-covered	2,552,383	42,602	22,018	26,877	26	2,643,906			
0499999. Subtotals	3,224,256	81,061	19,866	30,505	470	3,356,158			
0599999. Unreported claims and other claim reserves						0			
0699999. Total amounts withheld						33,218,803			
0799999. Total claims unpaid						36,574,961			
0899999 Accrued medical incentive pool and bonus amounts						402,172			

EXHIBIT 5 - AMOUNTS DUE FROM PARENT, SUBSIDIARIES AND AFFILIATES

1	1 2	3	4	5	6	Adr	Admitted	
Name of Affiliate	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	7 Current	8 Non-Current	
Hand of Annual	1 - 50 Days	ST- OU Days	01 - 30 Days	Over 50 Days	Nonadimited	ourrent	Non-Ounent	
			1	1				
			+		+		+	
	·····	·····						
	·····							
		·····						
		1	1	1	1		1	
		1	1	1	1		1	
		+			1			
		+						
0399999 Total gross amounts receivable								

EXHIBIT 6 - AMOUNTS DUE TO PARENT, SUBSIDIARIES AND AFFILIATES

1	2	3	4	5
Affiliate	Description	Amount	Current	Non-Current
Aetna Medicaid Administrators, LLC	_See Notes to the Financial Statements		8,471,292	0
Aetna Inc	See Notes to the Financial Statements	7,142,845	7,142,845	0
Aetna Life Insurance Company	See Notes to the Financial Statements	609, 150		0
0199999. Individually listed payables		16,223,287	16,223,287	0
0299999. Payables not individually listed		0	0	0
	-			
	-			
	-			
	-			
0399999 Total gross payables		16,223,287	16,223,287	0

EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:	Fayment	or rotal rayments	Covered	of rotal members	Anniated Floviders	FIUVIOEIS
1. Medical groups	880,944	0.5	0	0.0	0	880,944
2. Intermediaries.		0.0	0	0.0	0	
3. All other providers	15.470	0.0	45.655	100.0	0	15.470
4. Total capitation payments	896.414	0.5	45,655	100.0	0	896,414
Other Payments:			10,000			
5. Fee-for-service	39,263,475	22.1	XXX	XXX	0	39,263,475
6. Contractual fee payments	136,782,698	77.0	XXX	XXX	0	136,782,698
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX	0	0
8. Bonus/withhold arrangements - contractual fee payments	647.176	0.4	XXX	XXX	0	647.176
9. Non-contingent salaries	0	0.0	XXX	XXX	0	0
10. Aggregate cost arrangements	0	.0.0	XXX	XXX	0	0
11. All other payments	0	.0.0	XXX	XXX	0	0
12. Total other payments	176,693,349	99.5	XXX	XXX	0	176,693,349
13. TOTAL (Line 4 plus Line 12)	177,589,763	100%	XXX	XXX	0	177,589,763

24

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

1	2	3	4	5	6
			Average Monthly Capitation		Intermediary's Authorized Control Level RBC
			Monthly	Intermediary's	Authorized
NAIC Code	Name of Intermediary	Capitation Paid	Capitation	Total Adjusted Capital	Control Level RBC
9999999 Totals			XXX	XXX	XXX

Exhibit 8 - Furniture and Equipment Owned



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION A	etna Better Hea	Ith Inc. (a New Jerse	ey corporation)			2.	Princeton, NJ				
									(LOCATIC	DN)	
NAIC Group Code 0001	BUSINESS	IN THE STATE OF					DURING THE YE	AR 2017	NAIC Co	mpany Code	15611
		1	Comprehensive (H	lospital & Medical) 3	4	5	6	7	8	9	10
			2	5							
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:				e e e e e e e e e e e e e e e e e e e							
1. Prior Year			0	0	0	0	0	0	0		
2. First Quarter			0	0	0		0	0	0		
3. Second Quarter			0	0	0		0	0	0	40,407	
4. Third Quarter			0	0	0		0	0	0		
5. Current Year		45,655	0	0	0	0	0	0	0	45,655	
6. Current Year Member Months		482,008	0	0	0	c	0	0	0	482,008	
Total Member Ambulatory Encounters for Year	r:										
7 Physician			0	0	0		0	0	0		
8. Non-Physician		274,514	0	0	0		0	0	0		
9. Total		477,868	0	0	0	C	0	0	0	477,868	
10. Hospital Patient Days Incurred		331,001	0	0	0	C	0	0	0	331,001	
11. Number of Inpatient Admissions		14,898	0	0	0	C	0	0	0	14,898	
12. Health Premiums Written (b)			0	0	0		0	0	0		
13. Life Premiums Direct		0	0	0	0	C	0	0	0	0	
14. Property/Casualty Premiums Written		0	0	0	0		0	0	0	0	
15. Health Premiums Earned			0	0	0	c	0	0	0		
16. Property/Casualty Premiums Earned		0	0	0	0	C	0	0	0	0	
17. Amount Paid for Provision of Health Care	Services		0	0	0		0	0	0		
18 Amount Incurred for Provision of Health C	Care Services	182,811,322	0	0	0	C	0	0	0	182,811,322	



EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION Aetna	Better Health Inc. (a New Jerse	ey corporation)			2.	Princeton, NJ				
								(LOCATIC	DN)	
NAIC Group Code 0001	BUSINESS IN THE STATE OF					DURING THE YE	AR 2017	NAIC Co	mpany Code	15611
	1	Comprehensive (H	ospital & Medical)	4	5	6	7	8	9	10
		2	5							
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:										
1. Prior Year		0	0	0	0	0	0	0		
2. First Quarter		0	0	0	0	0	0	0		
3. Second Quarter		0	0	0	0	0	0	0	40,407	
4. Third Quarter		0	0	0	0	0	0	0		
5. Current Year	45,655	0	0	0	0	0	0	0	45,655	
6. Current Year Member Months	482,008	0	0	0	0	0	0	0	482,008	
Total Member Ambulatory Encounters for Year:										
7 Physician		0	0	0	0	0	0	0		
8. Non-Physician		0	0	0	0	0	0	0	274,514	
9. Total	477,868	0	0	0	0	0	0	0	477,868	
10. Hospital Patient Days Incurred	331,001	0	0	0	0	0	0	0	331,001	
11. Number of Inpatient Admissions	14,898	0	0	0	0	0	0	0	14,898	
12. Health Premiums Written (b)		0	0	0	0	0	0	0	242,409,193	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned		0	0	0	0	0	0	0		
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Ser	vices	0	0	0	0	0	0	0		
18 Amount Incurred for Provision of Health Care	Services 182,811,322	0	0	0	0	0	0	0	182,811,322	
Schedule S - Part 1 - Section 2 NONE

Schedule S - Part 2

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 2 3 4 5 6 7 8 9 10 Outstanding Surplus Relief 13 NAIC Domi- ciliary Type of Type of	14 Funds Withheld
NAIC Company CodeIDEffective DateName of CompanyCiliary Juris- dictionType of Reinsurance 	Funds Withheld
Company Code ID Effective Date Name of Company Juris- diction Reinsurance Ceded Business Ceded Premiums than for Unearned (Estimated) than for Unearned Premiums Current Year Prior Year Reinsurance Reserve 0399999. Total General Account - Authorized U.S. Affiliates Number	Funds Withheld
Code Number Date Name of Company diction Ceded Premiums (Estimated) Premiums Current Year Prior Year Reserver 0399999. Total General Account - Authorized U.S. Affiliates 0 <td< td=""><td></td></td<>	
0399999. Total General Account - Authorized U.S. Affiliates 0 0 0 0 0 0 0 0699999. Total General Account - Authorized Non-U.S. Affiliates 0	
0699999. Total General Account - Authorized Non-U.S. Affiliates 0 0 0 0 0 0 0 0799999. Total General Account - Authorized Affiliates 0 0 0 0 0 0 0 6480 _91-6034263 _03/01/2015 BERKLEY LIFE & HLTH INS 00 IA _SSL/L/I MC _332,227 0	Coinsurance
0799999. Total General Account - Authorized Affiliates 0 0 0 0 0 0	0 (
	0 0
0899999. General Account - Authorized U.S. Non-Affiliates 332,227 0 0 0 0 1099999. Total General Account - Authorized Non-Affiliates 332,227 0 0 0 0 0 1199999. Total General Account Authorized 332,227 0 0 0 0 0	0
1099999. Total General Account - Authorized Non-Affiliates 332,227 0 0 0 0 1199999. Total General Account Authorized 332,227 0	0
1199999. Total General Account Authorized 0 0 0 0	0 0
	0
1499999. Total General Account - Unauthorized U.S. Affiliates 0 0 0 0 0	0 (
	0 (
1799999. Total General Account - Unauthorized Non-U.S. Affiliates 0 0 0 0 0	0
1899999. Total General Account - Unauthorized Affiliates 0 0 0 0 0 0	0 (
2199999. Total General Account - Unauthorized Non-Affiliates 0 0 0 0 0	0 (
2299999. Total General Account Unauthorized 0 0 0 0 0	0
2599999. Total General Account - Certified U.S. Affiliates 0 0 0 0 0 0	0 (
2899999. Total General Account - Certified Non-U.S. Affiliates 0 0 0 0 0 0	0 (
2999999. Total General Account - Certified Affiliates 0 0 0 0 0	0 (
3299999. Total General Account - Certified Non-Affiliates 0 0 0 0 0	0
3399999. Total General Account Certified 0 0 0 0 0	0 /
3499999. Total General Account Authorized, Unauthorized and Certified 0 0 0	0 /
3799999. Total Separate Accounts - Authorized U.S. Affiliates	0 /
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates	0 (
4199999. Total Separate Accounts - Authorized Affiliates	0 /
4499999. Total Separate Accounts - Authorized Non-Affiliates	0
4599999. Total Separate Accounts Authorized	0
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates 0 0 0 0 0 0	0 (
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates 0 0 0 0 0 0	0 (
529999. Total Separate Accounts - Unauthorized Affiliates 0 0 0 0 0 0	0
559999. Total Separate Accounts - Unauthorized Non-Affiliates 0 0 0 0 0 0 0	0 0
5699999. Total Separate Accounts Unauthorized 0 0 0 0	0
599999, Total Operation Accounts - Certified U.S. Affiliates	0
629999. Total Separate Accounts - Certified Non-U.S. Affiliates	
6399999. Total Separate Accounts - Certified Affiliates 0 0 0 0 0 0 0	ő
6699999. Total Separate Accounts - Certified Non-Affiliates 0 0 0 0 0 0 0 0	0 (
6799999. Total Separate Accounts Certified 0 0 0 0 0 0 0	
6899999. Total Separate Accounts Authorized and Certified 0 0 0 0 0 0 0 0 0	
6999999. Total U.S. (Sum of 0399999, 0899999, 14999999, 1999999, 25999999, 3799999, 4299999, 5399999, 5999999 and	
6499999) 0 0 0 0	0
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4399999, 5199999, 6299999 and 6599999) 0 0 0 0 0 0 0 0	0
9999999 - Totals 0 0 0 0	0

Schedule S - Part 4

Schedule S - Part 4 - Bank Footnote

Schedule S - Part 5

Schedule S - Part 5 - Bank Footnote

SCHEDULE S - PART 6

	Five Year	Exhibit of Reinsuran	ice Ceded Business	s (\$000 Omitted)		
		1 2017	2 2016	3 2015	4 2014	5 2013
	A. OPERATIONS ITEMS					
	Premiums	0	0	0	0	0
1.			0		0	0
2.	Title XVIII - Medicare		0	0	0	0
3.	Title XIX - Medicaid			100	0	0
4.	Commissions and reinsurance expense allowance		0	0	0	0
5.	Total hospital and medical expenses	0	0	0	0	0
	B. BALANCE SHEET ITEMS					
6.	Premiums receivable	0	0	0	0	0
7.	Claims payable	0	0	0	0	0
8.	Reinsurance recoverable on paid losses		0	0	0	0
9.	Experience rating refunds due or unpaid		0	0	0	0
10.	Commissions and reinsurance expense allowances					
10.	due	0	0	0	0	0
11.	Unauthorized reinsurance offset	0	0	0	0	0
12.	Offset for reinsurance with Certified Reinsurers	0	0	0	0	0
	C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13.	Funds deposited by and withheld from (F)	0	0	0	0	0
14.	Letters of credit (L)	0	0	0	0	0
15.	Trust agreements (T)		0	0	0	0
16.	Other (O)		0	0	0	0
	D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17.	Multiple Beneficiary Trust	0	0	0	0	0
18.	Funds deposited by and withheld from (F)		0	0	0	0
19.	Letters of credit (L)		0	0	0	0
20.	Trust agreements (T)		0	0	0	0
21.		0	0	0	0	0
21.	Other (O)	U	U	U	U	0

SCHEDULE S - PART 7

	Restatement of Balance Sheet to Identify Net Credit Fo	or Ceded Reinsurance	2	3
		As Reported (net of ceded)	Restatement Adjustments	Restated (gross of ceded)
	ASSETS (Page 2, Col. 3)		100 C	allers our Char
1.	Cash and invested assets (Line 12)	128,829,782	0	
2.	Accident and health premiums due and unpaid (Line 15)		0	
3.	Amounts recoverable from reinsurers (Line 16.1)	0	0	0
4.	Net credit for ceded reinsurance		0	0
5.	All other admitted assets (Balance)	1,995,549	0	1,995,549
6.	Total assets (Line 28)	134,619,762	0	134,619,762
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7.	Claims unpaid (Line 1)		0	
8.	Accrued medical incentive pool and bonus payments (Line 2)		0	
9.	Premiums received in advance (Line 8)	0	0	0
10.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0	0	0
11.	Reinsurance in unauthorized companies (Line 20 minus inset amount)	0	0	0
12.	Reinsurance with Certified Reinsurers (Line 20 inset amount)	0	0	0
13.	Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0	0	0
14.	All other liabilities (Balance)	61,355,016	0	61,355,016
15.	Total liabilities (Line 24)		0	
16.	Total capital and surplus (Line 33)	36,287,613	xxx	36,287,613
17.	Total liabilities, capital and surplus (Line 34)	134,619,762	0	134,619,762
	NET CREDIT FOR CEDED REINSURANCE			
18.	Claims unpaid	0		
19.	Accrued medical incentive pool	0		
20.	Premiums received in advance	0		
21.	Reinsurance recoverable on paid losses	0		
22.	Other ceded reinsurance recoverables	0		
23.	Total ceded reinsurance recoverables	0		
24.	Premiums receivable	0		
25.	Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26.	Unauthorized reinsurance	0		
27.	Reinsurance with Certified Reinsurers	0		
28.	Funds held under reinsurance treaties with Certified Reinsurers	0		
29.	Other ceded reinsurance payables/offsets	0		
30.	Total ceded reinsurance payables/offsets	0		
31.	Total net credit for ceded reinsurance	0		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Allocated by	States and Territ	Direct Bus	iness Only		
			1	2	3	4	5	6
			Life	Annuities	Disability Income	Long-Term Care		
			(Group and	(Group and	(Group and	(Group and	Deposit-Type	
0.55	States, Etc.		Individual)	Individual)	Individual)	Individual)	Contracts	Totals
1.		AL						
2.	Alaska A	AK						
3.	Arizona A	AZ						
4.	Arkansas A	AR						
5.	California	CA						
6.	Colorado	co						
7.	Connecticut							
8.	Delaware							
9.								
		FL						
10.								
11.	Georgia G							
12.	Hawaii H							
13.	Idaho II							
14.	Illinois Il	L						
15.	Indiana If	IN						
16.	lowa l/	IA						
17.	Kansas K	KS						
18.	Kentucky K	KY						
19.	Louisiana L							
20.		ME						
21.		MD						
22.	•	MA						
23.	Michigan							
	•							
24.	Minnesota							
25.		MS						
26.		MO						
27.	Montana	MT						
28.	Nebraska							
29.	Nevada	NN.						
30.	New Hampshire	ин Т						
31.	New Jersey	NJ						
32.	New Mexico N	NM						
33.	New York N	NY						
34.	North Carolina N	NC						
35.	North Dakota N	ND						
36.	Ohio C	он						
37.	Oklahoma C	ок						
38.	Oregon	OR						
39.	Pennsylvania P							
40.	Rhode Island							
41.	South Carolina							
42.		SD						
42.								
43. 44.	Texas							
45.	Utah L							
46.	Vermont							
47.	Virginia V							
48.	•	WA						
49.	West Virginia	wv						
50.	Wisconsin	WI						
51.	Wyoming V	WY						
52.	American Samoa A	AS						
53.	Guam G	GU						
54.	Puerto Rico	PR						
55.	U.S. Virgin Islands V	vi						
56.	Northern Mariana Islands N							
57.		CAN						
58.	Aggregate Other Alien	от 🛄						
59.	Total							
					-		-	-

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	07721		3.9		1.1			on an	157.127.24	20.0	Type	lf	15110	1012514	C. C
											of Control	Control			1
											(Ownership,	is		ls an	1 1
						Name of Securities			Relation-		Board,	Owner-		SCA	1 1
						Exchange		Domi-	ship		Management,	ship		Filing	1 1
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	1
Gro	D	Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	1 1
Coc	e Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	•
0001	AETNA INC.		3-2229683	3060706	1122304	Ν	Aetna Inc.	PA	UIP	Aetna Inc.				N	0
0001	AETNA INC.		0-0123754	0	0		Aetna Health Holdings, LLC	DE	UDP	Aetna Inc	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.		5-3402799	0	0		Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc	N	0
0001	AETNA INC.		3-2442048	0	0		Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc	N	0
0001	AETNA INC.		9-2411584	0	0		Aetna Health Inc	FL		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001 0001	AETNA INC		8-1649568	0	0		Aetna Health Inc Aetna Health Inc.	GA ME.	IA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000 100.000	Aetna Inc Aetna Inc.	N	0 0
	AETNA INC.		3-2861565	0	0		Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AFTNA INC		2-1270921	0	0		Aetna Health Inc.	NJ		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	<u>0</u>
0001	AETNA INC.		2-2663623	0	0		Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		5-2634734	0	0		Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		6-0189680	0	0		Aetna Health Inc.	Χ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC		4-1844335	0	0		Aetna Better Health of Texas Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc	N	0
_0 001	AETNA INC		0-2207534	0	0		Aetna Better Health Inc	GA		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.		6-1160812	0	0		Aetna Dental of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc	N	0
0001	AETNA INC.		2-2990909	0	0		Aetna Dental Inc.	NJ		Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	
0001	AETNA INC		6-1177531	0	0		Aetna Dental Inc.	TX DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001 0001			0-0123760 3-3670795	0	0		Aetna Rx Home Delivery, LLC Aetna Health Management, LLC	DE	NIA NIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000 100.000	Aetna Inc. Aetna Inc.	N N	0 0
0001	AETNA INC.		2-3187443	0	0		Aetna Ireland Inc	DE		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AFTNA INC		7-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		0-1274723	0	0		Cofinity, Inc.	DE		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.		3-2671370	0	0		OCredentials Inc.	DE		Aetna Health Holdings, LLC	Ownership	100,000	Aetna Inc.	N	0
_0001	AETNA INC.		7-0640344	0	0		Strategic Resource Company	SC		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		7-0563973	0	0		Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
0001	AETNA INC		6-2867560	0	0		Aetna Better Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.		7-5178095	0	0		Aetna Better Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	
0001	AETNA INC.		7-2512072	0	0		Aetna Better Health Inc.	I L		Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	9
0001 0001	AETNA INC		7-3850677 0-0629718	0	0		Aetna Better Health of Iowa Inc Aetna Better Health, Inc	IA	IA	Aetna Health Holdings, LLC	Ownership Ownership	100.000 100.000	Aetna Inc Aetna Inc	N N	0
	AETNA INC.		0-0629718 0-0671703	0	0		Aetna Better Health, Inc	LA FL		Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc. Aetna Inc.	N	0 0
0001	AETNA INC.		5-2764938	0	0		Aetna Better Health Inc.		NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		6-3203088	0	0		Aetna Better Health Inc.	NJ	RF	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		1-1143850	0	0		Aetna Better Health of Oklahoma Inc.	OK	IA	Aetna Health Holdings, LLC	Ownership	L100.000	Aetna Inc.	N	0
0001	AETNA INC.		4-2708160	00	0		Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		3-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
							Schaller Anderson Medical Administrators,								
0001	AETNA INC.		1-0826783	0	0		Incorporated	DE		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		6-0842559	0	0		Aetna Medicaid Adminstrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
0001			5-2944270	U	U		iTriage, LLC	DE		Aetna Health Holdings, LLC	Ownership Ownership	_100.000	Aetna Inc.	N	0
0001 0001	AETNA INC		6-1471176 5-4901541	0	0		Prodigy Health Group, Inc Aetna ACO Holdings, Inc.	DE	NIA NIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000	Aetna Inc Aetna Inc.	N Y	0
	AETNA INC.		5-4901541 5-5527797	0	0		Aetna ACO Holdings, Inc. Innovation Health Holdings, LLC	DE DE	NIA NIA	Aetna Health Holdings, LLC Aetna ACO Holdings, Inc.	Ownership Ownership	50.000	Aetna IncAetna Inc	Y	7
0001	AETNA INC.		6-0674828	o 	0		Innovation Health Insurance Company	VA	NIA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		6-0682197	0	0		Innovation Health Plan, Inc.	VA	IA	Innovation Health Insurance Company	Ownership	100.000	Aetna Inc.	N	0
							Texas Health + Aetna Health Insurance Holding								
0001	AETNA INC.		1-3789357	0	0		Company LLC	XT	NIA	Aetna ACO Holdings, Inc	Ownership	_50.000	Aetna Inc.	N	10
							Texas Health + Aetna Health Insurance Company			Texas Health + Aetna Health Insurance					1
0001	AETNA INC		1-4749336	0	0			TX	IA	Holding Company LLC	Ownership	_100.000	Aetna Inc	N	0
			7.5510551					TV		Texas Health + Aetna Health Insurance		100.000			
0001			7-5548221	U	U		Texas Health + Aetna Health Plan Inc	TX	IA	Company	Ownership	_100.000	Aetna Inc.	N	11
0001			3-2169745 5-4901541	U	0		Aetna Health Inc.	PA DE	IA	Aetna Health Holdings, LLC Aetna Health Inc. (PA)	Ownership Ownership	100.000 39.500	Aetna Inc Aetna Inc	N Y	0
			5-4901541 0-0438576	0	0		Aetna ACO Holdings, Inc Niagara Re. Inc.	UE		Aetna Health Inc. (PA) Prodigy Health Group, Inc	Ownership		Aetna Inc	ŤN	4
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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	•
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
				1000		international)	0171111111100							(1/18)	
	AETNA INC	00000	52-2200070	0	0		Performax, Inc	DE	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	N	
	AETNA INC.	00000	87-0632355	0	0		Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000	27-1760756	0	0		Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership	100,000	Aetna Inc.	N	0
0001	AETNA INC.	00000	31-1368946	0	0		American Health Holding, Inc.	OH		Prodigy Health Group, Inc.	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.		16-1264154	0	0		Meritain Health, Inc.	NY		Prodigy Health Group, Inc.	Ownership	E100.000	Aetna Inc.	N	
					0										
	AETNA INC.	00000	86-0537707	U	0		Adminco, Inc	<mark>AZ</mark>	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
	AETNA INC.		86-0527428	0	0		Administrative Enterprises, Inc.	AZ		Meritain Health, Inc	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.		16-1684061	0	0		U.S. Healthcare Holdings, LLC	0H	NIA	Meritain Health, Inc.	Ownership	_100.000	Aetna Inc.	N	
.0001	AETNA INC.		34-1670299	0	0		Prime Net, Inc.	OH	NIA	Meritain Health. Inc.	Ownership	100,000	Aetna Inc.	N	
	AETNA INC.		34-1348032	0	0		Professional Risk Management, Inc.	OH		Meritain Health, Inc.	Ownership.	L100.000	Aetna Inc.	N	0
	ALINA AW.		04 104000Z	•	•		Continental Life Insurance Company of	VI L		morritarii iloartii, ilio.	onnor amp	_ 100.000	ny thu 110.		····· ···· ····
0001		00500	00 1104000	<u> </u>	<u> </u>			TN		Anton Inc.	Ownership	100,000	Anton Inc.		•
	AETNA INC.		62-1181209	U	U		Brentwood, Tennessee	TN	IA	Aetna Inc.	owner ship	_ 100.000	Aetna Inc	N	
										Continental Life Insurance Company of					
	AETNA INC.		20-2901054	0	0		American Continental Insurance Company	TN	IA	Brentwood, Tennessee	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.	00000	45-4901541	0	0		Aetna ACO Holdings, Inc.	DE		Aetna Life Insurance Company	Ownership	60,300	Aetna Inc.	Y	4
				·	0										
	AETNA INC.	00000	06-1270755	0	0		AHP Holdings, Inc	CT	NIA	Aetna Life Insurance Company	Ownership	_100.000	Aetna Inc	N	0
	AETNA INC.		06-1286276	0	0		Aetna Insurance Company of Connecticut	CT		AHP Holdings, Inc	Ownership	100.000	Aetna Inc	N	
0001	AETNA INC.	00000	06-1028469	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership	100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000	06-1373153	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc.	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.		20-3678339	0	0		PE Holdings, LLC	CT		Aetna Life Insurance Company	Ownership	E100.000	Aetna Inc	N	Ő
	AETNA INC.			0	0			DE				L 100.000	Aetna Inc.		
			06-1423207	0	0		Aetna Resources L.L.C.			Aetna Life Insurance Company	Ownership			N	0
	AETNA INC.			0	0		Canal Place, LLC	DE		Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	
0001	AETNA INC.		20-3180700	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	_100.000	Aetna Inc.	N	
.0001	AETNA INC.	00000	59-2108747	0	0		Broadspire National Services, Inc.	FL	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.		00 2100141	0	0		Aetna Multi-Strategy 1099 Fund	DE	NIA	Aetna Life Insurance Company	Ownership		Aetna Inc.	N	0
		00000	41-2035961		0			DE	NIA						
	AETNA INC.			U	0		Aetna Financial Holdings, LLC			Aetna Inc	Ownership	_100.000	Aetna Inc.	<u>N</u>	0
	AETNA INC.		26-2030792	0	0		Aetna Asset Advisors, LLC	DE		Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
	AETNA INC.	00000	23-2354500	0	0		U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		38-3704481	0	0		Aetna Capital Management, LLC	DE		Aetna Financial Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.	00000	11-3667142	0	1314522		Aetna Partners Diversified Fund, LLC	DE		Aetna Capital Management, LLC	Ownership	100,000	Aetna Inc.	N	1
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							Aetna Partners Diversified Fund (Cayman),				la u		L	I	
	AETNA INC.	00000		U	1460020		Limited	CYM	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc	N	2
	AETNA INC.	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
.0001	AETNA INC.	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Owner ship	100.000	Aetna Inc.	N	0
	AETNA INC.	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE		Aetna Financial Holdings, LLC	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.		59-3269144	0	0		Horizon Behavioral Services, LLC	DE		Aetna Financial Holdings, LLC	Owner ship	E100.000	Aetna Inc.	N	0
	AETNA INC.		61-1193498	ő	0			DE	NIA		Ownership	_ 100.000	Aetna Inc.	N	
				v	v		Employee Assistance Services, LLC			Horizon Behavioral Services, LLC					0
0001	AETNA INC.		33-0052273	U	U		Health and Human Resource Center, Inc	CA		Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	N	
	AETNA INC.		75-2420973	0	0		Resources for Living, LLC	TX		Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		22-3178125	0	0		Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.		27-1773021	ő 	0		Aetna Card Solutions, LLC	CT		Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc.		
				·	·									N	
	AETNA INC.		20-5216478	U	U		PayFlex Holdings, Inc.	DE		Aetna Financial Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.	00000	91-1774434	0	0		PayFlex Systems USA, Inc	NE	NIA	PayFlex Holdings, Inc	Ownership	100.000	Aetna Inc	N	0
	AETNA INC.		06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.	84450	57-0805126	ő	ő		Aetna Health Insurance Company of New York	NY		Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
				v	v										
	AETNA INC.		06-1571642	U	U		Aetna International Inc	CT	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	N	0
	AETNA INC.		98-0211470	0	0		Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International Inc	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		Aetna Insurance (Singapore) PTE. LTD.	SGP	IA	Aetna International Inc.	Ownership	100,000	Aetna Inc.	N	0
	AETNA INC.	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International Inc.	Ownership	100,000	Aetna Inc.	N	Ó
				· ·····	<u> </u>			BMU	NIA					N	×
	AETNA INC.			U	U		Goodhealth Worldwide (Global) Limited Aetna Global Benefits (Europe) Limited			Aetna Global Benefits (Bermuda) Limited	Ownership Ownership	100.000	Aetna Inc	N	<u>u</u>
	AFTNA INC	00000						GBR	NIA	Aetna Global Benefits (Bermuda) Limited					

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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
	Oraum Marris		Number	RSSD	CIK		Or Affiliates				Other)				
Code	Group Name	Code	Number	RSSD	CIK	International)		tion	Entity	(Name of Entity/Person)		tage	Entity(ies)/Person(s)	(Y/N)	
	AETNA INC	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	N	0
	AETNA INC.	00000		0	0		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	Aetna Inc.	N	
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49,000	Aetna Inc.	N	6
							Aetna Global Benefits (Asia Pacific) Limited								1
	AFTNA INC	00000		0	0		Actina drobal benefitis (Asta Factific) Eninted	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.			0	0			GBR				100.000			
				U	U		Spinnaker Bidco Limited		NIA	Spinnaker Topco Limited	Ownership		Aetna Inc.	N	0
	AETNA INC.	00000		U	0		Aetna Holdco (UK) Limited	<u>G</u> BR	NIA	Spinnaker Bidco Limited	Ownership	100.000	Aetna Inc	N	
	AETNA INC	00000		0	0		PT Asuransi Aetna Asia	IDN	NIA	Aetna International Inc	Ownership	77.000	Aetna Inc	N	
	AETNA INC.			0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc.	N	
0001	AETNA INC.	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership	_100.000	Aetna Inc.	N	0
										Aetna Global Benefits (Asia Pacific)					
0001	AETNA INC.	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Limited	Ownership	0.020	Aetna Inc.	N	
				•	•		Aetna Health Insurance Company of Europe DAC				ound on p		netha mo.		1
0001	AETNA INC.	00000		0	0		Retria fieartif filsurance company of Lurope DAC	IDI	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc.	N	
	AEINA INC.			U	U			IRL	IA	Aetha International Inc.	owner snip	_ 100.000	Aetha Inc.		· V
I I							Aetna (Shanghai) Enterprise Services Co. Ltd.								
.0001	AETNA INC	00000		0	0			CHN	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc	N	0
							Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.					
0001	AETNA INC.	00000		0	0		Services Co., Ltd.	CHN	NIA	Ltd.	Ownership	100,000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Aetna Global Benefits (Singapore) PTE, LTD, .	SGP	NIA	Aetna International Inc.	Ownership	E 100,000	Aetna Inc.	N	0
				•	•		terna arobar bonerres (erngapere) ric. cib. :			Aetna Global Benefits (Singapore) PTE, LTD.			Noting 110.		1
0001	AETNA INC.	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	forma drobar bonerres (orngapore) rie, erb.	Ownership	99,980	Aetna Inc.	N	3
	AETNA INC.		22-2578985	0	0		AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Ownership	100,000	Aetna Inc.	N	· 2
	AEINA INC.		22-23/0803	0	0										
	AETNA INC.	00000		0	0		Aetna Global Holdings Limited	GBR	NIA	Aetna International Inc.	Ownership	_100.000	Aetna Inc	N	0
	AETNA INC	00000		0	0		Aetna Korea Ltd	KOR	NIA	Aetna Global Holdings Limited	Ownership	100.000	Aetna Inc	N	0
0001	AETNA INC.	00000		0	0		Healthagen International Limited	GBR	NIA	Aetna Global Holdings Limited	Ownership	_100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Futrix Limited	NZL	NIA	Health Data & Management Solutions, Inc	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		06-1182176	0	0		PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership	.55.000	Aetna Inc.	N	8
	AFTNA INC		52-2182411	0	0		Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc	N	0
	AETNA INC.		47-0970432	0	0		Health Data & Management Solutions, Inc.	DE	NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.		23-2604867	0	0		Aetna Integrated Informatics, Inc.		NIA	Active Health Management, Inc.	Ownership	100.000	Aetna Inc.		
				·	·									N	
	AETNA INC.		27-2192415	U	U		Health Re, Inc	VT	IA	Aetna Inc	Ownership	100.000	Aetna Inc	N	Q
	AETNA INC.		81-0579372	0	0		Phoenix Data Solutions LLC	DE	NIA	Aetna Inc	Ownership	_100.000	Aetna Inc	N	0
	AETNA INC.		46-2469464	0	0		Heal thagen LLC	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	
	AETNA INC.		51-0029326	0	0		ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.	00000	33-0807547	0	0		Medicity LLC	DE	NIA	Aetna Inc.	Owner ship	_100.000	Aetna Inc.	N	0
0001	AETNA INC.	00000		0	0		Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.	00000		0	0		Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc.	N	Ō
	AETNA INC.		27-0259978	0	0		Novo Innovations, LLC	DE	NIA	Medicity Inc.	Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.		27-1170966	0	0		Allviant Corporation	DE	NIA	Medicity Inc.	Ownership	L 100.000	Aetna Inc.	N	
				0	0		Allylant corporation								0
.0001	AETNA INC.	81973	75-1296086	U	U		Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N.	0
							Aetna Better Health of Kentucky Insurance			Coventry Health and Life Insurance Company					1
	AETNA INC.		47-3279217	0	0		Company	KY	IA		Ownership	100.000	Aetna Inc.	N	0
	AETNA INC.	00000	52-1801446	0	0		Group Dental Service, Inc	MD	NIA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
	AETNA INC.		52-2056201	0	0		Group Dental Service of Maryland, Inc.	MD	IA	Group Dental Service, Inc.	Ownership.	100.000	Aetna Inc.	N	0
	AETNA INC.		81-4345344	0	0		Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
	AETNA INC.		42-1244752	0	0		Aetna Health of Iowa Inc.	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
				0	0						Ownership		Aetna Inc.		
0001	AETNA INC.	95925	42-1308659	U	U		Coventry Health Care of Nebraska, Inc	NE	IA	Aetna Health Holdings, LLC	ownership	100.000	Aetha INC.	N	0
							Aetna Risk Assurance Company of Connecticut								
	AETNA INC.		47-2049117	0	0		Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	
	AETNA INC.		74-2381406	0	0		Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	
	AETNA INC.		23-2366731	0	0		HealthAssurance Pennsylvania, Inc.	PA	IIA	Aetna Health Holdings, LLC	Ownership	L100.000	Aetna Inc.	N	
							the second s			the second se					1

					Carden Cardina and Cardina										
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
					1111						Туре	lf			
											of Control	Control		100	
											(Ownership,	is		ls an	6
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC					Names of								
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	*
							Coventry Prescription Management Services,								
	TNA INC	00000	47-0854096	0	0		Inc	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	0
	TNA INC.		81-3564875	0	0		Aetna Better Health of Nevada Inc.	NV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
0001 AE	TNA INC.		54-1576305	0	0		Coventry Health Care of Virginia, Inc.	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AE	TNA INC.		01-0646056	0	0		Coventry Transplant Network, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AE	TNA INC.	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AE	TNA INC.		43-1702094	0	0		Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	_100.000	Aetna Inc.	N	0
0001 AE	TNA INC.	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
.0001 AE	TNA INC.		62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
0001 AE	TNA INC.		47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	TNA INC.		48-0840330	0	0		Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	TNA INC.		81-3370401	0	0		Aetna Better Health of Kansas Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	TNA INC		20-1052897	0	0		Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100 000	Aetna Inc	N	0
	TNA INC.		87-0345631	0	0		Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
	INA INC.		20-4416606	0	0		Aetna Better Health Inc.	TN	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	INA INC.		37-1241037	0	0		Coventry Health Care of Illinois, Inc.	IL III	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
			0/ 124100/	•	•		Coventry Health Care National Accounts. Inc.	"	······	Actina Heartin Hordings, EEO	owner arrp		Aetha me.		
0001 AE	TNA INC	00000	20-8070994	0	0		covenity nearth care wattonal Accounts, the.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100,000	Aetna Inc.	N	
	INA INC.		20-5185442	0	0		Coventry Health Care National Network, Inc		NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	INA INC.		20-3163442	0	0			DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	
UUUT AE	INA INC.		20-1293/72	U	U		Coventry Consumer Advantage, Inc.	UC	NIA	Aetha health holdings, LLC	ownersnip		Aetha Inc.	·	0
0004	TNA INC	00000	00.0070054		•		Coventry Health Care Workers' Compensation,	DE		tates the life to the second second	Ownership	100,000	Astes tes	N	0
0001 AE	INA INC.		20-8376354	U	0		Inc	UE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	N	· u
							51 1 A 1 H H H A 1 A 1			Coventry Health Care Workers' Compensation,	A 11	100.000		N	
0001 AE	TNA INC		20-4096903	0	0		First Script Network Service, Inc	NV	NIA	Inc	Ownership	100.000	Aetna Inc.	N	0
					_					Coventry Health Care Workers' Compensation,					
0001 AE	TNA INC		06-1095987	0	0		MetraComp, Inc	CT	NIA	Inc	Ownership	100.000	Aetna Inc	N	0
I I										Coventry Health Care Workers' Compensation,					
0001 AE	TNA INC	00000	74-2879984	0	0		Medical Examinations of New York, P.C.	NY	NIA	Inc	Ownership	100.000	Aetna Inc.	N	9
I I										Coventry Health Care Workers' Compensation,					
0001 AE	TNA INC	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc	TN	NIA	Inc	Ownership	100.000	Aetna Inc.	N	0
I I										Coventry Health Care Workers' Compensation,	-				
0001 AE	TNA INC.		87-0443226	0	0		Coventry Rehabilitation Services, Inc.	DE	NIA	Inc.	Ownership	100.000	Aetna Inc.	N	
0001 AE	TNA INC.	00000	20-1736437	0	0		First Health Group Corp	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
I I							First Health Life & Health Insurance Company			• ·					
0001 AE	TNA INC.		38-2242132	0	0			ТХ	IA	First Health Group Corp.	Ownership	100.000	Aetna Inc.	N	
	TNA INC.		52-1320522	0	0		Claims Administration Corp.	MD	NIA	First Health Group Corp.	Ownership	100.000	Aetna Inc.	N	0
	INA INC.		20-1130063	0	0		Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership	L100.000	Aetna Inc.	N	0
	TNA INC.		65-0986441	0	0		Coventry Health Care of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	L100.000	Aetna Inc.	N	0
	INA INC.		65-0453436	0	0		Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
	INA INC.		59-3750548	0	0		Carefree Insurance Services. Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc.	N	0
			36-4391310	0	0		bswift LLC	DF	NIA	Aetna Health Holdings, LLC	Ownership	100 000	Aetna Inc.	N	Ó
	INA INC.		38-3348145	0	0		Corporate Benefit Strategies, Inc.	DE	NIA	bswift LLC	Ownership	L 100.000	Aetna Inc.	N	0
	INA INC.		26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc.	N	0
	INA INC.		37-1448790	ŏ	0		Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	
	INA INC.		20-2516317	ő	0		MHNet Life and Health Insurance Company	TX	NIA	MHNet Specialty Services, LLC	Ownership	L100.000	Aetna Inc.	N	
	INA INC.		72-1106596	0	0		Mental Health Associates, Inc.	1A	NIA	MHNet Specialty Services, LLC	Ownership	L 100.000	Aetna Inc.	N.	
	INA INC.		20-4276336	0	0		MENet of Florida, Inc	FL	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc.	N	·
	INA INC.		20-42/6336	0	0		Aetna Better Health of Washington, Inc.		IA	Aetna Health Holdings, LLC	Ownership Ownership	100.000	Aetna Inc.	N	
AE	INA INV.	10242	01-0000233	۰ ۷	v			WA	IA	Netha nearth nordings, LLC	owner sinp	- 100.000	Netlia INC	N	0
0004		00000	04 5040300		•		Banner Health and Aetna Health Insurance	N E			0 ti-	E4 000	Autor too		
0001 AE	TNA INC	00000	81-5212760	U	U		Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc	Ownership	51.000	Aetna Inc	N	
					-		Banner Health and Aetna Health Insurance			Banner Health and Aetna Health Insurance					-
0001 AE	TNA INC	16058	81-5281115	0	0		Company	AZ	IA	Holding Company LLC	Ownership	100.000	Aetna Inc	N	
	TNA INC.	16059						AZ		Banner Health and Aetna Health Insurance		100.000	Aetna Inc.	1	
			81-5290023				Banner Health and Aetna Health Plan Inc.		IA	Company	Ownership				

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											Туре	lf	- COLUMN		
											of Control	Control		1000	1
											(Ownership,	is		ls an	1
						Name of Securities			Relation-		Board,	Owner-		SCA	1
						Exchange		Domi-	ship		Management,	ship		Filing	1 1
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Be-	1 1
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	1
Code	Group Name	Company	Number	RSSD	СК	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Y/N)	•
Code	Group Name	Code	Number	ROOD	UIK	International)	Allina Health and Aetna Health Insurance	uon	Enuty	(Name of Entity/Person)	Other)	tage	Entity(les)/Person(s)	(T/N)	\vdash
0004		00000	04 5440000	0				DF	NIA	Later 100 lb Ld and Later	Ownership	50 000	Astes tes		40
	AETNA INC.		81-5112888	0	0		Holding Company LLC	UE			Ownership	00.000	Aetna Inc	^N	13
0004	AETNA INC.	10101	00.0004407	0	0		Allies the life and Astron Jacobson Company	MN		Allina Health and Aetna Health Insurance	Ownership	100,000	Aetna Inc.		
	AEINA ING.	16 194	82-2091197	U	U		Allina Health and Aetna Insurance Company	MN(IA	Holding Company LLC	Ownership	_ 100.000	Aetha Inc.	^N	4
0004	AETNA INC.	00000	00.0474057	•			Sutter Health and Aetna Insurance Holding	DE	NIA		Ownership	.50.000	Aetna Inc.		
	AEINA ING.		82-2171057	U	U		Company LLC Sutter Health and Aetna Administrative	UE	NIA	Aetna ACO Holdings, Inc Sutter Health and Aetna Insurance Holding	Ownership		Aetha Inc.	^{NL}	14
0001	AETNA INC.	00000	82-2560624	0	0			DF	NIA	Suffer Health and Aetha Insurance Holding Company LLC	Ownership	100,000	Aetna Inc.		
	AEINA ING.		82-2360624	U	U		Services LLC	UE	NIA		Ownership	100.000	Aetha Inc.	^N	· •
0004		00000	81-5290023	•			Sutter Health and Aetna Insurance Company			Sutter Health and Aetna Insurance Holding	Ownershin	100,000	Aetna Inc.		
0001	AETNA INC AETNA INC		81-5290023	0	0		Aetna Holdings (Thailand) Limited	CA	NIA	Company LLC Aetna Global Holdings Limited	Ownership		Aetna Inc. Aetna Inc.	N.	
	AEINA ING.			U	U		Bupa Health Insurance (Thailand) Public	IHA	NIA	Aetha Global Holdings Limited	Ownership	49.000	Aetna Inc.	^N	16
0001	AETNA INC.	00000		0	0		Company Limited	THA	NIA	Aetna Global Holdings Limited	Ownership	25,000	Aetna Inc.	м	17
	AETNA ING			U	·		Bupa Health Insurance (Thailand) Public	INA	NIA	Aetha Grobal Hordings Limited	ownership	23.000	Aetha Inc.	ⁿ L	<mark> /</mark>
0001	AETNA INC.	00000		0	0		Company Limited	THA	NIA	Minor Health Entreprise Co. Ltd.	Ownership	46.000	Aetna Inc.	м	17
	AETNA ING.			U	•		Bupa Health Insurance (Thailand) Public		NIA	winor nearth Entreprise co, Ltd.	ownership	40.000	Aetha Inc.	ⁿ	¹⁷
0001	AETNA INC.	00000		0	0		Company Limited	THA	NIA	Health Care Management Co. Ltd	Ownership		Aetna Inc.	м	47
	AETNA INC.	00000		0	0		Health Care Management Co. Ltd.	THA	NIA	Aetna Global Holdings Limited	Ownership	49.000	Aetna Inc.	R	
	AETNA INC.	00000		0	0		Minor Health Entreprise Co. Ltd.	INA	NIA	Aetna Global Holdings Limited	Ownership		Aetna Inc.	^{DL}	
0001	AETNA INC.	00000		0	0		Minor Health Entreprise Co. Ltd.	 THA	NIA	Bupa Holdings (Thailand) Limited	Ownership		Aetna Inc.	n.	18
0001	AETNA INC.	00000		0	0		Health Care Management Co. Ltd.		NIA	Bupa Holdings (Thailand) Limited	Ownership		Aetna Inc	R.	0 0
	AETNA INC.	00000		0	0		Aetna Global Benefits (Bahamas) Limited	BHS		Aetna Global Benefits (Bermuda) Limited	Ownership		Aetna Inc.	N	0
	AETNA INC.	00000		0	0		Aetna Pharmacy Management Services LLC	DE		Aetna Health Holdings, LLC	Ownership		Aetna Inc.	N	0
	AETNA INC.		82-3333789	0	ő		Aetna Better Health of North Carolina Inc.	NC		Aetna Health Holdings, LLC	Ownership		Aetna Inc.	N	0
			02 0000100	•	·		notha bottor noarth of north caroffila IIIC.			notina ilioartii ilorumyo, LEV	venior on p		noting 1110.	· ······	
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Asterisk	Explanation
1	Aetna Life Insurance Company, Aetna Health and Life Insurance Company and Aetna Health Management, LLC own substantially all of the non-managing membership interests.
2	Aetna Life Insurance Company owns the Class C participating shares.
3	Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
4	Actna ACO Holdings, Inc. is owned by Actna Life Insurance Company (60.3%), Actna Health Inc. (PA) (39.5%) and Actna Health Holdings, LLC (0.2%).
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.
1	ARCHA ACU HOTQINGS INC. OWNS 30% and 30% is owned by innovation health system foundation, an unattitated 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.
	100% owned through Aetna's nominees.
10	Texas Health + Aetna Health Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% by Texas Health Resources, an unaffiliated company.
11	Texas Health + Aetna Health Plan Inc. became a direct subsidiary of Texas Health + Aetna Health Insurance Company February 2017.
12	Banner Health and Aetna Health Insurance Holding Company LLC is 51% owned by Aetna ACO Holdings Inc. and 49% owned by Banner Health.
13	Allina Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Allina Health.
14	Sutter Health and Aetna Insurance Holding Company LLC is 50% owned by Aetna ACO Holdings Inc. and 50% owned by Sutter Health Plan Products Organization, LLC.
	PT Asuransi Aetna Asia is 77% owned by Aetna International Inc. and 23% owned by PT Asuransi Central Asia.
16	Aetna Holdings (Thailand) Limited is 49% owned by Aetna Global Holdings Limited and 51% owned by Mr. Paiboon Sutantivorakoon
17	Bupa Health Insurance (Thailand) Public Company Limited is 46% owned by Minor Health Entreprise Co, Ltd.; 25% owned by Aetna Global Holdings Limited; and 28% owned by Health Care Management Co. Ltd. (Bermuda) and total 1% owned by Aetna Global Benefits Limited (1 Share); Mr. Sansanapongpherchar
	(1 Share); Mr. Jitphasong Itsaraphakded (1 Share); Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)
18	Minor Health Entreprise Co, Ltd has 1 share owned by Aetna Global Benefits (Bermuda) Ltd

SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

	-											
1	2	3	4	5	6	7	8	9	10	11	12	13
						Income/ (Disbursements)						
					Purchases, Sales	(Dispursements)						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent.	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's		Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
	52-2182411	Active Health Management, Inc	0	0	0	0		0		0	113,860,338	0
		Aetna Behavioral Health, LLC	0	0	0	0	(342,504)	0		0	(342,504)	0
14408	45-2634734	Aetna Better Health Inc. (NY)	0	0	0	0	(33,860,275)	0		0	(33,860,275)	0
	45-2764938	Aetna Better Health Inc. (OH)	(90,000,000)	0	(7,820,816)	0	(87, 193, 899)	0		0	(185,014,715)	0
	80-0671703	Aetna Florida Inc.		0		0	(199,538)	0		0	(199,538)	0
		Aetna Better Health Inc. (GA)	0	0	0	0	(11,136)	0		0		0
	27-2512072	Aetna Better Health Inc. (IL)			0	0	(114,923,457)	0		0	(107,923,457)	0
14040	21-2312012	Aetna Better Health Inc. (TN)			0	0		0		0		0
	47-3850677	Actna Better Health of Iowa Inc	0	0	0	0		0		0		0
	47-3279217	Aetna Better Health of Kentucky Insurance		0	0	0		0		0		0
13/01	41-0219211		0	0	(12,979,171)	0	(86,588,034)	0		0	(99,567,205)	0
10100	00 1050007	Company	0	0	(12,9/9,1/1)	0		0		0		0
	20-1052897	Aetna Better Health of Michigan Inc			0	0	(41,909,951)	0		0		0
	43-1702094	Aetna Better Health of Missouri LLC	(55,000,000)		0	0	(19,299,459)	0		0		0
95040	74-1844335	Aetna Better Health of Texas Inc	(15,100,000)	0	0	0	(34,564,516)	0		0		0
		Aetna Better Health, Inc. (NJ)	(14,000,000)	0	0	0		0		0		0
	27-0563973	Aetna Better Health Inc. (PA)	(58,200,000)	0	(14,947,906)	0	(108,251,644)	0		0	(181,399,550)	0
		Aetna Better Health Inc. (CT)		0	0	0	(32,471)	0		0	(32,471)	0
	38-3704481	Aetna Capital Management, LLC		0	0	0	2,377,311	0		0		0
11183		Aetna Dental Inc. (NJ)	0	0	0	0	(1,713,557)	0		0	(1,713,557)	0
95910	06-1177531	Aetna Dental Inc. (TX)	(5,000,000)	0	0	0	(4,486,961)	(42,914)		0		0
	06-1160812	Aetna Dental of California Inc	(5,000,000)	0	0	0	(2,067,032)	0		0	(7,067,032)	0
78700	06-0876836	Aetna Health and Life Insurance Company	(398,298,553)	0	(512,084)	0	(252, 146, 458)	(1,997,631,580)		0	(2,648,588,675)	0
	30-0123754	Aetna Health Holdings, LLC	1,142,850,000		0	0	0	0		0	1,063,350,000	0
	23-2442048	Aetna Health Inc. (CT)	(19,000,000)	0	(3,350,000)	0	(22,835,290)	0		0	(45, 185, 290)	0
	59-2411584	Aetna Health Inc. (FL)	(85,000,000)	0	0	0	(175,982,611)	0		0	(260,982,611)	0
95094	58-1649568	Aetna Health Inc. (GA)	(55,500,000)	0	0	0	(35,245,630)	0		0		0
	42-1244752	Aetna Health of Iowa Inc	0	0	0	0	(29,648,028)	0		0	(29,648,028)	0
	01-0504252	Aetna Health Inc. (ME)	(2,450,000)	0	0	0	(8,444,080)	0		0	(10,894,080)	0
95756	23-2861565	Aetna Health Inc. (MI)	0	0	0	0	(4,021)	0		0	(4.021)	0
	52-1270921	Aetna Health Inc. (NJ)	(16,800,000)	0	0	0	(61,052,304)	0		0		0
	22-2663623	Aetna Health Inc. (NY)		0	(6,717,909)	0	(21,377,500)	0		0	(28,095,409)	0 0
		Aetna Health Inc. (NY)		۰۵	(0,717,303)	0	(385,421,951)			0		
	76-0189680	Aetna Health Inc. (TX)	(9,600,000)	0 0	0 0	0 0	(18,578,969)			0	(405,519,507)	
	57-0805126	Aetna Health Insurance Company of New		0	0	0		0		0		0
	51 0005120	York	0	0	0	0		0		0	(21,217)	٥
	13-3670795	Aetna Health Management, LLC	0	0	0	0		0		0		0
	95-3402799	Aetna Health of California Inc	(29,200,000)	0	0	0	(125,233,136)	0		0		0
	95-3402799 87-0345631		(15,000,000)	0	0	0		0		0		0
		Aetna Health of Utah Inc.		U	0	0	(47,316,706)	0		0		0
15827	47-4352768	Aetna HealthAssurance Pennsylvania Inc			0	0		0		0		0
	23-2229683	Aetna Inc.		0	0	0	1, 155,999,241	0		0	1,998,999,241	0
		Aetna Insurance (Singapore) Pte. Ltd	0	0	0	0	(345,618)	0		0	(345,618)	0
36153	06-1286276	Aetna Insurance Company of Connecticut	0	0	0	0	(35,204)	0		0	(35,204)	<u>0</u>
		Aetna Life & Casualty Bermuda Limited	0	0	0	0	(5,926,364)	0		0	(5,926,364)	0
60054	06-6033492	Aetna Life Insurance Company		1,575,697		0	(2,260,919,370)	5,266,541,885		0		1,426,344,357

SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
	2	3	7	5	0	Income/	0	5	10		12	15
						(Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent,	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's		Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
		Aetna Medicaid Administrators, LLC	0	0	0	0		0		0		(
		Aetna Multi Strategy 1099 Fund	(2,018,874)	0		0	0	0		0	(1,501,652)	(
		Aetna Partners Diversified Fund (Cayman),										
		Limited	(6,732,525)	0		0	0	0		0	(6,019,936)	(
		Aetna Partners Diversified Fund, LLC	(18,588,228)	0	1,982,688	0	0	0		0	(16,605,540)	(
	30-0123760	Aetna RX Home Delivery, LLC	0	0	0	0		0		0		(
		Aetna Specialty Pharmacy, LLC	0	0	0	0		0		0		(
		Aetna Ventures, LLC		(1,575,697)	0	0	0	0		0	1,050,532	(
12321		American Continental Insurance Company	0	0	(5,747,336)	0	(101,593,661)	0		0	(107,340,997)	
		American Health Holding, Inc	0	0	0	0		0		0		(
68500		Continental Life Insurance Company of										
		Brentwood, Tennessee	0	0	(8,883,464)	0		0		0	(107,594,585)	(
81973	75-1296086	Coventry Health and Life Insurance										
		Company	(200,000,000)	0	(30,695,166)	0	(264,703,904)	0		0	(495,399,070)	(
	65-0986441	Coventry Health Care of Florida, Inc		0	0	0	(56,658,674)	0		0	(138,658,674)	(
		Coventry Health Care of Illinois, Inc		0	0	0		0		0		(
		Coventry Health Care of Kansas, Inc		0	0	0	(6,094,954)	0		0		(
96377		Coventry Health Care of Missouri, Inc		0	(6,769,306)	0	(112,485,136)	0		0	(169,254,442)	(
	42-1308659	Coventry Health Care of Nebraska, Inc	0	0	(3, 147, 315)	0	(7,965,118)	0		0	(11, 112, 433)	(
		Coventry Health Care of Virginia, Inc	0	0	0	0	(25,697,145)	0		0	(25,697,145)	(
95408	55-0712129	Coventry Health Care of West Virginia,										
		Inc	(15,000,000)	0	(3,473,483)	0	(40,791,653)	0		0	(59,265,136)	(
95266	65-0453436	Coventry Health Plan of Florida, Inc		0	0	0	(93,434)	0		0	(33,093,434)	(
	62-1411933	Coventry HealthCare Management										
		Corporation		0	0	0	(8,462)	0		0		(
	47-0854096	Coventry Prescription Management										
		Services, Inc	0	0	0	0		0		0		(
90328	38-2242132	First Health Life & Health Insurance										
		Company	0	0	0	0	(182,872,313)	0		0	(182,872,313)	(
	52-2056201	Group Dental Services of Maryland, Inc	(5,000,000)	0	0	0	(160,454)	0		0	(5, 160, 454)	(
	52-1801446	Group Dental Services, Inc.	(1,000,000)	0	0	0	0	0		0	(1,000,000)	(
		Health and Human Resources Center, Inc	(2,300,000)	0	0	0	(1,894,415)	0		0	(4, 194, 415)	(
		Health Re, Inc	(210,000,000)	0	0	0		(3,268,910,305)		0	(3,562,438,863)	(1,277,227,07
11102		HealthAssurance Pennsylvania, Inc	(43,200,000)	0	(7,531,425)	0	(111,540,603)	0		0	(162,272,028)	(
		Horizon Behavioral Services LLC	2,300,000	0	0	0	0	0		0	2,300,000	(
		Innovation Health Holdings, LLC	0		0	0	1,908,962	0		0		(
	46-0674828	Innovation Health Insurance Company	0	40,000,000	0	0	(55,309,008)	0		0	(15,309,008)	(4,476
15098	46-0682197	Innovation Health Plan, Inc.	0	6,000,000	0	0	(18, 186, 336)	(121,603)		0	(12,307,939)	
		iTriage, ЦС	0	0	0	0	5,660,000	0		0	5,660,000	(
		Medicity, Inc	0	0	0	0		0		0		(
12509		MHNet Life and Health Insurance Company	0	0	0	0	2,854	0		0	2,854	(
		MHNet Specialty Services, LLC	0	0	0	0		0		0		(
		PayFlex Sytems USA, Inc	0	0	0	0		0		0		(
		First Health Group Corp		0	0	0	0	0		0		

SCHEDULE Y PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7 Income/	8	9	10	11	12	13
						(Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC	ID	Names of Jacobs and Depart	Shareholder	Oralital	Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of the Insurer's		Losses and/or Reserve Credit
Company Code	Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Dividends	Capital Contributions	Mortgage Loans or Other Investments	the Benefit of any Affiliate(s)	Agreements and Service Contracts	Reinsurance Agreements	*	Business	Totals	Taken/(Liability)
		Florida Health Plan Administrators, LLC	(2,000,000)	0	0	0	0	0		0	(2,000,000)	0
		First Script Network Services, Inc		0	0	0	0	0		0	(30,000,000)	0
16072		Aetna Better Health of Kansas Inc	0	0	0	0	(3,732)	0		0	(3,732)	0
15919	81-1143850	Aetna Better Health of Oklahoma Inc	0	0	0	0	(3,643)	0		0	(3,643)	0
95173	74-2381406	Aetna Health Inc. (LA)	(12,000,000)	0	0	0	(60,072,218)	0		0	(72,072,218)	0
95109	23-2169745	Aetna Health Insurance Company	0	0	0	0	(2,078,077)			0	(1,816,004)	0
		Claims Administration Corp	(17,000,000)	0	0	0	0	0		0	(17,000,000)	0
16059	81-5290023	Banner Health and Aetna Health Plan, Inc.										
			0		0	0	(975,408)	0		0		(6,742,988)
16132		Texas Health + Aetna Health Plan Inc	0		0	0		0		0		(676,746)
16058	81-5281115	Banner Health and Aetna Health Insurance										
		Company	0		0	0	0	0		0		(58, 525, 989)
16121	81-4749336	Texas Health + Aetna Health Insurance										
		Company	0		0	0	0	0		0		
		Banner Health and Aetna Health Insurance										
		Holding Company LLC	0		0	0	0	0		0		0
		Texas Health + Aetna Health Insurance										
		Holding Company LLC	0	(45,000,000)	0	0	0	0		0	(45,000,000)	0
		Aetna Better Health of California Inc	0		0	0		0		0		0
16242		Aetna Better Health of Washington	0	3,500,000	0	0		0		0	3,503,991	0
		Aetna Resources	0	0	0	0		0		0	2,526,402,104	0
		Aetna Better Health of Nevada Inc	0	0	0	0	(350,547)	0		0	(350,547)	0
9999999 Co	ntrol Totals		0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

	following the interrogatory questions.		Bosponsos
	MARCH FILING	-	Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile b	y March 1?	YES
2.	Will an actuarial opinion be filed by March 1? Will the confidential Risk-based Capital Report be filed with the NAIC by March	10	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March Will the confidential Risk-based Capital Report be filed with the state of domicile		YES
			165
_	APRIL FILING		
5. 6.	Will Management's Discussion and Analysis be filed by April 1? Will the Supplemental Investment Risks Interrogatories be filed by April 1?		YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?		YES
8.	JUNE FILING Will an audited financial report be filed by June 1?		YES
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and e	lectronically with the NAIC by June 1?	YES
10.	AUGUST FILING Will the regulator-only (non-public) Communication of Internal Control Related M		
10.	electronically with the NAIC (as a regulator-only non-public document) by Augu		YES
	The following supplemental reports are required to be filed as part of your annu business for which the special report must be filed, your response of NO to the be printed below. If the supplement is required of your company but is not being the interrogatory questions.	specific interrogatory will be accepted in lieu of filing a "NONE" filed for whatever reason enter SEE EXPLANATION and provid	report and a bar code will
11.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the sta		NO
12.	Will the Supplemental Life data due March 1 be filed with the state of domicile a		NO
13. 14.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state Will the actuarial opinion on participating and non-participating policies as requir		NO
	be filed with the state of domicile and electronically with the NAIC by March 1?	-	NO
15.	Will the actuarial opinion on non-guaranteed elements as required in Interrogato domicile and electronically with the NAIC by March 1?	ry 3 to Exhibit 5 to Life Supplement be filed with the state of	NO
16.	Will the Medicare Part D Coverage Supplement be filed with the state of domicil	e and the NAIC by March 1?	NO
17.	electronically with the NAIC by March 1?		NO
18.	Will an approval from the reporting entity's state of domicile for relief related to the	he one-year cooling off period for independent CPA be filed	NO
19.	electronically with the NAIC by March 1? Will an approval from the reporting entity's state of domicile for relief related to the	he Requirements for Audit Committees be filed electronically	
	with the NAIC by March 1?		NO
20.	Will the Long-Term Care Experience Reporting Forms be filed with the state of d	domicile and the NAIC by April 1?	NO
21.	Will the Supplemental Life data due April 1 be filed with the state of domicile and		NO
22. 23.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the sta Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense	Allocation Report be filed with the state of domicile and the	NO
	NAIC by April 1?		NO
24.	Will Management's Report of Internal Control Over Financial Reporting be filed		NO
	Explanations:		
11. 12.	The data for this supplement is not required to be filed. The data for this supplement is not required to be filed.		
13.	The data for this supplement is not required to be filed.		
14.	The data for this supplement is not required to be filed.		
15. 16.	The data for this supplement is not required to be filed. The data for this supplement is not required to be filed.		
17.	NOT APPLICABLE		
18.	NOT APPLICABLE		
19. 20.	NOT APPLICABLE The data for this supplement is not required to be filed.		
21.	The data for this supplement is not required to be filed.		
22. 23.	The data for this supplement is not required to be filed. The data for this supplement is not required to be filed.		
24.	The data for this supplement is not required to be filed.		
	Bar Codes:		
11.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]		
12.	Life Supplement [Document Identifier 205]		
12.			
			0 0 0
13.	SIS Stockholder Information Supplement [Document Identifier 420]		
14.	Participating Opinion for Exhibit 5 [Document Identifier 371]		
15.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]		
15.	Non-Guaranteed Opinion for Exhibit 5 [Document Identiner 570]		
16.	Medicare Part D Coverage Supplement [Document Identifier 365]		
17.	Relief from the five-year rotation requirement for lead audit partner [Document		
	Identifier 224]		
	Deliaf from the one user applies off and disciplination of the ODA	1 5 6 1 1 2 0 1 7 2 2 4 0 0	
18.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]		
19.	Relief from the Requirements for Audit Committees [Document Identifier 226]		

20. Long-Term Care Experience Reporting Forms [Document Identifier 306]

- 21. Life Supplement [Document Identifier 211]
- Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216] 22.
- 23. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- Management's Report of Internal Control Over Financial Reporting [Document Identifier 223] 24.



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Aetna Better Health Inc. (a New Jersey corporation) Actuarial Opinion

AETNA BETTER HEALTH INC. (A NEW JERSEY CORPORATION)

STATEMENT OF ACTUARIAL OPINION

TABLE OF KEY INDICATORS

This Opinion is: $$ Unqualifie	d Qualified	Adverse	Inconclusive	e
IDENTIFICATION SECTION $\sqrt{Prescribed Wording Only}$	I Prescribed Wordin	g with Addition	al Wording	Revised Wording
SCOPE SECTION $\sqrt{Prescribed Wording Only}$	Prescribed Wordin	g with Addition	al Wording	Revised Wording
RELIANCE SECTION √ Prescribed Wording Only	Prescribed Wordin	ng with Addition	al Wording	Revised Wording
OPINION SECTION Prescribed Wording Only	Prescribed Wordin	g with Addition	al Wording	Revised Wording

RELEVANT COMMENTS

Revised Wording – item "C" in the Opinion section – I used: "required by the state in which this statement is filed", as opposed to the prescribed wording: "required by any state".

The Actuarial Memorandum includes "Deviation from Standard" wording regarding conformity with an Actuarial Standard of Practice.

IDENTIFICATION SECTION

I, William R. Jones, Vice President and Valuation Actuary, am an employee of Aetna Resources LLC, acting in my capacity as the opining actuary for Aetna Better Health Inc. (a New Jersey corporation) and a member of the American Academy of Actuaries. I was appointed on 05/01/2014 in accordance with the requirements of the statement instructions. I meet the Academy qualification standards for rendering this opinion.

SCOPE

I have examined the assumptions and methods used in determining loss reserves, actuarial liabilities and related items listed below, as shown in the annual statement of the organization, as prepared for filing with state regulatory officials, as of December 31, 2017.

A. Claims Unpaid (Page 3, Line 1)	\$36,574,961
B. Accrued Medical Incentive Pool and Bonus Payments (Page 3, Line 2)	\$402,172
C. Unpaid Claims Adjustment Expenses (Page 3, Line 3)	\$647,861
D. Aggregate Health Policy Reserves (Page 3, Line 4)	\$40,245,216
E. Aggregate life policy reserves (Page 3, Line 5)	\$0
F. Property/casualty unearned premium reserves (Pg3, Line6)	\$0
G. Aggregate Health Claim Reserves (Pg 3, Line 7)	\$0
H. Any other loss reserves, actuarial liabilities or related items presented as	
liabilities in the annual statement	Not Applicable
I. Specified actuarial items presented as assets in the annual statement	Not Applicable



Aetna Better Health Inc. (a New Jersey corporation) Supplemental Compensation Exhibit

SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2017

(To be filed by March 1) PART 1 - INTERROGATORIES

DADT 1 INTEDDOCATODIES

P	ART 1 – INTERROGATORIES		
1.	The reporting insurer is a member of a group of insurers or other holding company system?	Yes [X]	No []
	If yes, do the amounts below represent		
	1) total gross compensation paid to each individual by or on behalf of all companies which are part of the group; or	Yes [X]	No[]
	2) allocation to each insurer?	Yes[]	No [X]
2.	Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statemer	it any	
	commission on the business transactions of the reporting entity?	Yes[]	No [X]
3	Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contra	ects	

Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond a period of 12 months from the date of the agreement? Yes [X] No []

PART 2 - OFFICERS AND EMPLOYEES COMPENSATION (A)

1	2	3		5	6	7	8	5	6
I	2	3	4	5	0		0	5	0
Name and Principal				Stock	Option	Sign-on	Severance	All Other	Totals
Position*	Year	Salary (B)	Bonus (C)	Awards (D)	Awards (E)	Awards	Payments	Comp. (F)	(G)
1. Mark T. Bertolini	2017	\$1,200,000	\$2,079,600	\$ 6,534,208	\$8,399,195	\$ 0	\$ 0	\$537,813	\$18,750,816
Principal Executive Officer –	2016	1,141,762	1,656,000	6,510,109	8,693,798	0	0	660,637	18,662,306
Chairman, Chief Executive Officer and President	2015	1,034,483	1,840,000	5,970,103	8,144,312	0	0	273,981	17,262,879
2. Shawn M. Guertin	2017	\$ 814,615	\$1,260,000	\$ 1,275,123	\$2,644,207	\$ 0	\$ 0	\$ 28,210	\$6,022,155
Principal Financial Officer -	2016	796,935	979,000	1,230,021	2,851,587	0	0	28,124	5,885,667
Executive Vice President, Chief Financial Officer and Chief Enterprise Risk Officer	2015	773,946	1,437,503	1,230,040	2,945,460	0	0	27,080	6,414,02
3. Richard M. Jelinek	2017	\$ 800,000	\$1,305,000	\$ 3,069,090	\$2,581,997	\$ 0	\$ 0	\$161,020	\$7,917,107
Executive Vice President,	2016	796,935	1,056,000	1,200,020	2,782,035	0	0	487,931	6,322,921
Enterprise Strategy	2015	122,605	306,130	3,262,623	715,095	0	0	294,212	4,700,665
4. Karen S. Lynch	2017	\$ 931,500	\$1,553,000	\$ 1,650,056	\$3,421,894	\$0	\$ 0	\$110,296	\$7,666,746
Executive Vice President, National,	2016	919,483	1,229,000	1,530,026	3,547,079	0	0	101,938	7,327,526
Local and Regional Businesses, Government and Specialty Businesses	2015	919,828	1,728,000	1,500,063	3,541,015	0	0	69,882	7,758,788
5. Thomas J. Sabatino, Jr.	2017	\$ 750,000	\$1,083,000	\$ 2,455,327	\$2,177,569	\$ 0	\$ 0	\$855,737	\$ 7,321,633
Executive Vice President and	2016	502,874	822,000	4,550,128	3,765,090	600,000	0	748,413	10,988,505
General Counsel	2015	0	0	0	0	0	0	0	0
6. Francis S. Soistman, Jr.	2017	\$ 710,000	\$1,030,000	\$ 1,005,041	\$2,084,254	\$ 0	\$ 0	\$ 17,163	\$4,846,458
Executive Vice President,	2016	697,893	774,769	1,005,017	2,329,943	0	0	25,999	4,833,621
Government Services	2015	675,287	1,500,000	900,078	2,124,628	0	0	19,838	5,219,831
7. Margaret M. McCarthy	2017	\$ 660,000	\$ 859,000	\$ 855,093	\$1,773,173	\$ 0	\$ 0	\$ 52,025	\$4,199,291
Executive Vice President,	2016	649,526	668,000	840,014	1,947,438	0	0	46,568	4,151,546
Operations & Technology	2015	652,112	851,007	810,030	1,912,153	0	0	61,646	4,286,948
8. Steven B. Kelmar	2017	\$ 568,269	\$ 824,000	\$ 630,108	\$1,306,567	\$ 0	\$ 0	\$ 24,906	\$3,353,850
Executive Vice President,	2016	541,188	660,000	600,010	1,391,017	0	0	19,216	3,211,431
Corporate Affairs	2015	512,452	750,000	525,012	1,239,350	0	0	17,386	3,044,200
9. Jean C. LaTorre	2017	\$ 438,221	\$ 744,400	\$ 225,110	\$ 466,638	\$ 0	\$ 0	\$234,627	\$2,108,996
Vice President and Chief	2016	425,896	590,100	219,004	507,741	Ŭ Ŭ	0	181,867	1,924,608
Investment Officer	2015	432,788	722,197	225,020	531,173	0	0	7,647	1,918,825
10. Gary W. Loveman, Ph.D.	2017	\$ 814,615	\$ 1,355,149	\$ 4,424,527	\$3,110,813	\$ 0	\$ 0	\$ 110,184	\$9,815,288
Executive Vice President,	2016	796,935	1,057,000	1,200,020	2,782,035	Ŭ Ŭ	0	568,411	6,404,401
Consumer Health and Services	2015	137,990	319,550	4,200,104	3,324,828	0	0	23,242	8,005,714

* Principal position at December 31, 2017. Mr. Jelinek joined the Company in November, 2015 and was not a named executive officer in 2015 or 2016. On February 20, 2018, Mr. Loveman terminated employment with the Company.

PART 3 - DIRECTOR COMPENSATION (H)

	Paio	d or Deferre Dire	d for Serv ector	ices as	6 All Other	7
Name and Principal Position or Occupation and Company (if Outside Director)	2 Direct Compensation (I)	3 Stock Awards (J)	4 Option Awards	5 Other	All Other Compensation Paid or Deferred (K)	Total s
F. Aguirre, Former President and Chief Executive Officer of Chiquita Brands International, Inc.	\$110,000	\$170,056	\$0	\$0	\$16,190	\$296,246
F.M. Clark, President of Chicago Board of Education	\$107,500	\$170,056	\$0	\$0	\$64,495	\$342,051
B.Z. Cohen, Chairman of FinTech Acquisition Corp. II	\$111,500	\$170,056	\$0	\$0	\$64,495	\$346,051
M.J. Coye, M.D., Senior Executive in Residence for Avia Health Innovation	\$116,000	\$170,056	\$0	\$0	\$64,495	\$350,551
R.N. Farah, Chairman of Tiffany & Co.	\$128,000	\$170,056	\$0	\$0	\$61,975	\$360,031
J.E. Garten, Dean Emeritus of the Yale School of Management	\$106,500	\$170,056	\$0	\$0	\$59,495	\$336,051
E.M. Hancock, Former President of Jazz Technologies, Inc. and Former Chairman and CEO of Exodus Communications, Inc.	\$124,000	\$170,056	\$0	\$0	\$64,495	\$358,551
R.J. Harrington, Chairman Emeritus of The Cue Ball Group	\$132,000	\$170,056	\$0	\$0	\$18,710	\$320,766
E.J. Ludwig, Former Chairman of Becton, Dickinson and Company	\$159,500	\$170,056	\$0	\$0	\$63,073	\$392,629
J.P. Newhouse, Professor of Health Policy and Management at Harvard University	\$109,000	\$170,056	\$0	\$0	\$64,495	\$343,551
O.J. Snowe, Chairman and CEO of Olympia Snowe, LLC, Former U.S. Senator	\$109,000	\$170,056	\$0	\$0	\$18,710	\$297,766

PART 4 - NARRATIVE DESCRIPTION OF MATERIAL FACTORS
Provide a narrative description of any material factors necessary to gain an understanding of the information disclosed in the tables.

A. Disclosure is made for persons who served as officers of Aetna Life Insurance Company and/or will be included in Aetna Inc.'s 2018 Proxy Statement, and/or one or more of its subsidiaries (collectively, the "Company") at December 31, 2017. Includes:

1. All individuals serving as the principal executive officer ("PEO") or acting in a similar capacity during the last completed fiscal year, regardless of compensation level;

2. All individuals serving as the principal financial officer ("PFO") or acting in a similar capacity during the last completed fiscal year, regardless of compensation level;

3. The reporting entity's three most highly compensated executive officers, other than the PEO and PFO, who were serving as executive officers at the end of the last completed fiscal year; and

4. The next five most highly compensated employees whose individual total compensation exceeds \$100,000, based on 2017 W-2 information.

B. Amount includes salary deferred under the Company's deferral programs.

C. Amounts shown in this column represent cash bonus awards for the relevant calendar year under the ABP. For 2017, bonus pool funding under the ABP depended upon Aetna's performance against certain measures discussed under "Annual Performance-based Bonuses" in Aetna Inc.'s 2018 Proxy Statement. Mr. Bertolini's 2017 ABP award was paid 40% (\$2,079,600) in cash and 60% (\$3,119,400), in RSUs with a grant date of March 2, 2018, that vest over three years (one-third per year). These RSUs will be included in the 2018 Grants of Plan-Based Awards Table in Aetna's 2019 Proxy Statement.

D. The amounts reported in this column represent the aggregate grant date fair value of the stock awards granted in the relevant year computed in accordance with FASB ASC Topic 718, excluding forfeiture estimates. Refer to pages 131-134 of Aetna's 2017 Annual Report on Form 10-K for all relevant valuation assumptions used to determine the grant date fair value of the stock awards included in this column. Amounts shown in this column for 2017 include the grant date fair value of PSUs and RSUs granted to the NEOs in 2017 as well as the incremental fair value of certain PSUs and/or RSUs granted in 2015 or 2016 whose vesting was accelerated into 2017. The PSU grant date fair values for PSUs granted in 2017 are based upon the probable outcome of the performance conditions associated with these PSUs as of the grant date. Each vested PSU represents one share of Common Stock and will be paid in shares of Common Stock, net of applicable withholding taxes.

For information about the treatment of Company equity awards under the CVS Health Merger Agreement, see "Compensation Discussion and Analysis – Impact of the CVS Health Merger Agreement – Long-Term Incentive Equity Awards (SARs, PSUs and RSUs)" in Aetna's 2018 Proxy Statement.

The grant date fair value of the PSUs granted to these NEOs on February 17, 2017 assuming the highest level of performance conditions associated with these PSUs occurs is as follows: Mr. Bertolini \$8,100,209; Mr. Guertin \$2,550,247; Mr. Jelinek \$2,490,117; Mr. Loveman \$3,000,217; and Ms. Lynch \$3,300,113. The Standard 2017 PSUs granted on February 17, 2017 will vest, if at all, based on achievement of the three-year compound annual growth rate of adjusted earnings per share target set by the Compensation Committee at the time of the grant. As described in Aetna's 2018 Proxy Statement, Mr. Loveman's 2017 PSUs are subject to the supplemental CH&S Multiplier. The Compensation Committee will determine the Company's achievement of the Standard 2017 PSU performance goal and the CH&S multiplier following December 31, 2019, provided that CVS Health's proposed acquisition of Aetna does not close prior to that date. Vesting of the PSUs granted to these NEOs on February 17, 2017 will occur, if at all, on February 17, 2020, and full vesting is subject to continued employment of the applicable NEO on February 17, 2020.

Includes \$2,484,104 grant date fair value of RSUs granted to Mr. Bertolini in February 2017 as part of his 2016 ABP award.

Includes the incremental fair value under FASB ASC Topic 718 of the accelerated vesting on December 27, 2017, of PSUs and/or RSUs granted to the applicable NEO in 2015 or 2016 in order to mitigate tax penalties applicable to benefits these NEOs may receive if their employment is terminated upon or following the closing of CVS Health's proposed acquisition of Aetna. The Compensation Committee approved such accelerated vesting on December 19, 2017.

E. For information about the treatment of Company equity awards under the CVS Health Merger Agreement, see "Compensation Discussion and Analysis – Impact of the CVS Health Merger Agreement – Long-Term Incentive Equity Awards (SARs, PSUs and RSUs)" in Aetna's 2018 Proxy Statement.

Grant date fair value of the SARs granted to these NEOs on February 17, 2017. These SARs have an exercise price of \$125.27 (the closing price of the Common Stock on February 17, 2017) and will vest in three substantially equal annual installments beginning on February 17, 2018. The SAR values are calculated using a modified Black-Scholes Model for pricing options. Refer to page 131 of Aetna's 2017 Annual Report on Form 10-K for all relevant valuation assumptions used to determine the grant date fair value of these SARs.

2017	Mr. Bertolini	Mr. Guertin	Mr. Jelinek	Ms. Lynch	Thomas J. Sabatino, Jr.	Francis S. Soistman, Jr.	Margaret M. McCarthy	Steven B. Kelmar	Jean C. LaTorre	Mr. Loveman
Personal Use of Corporate Aircraft(a)	456,912	745	0	61,274	12,212	799	13,966	5,589	0	83,234
Personal Use of Corporate Vehicles(b)	13,412	0	0	22,446	0	0	0	0	0	0
Professional Organization/Club Dues(c)	3,465	1,265	2,710	0	34,711	164	7,500	0	325	750
Relocation Expenses(d)	0	0	142,110	0	792,614	0	0	0	0	0
Financial Planning(e)	0	10,000	0	10,376	0	0	5,800	2,165	0	10,000

F. All Other Compensation for 2017:

2017	Mr. Bertolini	Mr. Guertin	Mr. Jelinek	Ms. Lynch	Thomas J. Sabatino, Jr.	Francis S. Soistman, Jr.	Margaret M. McCarthy	Steven B. Kelmar	Jean C. LaTorre	Mr. Loveman
Company Matching Contributions Under the 401(k) Plan(f)	16,200	16,200	16,200	16,200	16,200	16,200	16,200	16,200	16,200	16,200
Change in Pension	47,824	0	0	0	0	0	8,559	952	218,102	0
TOTAL	537,813	28,210	161,020	110,296	855,737	17,163	52,025	24,906	234,627	110,184

The calculation of incremental cost for personal use of Company aircraft includes only those variable costs incurred as a result of personal use, such as (a) fuel and allocated maintenance costs, and excludes non-variable costs which the Company would have incurred regardless of whether there was any personal use of the aircraft.

Represents the aggregate incremental cost to the Company of personal use of a Company driver and vehicle. (b)

Represents annual membership dues to professional and business organizations. (c)

Represents reimbursement of certain of Mr. Jelinek's relocation expenses, including \$90,956 of broker commissions, \$35,458 of carrying costs, as well (d) as closing costs, tax assistance and interest. Represents reimbursement of certain of Mr. Sabatino's relocation expenses, including \$700,000 loss on sale of home, \$105,000 of broker commissions and certain other expenses, net of a credit for previously paid carrying costs. Maximum benefit is \$10,000 for each calendar year. NEOs have until April of each calendar year to submit invoices for the prior year. Represents actual match received under the 401(k) Plan attributable to the 2017 plan year.

(e)

G. For details on 2016 Named Executive Officer compensation, please see pages 41 – 43 of the Aetna Inc. 2017 Proxy Statement. For details on 2015 Named Executive Officer compensation, please see pages 41 - 43 of the Aetna Inc. 2016 Proxy Statement.

H. Disclosure is made for persons who served Aetna Inc. as Directors in 2017.

The amounts shown in this column include any cash compensation that was deferred by Directors during 2017 under the Aetna Inc. Non-Employee Director Compensation Plan (the "Director Plan"). See "Additional Director Compensation Information" in Aetna's 2018 Proxy Statement for a discussion of Director compensation deferrals. Amounts in this column consist of one or more of the following:

Activity	2017 Fees Earned or Paid in Cash
Annual Retainer Fee	\$95,000
Lead Director	35,000
Chair of the Audit Committee	25,000
Membership on the Audit Committee	10,000
Chair of the Compensation Committee	25,000
Membership on the Compensation Committee	7,500
Chair of the Nominating Committee	15,000
Membership on the Nominating Committee	5,000
Chair of the Investment and Finance Committee	13,000
Chair of the Medical Affairs Committee	13,000
Committee Membership (except as set forth above) (other than the Chairs)	4,000

J. Amounts shown in this column represent the full grant date fair value for RSUs granted in 2017 computed in accordance with FASB ASC Topic 718, excluding forfeiture estimates. Refer to pages 131-134 of Aetna's 2017 Annual Report on Form 10-K for all relevant valuation assumptions used to determine the grant date fair value of the stock awards included in this column. On May 19, 2017, Aetna granted each nonmanagement Director then in office 1,203 RSUs, which are subject to the time-based vesting requirements described in Aetna's 2018 Proxy Statement. The full grant date fair value is calculated by multiplying the number of units granted times the closing price of Aetna's Common Stock on the grant date. See "Additional Director Compensation Information" in Aetna's 2018 Proxy Statement for a discussion of RSU awards and related deferrals.

At December 31, 2017, the number of outstanding RSU awards held by each Director was 1,203. Refer to the Beneficial Ownership Table and related footnotes in Aetna's 2018 Proxy Statement for more information on Director holdings of Common Stock.

K. 2017 All Other Compensation consists of the items in the following table. See "Additional Director Compensation Information" in Aetna's 2018 Proxy Statement for a discussion of certain components of All Other Compensation.

	Group Life Insurance and Business Travel Accident Insurance Premiums		Charitable Award		Charitable			Total
Fernando Aguirre	\$	1,190	\$	0	\$	15,000	\$	16,190
Frank M. Clark		3,710		45,785		15,000		64,495
Betsy Z. Cohen		3,710		45,785		15,000		64,495
Molly J. Coye, M.D.		3,710		45,785		15,000		64,495
Roger N. Farah		1,190		45,785		15,000		61,975
Jeffrey E. Garten		3,710		45,785		10,000		59,495
Ellen M. Hancock		3,710		45,785		15,000		64,495
Richard J. Harrington		3,710		0		15,000		18,710
Edward J. Ludwig		2,288		45,785		15,000	Π	63,073
Joseph P. Newhouse		3,710		45,785		15,000		64,495
Olympia J. Snowe		3,710		0		15,000		18,710

- (a) Refer to "Director Charitable Award Program" in Aetna's 2018 Proxy Statement for information about the Charitable Award Program, which was discontinued for any new Director joining the Board after January 25, 2008. Amounts shown are pre-tax and do not reflect the anticipated tax benefit to the Company from the charitable contributions under the Charitable Award Program. Directors derive no personal financial or tax benefit from this program.
- (b) These amounts represent matching contributions made by Aetna Foundation, Inc. pursuant to Aetna's charitable giving programs, which encourage contributions by eligible persons to charitable organizations. Through the 2017 Aetna Foundation Matching Grants Program for Directors, up to \$15,000 in eligible contributions per Director per program year are matched at 100% by Aetna Foundation, Inc. Amounts shown are pre-tax. Directors derive no personal financial or tax benefit from this program.

The reported amount does not include income from any exercise of stock appreciation rights or any vesting of restricted stock units during the year or any imputed income.

RELIANCE SECTION

In forming my opinion on all reserve amounts listed above, I relied upon Debra Bacon, Vice President and Chief Financial Officer, an employee of Aetna Medicaid Administrators and Steven M. Conte, Principal Financial Officer and Controller of Aetna Better Health Inc. (a New Jersey corporation) as certified in the attached statements. I evaluated that data for reasonableness and consistency. I also reconciled that data to the Underwriting and Investment Exhibit - Part 2B of the company's current annual statement. In other respects, my examination included review of the actuarial assumptions and actuarial methods used and tests of the calculations I considered necessary.

OPINION

In my opinion, the amounts carried in the balance sheet on account of the items identified above:

- A. Are in accordance with accepted actuarial standards consistently applied and are fairly stated in accordance with sound actuarial principles;
- B. Are based on actuarial assumptions relevant to contract provisions and appropriate to the purpose for which the statement was prepared;
- C. Meet the requirements of the insurance laws and regulations of the state of New Jersey, and are at least as great as the minimum aggregate amounts required by the state in which this statement is filed;
- D. Make good and sufficient provision in the aggregate for all unpaid claims and other actuarial liabilities of the organization under the terms of its contracts and agreements;
- E. Are computed on the basis of assumptions and methods consistent with those used in computing the corresponding items in the quarterly statement of the preceding year-end;
- F. Include appropriate provision for all actuarial items that ought to be established.

The Underwriting and Investment Exhibit – Part 2B was reviewed for reasonableness and consistency with the applicable Actuarial Standard of Practice.

The Analysis Of Health Care Receivables Collected and Accrued – Exhibit 3A was reviewed for reasonableness and consistency with the applicable Actuarial Standard of Practice.

Actuarial methods, considerations and analyses used in forming my opinion conform to the relevant Standards of Practice as promulgated from time to time by the Actuarial Standards Board, which standards form the basis of this statement of opinion.

William R. Jones, F.S.A., M.A.A.A. 151 Farmington Avenue Hartford, CT 06156 (860) 273-6254 February 23, 2018

RELIANCE STATEMENT

I, Debra Bacon, Vice President and CFO, an employee of Aetna Medicaid Administrators, hereby affirm that the listings and summaries, and analyses relating to data prepared for all entries listed in the actuarial opinion, except for the following -Reserves from Lags (included in Line 1 - Claims Unpaid) and submitted to William R. Jones in support of his actuarial opinion as of December 31, 2017, were prepared under my direction, and, to the best of my knowledge and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the annual statement for the year ended December 31, 2017.

Aetna Better Health Inc. (an Illinois corporation) Aetna Better Health Inc. (a Louisiana corporation) Aetna Better Health Inc. (a New Jersey corporation) Aetna Better Health Inc. (a New Jersey corporation) Aetna Better Health Inc. (a Pennsylvania corporation) Aetna Better Health Inc. (an Ohio corporation) Aetna Better Health of Texas Inc. Aetna Better Health of Michigan Inc. Aetna Better Health of Missouri LLC Aetna Better Health of Kentucky Insurance Company Aetna Better Health of Nevada Inc. Aetna Better Health of California Inc.

Debra Bacon,-' Vice President & CFO February 7, 2018

RELIANCE STATEMENT

I, Steven M. Conte, Principal Financial Officer and Controller of Aetna Better Health Inc. (a New Jersey corporation), hereby affirm that the listings and summaries, and analyses relating to data prepared for all entries listed in the actuarial opinion, except for the following - Reserves from Lags (included in Line 1 - Claims Unpaid) and submitted to William R. Jones in support of his actuarial opinion for Aetna Better Health Inc. (a New Jersey corporation) as of December 31, 2017, were prepared under my direction and, to the best of my knowledge, information and belief, are substantially accurate and complete and the same as, or derived from, the records and other data which form the basis of the annual statement for the year ended December 31, 2017.

Steven Conte

Steven M. Conte 1425 Union Meeting Road, U23S Blue Bell, PA 19422 (215) 775-6508 February 7, 2018