

HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2024 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health Inc. (a Maine corporation)

NAIC Group Cod	e <u>0001</u> <u>0001</u> (Current) (Prior)	_ NAIC Company Code	95517 Employer's	ID Number	01-0504252	
Organized under the Laws of	Maine	Sta	ate of Domicile or Port of E	.ntry	ME	· · ·
Country of Domicile		United States of	America			
Licensed as business type:		Health Maintenance	Organization			. ,
Is HMO Federally Qualified? Yes [] No	o[X]		•			
Incorporated/Organized	10/03/1995		Commenced Business		04/10/1996	
Statutory Home Office	191 Marginal Way, Suite	e G		Portland, ME,	US 04101	
	(Street and Number)		(City o	r Town, State, Co	ountry and Zip Code)	
Main Administrative Office	· · · · · · · · · · · · · · · · · · ·	151 Farmington				
Hartford, 0	CT, US 06156	(Street and No	umber)	800-872-	-3862	
(City or Town, State	, Country and Zip Code)		(/	Area Code) (Teler	ohone Number)	
	Compliance; P.O. Box 81				; P.O. Box 818048 ountry and Zip Code)	
·	t and Number or P.O. Box	•	` ,	i Town, State, Co	ountry and zip code;	
Primary Location of Books and Records		191 Marginal Wa (Street and No				
	ME, US 04101		<u> </u>	800-872-		
(City or Town, State	e, Country and Zip Code)		(/	Area Code) (Telep	ohone Number)	
Internet Website Address		www.aetna	.com			
Statutory Statement Contact	Kim E. R				-775-6508	
Statuton/Pon	(Name orting@aetna.com)		(Area Code) (860-262-	Telephone Number) -7767	
	il Address)			(FAX Nur		
President	Duncan Graeme Stu	OFFICEI	RS cipal Financial Officer and	Controller	Steven Matthew 0	onte
Vice President and Secretary						
		OTHER	₹			
Derek Scott Blunt, Senior Investm Tracy Louise Smith, Vice President a		rank Ferris Chronister III,	Assistant Controller		ter Keller, Assistant Con Porothy Todisco, Assista	
Tracy Louise Officer, vice i resident a	·			· · · · · · · · · · · · · · · · · · ·	, o.	
Vincent John Liscomb, J	r	DIRECTORS OR Spence William			Duncan Graeme Stuar	t
The officers of this reporting entity being d all of the herein described assets were the statement, together with related exhibits, secondition and affairs of the said reporting of in accordance with the NAIC Annual State rules or regulations require differences in Furthermore, the scope of this attestation (except for formatting differences due to enclosed statement.	ee absolute property of the chedules and explanation entity as of the reporting pe iment Instructions and Ac eporting not related to acc by the described officers	e said reporting entity, for s therein contained, anne eriod stated above, and o counting Practices and Pro ounting practices and pro also includes the relater	ee and clear from any lien exed or referred to, is a full if its income and deductions procedures manual except acedures, according to the lad corresponding electronic	s or claims thered and true statement s therefrom for the to the extent that: poest of their inform ifiling with the NA	on, except as herein sta t of all the assets and lis e period ended, and have (1) state law may differ nation, knowledge and be AIC, when required, that	ted, and that this bilities and of the been completed ; or, (2) that state elief, respectively is an exact copy
1 Jun Stat						
Duncan Graeme Stuart President		Edward Chung Vice President and		Princi	Steven Matthew Con pal Financial Officer and	
State of Pennsylvania County of Montgomery		of Connecticut of Hartford	,		. Pennsylvania . Montgomery	
Subscribed and sworn to before me this	Subsc	ribed and sworn to before	e me this	Subscribed a	and sworn to before me	this
29th day of April	, 2024	day of	, 2024	day (of May	, 2024
NOTARY PUBLIC (Seal)	NOTA	RY PUBLIC (Seal)	<u></u>	NOTARY PU	JBLIC (Seal)	
		•				
Commonwealth of Pennsylvania - Nota KIM E. ROTH, Notary Public Montgomery County My Commission Expires April 25, 20 Commission Number 1141410						

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

b. If no,
1. State the amendment number.....
2. Date filed

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

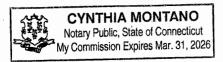


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Aetna Health Inc. (a Maine corporation)

NAIC	Group Code 0001 (Current)	0001 NAIC Company Co	ode 95517 Employer's II	D Number 01-0504252
Organized under the Laws of	, ,	, ,	State of Domicile or Port of En	try ME
Country of Domicile		United States	of America	·
Licensed as business type:		Health Maintenan	ce Organization	
Is HMO Federally Qualified?	es[] No[X]			
Incorporated/Organized	10/03/199	5	Commenced Business	04/10/1996
Statutory Home Office	191 Marginal V	Vay, Suite G		Portland, ME, US 04101
	(Street and	Number)	(City or	Town, State, Country and Zip Code)
Main Administrative Office		151 Farmingt		
	Hartford, CT, US 06156	(Street and	Number)	800-872-3862
(City or T	own, State, Country and Zip	Code)	(An	ea Code) (Telephone Number)
Mail Address	Attn: Stat Compliance; P.O.		Attn: S	stat Compliance; P.O. Box 818048
	(Street and Number or	P.O. Box)	(City or	Town, State, Country and Zip Code)
Primary Location of Books and	Records	191 Marginal (Street and		
	Portland, ME, US 04101	(Street and	Number)	800-872-3862
(City or T	own, State, Country and Zip	Code)	(Are	ea Code) (Telephone Number).
Internet Website Address		www.aet	na.com	
Statutory Statement Contact		Kim E. Roth		215-775-6508
01	thin Dear the Octoor	(Name)		(Area Code) (Telephone Number)
Sta	atutoryReporting@aetna.con (E-mail Address)	<u>n</u>		860-262-7767 (FAX Number)
	ent Duncan Gra		incipal Financial Officer and Co	ontroller Steven Matthew Conte
Derek Scott Blunt, Senie		Frank Ferris Chronister		Peter Keller, Assistant Controller
Tracy Louise Smith, Vice F	resident and Treasurer		,	Whitney Dorothy Todisco, Assistant Controller
Vincent John	Liscomb, Jr.	DIRECTORS OF Spence Will		Duncan Graeme Stuart
all of the herein described assestatement, together with related condition and affairs of the said in accordance with the NAIC Arrules or regulations require diffe Furthermore, the scope of this (except for formatting difference enclosed statement.	ets were the absolute propei exhibits, schedules and exp reporting entity as of the rep nual Statement Instructions rences in reporting not relate attestation by the described es due to electronic filing) o	rty of the said reporting entity, planations therein contained, an ording period stated above, and as and Accounting Practices and ed to accounting practices and planting practices an	free and clear from any liens of nexed or referred to, is a full an of its income and deductions the Procedures manual except to procedures, according to the bested corresponding electronic fill electronic filling may be requested.	ting entity, and that on the reporting period stated above, or claims thereon, except as herein stated, and that this d true statement of all the assets and liabilities and of the nerefrom for the period ended, and have been completed the extent that: (1) state law may differ; or, (2) that state st of their information, knowledge and belief, respectively, ing with the NAIC, when required, that is an exact copy sted by various regulators in lieu of or in addition to the
Duncan Graeme President		Edward Chur Vice President ar	•	Steven Matthew Conte Principal Financial Officer and Controller
State of Pennsylvania County of Montgomery		State of Connecticut County of Hartford		State of Pennsylvania County of Montgomery
Subscribed and sworn to before	me this	Subscribed and sworn to before		Subscribed and sworn to before me this
day of	, 2024	27th day of April	, 2024	day of, 2024
NOTARY PUBLIC (Seal)		Cynthia N NOTARY PUBLIC (Seal)	Ventoino .	NOTARY PUBLIC (Seal)
(5001)		/ Oblio (Geal)		HO PART I ODEIO (Geal)



	this an original filing?no,	Yes [X]	No []
1.	State the amendment number			
2.	Date filed			

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



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Organized under the Laws of	12.41.2.17	State of Do	micile or Port of Entry	ME
Country of Domicile		United States of America	a	
Licensed as business type:	He	alth Maintenance Organiz	ation	·
Is HMO Federally Qualified? Yes [] No	[X]			
Incorporated/Organized	10/03/1995	Comme	enced Business	04/10/1996
	191 Marginal Way, Suite G		Р	ortland, ME, US 04101
•	(Street and Number)			vn, State, Country and Zip Code)
Main Administrative Office		151 Farmington Avenue		
Hartford, C	T, US 06156	(Street and Number)		800-872-3862
	Country and Zip Code)		(Area	Code) (Telephone Number)
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Statutory Statement Schladt	(Name)	,		Area Code) (Telephone Number)
	rting@aetna.com			860-262-7767
(E-mail	Address)			(FAX Number)
		OFFICERS		
President		Principal Fina	ancial Officer and Contr	oller St e ve Matthew Conte
Vice President and Secretary	Edward Chung-I Lee	`		
Decel Coeff Physics Coeffee Investment	-1.055	OTHER		Detection Assistant Controller
Tracy Louise Smith, Vice President and		rris Chronister III, Assistar	nt Controller	Peter Keller, Assistant Controller Whitney Dorothy Todisco, Assistant Controller
	DIE	RECTORS OR TRUST	EEG	
Vincent John Liscomb, Jr.		Spence William Papke		Duncan Graeme Stuart
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		1		hto Cots
Duncan Graeme Stuart President	Vi	Edward Chung-I Lee ce President and Secretar		Steven Matthew Conte Principal Financial Officer and Controller
		•	,	
State of Pennsylvania County of Montgomery	State of County of H			State of Pennsylvania County of Montgomery
Subscribed and sworn to before me this	Subscribed an	d sworn to before me this		Subscribed and sworn to before me this
day of	_, 2024 day of		, 2024	# day of, 2024
			- -	
NOTARY PUBLIC (Seal)	NOTARY PUB	LIC (Seal)	1	NOTARY PUBLIC (Seal)

Commonwealth of Pennsylvania - Notary Seal KIM E. ROTH, Notary Public Montgomery County My Commission Expires April 25, 2025 Commission Number 1141410

a. Is this an original filing? Yes [X] No [$\,$] b. If no,

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

ASSETS

	7.0	OLIO	0 1011 151		
		1	Current Statement Date 2	3 Net Admitted Assets	4 December 31 Prior Year Net
		Assets	Nonadmitted Assets	(Cols. 1 - 2)	Admitted Assets
	Bonds	21,776,315	0	21,776,315	22,304,806
2.	Stocks:				•
	2.1 Preferred stocks				0
	2.2 Common stocks	2,233,321	0	2,233,321	2,044,194
3.	Mortgage loans on real estate:				
	3.1 First liens			0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$	0		0	0
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less summary encumbrances)	0	0	0	0
		0	0	0	0
	4.3 Properties held for sale (less \$				
	encumbrances)	0	0	0	0
5.	Cash (\$				
	(\$28,231,265) and short-term				
	investments (\$)			28,231,265	23,912,619
6.	Contract loans (including \$ premium notes)	0			0
7.	Derivatives		0	0	0
8.	Other invested assets			0	0
9.	Receivables for securities	0	0	0	0
10.	Securities lending reinvested collateral assets		0	0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	52,240,901	0	52,240,901	48,261,619
13.	Title plants less \$ charged off (for Title insurers				
	only)	0	0	0	0
14.	Investment income due and accrued	184,823	0	184,823	173,499
	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	277,620	66 , 141	211,479	55,720
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$12,579,692)	13 751 405	0	13,751,405	8 438 184
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	0
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts			0	0
17.	Amounts receivable relating to uninsured plans			2,246,051	
	Current federal and foreign income tax recoverable and interest thereon			3,928,890	
	Net deferred tax asset			175,642	
19.	Guaranty funds receivable or on deposit	,		0	
	Electronic data processing equipment and software			0	0
20. 21	Furniture and equipment, including health care delivery assets	0	0		0
21.	(\$	0	0	0	0
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0
22. 23.	Receivables from parent, subsidiaries and affiliates	٠			0
	Health care (\$2,091,771) and other amounts receivable			2,091,771	
	Aggregate write-ins for other than invested assets			590,714	
25. 26		5 9 0, / 14	0		102, 100
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	78,099,480	2,677,804	75,421,676	62,106,577
27.	From Separate Accounts, Segregated Accounts and Protected Cell				
	Accounts				0
28.	Total (Lines 26 and 27)	78,099,480	2,677,804	75,421,676	62,106,577
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Current state income tax receivable	590,714	0	590,714	102,100
2502.					,
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	590,714			102,100
೭೮೮೮.	Totalo (Ellico 2001 tillough 2000 plus 2000)(Ellic 20 dDUVE)	000,714		550,714	102, 100

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPI	IAL AND	Current Period	<u>'</u>	Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$260,373 reinsurance ceded)				
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses		0	304,992	217,475
4.	Aggregate health policy reserves, including the liability of				
	\$24,091 for medical loss ratio rebate per the Public				
	Health Service Act				
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	Current federal and foreign income tax payable and interest thereon	3,431		3,431	2,703
10.1	(including \$ o on realized gains (losses))	0	0	0	0
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				0
13.	Remittances and items not allocated				
14.	Borrowed money (including \$0 current) and				,
	interest thereon \$0 (including				
	\$0 current)				0
15.	Amounts due to parent, subsidiaries and affiliates	1,923,575	0	1,923,575	5,263,268
16.	Derivatives				0
17.	Payable for securities			500,000	0
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties (with \$0				
	authorized reinsurers, \$822,810 unauthorized	000 040		000 040	202 202
	reinsurers and \$	822,810	0	822,810	620,399
20.	Reinsurance in unauthorized and certified (\$0) companies	0	0	0	0
21.	Companies Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans				
23.	Aggregate write-ins for other liabilities (including \$				2, 107, 200
	current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	50,624,418	1,188,241	51,812,659	
25.	Aggregate write-ins for special surplus funds	xxx	xxx	0	0
26.	Common capital stock	XXX	XXX	1,000,000	1,000,000
27.	Preferred capital stock	xxx	XXX	0	0
28.	Gross paid in and contributed surplus				8,700,000
29.	Surplus notes				
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)	XXX	XXX	6,909,017	21,830,821
32.	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26	2004	2004		
	\$	XXX	XXX		
	32.20 shares preferred (value included in Line 27 \$	>>>	vvv	0	
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	75,421,676	62,106,577
01.	DETAILS OF WRITE-INS	7001	7001	70, 121,010	02,100,071
2301.	5217426 61 111412 1116				
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page		0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.		XXX	XXX		
2502.		xxx	xxx		
2503.		xxx	xxx		
2598.	Summary of remaining write-ins for Line 25 from overflow page	xxx	xxx	0	0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.		XXX			
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page		XXX		0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

		Current Ye To Date	:	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1.	Member Months	XXX	64,272	54,245	218,305
2.	Net premium income (including \$ non-health				
	premium income)				187,083,399
	Change in unearned premium reserves and reserve for rate credits				1,565
	Fee-for-service (net of \$ medical expenses)				0
	Risk revenue				0
	Aggregate write-ins for other health care related revenues				
	Aggregate write-ins for other non-health revenues				
	Total revenues (Lines 2 to 7)	XXX	60,272,508	46,213,898	187,084,964
	Hospital and Medical:				
	Hospital/medical benefits				
	Other professional services		2,725,821	, ,	, ,
	Outside referrals				
	Emergency room and out-of-area		9,411,753		
	Prescription drugs		, , , , , , , , , , , , , , , , , , ,	, ,	21,771,629
	Aggregate write-ins for other nospital and medical				0
	Subtotal (Lines 9 to 15)				1,170,407
		3,972, 143	55,254,679	42,001,095	105,050, 150
	Less: Net reinsurance recoveries		E4E 201		701 170
	Total hospital and medical (Lines 16 minus 17)			42,001,695	
	Non-health claims (net)			, ,	104,354,900
	Claims adjustment expenses, including \$				
20.	containment expenses	0	1 205 427	971 268	4 685 732
21.	General administrative expenses				
	Increase in reserves for life and accident and health contracts		5, 172,010		20,200,000
22.	(including \$ increase in reserves for life only)	0	16 186 356	0	0
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(17.071.191)	(1.746.413)	(2.220.825)
	Net investment income earned				
	Net realized capital gains (losses) less capital gains tax of		,	,	
	\$	0	6,803	(335,865)	(1,051,634)
27.	Net investment gains (losses) (Lines 25 plus 26)	0	528,075	137,681	1,250,162
28.	Net gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$)				
	(amount charged off \$)]	0	0		
29.	Aggregate write-ins for other income or expenses	0	0	0	(1,139)
30.	Net income or (loss) after capital gains tax and before all other federal	2004	(40 540 440)	(4 000 700)	(074,000)
0.4	income taxes (Lines 24 plus 27 plus 28 plus 29)				
				•	
	Net income (loss) (Lines 30 minus 31)	XXX	(12,982,490)	(1,851,283)	(662,718)
	DETAILS OF WRITE-INS	2004			
0601.					
0603.					
	Summary of remaining write-ins for Line 6 from overflow page				0
	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.		XXX			
0702.		XXX			
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.	Regulatory fines and penalties				(1, 139)
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	(1,139)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	31,530,821	31,948,193	31,948,193
34.	Net income or (loss) from Line 32	(12,982,490)	(1,851,283)	(662,718)
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 \$	149,411	92,997	429,146
37.	Change in net unrealized foreign exchange capital gain or (loss)	0		
38.	Change in net deferred income tax	39,717	609,245	216,812
39.	Change in nonadmitted assets	(2,128,442)	(63,328)	(400,612)
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles	0		
44.	Capital Changes:			
	44.1 Paid in	0		0
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
40.		7 000 000	0	0
	45.1 Paid in		0	0
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus			0
48.	Net change in capital & surplus (Lines 34 to 47)	(7,921,804)	(1,212,369)	(417,372)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	23,609,017	30,735,824	31,530,821
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	CASH FLOW			
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	54,884,278	57,488,368	186,531,618
2.	Net investment income	506,386	430,835	2,275,244
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	55,390,664	57,919,203	188,806,862
5.	Benefit and loss related payments	49,056,769	41,056,496	166,255,843
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	6,887,419	3,371,162	28,120,305
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$	0	0	331,189
10	Total (Lines 5 through 9)	55,944,188	44,427,658	194,707,337
10.				
11.	Net cash from operations (Line 4 minus Line 10)	(553,524)	13,491,545	(5,900,475)
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds			
	12.2 Stocks			
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	(5)	6
	12.7 Miscellaneous proceeds	500,000	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	3,142,342	2,952,528	9,140,206
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	2, 102, 196	979,883	5,816,431
	13.2 Stocks	0	867,976	867,976
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	2,102,196	1,847,859	6,684,407
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	1,040,146	1,104,669	2,455,799
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	7,000,000	0	0
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(3,167,975)	(16,205,279)	1,508,779
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,832,025	(16,205,279)	1,508,779
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).	4.318 647		(1.935-897)
19.	Cash, cash equivalents and short-term investments:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	. (., . 55, 550)	(1,000,001)
	19.1 Beginning of year	23.912.618	25.848.515	25.848.515
	19.2 End of period (Line 18 plus Line 19.1)	28,231,265	24,239,450	23,912,618

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

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compre (Hospital &		4	5	6	7	8	9	10	11	12	13	14
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
Total Members at end of:			•	.,										
1. Prior Year	18,435	0	464	0	0	0	0	17,971	0	0	0	0	0	
2. First Quarter	21,804	0	463	0	0	0	0	21,341	0	0	0	0	0	
Second Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	
4. Third Quarter	0	0	0	0	0	0	0	0	0	0	0	0	0	
5. Current Year	0	0	0	0	0	0	0	0	0	0	0	0	0	
Current Year Member Months	64,272	0	1,390	0	0	0	0	62,882	0	0	0	0	0	
Total Member Ambulatory Encounters for Period:														
7 Physician	137,518	0	902	0	0	0	0	136,616	0	0	0	0	0	
8. Non-Physician	137,353	0	1,051	0	0	0	0	136,302	0	0	0	0	0	
9. Total	274,871	0	1,953	0	0	0	0	272,918	0	0	0	0	0	
10. Hospital Patient Days Incurred	3,703	0	6	0	0	0	0	3,697	0	0	0	0	0	
11. Number of Inpatient Admissions	493	0	1	0	0	0	0	492	0	0	0	0	0	
12. Health Premiums Written (a)	60,869,866	0	880,308	0	0	0	0	59,989,558	0	0	0	0	0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned	60,859,746	0	870 , 188	0	0	0	0	59,989,558	0	0	0	0	0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services	49,441,596	0	537,418	0	0	0	0	48,904,178	0	0	0	0	0	
18. Amount Incurred for Provision of Health Care Services	55,234,879	0	482,289	0	0	0	0	54,752,590	0	0	0	0	0	(

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

Aging Analysis of Unpaid Claims									
1	2	3	4	5	6	7			
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total			
Claims Unpaid (Reported)	•	-	•	•					
0299999 Aggregate accounts not individually listed-uncovered	84,872	(762)	73	167	2,138	86,488			
0399999 Aggregate accounts not individually listed-covered	4,822,522	(11,674)	1,115	2,562	32,733	4,847,258			
0499999 Subtotals	4,907,394	(12,436)	1,188	2,729	34,871	4,933,746			
0599999 Unreported claims and other claim reserves						18,044,791			
0699999 Total amounts withheld						0			
0799999 Total claims unpaid						22,978,537			
0899999 Accrued medical incentive pool and bonus amounts						1,104,110			
······································						, .,			

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS	UNPAID - PRIOR YEAR - NET OF REINS					
	Claims		Liab		5	6
	Year to		End of Curre	ent Quarter		
	1	2	3	4		
	_		_			Estimated Claim
	On	_	On	_		Reserve and
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical) individual	0	0	0	0	0	
Comprehensive (hospital and medical) group	227,970	303,356	42,520	263,783	270,490	378,37
Medicare Supplement		0	0	0	0	
4. Vision only	0	0	0	0	0	
5. Dental only	0	0	0	0	0	
6. Federal Employees Health Benefits Plan	0	0	0	0	0	
7. Title XVIII - Medicare		41,013,174	2,115,989	20,297,574	10,815,183	14,278,89
8 Title XIX - Medicaid	0	0	0	0	0	
9. Credit A&H	0	0	0	0	0	
10. Disability Income	0	0	0	0	0	
11. Long-term care	0	0	0	0	0	
12. Other health	0	0	0	0	0	
13. Health subtotal (Lines 1 to 12)		41,316,530	2,158,509	20,561,357	11,085,673	14,657,26
14. Health care receivables (a)	0	4,703,434	0	0	0	2,612,99
15. Other non-health	0	0	0	0	0	
16. Medical incentive pools and bonus amounts	(1,774,839)	587,914	610,003	494 , 107	(1,164,836)	1,443,44
17. Totals (Lines 13 - 14 + 15 + 16)	7,152,325	37,201,010	2,768,512	21,055,464	9,920,837	13,487,71

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Maine for the periods ended March 31, 2024 and December 31, 2023 is as follows:

		SSAP#	F/S Page	F/S Line #	2024	2023	
NET IN	NCOME						
(1)	Aetna Health Inc. (a Maine corporation) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (12,982,490)	\$	(662,718)
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
(4)	Net Income NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (12,982,490)	\$	(662,718)
SURPL	US						
(5)	Aetna Health Inc. (a Maine corporation) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 23,609,017	\$	31,530,821
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
(8)	Statutory Surplus NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 23,609,017	\$	31,530,821

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

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

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) No significant change.

(2) Bonds

Bonds, which include special deposits, are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements. Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at, March 31, 2024,. Bonds include all investments whose maturity is greater than one year when purchased. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus.

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

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

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

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

(3) Common Stocks

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

(4) through (5): No significant change.

(6) Loan-Backed and Structured Securities

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

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

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

D. Going Concern

As of May 10, 2024, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

2. Accounting Changes and Corrections of Errors

The Company did not have any accounting changes or corrections of errors in the period ended March 31, 2024.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

No significant change.

5. <u>Investments</u>

A. through C.: No significant change.

D. Loan-Backed Securities

- Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.
- (2) The Company did not recognize any OTTI on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with Statements of Statutory Accounting Principles ("SSAP") No. 43R, Loan-Backed and Structured Securities ("SSAP No. 43R") at March 31, 2024.
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at the reporting date March 31, 2024.
- (4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at March 31, 2024 is as follows:
- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at March 31, 2024 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.
- E. <u>Dollar Repurchase Agreements and/or Securities Lending Transactions</u>
 - (1) and (2): No significant change.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of March 31, 2024.
 - (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at March 31, 2024.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at March 31, 2024.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at March 31, 2024.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at March 31, 2024.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at March 31, 2024.
- N. The Company did not have any offsetting and netting of derivative, repurchase and reverse repurchase, and securities borrowing and securities lending assets or liabilities at March 31, 2024.
- O. through Q.: No significant change.
- R. The Company did not participate in any Qualified Cash Pools at March 31, 2024.
- 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. <u>Investment Income</u>

No significant change.

8. Derivative Instruments

The Company did not have any derivative instruments at March 31, 2024.

9. Income Taxes

No significant change.

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

A. and B.:

Transactions occurring between the Company and its parent, subsidiaries and affiliates excluding reinsurance transactions and non-insurance transactions involving less than ½ of 1% of the Company's total admitted assets and cost allocation transactions follow:

March 31, 2024

				 Assets receiv	ved by insurer	Assets transfe	rred by insurer
Date of transaction	Explanation of transaction	Name of reporting entity	Name of affiliate	Statement value	Statement description	Statement value	Statement description
March 28, 2024	Capital Contribution	Aetna Health Holdings, LLC	Aetna Health, Inc (Maine)	\$ 7,000,000	Cash		

- C. No significant change.
- D. At March 31, 2024 and December 31, 2023, the Company had the following amounts due to and due from affiliates, which exclude amounts related to pharmacy rebate transactions as discussed more fully in Note 28 and the Company's reinsurance agreements if applicable.

	 March 31, 2024	December 31, 2023
Amounts due to affiliates		
Aetna Health Management LLC	\$ 1,923,575 \$	5,263,268
Total due to affiliates	\$ 1,923,575 \$	5,263,268

The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter.

At March 31, 2024 and December 31, 2023, the Company had no amounts due from affiliates.

E. through O.: No significant change.

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at March 31, 2024.
- B. The Company did not have any Federal Home Loan Bank agreements at March 31, 2024.
- 12. <u>Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans</u>

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at March 31, 2024.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

No significant change.

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

No significant change.

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

No significant change.

- B. Transfer and Servicing of Financial Assets
 - (1) No significant change.
 - (2) and (3): The Company did not have any servicing assets or liabilities at March 31, 2024.
 - (4) The Company did not have any securitized financial assets at March 31, 2024.
 - (5) through (7): No significant change.

C. Wash Sales

- (1) In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio.
- (2) The Company had no securities sold during the quarter ended March 31, 2024 and reacquired within 30 days of the sale
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No significant change.

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

No significant change.

20. Fair Value Measurements

Α.

(1) The Company carries unaffiliated common stocks at fair value in the financial statements. Certain bonds are also valued at the lower of cost or fair value as described in Note 1. The Company's financial instruments carried at fair value in the financial statements at March 31, 2024 is as follows:

	a 110	~	a	Net Asset Value	
Type of Financial Instrument	(Level 1)	(Level 2)	(Level 3)	(NAV)	Total
Common stocks	\$ 2,233,321	\$	\$	\$ —	\$ 2,233,321

- (2) There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2024.
- (3) Transfers in and out of all levels are recognized at the end of the reporting period of which the transfer occurred.
- (4) The Company's fair value measurement valuation techniques are described in B. below.
- (5) The Company did not have any derivative instruments at March 31, 2024.
- B. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:
 - Level 1 Unadjusted quoted prices for identical assets or liabilities in active markets.
 - **Level 2** Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets.
 - Level 3 Developed from unobservable data, reflecting the Company's own assumptions.

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

C. The carrying values and estimated fair values of the Company's financial instruments at March 31, 2024 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds, short-term investments, and cash equivalents	\$ 49,173,278	\$ 50,007,580	\$ 2,793,129	\$ 46,380,149	s —	s —	s —
Common stocks	\$ 2,233,321	\$ 2,233,321	\$ 2,233,321	\$	\$	\$	\$

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

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

21. Other Items

A. and B.: No significant change.

C. Other Disclosures

Pursuant to State of Maine statute, there are standards, either singly or a combination of two or more, that if companies do not adhere to they can be considered by Maine Department to be hazardous to policyholders, creditors or the public in general ("hazardous condition"). At March 31, 2024, the Company did not meet all the standards necessary to not be considered in hazardous condition due to net operating losses in 2024 and 2023.

D. through I.: No significant change.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through May 10, 2024 for the statutory statement issued on May 10, 2024.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through May 10, 2024 for the statutory statement issued on May 10, 2024.

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

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D.: No significant change.

E. Risk Sharing Provisions of the Affordable Care Act

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

		AMOUNT
a.	Permanent ACA Risk Adjustment Program	
	Assets	
	1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments)	\$ 27
	Liabilities	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	8
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	24,698
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	(5,101)
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	1
b.	Transitional ACA Reinsurance Program	
	Assets	
	1. Amounts recoverable for claims paid due to ACA Reinsurance	_
	2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	_
	3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	_
	Liabilities	
	4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	_
	5. Ceded reinsurance premiums payable due to ACA Reinsurance	_
	6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	_
	Operations (Revenue & Expense)	
	7. Ceded reinsurance premiums due to ACA Reinsurance	_
	8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	_
	9. ACA Reinsurance contributions – not reported as ceded premium	_
c.	Temporary ACA Risk Corridors Program	
	Assets	
	1. Accrued retrospective premium due to ACA Risk Corridors	_
	Liabilities	
	2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	_
	Operations (Revenue & Expense)	
	3. Effect of ACA Risk Corridors on net premium income (paid/received)	_
	4. Effect of ACA Risk Corridors on change in reserves for rate credits	_

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

	1						1			I	
	Accrued Du Year on Bus	ring the Prior siness Written		Paid as of the r on Business	Diffe	rences	A	djustments			lances as of the ing Date
						Prior Year Accrued Less				Cumulative Balance from	Cumulative Balance from
		mber 31 of the r Year	Written Before of the Pr			Payments Payments (Col 1 - 3) (Col 2 - 4) E		To Prior Year Balances		Prior Years (Col 1 - 3 + 7)	Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
Premium adjustments receivable (including high risk pool payments)	s —	s —	s —	s —	s —	s —	s —	s —	A	s —	s —
2. Premium adjustments (payable) (including high risk pool premium)	_	19,570	_	_	_	19,570	_	324	В	_	19,894
3. Subtotal ACA Permanent Risk Adjustment Program	_	19,570	_	_	_	19,570	_	324		_	19,894
b. Transitional ACA Reinsurance Program											
Amounts recoverable for claims paid	_	_	_	_	_	_	_	_	С	_	_
2. Amounts recoverable for claims unpaid (contra liability)	_	_	_	_	_	_	_	_	D	_	_
Amounts receivable relating to uninsured plans	_	_	_	_	_	_	_	_	Е	_	_
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	_	_	_	_	_	_	_	_	F	_	_
5. Ceded reinsurance premiums payable	_	_	_	_	_	_	_	_	G	_	_
Liability for amounts held under uninsured plans	_	_	_	_	_	_	_	_	Н	_	_
7. Subtotal ACA Transitional Reinsurance Program	_	_	_	_	_	_	_	_		_	_
c. Temporary ACA Risk Corridors Program											
Accrued retrospective premium	-	_	–	_	-	-	_	_	I	_	-
Reserve for rate credits or policy experience rating refunds	_	-	_	_	_	_	_	_	J	_	-
3. Subtotal ACA Risk Corridors Program	_	_	_	_	_	_	_	_		_	_
d. Total for ACA Risk Sharing Provisions	s —	\$ 19,570	s —	s —	s —	\$ 19,570	s —	\$ 324		s —	\$ 19,894

Explanations of Adjustments

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

Risk Corridors Program Year	Accrued Year on	d Dur Bus	ring the Prior	Received or Paid as of the Current Year on Business		Differ	rences	A	djustments		Unsettled Balances as of the Reporting Date		
	Before December 31 of the Prior Year		Written Before December 31 of the Prior Year		Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)		
	1		2	3	4		5	6	7	8		9	10
	Receivat	ole	(Payable)	Receivable	eceivable (Payable) Rec		Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014													
Accrued retrospective premium	\$	_	\$	\$ -	\$	-	\$	\$ —	\$	\$	A	\$	\$
Reserve for rate credits or policy experience rating refunds		_	_	_		_	_	_	_	_	В	_	_
b. 2015													
Accrued retrospective premium		_	_	_		-	_	_	_	-	С	_	_
2. Reserve for rate credits or policy experience rating refunds		_	_	_		_	_	_	_	_	D	_	_
c. 2016													
Accrued retrospective premium		_	_	_		-	_	_	_	-	Е	_	_
2. Reserve for rate credits or policy experience rating refunds		_	_	_		_	_	_	_	_	F	_	_
d. Total for Risk Corridors	\$	_	\$	\$	\$	_	\$	\$ —	\$	\$		\$ —	\$

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

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

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

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

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of December 31, 2023 were \$16,318,180. As of March 31, 2024, \$7,369,800 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$2,768,512 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$6,179,868 favorable prior-year development since December 31, 2023 to March 31, 2024. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. Included in this decrease, the Company experienced \$6,058,785 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.
- B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26.	Intercom	pany	<u>Pooling</u>	Arrang	ements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

March 31, 2024

1. Liability carried for premium deficiency reserves ("PDR")

16,186,356

2. Date of the most recent evaluation of this liability

3/31/2024 No

3. Was anticipated investment income utilized in the calculation?

_

No significant change.

31. Anticipated Salvage and Subrogation

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring Domicile, as required by the Model Act?					Yes [] No [X]	
1.2	If yes, has the report been filed with the domiciliary state?					Yes [] No []	
2.1	Has any change been made during the year of this statement in the cl reporting entity?	arter, by-laws, articles of incorporation, or d	leed of settleme	nt of the		Yes [] No [X]	
2.2	If yes, date of change:							
3.1	Is the reporting entity a member of an Insurance Holding Company Sy is an insurer?					Yes [X] No []	
3.2	Have there been any substantial changes in the organizational charts	nce the prior quarter end?				Yes [X] No []	
3.3	If the response to 3.2 is yes, provide a brief description of those change Effective January 1, 2024, Coventry Health Plan of Florida, Inc. merge Health Plan Administrators, LLC acquired Hella Group LLC, a New Your subsidiaries: Audomo Insurance Services LLC, a Delaware limited lial Effective March 5, 2024, Spinnaker Bidco Limited was dissolved. Effective March 19, 2024, Spinnaker Bidco Limited was dissolved. Effective Changed its name to Aetna Health Company of Europe DAC. Effective March 19, 2024, Goodhealth Worldwide (Global) Limited merged with Aetna Global Holdings Limited has been dissolved. Effective December was dissolved. Effective April 1, 2024, Texas Health + Aetna Health I Effective on April 1, 2024, Texas Health + Aetna Health Plan Inc. mer	d into Aetna Health Inc. (FL). Effective Febrik limited liability company. Hella Group LL lity company Hella Media LLC, a Delaware stive March 5, 2024, PT Aetna Global Beneflarch 14, 2024, Aetna Health Insurance Comarch 19, 2024, Aetna Holdco (UK) Limited Health Global Benefits (Bermuda) Limited. I er 8, 2023, Aetna (Beijing) Enterprise Mana surance Company merged into Aetna Life I	C owns the two limited liability of the lia	following company ecame be DAC d. Effecti 26, 2024 es Co. Lt cany.	ive 4,			
3.4	Is the reporting entity publicly traded or a member of a publicly traded	roup?				Yes [X] No []	
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code	issued by the SEC for the entity/group				0000	0064803	
4.1	Has the reporting entity been a party to a merger or consolidation duri	g the period covered by this statement?				Yes [] No [X]	
4.2	If yes, provide the name of the entity, NAIC Company Code, and state ceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbreviation	n) for any entity	that has				
	1 Name of Entity	2 NAIC Company Code S	3 State of Domicile	;				
5.	If the reporting entity is subject to a management agreement, includin in-fact, or similar agreement, have there been any significant changes If yes, attach an explanation.	regarding the terms of the agreement or pri	incipals involved	d?] No [X] N/A [
6.1	State as of what date the latest financial examination of the reporting	ntity was made or is being made			<u> </u>	12/3	31/2020	
6.2	State the as of date that the latest financial examination report became date should be the date of the examined balance sheet and not the date of the examined balance sheet and not the date.					12/3	31/2020	
6.3	State as of what date the latest financial examination report became a the reporting entity. This is the release date or completion date of the date).	xamination report and not the date of the e	examination (bal	ance she	eet	06/3	30/2022	
6.4	By what department or departments? Maine Bureau of Insurance							
6.5	Have all financial statement adjustments within the latest financial exastatement filed with Departments?				Yes [] No [] N/A [)	X
6.6	Have all of the recommendations within the latest financial examination	report been complied with?			Yes [] No [] N/A [)	X
7.1	Has this reporting entity had any Certificates of Authority, licenses or revoked by any governmental entity during the reporting period?					Yes [] No [X]	
7.2	If yes, give full information:							
8.1	Is the company a subsidiary of a bank holding company regulated by	ne Federal Reserve Board?				Yes [] No [X]	
8.2	If response to 8.1 is yes, please identify the name of the bank holding							
8.3	Is the company affiliated with one or more banks, thrifts or securities f	ms?				Yes [] No [X]	
8.4	If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commiss	Office of the Comptroller of the Currency (C	DCC), the Feder	al Depos				
	1 Aggillata Nassa	2	3	4	5	6		
	Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC		
							l	

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?	sonal and professional		Yes [X]] No []	
	(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and (e) Accountability for adherence to the code.					
9.11	If the response to 9.1 is No, please explain:					
9.2	Has the code of ethics for senior managers been amended?			Yes [X] No []	
9.21	If the response to 9.2 is Yes, provide information related to amendment(s). Added "Responsible Use of Technology" as a new section and made minor updates to the "Non-discrimination, hard section.					
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers? If the response to 9.3 is Yes, provide the nature of any waiver(s).			Yes [] No [X]	
	FINANCIAL					
10.1 10.2	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? If yes, indicate any amounts receivable from parent included in the Page 2 amount:			-		
	INVESTMENT					
11.1 11.2	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or oth use by another person? (Exclude securities under securities lending agreements.) If yes, give full and complete information relating thereto:			Yes [] No [X]	
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:					
13. 14.1 14.2	Amount of real estate and mortgages held in short-term investments:] No [X]	
17.2	ii yes, piease complete the following.	1 Prior Year-End Book/Adjusted Carrying Value		Boo	2 rent Quarter ok/Adjusted rying Value	
	Bonds					
	Preferred Stock					
	Short-Term Investments					
	Mortgage Loans on Real Estate					
14.26	All Other	§	.0			
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)					
15.1 15.2	Has the reporting entity entered into any hedging transactions reported on Schedule DB?		Yes [] No [X]] N/A []
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date		_			^
	 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, P 					
	16.3 Total payable for securities lending reported on the liability page					
	rotal payable for obstantion to landing reported on the hability page.		4	,		

GENERAL INTERROGATORIES

17. 17.1	offices, vaults or safety custodial agreement w Outsourcing of Critical	y deposit boxes, we vith a qualified bank Functions, Custod	Special Deposits, real estate, more all stocks, bonds and other so or trust company in accordanc lial or Safekeeping Agreements equirements of the NAIC Finance	securities, owne be with Section of the NAIC Fi	ed throughout the 1, III - General E nancial Condition	e current year examination C n Examiners H	held pursuant to a onsiderations, F. landbook?	Yes	[X] No []		
		1				2					
	State Street Bank ar	Name of Custo nd Trust Company	dian(s)	State Street	Financial Cent	<u>ustodian Addr</u> er; One Linco	ess In Street; Boston, MA				
17.2	For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:										
	1 Name(2 Location(s)				nation(s)				
17.3 17.4	Have there been any of If yes, give full information			(s) identified in		current quarte	er?	Yes	[] No [X]		
	1 Old Custo		2 New Custodian		3 of Change		4 Reason				
17.5	Investment manageme	ent – Identify all inv	restment advisors, investment m the reporting entity. For assets the ment accounts"; "handle secur	nanagers, brokenat are managerities"]	er/dealers, included internally by e	ling individual	s that have the authority	to			
		nior Investment 0	or Individual fficer	A	tion						
	17.5097 For those firm	ns/individuals listed	in the table for Question 17.5, d	do any firms/ind	ividuals unaffilia	ted with the re	eporting entity (i.e.	Yes	s [] No [X]		
	17.5098 For firms/indi total assets u	viduals unaffiliated nder management	with the reporting entity (i.e. des aggregate to more than 50% of	signated with a the reporting e	"U") listed in the ntity's invested a	table for Que	stion 17.5, does the	Yes	s [] No [X]		
17.6	For those firms or inditable below.	viduals listed in the	table for 17.5 with an affiliation	code of "A" (af	filiated) or "U" (u	naffiliated), pr	ovide the information for	the			
	1		2		3		4		5 Investment Management		
	Central Registration Depository Number	Derek S. Blunt	Name of Firm or Individual		Legal Entity Id	entifier (LEI)	Registered With		Investment Management Agreement (IMA) Filed		
10.1	Central Registration Depository Number	Derek S. Blunt	Name of Firm or Individual		Legal Entity Id	entifier (LEI)	Registered With		Investment Management Agreement (IMA) Filed		
18.1 18.2	Central Registration Depository Number	Derek S. Blunt	Name of Firm or Individual		Legal Entity Id	entifier (LEI)	Registered With		Investment Management Agreement (IMA) Filed		
	Central Registration Depository Number N/A Have all the filing requ If no, list exceptions: By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has	Derek S. Blunt Derek S. Blunt Derek S. Blunt Blu	Name of Firm or Individual	of the NAIC In	Legal Entity Id N/A vestment Analys s for each self-de exist or an NAIC	entifier (LEI) s Office been esignated 5GI CRP credit ra	Registered With Not registered followed? security: ating for an FE or PL	Yes	Investment Management Agreement (IMA) Filed		
18.2	Central Registration Depository Number N/A Have all the filing requ If no, list exceptions: By self-designating 50 a. Documentation security is not a b. Issuer or obligo c. The insurer has Has the reporting entit By self-designating PL a. The security wa. b. The reporting er c. The NAIC Desig on a current priv d. The reporting er	Derek S. Blunt Bl securities, the representation of the Purchard in a securities, the representation of the Purchard in a securities, the representation of the purchased prior to the purchased prior t	name of Firm or Individual rposes and Procedures Manual coorting entity is certifying the folkation at a full credit analysis of the secontracted interest and principal prition of ultimate payment of all coordinates and principal prition of ultimate payment of all coordinates are contracted interest and principal prition of ultimate payment of all coordinates are contracted interest and principal prition of ultimate payment of all coordinates are contracted interest and principal prition of ultimate payment of all coordinates are contracted interest.	of the NAIC In owing element curity does not payments. ontracted intere collowing element collowing element by an NAIC CI or examination e PL security w	Legal Entity Id N/A vestment Analys s for each self-de exist or an NAIC st and principal. nts of each self-de exported for the si RP in its legal ca by state insurance ith the SVO.	entifier (LEI) s Office been esignated 5GI CRP credit ra designated PL eccurity. pacity as a NF pacity as a NF per regulators.	Registered With Not registered	Yes	Investment Management Agreement (IMA) Filed NO		
18.2	Central Registration Depository Number N/A Have all the filing requ If no, list exceptions: a. Documentation security is not a b. Issuer or obligo c. The insurer has Has the reporting entit By self-designating PL a. The security wa b. The reporting er c. The NAIC Desig on a current priv d. The reporting er Has the reporting entit By assigning FE to a S FE fund: a. The shares were b. The reporting er c. The security had January 1, 2019 d. The fund only or e. The current repo in its legal capar f. The public credit	Derek S. Blunt Sil securities, the representation of the Purchased prior to the purch	Name of Firm or Individual reposes and Procedures Manual corting entity is certifying the folk bit a full credit analysis of the sec- contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the for contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the for contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the for contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the for contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the for contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment of all co- inguity is certifying the folk contracted interest and principal p tion of ultimate payment	of the NAIC In owing element curity does not payments. Intracted interest of the payments of t	Legal Entity Id N/A vestment Analys s for each self-deexist or an NAIC st and principal. ants of each self-deexist or an NAIC exported for the self-deexist insurance in the SVO. retifying the follow exported for the self-deexist insurance in the SVO. retifying the follow exported for the self-deexist insurance in the SVO. retifying the follow exported for the self-deexist insurance in the SVO. retifying the follow exported for the self-deexist insurance in the SVO.	entifier (LEI) s Office been esignated 5GI CRP credit ra designated PL ecurity. pacity as a Ni ee regulators. ring elements ecurity. legal capacity rveillance ass	Registered With Not registered	Yes Yes	Investment Management Agreement (IMA) Filed N0		

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages: 1.3 A&H expense percent excluding cost containment expenses 9.2 % 2.1 Do you act as a custodian for health savings accounts? Yes [] No [X] 2.2 If yes, please provide the amount of custodial funds held as of the reporting date\$...... Yes [] No [X] Do you act as an administrator for health savings accounts? 2.3 If yes, please provide the balance of the funds administered as of the reporting date\$ 2.4 Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [] No [X] 3. If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of 3.1

domicile of the reporting entity? ...

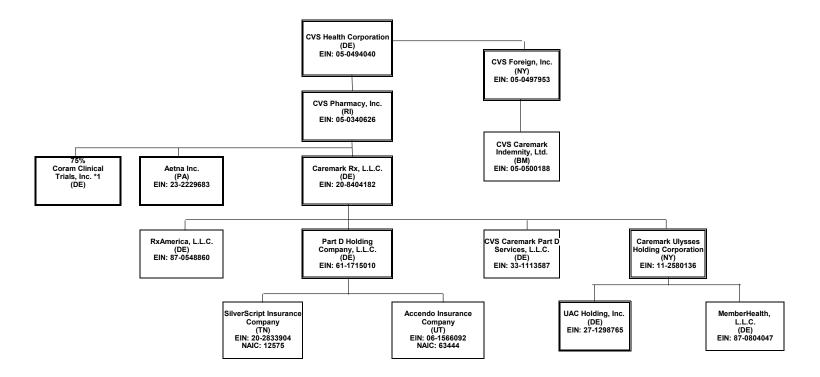
Yes [] No [X]

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date											
4	_				- Current Ye	ar to Date			10		
NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	Type of Reinsurance	Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating		
					·····						
									ļ		
		1		1	1	1		1	1		

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

		1	_	^			rect Business O		^	_	10	
		Active Status	2 Accident and Health	3 Medicare	4 Medicaid	5 CHIP Title	6 Federal Employees Health Benefits Program	7 Life and Annuity Premiums & Other	8 Property/ Casualty	9 Total Columns 2	10 Deposit-Typ	
	States, etc.	(a)	Premiums	Title XVIII	Title XIX	XXI	Premiums	Considerations		Through 8	Contracts	
1.	Alabama AL	N								0		
2.	Alaska Ak									0		
3. 4.	Arizona AZ Arkansas AF	N								0		
4. 5.	California CA									0		
6.	Colorado CO									0		
7.	Connecticut C7	N								0		
	Delaware DE									0		
9.	District of Columbia DC	N								0		
10.	Florida FL	N								0		
11.	Georgia GA									0		
	Hawaii HI	N								0		
13.	Idaho ID	N	· ····							0		
14.	Illinois IL	N								0		
15. 16.	Indiana IN	N								0		
	lowa IA Kansas KS	N								0		
17. 18.	Kentucky KY	N								0		
	Louisiana LA	N								0		
	Maine ME		880,308	59,989,558						60,869,866		
21.	Maryland MI		.							0		
22.	Massachusetts MA									0		
23.	Michigan MI	N	.							0		
24.	Minnesota Mi									0		
	Mississippi MS		.							0		
	Missouri MO									0		
	Montana M	N	· ····							0		
	Nebraska NE									0		
	Nevada N\ New Hampshire NI									0		
	New Hampshire NI- New Jersey NJ	N								0		
	New Mexico NN									0		
	New York N									0		
	North Carolina NO									0		
	North Dakota NE									0		
36.	Ohio Oh									0		
	Oklahoma Oł									0		
38.	Oregon OF	N								0		
39.	Pennsylvania PA	N								0		
	Rhode Island RI	N								0		
41.	South Carolina SC	N								0		
42.	South Dakota SE									0		
	Tennessee TN									0		
	Texas TX	N								0		
	Utah UT	N								0		
	Vermont VT	N								0		
	Virginia VA									0		
	Washington W. West Virginia W									0		
	Wisconsin W									0		
	Wyoming W									0		
	American Samoa AS									0		
	Guam Gl									0		
	Puerto Rico PF									0		
55.	U.S. Virgin Islands VI	N								0		
56.	Northern Mariana Islands MF	N								0		
57.	Canada CA									0		
58.	Aggregate Other											
-	Aliens Ol		0	0	0	0	0	0	0	0		
59.	Subtotal		880,308	59,989,558	0	0	0	0	0	60,869,866		
60.	Reporting Entity Contributions for Emplo	yee										
	Benefit Plans									0		
61.	Totals (Direct Business)	XXX	880,308	59,989,558	0	0	0	0	0	60,869,866		
	DETAILS OF WRITE-IN											
3001.												
3002.									·····			
3003. 3008	Summary of remaining	XXX										
ව ුව වර.	Summary of remaining write-ins for Line 58 from											
	overflow page	xxx	0	0	0	0	0	0	0	0		
3999.	Totals (Lines 58001 thro	ıgh		***************************************			•					
	58003 plus 58998)(Line	58		-			_		_	_		
	above) e Status Counts:	XXX	0	0	0	0	0	0	0	0		
۸ ۵۰:												



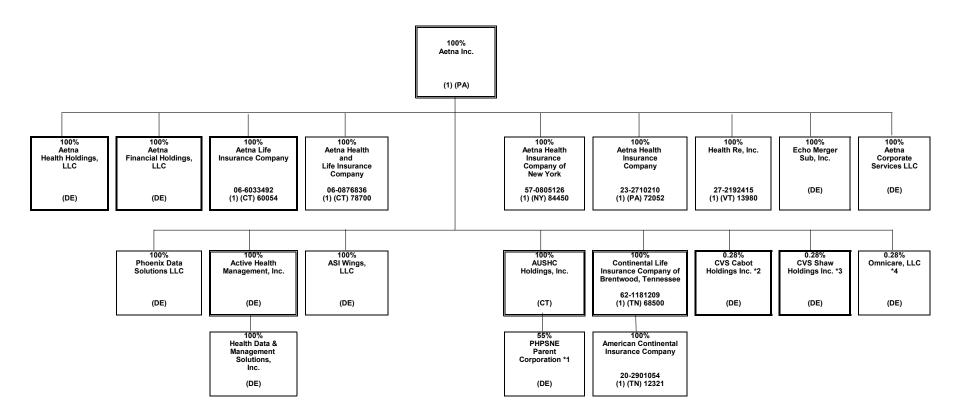
This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 6 company with numerous subsidiaries, the majority of which do not interact with the insurance entities. (1) Insurers/HMO's

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

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

Insurers/HMO's
 Percentages are rounded to the nearest whole percent and based on ownership of voting rights.

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

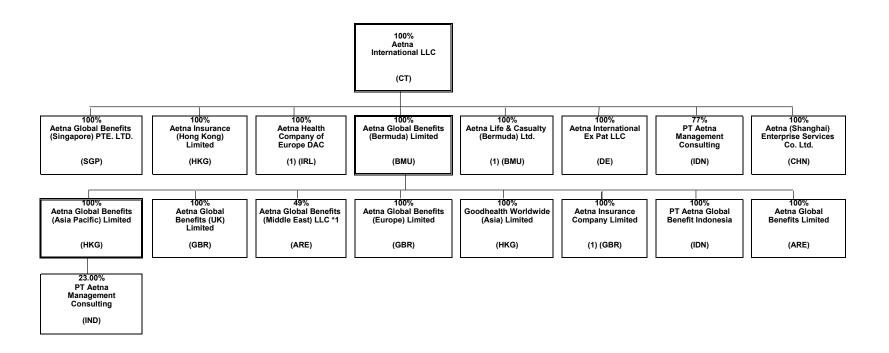


^{*1} PHPSNE Parent Corporation is also 45% owned by third parties.

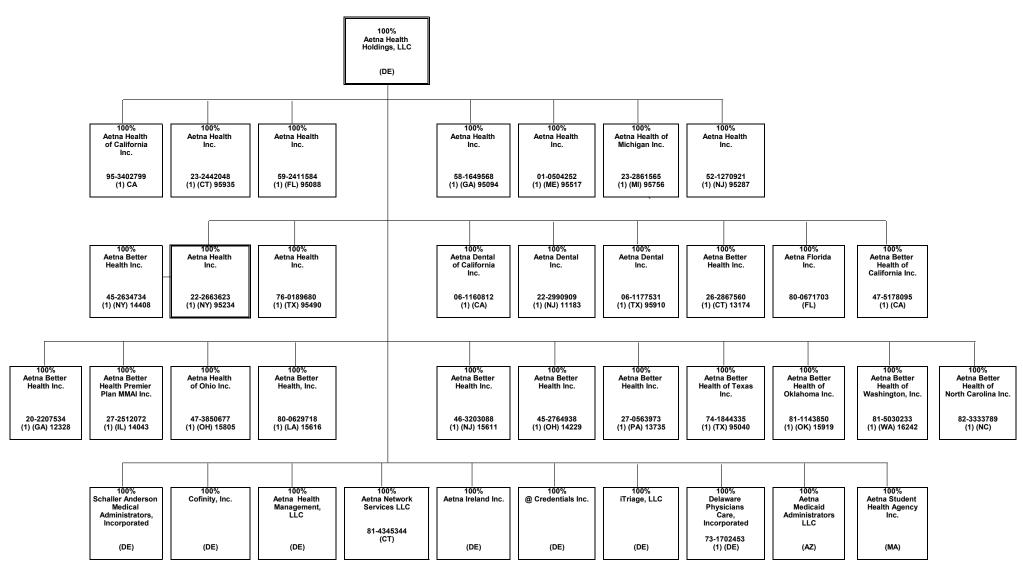
^{*2} CVS Cabot Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

^{*3} CVS Shaw Hoidings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

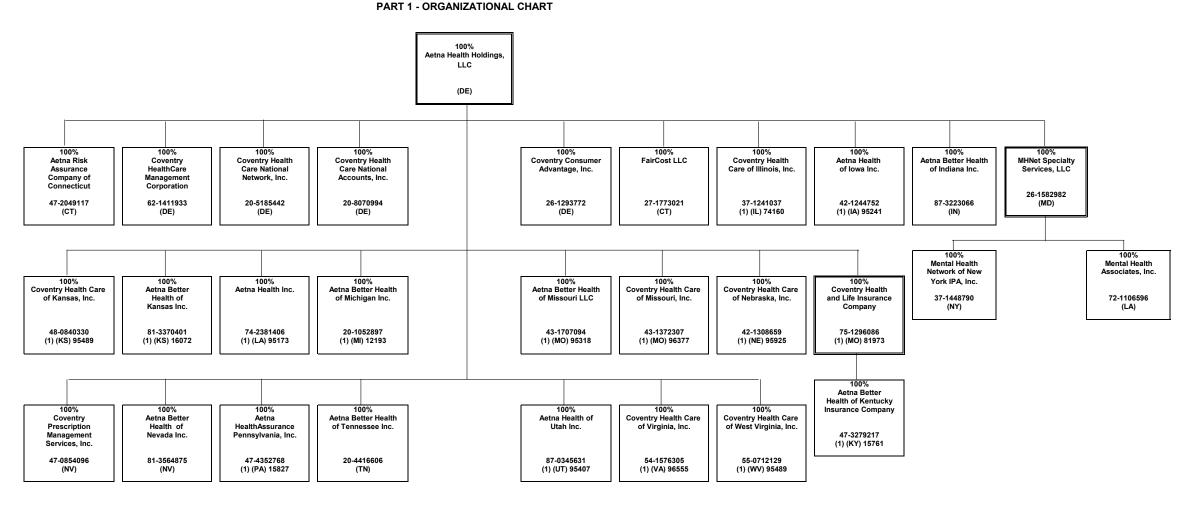
^{*4} Omnicare, LLC is also owned by CVS Cabot Holdings Inc and CVS Shaw Holdings Inc., each with 49.86% ownership.

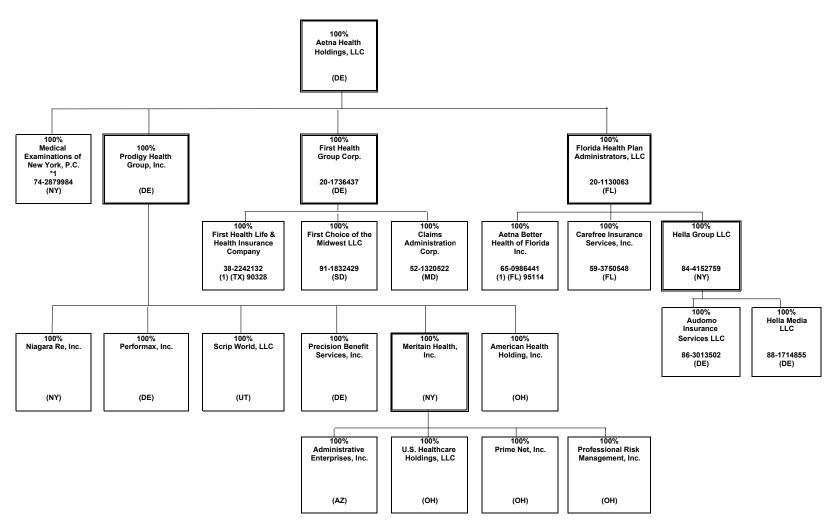


^{*1} Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee.



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

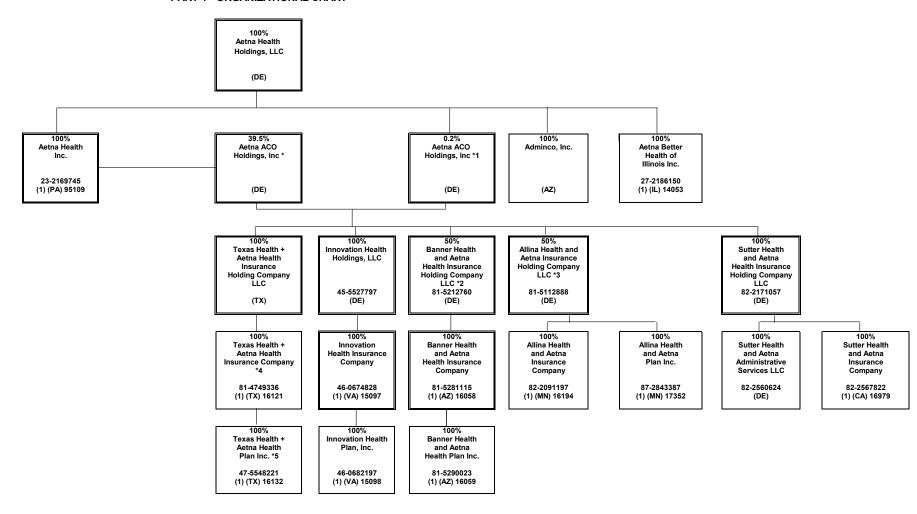




^{*1} Owned via a nominee

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

PART 1 - ORGANIZATIONAL CHART



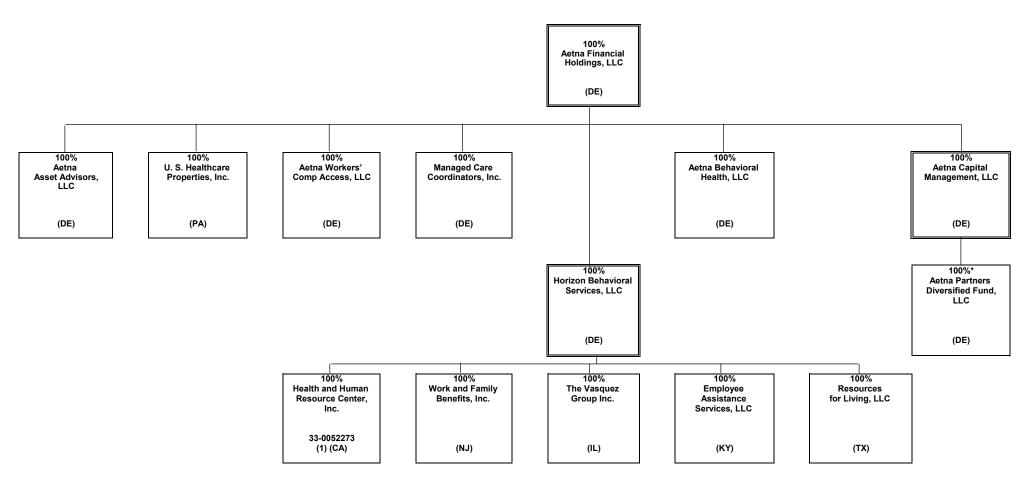
^{*1} Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

^{*2} Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

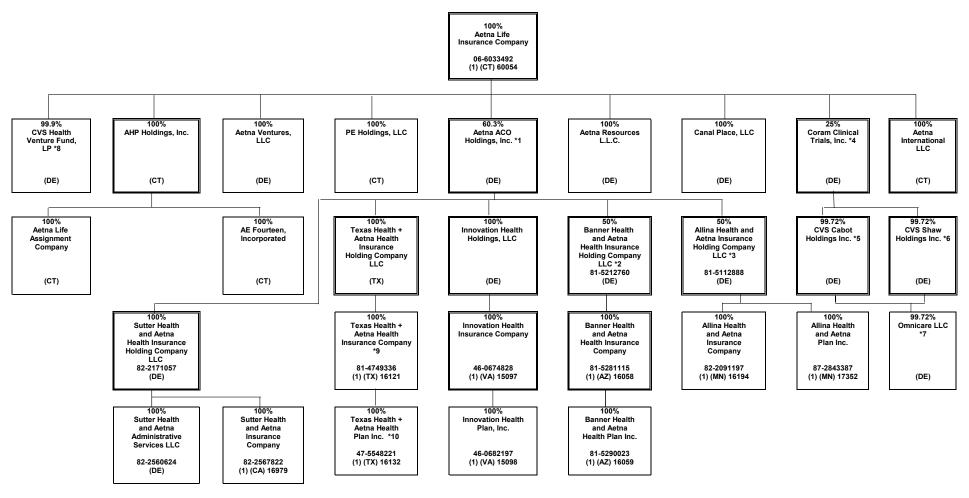
^{*3} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

^{*4} Effective on April 1, 2024, Texas Health + Aetna Health Insurance Company was merged into Aetna Life Insurance Company.

^{*5} Effective on April 1, 2024, Texas Health + Aetna Health Plan Inc. was merged into Aetna Health Inc. (Texas).



^{*} Aetna Capital Management, LLC is the managing member of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF. Aetna Life Insurance Company is the largest investor in APDF and currently owns a majority of the non-managing member interests of APDF.



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

^{*2} Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

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

^{*4} Coram Clinical Trials, Inc. is also 75% owned by CVS Pharmacy, Inc.

^{*5} CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.

^{*6} CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.

^{*7} Remaining .28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.

^{*8} CVS Health Venture Fund, LP is also 0.1% owned by CVS Helath Ventures Fund GP, LLC

^{*9} Effective on April 1, 2024, Texas Health + Aetna Health Insurance Company was merged into Aetna Life Insurance Company.

^{*10} Effective on April 1, 2024, Texas Health + Aetna Health Plan Inc. was merged into Aetna Health Inc. (Texas).

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
. 0001	CVS HEALTH GROUP		05-0494040		0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	63444	06-1566092				Accendo Insurance Company	UT	I A	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	12575	20-2833904				SilverScript Insurance Company	TN	IA	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	05-0340626				CVS Pharmacy, Inc.	RI	UIP	CVS Health Corporation	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	20-8404182				Caremark Rx, L.L.C.	DE	NIA	CVS Pharmacy, Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	61-1715010				Part D Holding Company, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	33-1113587 87-0548860				CVS Caremark Part D Services, L.L.C.	DE		Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-0548860 11-2580136				RxAmerica, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	11-2580136 87-0804047				Caremark Ulysses Holding Corporation	NY	NIA	Caremark, Rx., L.L.C	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	05-0500188				CVS Caremark Indemnity, Ltd.	DE	IA		Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	27-1298765				UAC Holding. Inc.	bwu		CVS Foreign, Inc	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	05-0497953				CVS Foreign. Inc.	NY	NIA	CVS Health Corporation	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials. Inc.	DE	NIA	CVS Pharmacy. Inc	Ownership		CVS Health Corporation	NO	7
. 0001	CVS HEALTH GROUP	00000	23-2229683	3060706	0001122304		Aetna Inc.	PA	UIP	CVS Pharmacy Inc	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	30-0123754				Aetna Health Holdings. LLC	DE	UDP	Aetna Inc.	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	95-3402799				Aetna Health of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95935	23-2442048				Aetna Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95088	59-2411584				Aetna Health Inc.	FL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	95094	58-1649568				Aetna Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	95517	01-0504252				Aetna Health Inc	ME	RE	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95756	23-2861565				Aetna Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95287	52-1270921				Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95234	22-2663623				Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	14408	45-2634734				Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95490	76-0189680				Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95040	74-1844335				Aetna Better Health of Texas Inc	TX	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	12328	20-2207534				Aetna Better Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1160812				Aetna Dental of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	11183	22-2990909				Aetna Dental Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95910	06-1177531				Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	13-3670795				Aetna Health Management, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	22-3187443				Aetna Ireland Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-1274723				Cofinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2671370				@Credentials Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13735	27-0563973				Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13174	26-2867560				Aetna Better Health Inc.	CT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP		47-5178095				Aetna Better Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	14043	27-2512072				Aetna Better Health Premier Plan MMAI Inc Aetna Health of Ohio Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15805	47-3850677					OH	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15616	80-0629718 80-0671703				Aetna Better Health, Inc.	LA	IA NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	14229	45-2764938				Aetna Better Health Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	14229	45-2764938 46-3203088				Aetna Better Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15919	81-1143850				Aetna Better Health of Oklahoma Inc.	NJ	IA	Aetna Health Holdings, LLC	Owner ship		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	04-2708160				Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	73-1702453				Delaware Physicians Care, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
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. 0001	CVS HEALTH GROUP	00000	01-0826783				Incorporated	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0

16.1

SCHEDULE Y

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.0001 CVS HEALTH GROUP .00000 58-2160656 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001																
.0001 CVS HEALTH GROUP .00000 85-3918720 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001	. 0001	CVS HEALTH GROUP						Aetna Ventures, LLC		NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation		
.0001 CVS HEALTH GROUP .00000 85-3918567 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001 .0001	. 0001													CVS Health Corporation		7
.0001 CVS HEALTH GROUP .00000 .31-1001351 .000 micare, LLC .DE. .NIA CVS Cabot Holdings Inc. .000 micare, LLC .0000 micare, LLC <td>. 0001</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>Coram Clinical Trials, Inc</td> <td>oo</td> <td></td> <td>CVS Health Corporation</td> <td></td> <td> 8</td>	. 0001										Coram Clinical Trials, Inc	oo		CVS Health Corporation		8
.0001 CVS HEALTH GROUP .0000 31-1001351 .0001 cvs Health Corporation .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00 .00	. 0001									NI A	Coram Clinical Trials, Inc	Ownership	99.720	CVS Health Corporation		9
. 0001 CVS HEALTH GROUP 00000 41-2035961 Aetna Financial Holdings, LLC	. 0001			31-1001351				Omnicare, LLC	DE	NIA		Ownership	49.860	CVS Health Corporation	NO	10
. 0001 CVS HEALTH GROUP . 00000 . 41-2035961 . Aetna Financial Holdings, LLC . DE. . NIA. Aetna Inc. . 0 mership . 100.000 . CVS Health Corporation . NO. . 0 . 0001 . CVS HEALTH GROUP . 00000 . 26-2030792 . Aetna Asset Advisors, LLC . DE. . NIA. Aetna Financial Holdings, LLC . O mership . 100.000 . CVS Health Corporation . NO. . 0 . 0001 . CVS HEALTH GROUP . 00000 . 23-2354500 . U.S. Health Corporation . NO. . O . O mership . 100.000 . CVS Health Corporation . NO. . 0 . 0001 . CVS HEALTH GROUP . 00000 . 38-3704481 . Aetna Capital Management, LLC . DE. . NIA. Aetna Financial Holdings, LLC . O mership . 100.000 . CVS Health Corporation . NO. . O	. 0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare, LLC	DE	NIA	CVS Shaw Holdings Inc	Ownership	49.860	CVS Health Corporation	NO	10
. 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001 . 0001	. 0001	CVS HEALTH GROUP		41-2035961				Aetna Financial Holdings, LLC	DE	NIA		Ownership	100.000	CVS Health Corporation	NO	0
. 0001 CVS HEALTH GROUP	. 0001		00000	26-2030792				Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	
. 0001 CVS HEALTH GROUP									PA	NI A					NO	
			00000						DE	NIA		Ownership	100.000			
										NI A		Ownership	100.000			1

SCHEDULE Y

	PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf			1
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	1
		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	auired?	1
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
. 0001	CVS HEALTH GROUP	00000	20-0446676				Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-0446713				Aetna Behavioral Health, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2670015				Managed Care Coordinators, Inc	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	59-3269144				Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	61-1193498				Employee Assistance Services, LLC	KY	NI A	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	33-0052273				Health and Human Resource Center, Inc	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NI A	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	36-3681261				The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	22-3178125				Work and Family Benefits, Inc	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	27-1773021				FairCost LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	78700	06-0876836				Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	84450	57-0805126				Aetna Health Insurance Company of New York .	NY	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1571642				Aetna International LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	98-0211470				Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	86-1455140				Aetna International Ex Pat LLC	DE	NIA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Bermuda) Limited	BMU	NI A	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Europe) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Asia) Limited	HKG	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000			l		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					PT Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Middle East) LLC	ARE	NI A	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	CVS Health Corporation	NO	3
							Aetna Global Benefits (Asia Pacific) Limited						·		1
. 0001	CVS HEALTH GROUP	00000						HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Aetna International LLC	Ownership	77.000	CVS Health Corporation	NO	0
										Aetna Global Benefits (Asia Pacific)					
. 0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Insurance Company Limited	GBR	IA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Health Company of Europe DAC	IRL	I A	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
							Aetna (Shanghai) Enterprise Services Co. Ltd.								
. 0001	CVS HEALTH GROUP	00000						CHN	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Singapore) PTE. LTD.	SGP	NIA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	22-2578985				AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Insurance (Hong Kong) Limited	HKG	IA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1182176				PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership		CVS Health Corporation	NO	4
. 0001	CVS HEALTH GROUP	00000	52-2182411				Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-0970432				Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13980	27-2192415				Health Re, Inc.	VT	IA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	81-0579372				Phoenix Data Solutions LLC	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	51-0029326				ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-4556274				Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-4547145				Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	85-3918720				CVS Cabot Holdings Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	8
. 0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	9
. 0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare, LLC	DE	NI A	Aetna Inc.	Ownership		CVS Health Corporation	NO	10
. 0001	CVS HEALTH GROUP	81973	75-1296086				Coventry Health and Life Insurance Company .	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
1		l		I	[Aetna Better Health of Kentucky Insurance	l		Coventry Health and Life Insurance Company				l l	
. 0001	CVS HEALTH GROUP	15761	47-3279217				Company	KY	IA		Ownership	100.000	CVS Health Corporation	NO	0

SCHEDULE Y

1		PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM														
Part	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Name of Securities Part												Type	If			
Section Company Comp													Control			
Course C												(Ownership,	is		Is an	
Compose Comp							Name of Securities			Relation-		Board,	Owner-		SCA	
Company Comp							Exchange		Domi-	ship		Management,	ship		Filing	
Company Comp			NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
April Sept. 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975 1975	Group		Company	ID	Federal			Parent, Subsidiaries		Reporting	Directly Controlled by		Percen-	Ultimate Controlling	quired?	
Annual Process Annu	Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
Content Section Cont	. 0001	CVS HEALTH GROUP	00000	81-4345344				Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
April Control Contro	. 0001			42-1244752				Aetna Health of Iowa Inc		IA		Ownership	100.000	CVS Health Corporation	NO	0
1907 1975 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977 1977	. 0001	CVS HEALTH GROUP	95925	42-1308659				Coventry Health Care of Nebraska, Inc	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
Sept. Sept																
Covert Proceed Covert Proced Covert																
Dec.	. 0001	CVS HEALTH GROUP	95173	74-2381406					LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
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Control Cont																
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DOT COR HALTH 9902 97-327001 Astra Setter Halth of Kindson (n. S. S. J. A. Astra Halth Holdings, LLC Domorship. 1,00,000 CS Halth Corporation M. D. O.																

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Covertify Health Care of Illinois, Inc. I. A. Actina Health Replicings, LLC Covership. 100,000 OS Health Corporation O. 0. 0.																
Covertry Real Th Grap Covertry Real Th Care National Accounts, Inc. Covertry Real Th Care National Accounts, Inc. Covertry Real Th Care National Network, Inc. Covertry Real Th Real Real Th Holdings, LLC Concerting, Inc. Covertry Inc. Cov																
OST FEALTH GRUP	. 0001	CVS HEALTH GROUP	74160	37-1241037					IL	I A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
OSS FEATH GRUP								Coventry Health Care National Accounts, Inc.								
OSF HELTH 960UP 00000 26-283772 Covertry Consumer Advantage, Inc. E. NIA. A Actra Health Holdrings, LLC																
DOI DIS HEALTH GROUP																
DO01 OIS HEALTH GRUP S0028 38-224/132 First heal th Life & Health Insurance Company T								,				0 m 10 1 0 m p				
0001 CVS HEALTH GRUP 00000 03 -1832429 First Choice of the Midnest LLC SD NIA First Health Group Corp 0 mership 100,000 CVS Health Corporation ND 0 0 0 0 0 0 0 0 0	. 0001	CVS HEALTH GROUP	00000	20-1736437					DE	NIA	Aetna Health Holdings, LLC		100.000	CVS Health Corporation		
0001 CVS HEALTH GROUP 0.0000 C2-130052 Claims Administration Corp. M.D. NIA First Health Group Corp. 0.0000 CVS Health Group Corp. 0.0000 0.0000 CVS Health Group Corp. 0.0000 CVS Health Group LC 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.00000 0.0000 0.	. 0001	CVS HEALTH GROUP	90328	38-2242132					TX	IA		Ownership	100.000	CVS Health Corporation	NO	0
COST CVS FEALTH GROUP	. 0001							First Choice of the Midwest LLC		NI A	First Health Group Corp	Carrier Critical Crit		CVS Health Corporation		0
0.001 CVS EALTH GRUP	. 0001		00000	52-1320522					MD	NI A	First Health Group Corp	Ownership	100.000	CVS Health Corporation	NO	0
0001 CVS FEALTH GROUP	. 0001															
COO1	. 0001	CVS HEALTH GROUP						Aetna Better Health of Florida Inc		I A	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation		0
0001 CVS HEALTH GROUP 00000 88-7714855	. 0001									NI A				CVS Health Corporation		
0.0001 CVS HEALTH GROUP 0.0000 59-3750548 Carefree Insurance Services, Inc. FL NIA Florida Health Plan Administrators, LLC Ownership 0.0000 CVS Health Corporation NO 0.0001 CVS Health GROUP 0.0000 26-1582982 MMNet Specialty Services, LLC MD NIA Aetha Health Holdings, LLC Ownership 0.0000 CVS Health Corporation NO 0.0001 CVS Health GROUP 0.0000 37-1448790 Mental Health Network of New York IPA, Inc. NY NIA MMNet Specialty Services, LLC Ownership 0.0000 CVS Health Corporation NO 0.0001 CVS Health GROUP 0.0000 72-1106596 Mental Health Associates, Inc. LA NIA MMNet Specialty Services, LLC Ownership 0.0000 CVS Health Corporation NO 0.0000 CVS Health GROUP 0.0000 CVS Health Corporation NO 0.0000 CVS Health GROUP 0.0000 CVS Health Corporation NO 0.0000 CVS Health GROUP 0.0000 CVS Health Corporation NO 0.0000 CVS Health GROUP 0.0000 CVS Health Corporation NO 0.0000 CVS Health GROUP 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.0000 0.00000 0.0000 0.0000 0.00000 0.00000 0.00000 0.00000 0.00000 0.00000	. 0001													CVS Health Corporation		
0.001 CVS EALTH GROUP 0.0000 26-1582982 0.001 CVS EALTH GROUP 0.0000 37-148790 0.001 CVS EALTH GROUP 0.0000 37-146790 0.001 CVS EALTH GROUP 0.0000 72-1106596 0.001 CVS EALTH GROUP 0.0000 72-1106596 0.001 CVS EALTH GROUP 0.0000 0.001 CVS EALTH GROUP 0	. 0001	CVS HEALTH GROUP						Hella Media LLC		NI A		Ownership	100.000	CVS Health Corporation	NO	0
0.001 CVS HEALTH GROUP 0.0000 37-1448790 Mental Health Network of New York IPA, Inc. NY NIA. MHNet Specialty Services, LLC Ownership 1.00.000 CVS Health Corporation NO 0 0.001 CVS HEALTH GROUP 0.0000 72-1106596 Mental Health Associates, Inc. LA NIA. MHNet Specialty Services, LLC Ownership 100.000 CVS Health Corporation NO 0 0.001 CVS HEALTH GROUP 16242 81-5030233 Aetha Better Health of Washington, Inc. WA IA Aetha Health Holdings, LLC Ownership 100.000 CVS Health Corporation NO 0 0001 CVS HEALTH GROUP 00000 81-5212760 Banner Health and Aetha Health Insurance DE NIA Aetha ACO Holdings, Inc. Ownership 0wnership 50.000 CVS Health Corporation NO 5 0001 CVS HEALTH GROUP 16058 81-5281115 Company AZ IA Holding Company LLC Ownership 0wnership 0wnership 0wnership 0wnership 0wnership 0wnership	. 0001	CVS HEALTH GROUP	00000	59-3750548				Carefree Insurance Services, Inc	FL	NI A	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001 CVS HEALTH GROUP 00000 72-1106596 Mental Health Associates, Inc. LA NIA. MHNet Specialty Services, LLC 0wnership. 100.000 CVS Health Corporation NO 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	. 0001	CVS HEALTH GROUP	00000	26-1582982				MHNet Specialty Services, LLC	MD	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
O001 CVS HEALTH GROUP 16059 81-5290023 Aetna Better Health of Washington, Inc. Banner Health Insurance Company LLC Ownership. 100.000 CVS Health Corporation NO. 0 Moreship. 100.000 CVS Health Corporation NO. 100.0	. 0001	CVS HEALTH GROUP	00000	37-1448790				Mental Health Network of New York IPA, Inc.	NY	NI A	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
Banner Health and Aetna Health Insurance OUD1 CVS HEALTH GROUP	. 0001		00000	72-1106596				Mental Health Associates, Inc	LA	NI A	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001 CVS HEALTH GROUP	. 0001	CVS HEALTH GROUP	16242	81-5030233					WA	IA		Ownership	100.000	CVS Health Corporation	N0	0
0001 CVS HEALTH GROUP 16058 81-5281115 Company LC Company LC Ownership 100.000 CVS Health Corporation NO 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	. 0001	CVS HEALTH GROUP	00000	81-5212760				Holding Company LLC	DE	NIA		Ownership	50.000	CVS Health Corporation	NO	5
0001 CVS HEALTH GROUP	. 0001	CVS HEALTH GROUP	16058	81-5281115					AZ	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
	. 0001	CVS HEALTH GROUP	16059	81-5290023					AZ	IA		Ownership	100.000	CVS Health Corporation	NO	0
	. 0001	CVS HEALTH GROUP	00000	81-5112888	l				DE	NI A	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	6

SCHEDULE Y

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	If			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
										Allina Health and Aetna Health Insurance					
. 0001	CVS HEALTH GROUP	16194	82-2091197				Allina Health and Aetna Insurance Company	MN		Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
										Allina Health and Aetna Health Insurance					1
. 0001	CVS HEALTH GROUP	17352	87-2843387				Allina Health and Aetna Health Plan Inc	MN	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
2004	01/0 1/5/1 5/1 0D01/D		00 0474057				Sutter Health and Aetna Insurance Holding	25				400.000	lava u u u a		
. 0001	CVS HEALTH GROUP	00000	82-2171057				Company LLC	DE			Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	82-2560624				Sutter Health and Aetna Administrative Services LLC	DE		Sutter Health and Aetna Insurance Holding Company LLC	Ownership	100 000	CVS Health Corporation	NO	0
. 0001	CVS REALIR GROUP	00000	02-2000024				Services LLC	UE		Sutter Health and Aetna Insurance Holding	owner snrp	100.000	CVS Hearth Corporation	NU	0
0001	CVS HEALTH GROUP	16979	82-2567822				Sutter Health and Aetna Insurance Company	CA		Company LLC	Ownership	100 000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP		82-3333789				Aetna Better Health of North Carolina Inc	NC.		Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		27-2186150				Aetna Better Health of Illinois Inc.	11		Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		87-3223066				Aetna Better Health of Indiana Inc.			Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	01-0223000				CVS Health Venture Fund. LP	DE		Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	11
. 0001	OVO REALIR UNOUF	00000					OVO REALLIT VEHILUTE FUILO, LF	υΕ	INT A	Aetha Life insurance company	Towner Sirrp	100.000	GVO HEATTH COLPOLATION	١٧0	11

Asterisk	Explanation
Aetna Capital Management, LLC is the managing me	mber of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain other subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF. Aetna Life
Insurance Company is the largest investor in APDF	and currently owns a majority of the non-managing member interests of APDF.
Aetna ACO Holdings Inc. is owned by Aetna Life I	nsurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).
Aetna Global Benefits (Middle East) LLC is also	51% owned by Euro Gulf LLC, Aetna's Nominee
PHPSNE Parent Corporation is 55% owned by AUSHC	foldings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
Banner Health and Aetna Health Insurance Holding	Company LLC is also 50% owned by Banner Health
Allina Health and Aetna Insurance Holding Compan	/ LLC is also 50% owned by Allina Health System
	Pharmacy, Inc. and 25% owned by Aetna Life Insurance Company.
	Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
	linical Trials, Inc. and 0.28% owned by Aetna Inc.
Omnicare, LLC is 0.28% owned by Aetna Inc. The	Company is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. with 49.86% each ownership.
	/ CVS Health Ventures Fund GP, LLC
Medical Examinations of New York, P.C. is owned	via a nominee
Effective April 1, 2024, Texas Health + Aetna He	alth Insurance Company merged into Aetna Life Insurance Company
	alth Plan Inc. merged into Aetna Health Inc. (Texas).

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

OVERFLOW PAGE FOR WRITE-INS

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Deduct amounts received on disposals		
6.	Total foreign exchange change in book/adjusted rying		
7.	Deduct current year's other than temporary impailment recognized		
8.	Deduct current year's depreciation		
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)		
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans

	Mortgage Loans		
		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase/(decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage in lest parallel and learniting less bes less less less less less less		
9.	Total foreign exchange change in book value/rectured investment excurse a decrued atteresttress.		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Total valuation allowance		
13.	Subtotal (Line 11 plus Line 12)		
14.	Deduct total nonadmitted amounts		
15.	Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets		
	-	1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount		
5.	Unrealized valuation increase/(decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value		
10.	Deduct current year's other than temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	24,349,000	27,513,093
2.	Cost of bonds and stocks acquired	2, 102, 196	6,684,407
3.	Accrual of discount	18,376	57,246
4.	Unrealized valuation increase/(decrease)	189 , 128	543,222
5.	Total gain (loss) on disposals	8,092	(875,593)
6.	Deduct consideration for bonds and stocks disposed of	2,642,342	9, 108, 717
7.	Deduct amortization of premium	14,814	57 , 167
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	376,008
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees	0	(31,483)
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	24,009,636	24,349,000
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	24,009,636	24,349,000

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation.

Duning	the Current Quarter fo			Designation				
	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value	Acquisitions	Dispositions	Non-Trading Activity	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value	Book/Adjusted Carrying Value
	Beginning	During	Dispositions	During Activity	End of	End of	End of	December 31
NAIC Designation	of Current Quarter	Current Quarter	Current Quarter	Current Quarter	First Quarter	Second Quarter	Third Quarter	Prior Year
BONDS								
1. NAIC 1 (a)		,,	, ,	342,770			0	37,369,188
2. NAIC 2 (a)				(10,652)			0	8,099,098
3. NAIC 3 (a)	747,994	0	0	6,590	754,584	0	0	747,994
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	46,216,280	120,035,834	116,584,249	338,708	50,006,573	0	0	46,216,280
PREFERRED STOCK								
						_		
8. NAIC 1					0	0	0	0
9. NAIC 2					0	0	-	0
10. NAIC 3					0	0	0	0
11. NAIC 4		0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	46,216,280	120,035,834	116,584,249	338,708	50,006,573	0	0	46,216,280

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

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

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

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Cash Equivalents)	1	2
		·	_
			Prior Year Ended
		Year To Date	December 31
1.	Book/adjusted carrying value, December 31 of prior year	23,912,619	25,848,515
2.	Cost of cash equivalents acquired	118,098,928	740,558,110
3.	Accrual of discount	335 , 147	1,649,039
4.	Unrealized valuation increase/(decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	114,115,429	744,143,051
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	28,231,265	23,912,619
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	28,231,265	23,912,619

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

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

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

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

NONE

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

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

SCHEDULE D - PART 3

-· · · · · -			
Show All Long-Term	Bonde and Stock	Acquired During the	Current Quarter
SHOW All LUNG-16111	i bullus allu Sluck	Acquired Dulling the	Cullelli Quallel

		SHOW All L	ong-reim Bonds and Stock Acquired During the Current Quarter					
1 2	3	4	5	6	7	8	9	10
								NAIC
								Designation,
								NAIC
								Designation
								Modifier
								and
								SVO
				Number of			Paid for Accrued	Admini-
CUSIP		Date		Shares of			Interest and	strative
Identification Description	Foreign	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
110122-EF-1 BRISTOL-MYERS SQUIBB SR UNSECURED 4.900% 02/22/29			Citigroup Global Markets Inc			500.000	0	1.F FE
113520-AA-8 BROOKHAVEN PARK CLO LTD SERIES 24-1A CLASS A 6.810% 04/19/37			Citigroup Global Markets Inc		500,000	500.000	0	1.A Z
236057-AA-3 DANBY PARK CLO LTD SERIES 22-1A CLASS A1A 7.418% 10/21/35			DEUTSCHE BANK		603,246	600.000	8.160	
69688M-AN-5 PALMER SQUARE CLO LTD SERIES 18-2A CLASS A1R 6.844% 04/16/37			Citigroup Global Markets Inc		500.000	500.000	0,100	1.A FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)		00/ 10/ 2024	יוט ווען אויט אין		2, 102, 196	2.100.000	8.160	
2509999997. Total - Bonds - Part 3					2, 102, 196	2,100,000	8,160	
2509999998. Total - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999. Total - Bonds					2,102,196	2,100,000	8.160	
4509999997. Total - Preferred Stocks - Part 3					2, 102, 130	XXX	0,100	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	XXX
5989999997. Total - Common Stocks - Part 3					0	XXX	0	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
598999999. Total - Common Stocks					0	XXX	0	XXX
599999999. Total - Preferred and Common Stocks					0	XXX	0	XXX
600999999 - Totals	•	*	<u> </u>		2, 102, 196	XXX	8.160	XXX

SCHEDULE D - PART 4

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

					Show All Lor	ng-Term Bo	inds and Sto	ck Sold, Red	leemed or (Otherwise L	Disposed o	of During ti	ne Current	Quarter							
1	2	3	4	5	5 6 7 8 9					Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Desig-
																					nation,
																					NAIC
													Total	Total							Desig-
												Current	Change in						Bond		nation
												Year's	Book/	Exchange	Book/				Interest/		Modifier
									Prior Year		Current	Other Than		Change in	Adjusted	Foreign			Stock	Stated	and
									Book/	Unrealized		Temporary		Book	Carrying		Realized		Dividends	Con-	SVO
CUSIP					Number of				Adjusted	Valuation	(Amor-	Impairment	Value	/Adjusted	Value at	Gain	Gain	Total Gain	Received	tractual	Admini-
Ident-		For-	Disposal	Name	Shares of	Consid-		Actual	Carrying	Increase/	tization)/	Recog-	(11 + 12 -	Carrying	Disposal	(Loss) on		(Loss) on	During	Maturity	strative
ification		eian		of Purchaser	Stock	eration	Par Value	Cost	Value	(Decrease)	Accretion	nized	13)	Value	Date	Disposal	Disposal	Disposal	Year	Date	Symbol
	BOEING CO SR UNSECURED 1.433% 02/04/24	oigii		Maturity	Otook	500.000	500.000	500.000	500.000	(Decrease)	/ tooretion	n	0	Value	500.000	Diopodai	Diopodai	0	3.583		2.0 FE
03/020 DL 2	CARLYLE GLOBAL MARKET STRATEGI SERIES 13-1A		. 02/04/2024 .	maturity			500,000		500,000						500,000					. 02/04/2024 .	2.012
	CLASS A1R 6.519% 08/14/30		. 02/14/2024 .	Paydown		81,076	81,076	80,549	80,502	0	574	0	574	0	81,076	0	0	0	1,365	. 08/14/2030 .	1.A FE
	GOLDENTREE LOAN OPPORTUNITIES SERIES 14-9A									_				_				_			
	CLASS AR2 6.691% 10/29/29		. 01/29/2024 .	Paydown		687,852	687,852	688,052	687,904	0	(52)	0	(52)	0	687,852	0	0	0	11,757	. 10/29/2029 .	1.A FE
	GOLDENTREE LOAN OPPORTUNITIES SERIES 14-9A CLASS AR2 6.691% 10/29/29		. 03/01/2024 .	nedellipt for 100.0000		372.313	372.313	372.421	372.341		(28)		(28)		372.313	0	0	0	0 570	. 10/29/2029 .	1 / 55
	OAK HILL CREDIT PARTNERS SERIES 20-6A CLASS		. 03/01/2024 .			3/2,313					(20)		(20)							. 10/29/2029 .	1.A FE
67098U-AN-5	AR 6.981% 07/20/34			MORGAN STANLEY		1,001,101	1,000,000	995,490	993,574	0	(566)	0	(566)	0	993,009	0	8,092	8,092	16,854	. 07/20/2034 .	1.A FE
110999999	9. Subtotal - Bonds - Industrial and M	iscella	aneous (Una	affiliated)		2,642,342	2,641,241	2,636,512	2,634,321	0	(72)	0	(72)	0	2,634,250	0	8,092	8,092	42,137	XXX	XXX
250999999	7. Total - Bonds - Part 4					2,642,342	2,641,241	2,636,512	2,634,321	0	(72)	0	(72)	0	2,634,250	0	8,092	8,092	42, 137	XXX	XXX
250999999	8. Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
250999999	9. Total - Bonds					2,642,342	2,641,241	2,636,512	2,634,321	0	(72)	0	(72)	0	2,634,250	0	8,092	8,092	42, 137	XXX	XXX
450999999	7. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
450999999	8. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
450999999	9. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
598999999	7. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
598999999	8. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
598999999	9. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
599999999	9. Total - Preferred and Common Sto	cks				0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
600999999	9 - Totals					2,642,342	XXX	2,636,512	2,634,321	0	(72)	0	(72)	0	2,634,250	0	8,092	8,092	42, 137	XXX	XXX

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

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

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

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open **N O N E**

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

NONE

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

Schedule E - Part 1 - Month End Depository Balances **NONE**

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

		Snow investments Ov	viled Elia di Culteti			,		
1	2	3	4	5	6	7	8	9
						Book/Adjusted	Amount of Interest	Amount Received
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Carrying Value	Due and Accrued	During Year
0109999999. Total - U.S. Government Bo						0	0	0
0309999999. Total - All Other Governmer	nt Bonds					0	0	0
0509999999. Total - U.S. States, Territori	ies and Possessions Bonds					0	0	0
0709999999. Total - U.S. Political Subdiv	risions Bonds					0	0	0
0909999999. Total - U.S. Special Revenu	ues Bonds					0	0	0
FORTUNE BRANDS HOME & SE CP 4(2)) 144A		03/28/2024	5.530	04/18/2024		0	3,064
GLENCORE FUNDING LLC CP 4(2) 144	4A		03/27/2024	5.620	04/08/2024	324,645	0	253
INTERCONTINENTALEXCHANGE INC CP	4(2) 144A		03/19/2024	5.520	04/12/2024	4,099,061	0	8, 171
ONE GAS INC CP 4(2) 144A			03/25/2024	5.580	04/22/2024	3,146,713	0	3,414
			03/25/2024	5.600	04/24/2024		0	
RYDER SYSTEMS CP			03/28/2024	5.550	04/25/2024	5.287.352	0	3.261
			03/13/2024	5.470	04/02/2024	4.012.388	0	11.584
WBKCO INC CP 4(2) 144A			03/14/2024	5.540	04/05/2024	3.383.909	0	9.373
1019999999. Subtotal - Bonds - Industrial	l and Miscellaneous (Unaffiliated) - Issuer Obligations					28.230.258	0	42.375
1109999999. Total - Industrial and Miscel						28,230,258	0	42.375
1309999999. Total - Hybrid Securities	namosas (omaninatos) Bonas					0	0	0
1509999999. Total - Parent, Subsidiaries	and Affiliates Bonds					0	0	0
1909999999. Subtotal - Unaffiliated Bank						0	0	0
2419999999. Total - Issuer Obligations	A LOUIS					28,230,258	0	42.375
2429999999. Total - Residential Mortgage	e-Backed Securities					20,200,230	0	42,010
2439999999. Total - Commercial Mortgage						0	0	0
2449999999. Total - Other Loan-Backed						0	0	0
2459999999. Total - SVO Identified Fund						0	0	0
2469999999. Total - Affiliated Bank Loans						0	0	0
2479999999. Total - Unaffiliated Bank Loans						0	0	0
2509999999. Total Bonds	diis					28.230.258	0	42.375
60934N-50-0 FEDERATED INVESTORS INC TREASURY	V ODLIGATION CIAID		03/28/2024	0.000		28,230,238	<u> </u>	42,3/5
	Narket Mutual Funds - as Identified by the SVO					1,007		53
6209999999. Subtotal - Exempt Money M	Market Multual Funds - as identified by the 5VO					1,007	17	63
8609999999 - Total Cash Equivalents						28,231,265	17	42,438