

HEALTH ANNUAL STATEMENT

AS OF DECEMBER 31, 2019 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health of Iowa Inc.

NAIC Group (Code 95241 Employer's	ID Number <u>42-1244752</u>
Organized under the Laws of	(Current) (Prior) lowa	_ State of Domicile or Port of E	ntry IA
Country of Domicile	United Sta	tes of America	
Licensed as business type:	Health Mainten	ance Organization	
Is HMO Federally Qualified? Yes [] No[X]		
Incorporated/Organized	02/07/1985	Commenced Business	01/01/1986
Statutory Home Office	15950 West Dodge Road		Omaha, NE, US 68118
	(Street and Number)	(City o	r Town, State, Country and Zip Code)
Main Administrative Office		at Dodge Road	
Omah	a, NE, US 68118	nd Number)	800-471-0240
(City or Town, S	tate, Country and Zip Code)	(A	rea Code) (Telephone Number)
Mail Address	15950 West Dodge Road	(Cib.o	Omaha, NE, US 68118 r Town, State, Country and Zip Code)
`	treet and Number or P.O. Box)		r Town, State, Country and Zip Code)
Primary Location of Books and Record		st Dodge Road nd Number)	
	a, NE, US 68118 tate, Country and Zip Code)		402-351-7476 Area Code) (Telephone Number)
, ,		·	riea Gode) (Telephone Number)
		yhealthcare.com	
Statutory Statement Contact	Frank Ferris Chronister III (Name)	 	717-541-5742 (Area Code) (Telephone Number)
	Reporting@aetna.com		717-526-2888
(E:	-mail Address)		(FAX Number)
Vice President and Treasurer	OFF Tracy Louise Smith #	ICERS Corporate Controller	Robert Joseph Parslow #
Vice President and Secretary			Troson bedapin area. II
	то	THER	
Kevin James Casey, Senior Inv	estment Officer Frank Ferris Chroniste	er III, Assistant Controller#	Peter Keller, Assistant Controller #
Bryan James Lane, Assistant	Controller # William Stephen Mayr	nes, Assistant Controller #	Davin Henry Reinecke, Chief Financial Officer
James Dean Christer		OR TRUSTEES	Richard Noble Sloma
all of the herein described assets were statement, together with related exhibit condition and affairs of the said reportir in accordance with the NAIC Annual S rules or regulations require differences Furthermore, the scope of this attestal	e the absolute property of the said reporting enti- is, schedules and explanations therein contained, ng entity as of the reporting period stated above, a tatement Instructions and Accounting Practices a in reporting not related to accounting practices an tion by the described officers also includes the re-	ty, free and clear from any liens annexed or referred to, is a full a and executions and deductions and Procedures manual except to d procedures, according to the be elated corresponding electronic	orting entity, and that on the reporting period stated above or claims thereon, except as herein stated, and that this and true statement of all the assets and liabilities and of the therefrom for the period ended, and have been complete to the extent that: (1) state law may differ; or, (2) that state est of their information, knowledge and belief, respectively filling with the NAIC, when required, that is an exact copiested by various regulators in lieu of or in addition to the
enclosed statement.	to electronic iming) of the enclosed statement. T	The electronic liming may be requ	ested by various regulators in field of or in addition to the
N 41	*		
Tracy Louise Smith	Edward	Chung-I Lee	Robert Joseph Parslow
Vice President and Treasu		ent and Secretary	Corporate Controller
State of Rhode Island County of Providence	State of Connecticut County of Hartford	t	State of Connecticut County of Hartford
Subscribed and sworn to before me thi	Subscribed and sworn to	before me this	Subscribed and sworn to before me this
3Kd day of Februser	2020 20 day of Jan	<u>lales</u> , 2020	day of Flowary , 2020
NOTARY PUBLIC (Seal)	NO PARY PUBLIC (Seal)	Cadorcinie	NOTARY PUBLIC (Seal)
SUSAN J. GEORGE NOTARY PUBLIC STATE OF RHODE ISLAN COMMISSION # 753267 COMMISSION EXPIRES 8/26/	Notery Public, My Commission	ANN CIANCI State of Connecticut Expires Nov. 30, 2020	VICTORIA WOLLSCHLAGER Notary Public, State of Connecticut My Commission Expires Sept. 30, 2022

ASSETS

			Current Year		Prior Year
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1.	Bonds (Schedule D)	33,331,246	0		40,990,173
2.	Stocks (Schedule D):				
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks	0	0	0	0
3.	Mortgage loans on real estate (Schedule B):				
	3.1 First liens	0	0	0	0
	3.2 Other than first liens		0	0	0
	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0				
	encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5.	Cash (\$13,635,050 , Schedule E - Part 1), cash equivalents				
	(\$2,872,475 , Schedule E - Part 2) and short-term				
	investments (\$0 , Schedule DA)	16,507,525	0	16,507,525	9,383,786
6.	Contract loans, (including \$0 premium notes)				
	Derivatives (Schedule DB)				
	Other invested assets (Schedule BA)				
9.	Receivables for securities				
	Securities lending reinvested collateral assets (Schedule DL)				
	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	49,838,771	0		
	Title plants less \$0 charged off (for Title insurers				
	only)	0	0	0	0
14.	Investment income due and accrued	310,052	0	310,052	397,014
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	143, 193	143, 193	0	157 , 176
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$73,807)	73,807	0	73,807	211,472
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers	0	0	0	49,070
	16.2 Funds held by or deposited with reinsured companies	0	0	0	0
	16.3 Other amounts receivable under reinsurance contracts	0			0
17.	Amounts receivable relating to uninsured plans	0	0	0	0
18.1	Current federal and foreign income tax recoverable and interest thereon	101,285	0	101,285	0
18.2	Net deferred tax asset	223,395	31,034	192,361	306,235
19.	Guaranty funds receivable or on deposit	0	0	0	0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$	1,637	1,637	0	0
	Net adjustment in assets and liabilities due to foreign exchange rates				
	Receivables from parent, subsidiaries and affiliates				
	Health care (\$30,141) and other amounts receivable				
25.	Aggregate write-ins for other than invested assets	1,927,410	0	1,927,410	2,433,455
26.	Total assets excluding Separate Accounts, Segregated Accounts and	E0 6E4 000	100 E44	EQ 470 007	E2 007 007
o-	Protected Cell Accounts (Lines 12 to 25)	5∠,654,368	180,541	52,4/3,82/	ეკე კა
27.	Accounts	0	0	0	0
28.	Total (Lines 26 and 27)	52,654,368	180,541		
	DETAILS OF WRITE-INS	·			
1101.					
1102.					
1103.					
	Summary of remaining write-ins for Line 11 from overflow page				
	T. I. (1) 1404 (1) 1400 (1) 1400 (1) 14	0			
	Recoverable state premium taxes				
	Guaranty fund assessments			1,721,676	
	•				
2503.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	1,927,410	0	1,927,410	2,433,455

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPI	IAL AND	Current Year		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$0 reinsurance ceded)		12,211		3,203,595
	Accrued medical incentive pool and bonus amounts		0		
	Unpaid claims adjustment expenses.				50,913
	Aggregate health policy reserves, including the liability of	,		,	,
•	\$				
	Health Service Act	6.046.180	0	6.046.180	6.343.384
5.	Aggregate life policy reserves.				0
	Property/casualty unearned premium reserves.				0
	Aggregate health claim reserves				48,457
	Premiums received in advance.				27,835
9.	General expenses due or accrued				113,854
10.1	Current federal and foreign income tax payable and interest thereon			,	,
	(including \$0 on realized capital gains (losses))	0	0	0	32,986
10.2	Net deferred tax liability				0
	Ceded reinsurance premiums payable				0
	Amounts withheld or retained for the account of others				11,767
	Remittances and items not allocated.			*	32,783
	Borrowed money (including \$0 current) and				•
	interest thereon \$0 (including				
	\$0 current).	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates.				790,941
	Derivatives.				0
	Payable for securities.				0
	Payable for securities lending				0
	Funds held under reinsurance treaties (with \$				
13.	authorized reinsurers, \$				
	reinsurers and \$0 certified reinsurers)	0	0	0	0
20	Reinsurance in unauthorized and certified (\$				0
20.		0	0	0	0
0.4	companies				0
	Net adjustments in assets and liabilities due to foreign exchange rates				0
	Liability for amounts held under uninsured plans			0	0
23.	Aggregate write-ins for other liabilities (including \$	11 007		11 007	00.000
	current)		12,211		
24.	Total liabilities (Lines 1 to 23)				
	Aggregate write-ins for special surplus funds				0
26.	Common capital stock				1,267,835
	Preferred capital stock.				0
	Gross paid in and contributed surplus.				27,901,617
	Surplus notes.				0
	Aggregate write-ins for other than special surplus funds				0
	Unassigned funds (surplus)	XXX	XXX	13,344,056	10,704,061
	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26				
	\$0)	XXX	XXX	0	0
	32.20 shares preferred (value included in Line 27				
	\$				
	Total capital and surplus (Lines 25 to 31 minus Line 32)	xxx	XXX		39,873,513
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	52,473,827	53,997,097
	DETAILS OF WRITE-INS				
2301.	Abandoned property liability	11,937	0	11,937	32,266
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	11,937	0	11,937	32,266
2501.	Estimated health insurer fee accrual	XXX	XXX	120,000	0
2502.		XXX	XXX		
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page	xxx	xxx	0	0
	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	120,000	0
3003.					
	Summary of remaining write-ins for Line 30 from overflow page				0
3098.	Cannada y or romaning with 110 for Line of Holli UVEIIUW Paye			U	

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AN	Current Y		Prior Year
		1	2	3
		Uncovered	Total	Total
1. Men	nber Months	XXX	11,835	67,758
·	premium income (including \$0 non-health premium income)			
3. Char	nge in unearned premium reserves and reserve for rate credits	XXX	(409,040)	712,899
4. Fee-	for-service (net of \$0 medical expenses)	XXX	0	0
5. Risk	revenue	xxx	0	0
6. Aggr	regate write-ins for other health care related revenues	xxx	(2,118)	20
7. Aggr	regate write-ins for other non-health revenues	XXX	0	0
8. Tota	l revenues (Lines 2 to 7)	xxx	5,548,354	31,818,696
	pital and Medical:			
	pital/medical benefits	41,766	1,392,188	12,707,337
10. Othe	er professional services	(275)	(9, 167)	196,444
	side referrals			
	ergency room and out-of-area	3 361	112 049	1 924 853
	scription drugs			
	regate write-ins for other hospital and medical.			
				0
	ntive pool, withhold adjustments and bonus amounts			
16. Subt	total (Lines 9 to 15)	45,601	2,621,978	18,652,743
Less		_		_
	reinsurance recoveries		ŕ	
	I hospital and medical (Lines 16 minus 17)			
19. Non-	-health claims (net)	0	0	0
20. Clair	ms adjustment expenses, including \$113, 150 cost containment expenses	0	162,067	562,437
21. Gene	eral administrative expenses	0	1,642,462	8,607,686
22. Incre	ease in reserves for life and accident and health contracts (including \$			
	crease in reserves for life only)	0	(708 337)	788 788
	l underwriting deductions (Lines 18 through 22)			
	underwriting gain or (loss) (Lines 8 minus 23)			
	investment income earned (Exhibit of Net Investment Income, Line 17)			
	realized capital gains (losses) less capital gains tax of \$			
27. Net i	investment gains (losses) (Lines 25 plus 26)	0	1,205,279	814,036
28. Net (gain or (loss) from agents' or premium balances charged off [(amount recovered			
\$	0) (amount charged off \$	0	0	0
29. Aggr	regate write-ins for other income or expenses	0	0	0
30. Net i	income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus			
27	plus 28 plus 29)	XXX	3,061,282	4,021,083
31. Fede	eral and foreign income taxes incurred	XXX	278,882	2,016,508
32. Net i	income (loss) (Lines 30 minus 31)	XXX	2,782,400	2,004,575
DET	AILS OF WRITE-INS			
0601. Misc	other income	xxx	(2,118)	20
		xxx		
	mary of remaining write-ins for Line 6 from overflow page		0	0
	ls (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	(2,118)	20
	2		(=,,	
		XXX		
	mary of remaining write-ins for Line 7 from overflow page		0	n
	Is (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
	is (Lines 0701 tillu 0703 pius 0790)(Line 7 above)			U
	many of romaining write ins for Line 14 from everflow page	_	0	Λ
	Imary of remaining write-ins for Line 14 from overflow page	0	0	۰۰۰۰
	ls (Lines 1401 thru 1403 plus 1498)(Line 14 above)	-	0	0
	mary of remaining write-ins for Line 29 from overflow page		0	0
2999. Tota	ls (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EXPENSES	Continued	2
		Current Year	Prior Year
	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year.	39,873,513	37,492,972
34.	Net income or (loss) from Line 32	2,782,400	2,004,575
35.	Change in valuation basis of aggregate policy and claim reserves	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)		
38.	Change in net deferred income tax		
39.	Change in nonadmitted assets		
40	Change in unauthorized and certified reinsurance		
41.	Change in treasury stock		
42.	Change in surplus notes		
43.	Cumulative effect of changes in accounting principles		0
44.	Capital Changes:		······································
77.	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)		0
	44.3 Transferred to surplus.		0
45.	Surplus adjustments:		
45.	45.1 Paid in		0
	45.2 Transferred to capital (Stock Dividend)		0
	45.3 Transferred from capital		
46	Dividends to stockholders		0
46.	Aggregate write-ins for gains or (losses) in surplus		(917,308
47.	Net change in capital and surplus (Lines 34 to 47)		2,380,541
48.		42,633,508	
49.	Capital and surplus end of reporting period (Line 33 plus 48)	42,000,000	39,873,513
	DETAILS OF WRITE-INS		(4.404.440
4701.	Prior Period MLR Rebate Liability Audit Adjustment		(1,161,149
4702.	Prior Period Federal Income Tax 2015 MLR Correction Audit Adjustment		243,841
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page		0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	(917,308)

CASH FLOW

	CASITILOW	1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	5,682,341	25, 189,374
2.	Net investment income	1,416,883	2,583,831
3.	Miscellaneous income	(2,118)	20
4.	Total (Lines 1 through 3)	7,097,106	27,773,225
5.	Benefit and loss related payments	4,874,174	45,455,936
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	2,120,432	11,086,975
8.	Dividends paid to policyholders	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$	447,387	732,921
10.	Total (Lines 5 through 9)	7,441,993	57,275,832
11.	Net cash from operations (Line 4 minus Line 10)	(344,887)	(29,502,607)
40	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:	10, 700, 070	00 070 700
	12.1 Bonds		
	12.2 Stocks		0
	12.3 Mortgage loans		0
	12.4 Real estate		0
	12.5 Other invested assets		
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		3
	12.7 Miscellaneous proceeds		00 070 000
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	12,760,231	39,376,802
13.	Cost of investments acquired (long-term only):	5 404 740	044 050
	13.1 Bonds		
	13.2 Stocks		0
	13.3 Mortgage loans		0
	13.4 Real estate		
	13.5 Other invested assets	_	0
	13.6 Miscellaneous applications		0
	13.7 Total investments acquired (Lines 13.1 to 13.6)		241,250
14.	Net increase (decrease) in contract loans and premium notes		0
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	7,568,518	39, 135, 552
	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):		
	16.1 Surplus notes, capital notes	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0
	16.3 Borrowed funds	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
	16.5 Dividends to stockholders	0	0
	16.6 Other cash provided (applied)	(99,892)	(1,041,695)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(99,892)	(1,041,695)
	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)	7,123,739	8,591,250
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	9,383,786	792,535
	19.2 End of year (Line 18 plus Line 19.1)	16,507,524	9,383,786

Note: Supplemental disclosures of cash flow information for non-cash transactions:		
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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		<i>/</i> \(1	AME I SIS C		VIIONO D						
		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
		-	Comprehensive	Medicare	Dental	Vision	Health	XVIII	XIX		Other
—		Total	(Hospital & Medical)	Supplement	Only	Only	Benefits Plan	Medicare	Medicaid	Other Health	Non-Health
	Net premium income	5,959,512	5,959,512	0)	0 0	0		0 0	0
2.	rate credit	(409,040)	(364,030)	0)	0(45,010)	0		0	0
3.	Fee-for-service (net of \$0										
	medical expenses)	Q	0	0)	00	0		0	XXX
4.	Risk revenue	Q	0	0)	00	0		0	XXX
5.	Aggregate write-ins for other health care related revenues	(2, 118)	(2,118)	0)	00	0	(0	XXX
6.	Aggregate write-ins for other non-health care related revenues	0	xxx	xxx	XXX	xxx	xxx	XXX	XXX	xxx	0
7.	Total revenues (Lines 1 to 6)	5.548.354	5,593,364	0	(0 (45.010)	0	(0	0
8.	Hospital/medical benefits	1,392,188	1,394,340	n)	0 (2,152)	n .	(n	XXX
9.	Other professional services	(9, 167)	(9, 115)	0	(1	0(52)	0	(0	XXX
10.	Outside referrals	24.982	24,955	n)	0	0		0	XXX
11.	Emergency room and out-of-area	112,049	112,232	0)	0 (183)	0		0	XXX
12.	Prescription drugs	1,236,452	1,236,452	0)	0	0		0	XXX
13.	Aggregate write-ins for other hospital and medical	0	1,200,402	n)	0	0		0	XXX
14.	Incentive pool, withhold adjustments and bonus amounts	(134,526)	(134,526)	n)	0 0	0		0	XXX
15.	Subtotal (Lines 8 to 14)	2,621,978	2,624,338	n)	0(2,360)	0		1	XXX
16.	Net reinsurance recoveries	25,819	25,819	n)	0	0		0	XXX
17.	Total medical and hospital (Lines 15 minus 16)	2,596,159	2,598,519	n		, I	0(2,360)	0		0	XXX
18.	Non-health claims (net)	2,000,100	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19.	Claims adjustment expenses including						1				
	\$113,150 cost containment expenses	162,067	162,067	0			0	0		0	0
20.		1,642,462	1,641,998	0		·	0464	0		0	0
21.	Increase in reserves for accident and health contracts	(708,337)	(708,337)	0			0	0		0	XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
23.	Total underwriting deductions (Lines 17 to 22)	3,692,351	3,694,247	0)	0(1,896)	0		0 0	0
24.	Total underwriting gain or (loss) (Line 7 minus Line 23)	1,856,003	1,899,117	0	()	0 (43,114)	0	(0	0
	DETAILS OF WRITE-INS										
0501.	Misc other income	(2, 118)	(2, 118)	0)	0 0	0		0	XXX
0502.											XXX
0503.											XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0	()	0	0	(0	XXX
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	(2,118)	(2,118)	0	()	0 0	0	(0	XXX
0601.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.			XXX	XXX	XXX	XXX	xxx	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	xxx	xxx	XXX	xxx	xxx	XXX	XXX	xxx	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.			ļ								XXX
1302.			ļ								XXX
1303. 1398.	Summary of remaining write-ins for Line 13 from		 								XXX
	overflow page	0	o	0			0	0		0	XXX
1399.	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	() [0	0	(0	XXX

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	PART 1 - PREMIUMS		,		
		1	2	3	4
	Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
Comprehensive (hospital and medical)		5,959,512	0	0	5,959,512
2. Medicare Supplement		0	0	0	0
3. Dental only		0	0	0	0
4. Vision only		0	0	0	0
5. Federal Employees Health Benefits Plan		0	0	0	0
6. Title XVIII - Medicare		0	0	0	0
7. Title XIX - Medicaid		0	0	0	0
8. Other health		0	0	0	0
9. Health subtotal (Lines 1 through 8)		5,959,512	0	0	5,959,512
10. Life		0	0	0	0
11. Property/casualty		0	0	0	0
12. Totals (Lines 9 to 11)		5,959,512	0	0	5,959,512

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

				PARI 2 - CLA	IMS INCURRED DU	RING THE TEAR					
		1	2	3	4	5	6 Federal	7	8	9	10
		Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1	Payments during the year:	· Otal	(Freepital at Meanal)	Саррини	2011(01.0111)	110.01. 01	Donomo i idii	aira	mouroura	o a roi i rodiar	
• • •	1.1 Direct	5,562,672	5,562,931	0	0	0	(259)	0	0	0	0
	1.2 Reinsurance assumed	0,002,072	0	0	0	0	0	0	0	0	0
	1.3 Reinsurance ceded	74,889	74,889	0	0	0	0	0	0	0	
	1.4 Net	5,487,783	5,488,042		0		(259)		0	0	
2.		94,727	94,727		0		0		n l		
	Claim liability December 31, current year from Part 2A:				0			0	0		
٥.	3.1 Direct	407,020	407,020	0	0	0	0	0	0	0	0
	3.2 Reinsurance assumed	07,020	0		0		0		n l		٥٥
	3.3 Reinsurance ceded	0	0		0	٥	0		n l		
	3.4 Net	407,020	407,020		o		n		o		
4	Claim reserve December 31, current year from Part 2D:				0			0			
→.	4.1 Direct	4,966	4,966	0	0	0	0	0	٥	٥	0
	4.2 Reinsurance assumed			٥	o	٠	o	٠٠	o		٠٥
	4.3 Reinsurance ceded	0	0	٥	0	٥	0		۰		
	4.4 Net	4,966	4,966		0	٥		٥			0
_		4,900	4,900		0			0			
5.	Accrued medical incentive pools and bonuses, current year	3,205,550	3,205,550	0	0	0	١	0	٥	٥	0
6.	•	(33,897)	(33,897)	٥	o	Λ	n	٥	o		۰۰۰۰
	Amounts recoverable from reinsurers December 31,	(00,007)	(00,007)					0			
7.	current year	0	0	0	0	0	0	0	0	0	0
8.	-										
0.	8.1 Direct	3,203,595	3,201,530	0	0	0	2,065	0	0	0	0
	8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
	8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
	8.4 Net	3,203,595	3,201,530	0	0	0	2,065	0	0	0	0
9		,200,000					2,000				
٥.	9.1 Direct	48,457	48,421	0	0	0	36	0	0	0	0
	9.2 Reinsurance assumed		0	0	0	0	0	0	0	0	0
	9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	
	9.4 Net	48,457	48,421		0		36		0	0	
10.		3,434,802	3,434,802		0		0		n l		
	Amounts recoverable from reinsurers December 31,	0,404,002	0,404,002	<u> </u>	0	<u> </u>	0	0	0	0	
11.	prior year	49,070	49,070	0	0	0	0	0	0	0	0
12	Incurred Benefits:	.5,010	.5,010				<u> </u>				
12.	12.1 Direct	2,756,503	2,758,863	0	0	0	(2,360)	0	n	0	0
	12.2 Reinsurance assumed	n	n l	0 N	n			0 n	n l	n l	o
	12.3 Reinsurance ceded	25,819	25,819		n		n		n l	n	o
	12.4 Net	2,730,684	2,733,044	0	0	<u> </u>	(2,360)	0	0	n	
10	Incurred medical incentive pools and bonuses	(134,525)	(134,525)	0	0	<u> </u>	(2,000)	0	0	0	
13.	incurred medical incentive pools and pondses	(104,020)	(104,020)	U	U	U	1 0	U	U	U	U

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

				IS CIABILITY LIND			_	_	_	
	1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Health Benefits Plan	XVIII Medicare	XIX Medicaid	Other Health	Other Non-Health
Reported in Process of Adjustment:										
1.1 Direct	44,980	44,980	0	0	0	0	0	0	0	0
1.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
1.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
1.4 Net	44,980	44,980	0	0	0	0	0	0	0	0
Incurred but Unreported:										
2.1 Direct	362,040	362,040	0	0	0	0	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
2.4 Net	362,040	362,040	0	0	0	0	0	0	0	0
Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net	0	0	0	0	0	0	0	0	0	0
4. TOTALS:										
4.1 Direct	407,020	407,020	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	407,020	407,020	0	0	0	0	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

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

PART 2D - ANALTOIS OF CLAIMS ON AID - P		ouring the Year	Claim Reserve a December 31	nd Claim Liability of Current Year	5	6
	1	2	3	4		Estimated Claim Reserve and Claim
	On Claims Incurred		On Claims Unpaid		Claims Incurred	Liability
Line of Business	Prior to January 1 of Current Year	On Claims Incurred During the Year	December 31 of Prior Year	On Claims Incurred During the Year	In Prior Years (Columns 1 + 3)	December 31 of Prior Year
Ento di Buomoso	or carrone rear	During the Your	Their real	Burng the rear	(Columno 1 - O)	THOI TOU
Comprehensive (hospital and medical)	475,861	5,061,253	120,814	291, 172	596,675	3,249,951
Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	(259)	0	0	0	(259)	2,101
6. Title XVIII - Medicare	0	0	0	0	0	0
7 Title XIX - Medicaid	0	0	0	0	0	0
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	475,602	5,061,253	120,814	291,172	596,416	3,252,052
10. Healthcare receivables (a)	0	34,818	0	0	0	68,715
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	54,142	40,585	3, 154, 637	50,913	3,208,779	3,434,803
13. Totals (Lines 9 - 10 + 11 + 12)	529,744	5,067,020	3,275,451	342,085	3,805,195	6,618,140

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

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

		Cumulative Net Amounts Paid						
		1	2	3	4	5		
	Year in Which Losses Were Incurred	2015	2016	2017	2018	2019		
1.	Prior	25,698	25,698	25,698	25,698	25,698		
2.	2015	194, 142	225,852	225,852	225,852	225,852		
3.	2016	XXX	165,894	184,326	184,326	184,326		
4.	2017	XXX	XXX	142,930	166,343	166,343		
5.	2018	XXX	XXX	XXX	21,313	21,843		
6.	2019	XXX	XXX	XXX	XXX	5,067		

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

	Sum of Cumulative N	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bor Outstanding at End of Year						
Year in Which Losses Were Incurred	1 2015	1 2 3 4 2015 2016 2017 2018						
1. Prior	(28,913)	(28,913)	(28,913)	(28,913)	(28,913)			
2. 2015	222,815	255, 193	255, 193	255,193	255 , 193			
3. 2016	XXX	194 , 148	213,041	213,041	213,041			
4. 2017	XXX	XXX	175,590	203,025	203,025			
5. 2018	XXX	XXX	XXX	23,976	27,781			
6. 2019	XXX	XXX	XXX	XXX	5,409			

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015	263,951	225,852	0	0.0	225,852	85.6	0	0	225,852	85.6
2.	2016	224,519	184,326	0	0.0	184,326	82.1	0	0	184,326	82.1
3.	2017	209,641	166,343	0	0.0	166,343	79.3	0	0	166,343	79.3
4.	2018	32,328	21,843	0	0.0	21,843	67.6	3,275	0	25,118	777
5.	2019	5,595	5,067	203	4.0	5,270	94.2	342	10	5,622	100.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

(\$000 Omitted)
Section A - Paid Health Claims - Medicare Supplement

Section A - Faid Health Glaims - Medicare Supplement	-	Cu	mulative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019
1. Prior					
2. 2015					
3. 2016	XXX				
4. 2017	XXX	XXX			
5. 2018	XXX	XXX	xxx		
6. 2019	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Medicare Supplement

	The state of the s												
		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medica Outstanding at End of Year											
1 2 3													
	Year in Which Losses Were Incurred	2015	2016	2017	2018	2019							
1.	Prior												
2.	2015												
3.	2016	XXX											
4.	2017	XXX	XXX										
5.	2018	XXX	XXX	XXX									
6.	2019	xxx	XXX	XXX	XXX								

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	1
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	į l
	Premiums were Earned and Claims			Claim Adiustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	2015										
2	2016										
۷.						·····					[
3.	2017				<i>49</i>					ļ ¹	·
4.	2018										
5.	2019				_						

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Dental Only

	Socion 71 Tala Houling Bontai Giny								
		Cumulative Net Amounts Paid							
		1	2	3	4	5			
	Year in Which Losses Were Incurred	2015	2016	2017	2018	2019			
1.	Prior	0	0	0	0	0			
2.	2015	0	0	0	0	0			
3.	2016	XXX	0	0	0	0			
4.	2017	XXX	XXX	0	0	0			
5.	2018	XXX	XXX	XXX	0	0			
6.	2019	XXX	XXX	XXX	XXX	0			

Section B - Incurred Health Claims - Dental Only

	Sum of Cumulative Ne	t Amount Paid and Claii Ou	m Liability, Claim Resetstanding at End of Ye	erve and Medical Incent ar	ve Pool and Bonuses	
	1 2 3 4					
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019	
1. Prior	0	0	0	0	0	
2. 2015	0	0	0	0	0	
3. 2016	XXX	0	11	11	11	
4. 2017	XXX	XXX	0	0	0	
5. 2018	XXX	XXX	XXX	0	0	
6. 2019	XXX	XXX	XXX	XXX	0	

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

	Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
Ī	1. 2015	.0	0	0	0.0	0	0.0	0	0	0	0.0
	2. 2016	0	0	0	0.0	0	0.0	0	0	0	0.0
	3. 2017	0	0	0	0.0	0	0.0	0	0	0	0.0
	4. 2018	0	0	0	0.0	0	0.0	0	0	0	0.0
	5. 2019	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Vision Only

	Cumulative Net Amounts Paid							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019			
1. Prior								
2. 2015	,							
3. 2016	XXX							
4. 2017	XXX	XXX						
5. 2018	XXX	XXX	XXX					
6. 2019	XXX	XXX	XXX	XXX				

Section B - Incurred Health Claims - Vision Only

Control 2 mount of mount of mineral mounts of mi					
	Sum of Cumulative No		aim Liability, Claim Rese outstanding at End of Ye		ive Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019
1. Prior					
2. 2015					
3. 2016	XXX				
4. 2017	XXX	XXX			
5. 2018	XXX	XXX	XXX		
6. 2019	XXX	XXX	XXX	XXX	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adiustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2015										
	. 2016										
3	. 2017										
4	. 2018										
5	. 2019									!	

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

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

			Cum	ulative Net Amounts P	aid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2015	2016	2017	2018	2019
1.	Prior	667	667	667	667	667
2.	2015	9,603	11,233	11,233	11,233	11,233
3.	2016	XXX	71	96	96	96
4.	2017	XXX	XXX	0	17	17
5.	2018	XXX	XXX	XXX	0	0
6.	2019	XXX	XXX	XXX	XXX	0

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bo Outstanding at End of Year						
	Year in Which Losses Were Incurred	1 2015	2 3 4 2016 2017 2018					
	real in which cosses were incurred					2019		
1. Prior		97,267	97,267	97,267	97,267	97,267		
2. 2015		11,048	12,688	12,688	12,688	12,688		
3. 2016		XXX	70	100	100	100		
4. 2017		XXX	XXX	0	19	19		
5. 2018		XXX	XXX	XXX	0	0		
6. 2019		XXX	XXX	XXX	XXX	0		

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015	14,934	11,233	0	0.0	11,233		0	0	11,233	75.2
2.	2016	(650)	96	0	0.0	96	(14.8)	0	0	96	(14.8)
3.	2017	0	17	0	0.0	17	0.0	0	0	17	0.0
4.	2018	(509)	0	0	0.0	0	0.0	0	0	0	0.0
5.	2019	(45)	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Title XVIII

	Cumulative Net Amounts Paid							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019			
1. Prior	3,748	3,748	3,748	3,748	3,748			
2. 2015	26,552	29,084	29,084	29,084	29,084			
3. 2016	XXX	14,654	14,654	14,654	14,654			
4. 2017	XXX	XXX	0	0	0			
5. 2018	XXX	XXX	XXX	11	11			
6. 2019	XXX	XXX	XXX	XXX	0			

Section B - Incurred Health Claims - Title XVIII

	Sum of Cumulative Net A	mount Paid and Claim Outs	Liability, Claim Rese standing at End of Ye	erve and Medical Incenti ar	ve Pool and Bonuses	
	1 2 3 4					
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019	
1. Prior	(3,314)	(3,314)	(3,314)	(3,314)	(3,314)	
2. 2015	30,678	33,210	33,210	33,210	33,210	
3. 2016	XXX	14,651	14,651	14,651	14,651	
4. 2017	XXX	XXX	11	11	11	
5. 2018	XXX	XXX	XXX	11	11	
6. 2019	XXX	XXX	XXX	XXX	0	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015	34,800	29,084	0	0.0	29,084	83.6	0	0	29,084	83.6
2.	2016	18,064	14,654	0	0.0	14,654	81.1	0	0	14,654	81.1
3.	2017	0	0	0	0.0	0	0.0	0	0	0	0.0
4.	2018	0	11	0	0.0	11	0.0	0	0	11	0.0
5.	2019	0	0	0	0.0	0	0.0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Title XIX

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019		
1. Prior							
2. 2015							
3. 2016	XXX						
4. 2017	XXX	XXX					
5. 2018	XXX	XXX	XXX				
6. 2019	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Title XIX

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bo Outstanding at End of Year							
Year in Which Losses Were Incurred	1 2015	2 2016	3 2017	4 2018	5 2019			
	2015	2010	2017	2010	2019			
1. Prior								
2. 2015								
3. 2016	XXX							
4. 2017	XXX	XXX						
5. 2018	XXX	XXX	XXX					
6. 2019	XXX	XXX	XXX	XXX				

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adiustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015										
2	2016										
2.						·····				<u> </u>	
3.	2017					<u></u>	•			-	
4.	2018										
5.	2019										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted) Section A - Paid Health Claims - Other

	Cumulative Net Amounts Paid						
	1	2	3	4	5		
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019		
1. Prior							
2. 2015							
3. 2016	XXX						
4. 2017	XXX	XXX					
5. 2018	XXX	XXX	XXX				
6. 2019	XXX	XXX	XXX	XXX			

Section B - Incurred Health Claims - Other

	Sum of Cumulative No	et Amount Paid and Cl	aim Liability, Claim Resoutstanding at End of Ye	erve and Medical Incent ear	ive Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019
1. Prior					
2. 2015					
3. 2016	XXX				
4. 2017	XXX	XXX			
5. 2018	XXX	XXX	XXX		
6. 2019	XXX	XXX	XXX	XXX	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adiustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	ense ymer	Perc		Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015										
2	2016										
2.						·····				<u> </u>	
3.	2017					<u></u>	•			-	
4.	2018										
5.	2019										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS (\$000 Omitted)

Section A - Paid Health Claims - Grand Total

		Cur	mulative Net Amounts P	'aid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2015	2016	2017	2018	2019
1. Prior	30 , 113	30,113	30,113	30,113	30,113
2. 2015	230,297	266, 169	266, 169	266, 169	266, 169
3. 2016	XXX	180,619	199,076	199,076	199,076
4. 2017	XXX	XXX	142,930	166,360	166,360
5. 2018	XXX	XXX	XXX	21,324	21,854
6. 2019	XXX	XXX	XXX	XXX	5,067

Section B - Incurred Health Claims - Grand Total

	Sum of Cumulative Net A	Amount Paid and Claim Outs	Liability, Claim Rese tanding at End of Yea	rve and Medical Incentiv ar	e Pool and Bonuses	
Year in Which Losses Were Incurred	1 2 3 4 2015 2016 2017 2018					
1. Prior	65.040	65.040	65.040	65.040	2019 65.040	
	1				,	
2. 2015	264,541	301,091	301,091	301,091	301,091	
3. 2016	XXX	208,869	227,803	227,803	227,803	
4. 2017	XXX	XXX	175,601		203,055	
5. 2018	XXX	XXX	XXX	23,987	27,792	
6. 2019	XXX	XXX	XXX	XXX	5,409	

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

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2015	313,685	266, 169	0	0.0	266, 169	84.9	0	0	266,169	84.9
2.	2016	241,933	199,076	0	0.0	199,076	82.3	0	0	199,076	82.3
3.	2017	209,641	166,360	0	0.0	166,360	79.4	0	0	166,360	79.4
4.	2018	31,819	21,854	0	0.0	21,854	68.7	3,275	0	25,129	79.0
5.	2019	5,550	5,067	203	4.0	5,270	95.0	342	10	5,622	101.3

UNDERWRITING AND INVESTMENT EXHIBIT

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

	PART 2D - A	GGREGATE RESER	VE FOR ACCIDENT	<u> </u>	NTRACTS ONLY				
	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other
Unearned premium reserves	495	495	0	0		0	0	0	
Additional policy reserves (a)				0		0	0	0	
Reserve for future contingent benefits				0		0			
Reserve for rate credits or experience rating refunds (including		0	0					0	
\$	6,045,685	4, 181,469	0	0	(1,864,216	0	0	
Aggregate write-ins for other policy reserves	, ,		0	0		1,004,210	0		
6. Totals (gross)			0	0				0	
7. Reinsurance ceded		, ,-				1,001,210		0	
Totals (Net)(Page 3, Line 4)			0				0	0	
	,,	4, 181,964	0		0	1,864,216	0	0	
Present value of amounts not yet due on claims	0		0	0		0	0	0	
Reserve for future contingent benefits	,,000	,	0	0	C	0	0	0	
Aggregate write-ins for other claim reserves		0	0	0	C	0	0	0	
12. Totals (gross)	4,966	4,966	0	0		0	0	0	
13. Reinsurance ceded	0	0	0	0		0	0	0	0
14. Totals (Net)(Page 3, Line 7)	4,966	4,966	0	0	(0	0	0	(
DETAILS OF WRITE-INS									
0501.									
0502.									
0503.									
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0		0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	C	0	0	0	(
1101.									
1102.									
1103.									
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	c	0	0	0	
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0		0	0	0	

(a) Includes \$80,450 premium deficiency reserve.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	<u> </u>	Claim Adjustme	nt Expenses	3	4	5
		Cost Containment Expenses	Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent (\$0 for occupancy of					
	own building)	2,754	935	1,508	1,428	6,625
2.	Salary, wages and other benefits	75,341	26,499	179,565	36,707	318,112
3.	Commissions (less \$0					
	ceded plus \$0 assumed)	0	0	238,225	0	238,22
4.	Legal fees and expenses					4,66
5.	Certifications and accreditation fees			0		,)
6.	Auditing, actuarial and other consulting services					
7.	Traveling expenses					
8.	Marketing and advertising					30,61
9.	Postage, express and telephone					15.36
10.	Printing and office supplies					5,39
	Occupancy, depreciation and amortization			(1,878)		,
11.	Equipment					
12.			249	11,297	972	12,51
13.	Cost or depreciation of EDP equipment and software	2	951	15,734	581	17,26
14.	Outsourced services including EDP, claims, and other services	27,623	11,463	128,665	5,331	173,08
15.	Boards, bureaus and association fees	18	7	552	84	66
16.	Insurance, except on real estate			3,114	27	3,41
17.	Collection and bank service charges					3,90
18.	Group service and administration fees					
19.	Reimbursements by uninsured plans			0		
20.	Reimbursements from fiscal intermediaries			0		
21.	Real estate expenses			5,123		5.16
22.				ŕ		
				902		
23.	Taxes, licenses and fees: 23.1 State and local insurance taxes	0	0	55.792	0	EE 70
						55,79
	23.2 State premium taxes					597,59
					0	
	23.4 Payroll taxes	4,809	1,691	9,444	1,115	17,05
	23.5 Other (excluding federal income and real estate taxes)	0	0	(90,266)	0	(90,26
24.	Investment expenses not included elsewhere	0	0	0	0	
25.	Aggregate write-ins for expenses	6	310	(68,866)	0	(68,55
26.	Total expenses incurred (Lines 1 to 25)	113,150	48,917	1,642,462	60,220	a)1,864,74
27.	Less expenses unpaid December 31, current year	7,238	3, 129	12,720	0	23,08
28.	Add expenses unpaid December 31, prior year	34,749	16,164	113,854	0	164,76
29.	Amounts receivable relating to uninsured plans.	_				
30.	Amounts receivable relating to uninsured plans,	0	0	0	0	
31.	Total expenses paid (Lines 26 minus 27 plus 28				-	
	minus 29 plus 30)	140,661	61,952	1,743,596	60,220	2,006,42
	DETAILS OF WRITE-INS		047	(00, 404)		(00.07
2501.	Miscellaneous			(60,401)		(60,07
2502.	Loss adjustment expense			(40,545)		(40,54
2503.	Rx rebate expense		0	26,674	0	26,67
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	(7)	5,406	0	5,39
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	_	310	(68,866)	0	(68,55

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EXHIBIT OF NET INVESTMENT INCOME

		1	2
		-	Earned During Year
1.	U.S. government bonds (a)	67,925	67,925
1.1	Bonds exempt from U.S. tax (a)	0	0
1.2		997,428	910,466
1.3	Bonds of affiliates (a)	0	0
2.1	Preferred stocks (unaffiliated) (b)	0	0
2.11			0
2.2	Common stocks (unaffiliated)	0	0
2.21	Common stocks of affiliates	0	0
3.	Mortgage loans(c)	0	0
4.	Real estate (d)	0	0
5	Contract Loans	0	0
6	Cash, cash equivalents and short-term investments(e)	92,668	92,668
7	Derivative instruments (f)	0	0
8.	Other invested assets	0	0
9.	Aggregate write-ins for investment income	0	0
10.		1,158,021	1,071,059
11.	Investment expenses		(g)59,105
12.	Investment taxes, licenses and fees, excluding federal income taxes		
13.	Interest expense		(h)0
14.	Depreciation on real estate and other invested assets		(i)0
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		1,010,839
	DETAILS OF WRITE-INS	l.	
0901.			
0902.			
0903.			
0998.	, , , , , , , , , , , , , , , , , , , ,		0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.			
1502.			
1503.			_
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0
(a) Inclu	udes \$33,042 accrual of discount less \$352,124 amortization of premium and less \$36,576 paid for	accrued into	erest on purchases.
(b) Inclu	ides \$0 accrual of discount less \$0 amortization of premium and less \$	accrued div	idends on purchases.
(c) Inclu	ides\$0 accrual of discount less\$0 amortization of premium and less\$	accrued inte	erest on purchases.
(d) Inclu	udes \$	S.	·
	udes \$		erest on nurchases
. ,	des\$		5 pa. 5 a556.
	udes \$	ma tawaa -#	ributable to
	regated and Separate Accounts.	ne taxes, atti	TIDUTADIE TO

EXHIBIT OF CAPITAL GAINS (LOSSES)

(i) Includes \$ _____0 depreciation on real estate and \$ _____0 depreciation on other invested assets.

		4	2	- (L300L	1	
		1	2	3	4	5
				Total Realized Capital	Change in	Change in Unrealized
		Realized Gain (Loss)	Other Realized	Gain (Loss)	Unrealized Capital	Foreign Exchange
		On Sales or Maturity	Adjustments	(Columns 1 + 2)	Gain (Loss)	Capital Gain (Loss)
1.	U.S. Government bonds		0	0	0	0
1.1	Bonds exempt from U.S. tax	0	0	0	0	0
1.2	Other bonds (unaffiliated)	244,561	(15,843)	228,718	0	0
1.3	Bonds of affiliates	0	0	0	0	0
2.1	Preferred stocks (unaffiliated)	0	0	0	0	0
2.11	Preferred stocks of affiliates	0	0	0	0	0
2.2	Common stocks (unaffiliated)	0	0	0	0	0
2.21	Common stocks of affiliates	0	0	0	0	0
3.	Mortgage loans	0	0	0	0	0
4.	Real estate	0	0	0	0	0
5.	Contract loans	0	0	0	0	0
6.	Cash, cash equivalents and short-term investments	(44)	0	(44)	0	0
7.	Derivative instruments	0	0	0	0	0
8.	Other invested assets	0	0	0	0	0
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	244,517	(15,843)	228,674	0	0
	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

EXHIBIT OF NON-ADMITTED ASSETS

		1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)	_	0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks	0	0	0
	2.2 Common stocks		0	0
3.	Mortgage loans on real estate (Schedule B):			
	3.1 First liens	0	0	0
	3.2 Other than first liens.	_	0	0
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company	0	0	0
	4.2 Properties held for the production of income.			0
	4.3 Properties held for sale		0	0
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)		0	0
6.	Contract loans	0	0	0
7.	Derivatives (Schedule DB)	0	0	0
8.	Other invested assets (Schedule BA)	0	0	0
9.	Receivables for securities			0
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:			
10.	15.1 Uncollected premiums and agents' balances in the course of collection	143 193	238 904	95 711
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due		0	
	15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16	Reinsurance:			
16.	16.1 Amounts recoverable from reinsurers	0	0	0
	16.2 Funds held by or deposited with reinsured companies			
4-7	16.3 Other amounts receivable under reinsurance contracts			0
	Amounts receivable relating to uninsured plans	_		•
	Current federal and foreign income tax recoverable and interest thereon		0	0
	Net deferred tax asset		37,883	,
19.	Guaranty funds receivable or on deposit		0	0
20.	Electronic data processing equipment and software		0	
21.	Furniture and equipment, including health care delivery assets		2,073	
22.	Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23.	Receivable from parent, subsidiaries and affiliates		0	0
24.	Health care and other amounts receivable		0	(4,677
25.	Aggregate write-ins for other than invested assets		0	0
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			· ·
	From Separate Accounts, Segregated Accounts and Protected Cell Accounts		0	
28.	Total (Lines 26 and 27)	180,541	278,860	98,319
	DETAILS OF WRITE-INS			
1101.				
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.		0	0	0
2502.				
2503.				
2598.	Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	0	0

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EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

			Total Members at End of			6
Source of Enrollment	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	Current Year Member Months
OSAISS SI EINSINISIN						
Health Maintenance Organizations	1,352	107	104	104	103	1,333
Provider Service Organizations	0	0	0	0	0	0
Preferred Provider Organizations	0	0	0	0	0	0
4. Point of Service	2,673	1, 174	1, 192	714	334	10,502
5. Indemnity Only	0	0	0	0	0	0
Aggregate write-ins for other lines of business.	0	0	0	0	0	0
7. Total	4,025	1,281	1,296	818	437	11,835
DETAILS OF WRITE-INS						
0601.	0	0	0	0	0	0
0602.	0	0	0	0	0	0
0603.	0	0	0	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health of Iowa Inc. (the "Company"), indirectly a wholly-owned subsidiary of CVS Health Corporation ("CVS Health"), have been prepared in conformity with accounting practices prescribed or permitted by the Iowa Insurance Division, Department of Commerce of the State of Iowa ("Iowa Insurance Division") ("Iowa Accounting Practices"). The Iowa Insurance Division recognizes statutory accounting practices prescribed or permitted by the State of Iowa 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"). On November 28, 2018, CVS Health acquired Aetna Inc. ("Aetna") and at that date became the Company's ultimate parent (the "Aetna Acquisition").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Iowa for the years ending December 31, 2019 and 2018 is as follows:

		SSAP#	F/S Page	F/S Line #	2019	2018
NET II	NCOME					
(1)	State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 2,782,400	\$ 2,004,575
(2)	State Prescribed Practices that increase/(decrease) NAIC SAP:				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,
(3)	State Permitted Practices that increase/(decrease) NAIC SAP:				_	-
					_	_
(4)	NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 2,782,400	\$ 2,004,575
SURPL	LIS					
(5)	State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 42,633,508	\$ 39,873,513
(6)	State Prescribed Practices that increase/(decrease) NAIC SAP:					
					_	_
(7)	State Permitted Practices that increase/(decrease) NAIC SAP:				_	_
(8)	NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 42,633,508	\$ 39,873,513

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

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

C. Accounting Policies

The Company applies the following significant accounting policies:

(1) Cash, Cash Equivalents and Short-Term Investments

Cash, cash equivalents and short-term investments, consisting primarily of money market instruments and other debt issues with an original maturity of up to one year, are carried at amortized cost. Short-term investments consist primarily of investments purchased with an original maturity date of greater than three months but less than one year. Cash equivalents consist of highly liquid instruments, which mature within three months from the date of purchase. The carrying amount of cash, cash equivalents and short-term investments approximates fair value. Cash accounts with positive balances shall not be reported separately from cash accounts with negative balances. If in the aggregate, the reporting entity has a net negative cash balance, it shall be reported as a negative asset and shall not be recorded as a liability.

(2) Bonds

Bonds are carried at amortized cost except for those bonds with an NAIC designation of 3 through 6, which are carried at the lower of amortized cost or fair value. The amount carried at fair value is not material to the financial statements.

Bond premiums and discounts are amortized using the scientific interest method. When quoted prices in active markets for identical assets are available, the Company uses these quoted market prices to determine the fair value of bonds. This is used primarily for U.S. government securities. In other cases where a quoted market price for identical assets in an active market is either not available or not observable, the Company estimates fair values using valuation methodologies based on available and observable market information or by using a matrix pricing model. If quoted market prices are not available, the Company determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at December 31, 2019 and 2018. Bonds include all investments whose maturity is greater than one year when purchased. Loan-backed and structured securities 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. 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"), an other-than-temporary impairment ("OTTI") shall be recorded if it is probable that the Company will be unable to collect all amounts due according to the contractual terms in effect at the date of acquisition. Declines deemed to be OTTI in the cost basis are recognized as realized capital losses. Yield-related impairments are deemed other-than-temporary when the Company intends to sell an investment at the reporting date before recovery of the cost of the investment.

For 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.

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.

- (3) The Company did not own any common stock at December 31, 2019 or 2018.
- (4) The Company did not own any preferred stock at December 31, 2019 or 2018.
- (5) The Company did not have any mortgage loans at December 31, 2019 or 2018.
- (6) The Company did not have any investments in subsidiaries, controlled or affiliated companies at December 31, 2019 or 2018.
- (7) The Company did not have any investments in any joint ventures, partnerships and limited liability companies at December 31, 2019 or 2018.
- (8) The Company did not have any derivatives at December 31, 2019 or 2018.
- (9) Aggregate Health Policy Reserves and Related Expenses

Premium deficiency reserves ("PDR") are recognized when it is probable that the expected future hospital and medical costs, including maintenance costs, will exceed anticipated future premiums and reinsurance recoveries on existing contracts. Where allowed, anticipated investment income is considered in the calculation of any PDR. For purposes of calculating a PDR, contracts are grouped in a manner consistent with the method of acquiring, servicing and measuring the profitability of such contracts.

Unearned premium reserves ("UEP") are recognized for premiums that are recorded by the Company that have not been earned as of the statement date. The UEP balances of \$495 and \$9,095 were included in aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus at December 31, 2019 and 2018, respectively.

The Company is required to make premium rebate payments to customers that are enrolled under certain health insurance policies if specific minimum annual medical loss ratios ("MLR") were not met in the prior year. The Company's results for full year 2019 and 2018 include estimates of \$4,594,039 and \$4,176,399, respectively, of minimum MLR rebates, which were included in aggregate health policy reserves in the Statutory Statements of Liabilities and Capital and Surplus.

The Company contracts with the Office of Personnel Management ("OPM") to provide managed health care services under the Federal Employees Health Benefits ("FEHB") program in its service areas. OPM regulations require that FEHB plans meet a FEHB program-specific MLR by plan code and market. The Company reported minimum FEHB program MLR rebate estimates of \$700,000 and \$700,000 in aggregate policy reserves at December 31, 2019 and 2018, respectively.

The Company reported a Federal Contingency Reserve of \$669,103 and \$669,103 in aggregate health policy reserves at December 31, 2019 and 2018, respectively, which were included in aggregate health policy reserves in the Statutory Statements of Liabilities and Capital and Surplus.

The Company reported liabilities associated with contracts subject to redetermination as aggregate health policy reserves in accordance with SSAP No. 54R - *Individual and Group and Accident Health Contracts* ("SSAP No. 54R") and SSAP No. 107 - *Risk-Sharing Provisions of the Affordable Care Act* ("SSAP No. 107"). The Company reported Affordable Care Act ("ACA") Risk Adjustment Payables of \$2,093 and \$0 in aggregate health policy reserves at December 31, 2019 and 2018, respectively.

(10) Hospital and Medical Costs and Claims Adjustment Expenses and Related Reserves

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

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

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

(11) The Company has not modified its capitalization policy from the prior period.

(12) Pharmaceutical Rebate Receivables

The Company estimates pharmaceutical rebate receivables based upon historical payment trends, actual utilization and other variables. Pharmaceutical rebates for a quarter are billed to the vendor within one month of the completion of the quarter with any adjustment to previously recorded amounts reflected at the time of billing. The Company reports pharmaceutical rebate receivables as health care receivables. Pharmacy rebate receivables not in accordance with SSAP No. 84 – *Health Care and Government Insured Plan Receivables* or are over 90 days past due are nonadmitted. All rebates are processed and settled monthly with an affiliated entity, including adjustments to previously billed periods. The pharmaceutical rebate receivables are more fully discussed in Note 28.

(13) Premiums and Amounts Due and Unpaid

Premium revenue for prepaid health or dental care products is recognized as income in the month in which enrollees are entitled to health or dental care services. Premiums collected before the effective period are reported as premiums received in advance. Premiums related to unexpired contractual coverage periods are reported as unearned premiums in the Statutory Statements of Liabilities, Capital and Surplus (refer to discussion of aggregate health policy reserves and related expenses above).

Nonadmitted amounts consist of all premiums due and unpaid greater than 90 days past due, with the exception of amounts due under government insured plans, which may be admitted assets under certain circumstances. In addition, for any customer for which the premiums due and unpaid greater than 90 days past due is more than a de minimus portion of the entire balance of premiums due and unpaid for that customer, the entire balance of premiums due and unpaid for that customer is nonadmitted. Management also performs a specific review of accounts and based on the results of the

review, additional amounts may be nonadmitted. Uncollectible amounts are generally written-off and charged to revenue in the period in which the customer reconciliations are completed and agreed to by the customer (retroactivity) or when the account is determined to be uncollectible by the Company.

(14) Aggregate Health Claim Reserves

The reserve for future contingent benefits includes the estimated cost of services that will continue to be incurred after the Statutory Statements of Liabilities, Capital and Surplus date if the Company is obligated to pay for such services in accordance with contract provisions or regulatory requirements. These balances are recorded in aggregate health claim reserves in the Statutory Statements of Liabilities, Capital and Surplus and are estimated using a percentage of current hospital and medical costs, which is based on the Company's historical cost experience.

(15) Investment Income Due and Accrued

Accrued investment income consists primarily of interest. Interest is recognized on an accrual basis and dividends are recorded as earned on the ex-dividend date. Due and accrued income is not recorded on: (a) bonds in default; and (b) bonds delinquent more than 90 days or where collection of interest is improbable. At December 31, 2019 and 2018, the Company did not have any nonadmitted investment income due and accrued.

(16) Covered and Uncovered Expenses and Related Liabilities

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

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

SSAP No. 106 - Affordable Care Act Section 9010 Assessment ("SSAP No. 106") required (1) that the health insurer fee be recognized in full on January 1 of the fee year (the calendar year in which the assessment must be paid to the federal government), in the operating expense category of insurance taxes, licenses and fees, excluding federal income taxes and (2) that in each data year preceding a fee year a reporting entity pro-ratably accrue by reclassifying from unassigned funds (surplus) to aggregate write-ins for special surplus funds an amount equal to its estimated subsequent fee year assessment. This reclassification has no impact on total capital and surplus and is reversed in full on January 1 of the fee year. On January 22, 2018, Public Law No: 115-120 was signed into law and it imposes a moratorium on the health insurer fee for calendar year 2019. As interpreted in INT 18-02: ACA Section 9010 Assessment Moratoriums, because there was not an ACA Section 9010 fee due in September 2019, there was not an accrual of a liability on January 1, 2019 based on 2018 data year net written premiums. Accrual of a liability on January 1, 2020 for the ACA Section 9010 assessment based on 2019 data year net written premiums and the reclassification from unassigned funds (surplus) to aggregate write-ins for special surplus funds equal to the estimated 2020 fee year assessment accrued in data year 2019 will both continue as prescribed under SSAP No. 106. See Note 22 for disclosure of all amounts related to the health insurer fee for the Company.

(18) The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act of 2010's (collectively, the "ACA") Risk Adjustment

Risk Adjustment

The ACA established a permanent risk adjustment program to transfer funds from qualified individual and small group insurance plans with below average risk scores to plans with above average risk scores. Based on the risk of the Company's qualified plan members relative to the average risk of members of other qualified plans in comparable markets, the Company estimates its ultimate risk adjustment receivable or payable for the current calendar year and reflects the impact as an adjustment to its premium revenue in accordance with SSAP No. 107.

(19) Federal and State Income and Premium Taxes

Aetna and its wholly-owned subsidiaries are included in the consolidated federal income tax return of its parent company, CVS Health, pursuant to the terms of a tax sharing agreement (and a Supplemental Tax Sharing Agreement where applicable) between CVS Health and the Company.

In accordance with the agreements, the Company's current federal and state income tax provisions are generally computed as if the Company were filing a separate federal and state income tax return; current income tax benefits, including those resulting from net operating losses, are recognized to the extent expected to be realized in the consolidated return. Pursuant to the agreements, the Company has the enforceable right to recoup federal and state income taxes paid in prior years in the event of future net losses, which it may incur, or to recoup its net losses carried forward as an offset to future net income subject to federal and state income taxes.

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

whereby statutory and tax basis balance sheets are compared. Current income tax recoverables include all current income taxes, including interest, reasonably expected to be recovered in a subsequent accounting period.

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

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

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

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

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

The Company is subject to state income taxes in the State of Iowa. State income tax expense is recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. For the years ended December 31, 2019 and 2018, the Company incurred state income tax expenses of \$55,792 and \$0, respectively. The Company had \$5,766 and \$0 state income tax payables at December 31, 2019 or 2018 included in general expenses due or accrued in the Statutory Statements of Liabilities, Capital and Surplus. The Company had no state income tax receivables at December 31, 2019 and 2018, respectively.

The Company is subject to premium taxes in the State of Iowa. These tax expenses were recorded in general administrative expenses in the Statutory Statements of Revenue and Expenses. The expenses for these taxes were \$597,592 and \$385,779 for the years ended December 31, 2019 and 2018. The Company had no premium tax payables as of December 31, 2019 and 2018, respectively. The Company had prepaid premium taxes of \$1,721,676 and \$1,547,453 at December 31, 2019 and 2018 respectively, which were included as a write-in in the Statutory Statements of Assets.

(20) Reinsurance

In the normal course of business, the Company seeks to reduce the loss that may arise from catastrophes or other events that cause unfavorable underwriting results and to help balance its risks and capital by reinsuring certain levels of risk with other insurance enterprises. The reinsurance coverage does not relieve the Company of its primary obligations. Reinsurance premiums and reserves related to reinsured business are accounted for on a basis consistent with those used in accounting for the original policies issued and the terms of the reinsurance contracts. Premiums ceded for medical losses and the related unpaid reserves have been reported as reductions of these items. The reinsurance agreements are more fully discussed in Notes 10 and 23.

D. Going Concern

As of February 27, 2020, 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 correction of errors in the years ended December 31, 2019 and 2018.

3. Business Combinations and Goodwill

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The Company was not a part of any business combinations that involved the statutory purchase method, a statutory merger, an assumption reinsurance, or an impairment loss in the years ending December 31, 2019 and 2018.

4. <u>Discontinued Operations</u>

The Company did not have any discontinued operations in the years ending December 31, 2019 and 2018.

5. Investments

- A. The Company did not have any mortgage loans, including Mezzanine Real Estate Loans, at December 31, 2019 and 2018.
- B. The Company did not have any debt restructuring in the years ending December 31, 2019 and 2018.
- C. The Company did not have any reverse mortgages at December 31, 2019 or 2018.

D. Loan-Backed Securities

- Prepayment assumptions for single class and multi-class mortgage-backed/loan-backed securities were obtained from industry market sources.
- (2) The Company did not recognize any other-than-temporary impairments ("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 SSAP No. 43R *Loan-Backed and Structured Securities* ("SSAP No. 43R") at December 31, 2019.
- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at December 31, 2019.
- (4) The Company had no unrealized loss position on loan-backed and structured securities held by the Company at December 31, 2019.
- (5) Not applicable.
- E. The Company had no dollar repurchase agreements and/or securities lending transactions at December 31, 2019.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at December 31, 2019.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured at December 31, 2019.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at December 31, 2019.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at December 31, 2019.
- J. The Company did not have any real estate at December 31, 2019.
- K. The Company did not have any low-income housing tax credits at December 31, 2019 or 2018.

L. Restricted Assets

- (1) The Company did not have any restricted assets (including pledged) at December 31, 2019 or 2018.
- (2) The Company did not have any assets pledged as collateral not captured in other categories at December 31, 2019 or 2018.
- (3) The Company did not have any other restricted assets at December 31, 2019 or 2018.
- (4) The Company did not have any collateral received and reflected within its financial statements at December 31, 2019.
- M. The Company did not have any working capital finance investments at December 31, 2019.
- 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 December 31, 2019.
- O. The Company did not have any 5GI securities at December 31, 2019 or 2018.
- P. The Company did not have any short sales within the reporting period.
- Q. The Company did not have any prepayment penalty and acceleration fees at December 31, 2019.
- 6. Joint Ventures, Partnerships, and Limited Liability Companies

- A. The Company did not have any joint ventures, partnerships, or limited liability companies that exceeded 10% of its admitted assets at December 31, 2019 or 2018.
- B. The Company does not have any impaired investments in joint ventures, partnerships, or limited liability companies at December 31, 2019 or 2018.

7. Investment Income

A. Due and accrued income was excluded from surplus on the following bases:

Bonds - where collection of interest is uncertain.

B. There was no amount excluded at December 31, 2019 or 2018.

8. <u>Derivative Instruments</u>

The Company did not have any derivative instruments at December 31, 2019 or 2018.

9. Income Taxes

A.

(1) The components of the net DTAs recognized in the Company's Statutory Statements of Assets and Liabilities, Capital and Surplus are as follows:

			12/31/2019			12/31/2018		Change			
		(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total	
(a)	Gross Deferred Tax Assets	\$ 212,229	\$ 134,164	\$ 346,393	\$ 409,493	\$ 147,950	\$ 557,443	\$ (197,264)	\$ (13,786)	\$ (211,050)	
(b)	Statutory Valuation Allowance Adjustment	_	_	_	_	147,950	147,950	_	(147,950)	(147,950)	
(c)	Adjusted Gross Deferred Tax Assets (1a - 1b)	212,229	134,164	346,393	409,493	_	409,493	(197,264)	134,164	(63,100)	
(d)	Deferred Tax Assets Nonadmitted	12,647	18,387	31,034	37,883	_	37,883	(25,236)	18,387	(6,849)	
(e)	Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	199,582	115,777	315,359	371,610	_	371,610	(172,028)	115,777	(56,251)	
(f)	Deferred Tax Liabilities	42,373	80,625	122,998	65,375	_	65,375	(23,002)	80,625	57,623	
(g)	Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 157,209	\$ 35,152	\$ 192,361	\$ 306,235	\$ —	\$ 306,235	\$ (149,026)	\$ 35,152	\$ (113,874)	

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

			12/31/2019			12/31/2018			Change	
		(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)
		Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
	nission Calculation Components P No. 101									
(a)	Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks.	\$ 157,093	\$ 35,152	\$ 192,245	\$ 306,018	\$ —	\$ 306,018	\$ (148,925)	\$ 35,152	\$ (113,773)
(b)	Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	116	_	116	217	_	217	(101)	_	(101)
(6)	Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	116	_	116	217	_	217	(101)		(101)
	2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	110		6,366,173	217		5,935,092	(101)		431,081
(c)	Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	42,373	80,625	122,998	65,375	_	65,375	(23,002)	80,625	57,623
(d)	Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 199,582	\$ 115,777	\$ 315,359	\$ 371,610	\$ —	\$ 371,610	\$ (172,028)	\$ 115,777	\$ (56,251)

(3)

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		2019	2018
(a)	Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	5,401 %	3,425 %
(b)	Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 42.441.147 \$	39.567.278

(4) The impact of tax planning strategies is as follows:

		12/31	/2019		12/31/2018							
	(1)	(2)	(3)	(-	4)	(Co	(5) d. 1 - 3)	(6 (Col. :	5)
	Ord	inary	Ca	oital	Ordi	nary	Cap	oital		dinary	Cap	
Impact of Tax Planning Strategies:												
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.												
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 2	212,229	\$ 1	34,164	\$ 40	09,493	\$	_	\$ ((197,264)	\$ 13	34,164
Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies		— %		— %		— %		— %		— %		— %
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	1	99,582	1	15,777	3′	71,610		_	((172,028)	1	15,777
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies		— %		— %		— %		— %		— %		 %

(b) Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

- B. There are no DTLs that were not recognized at December 31, 2019 or 2018.
- C. Current income taxes incurred consist of the following major components:

		(1)	(2)	(3)
1. Cur	rent Income Tax	12/31/2019	12/31/2018	(Col. 1 - 2)
(a)	Federal	\$ 278,882	\$ 2,016,508	\$ (1,737,626)
(b)	Foreign		_	_
(c)	Subtotal	278,882	2,016,508	(1,737,626)
(d)	Federal income tax on net capital gains	34,234	(143,135)	177,369
(e)	Utilization of capital loss carry-forwards		_	_
(f)	Other		_	_
(g)	Federal and foreign income taxes incurred	313,116	1,873,373	(1,560,257)
2. Def	erred Tax Assets:			
(a)	Ordinary:			
	(1) Discounting of unpaid losses	11,592	21,733	(10,141)
	(2) Unearned premium reserve	2,807	1,551	1,256
	(3) Policyholder reserves	16,895	165,645	(148,750)
	(4) Investments	_	_	_
	(5) Deferred acquisition costs	_	_	_
	(6) Policyholder dividends accrual	_	_	_
	(7) Fixed Assets	7,925	8,767	(842)
	(8) Compensation and benefits accrual	_	_	_
	(9) Pension accrual	_	_	_
	(10) Receivables - nonadmitted	31,053	50,170	(19,117)
	(11) Net operating loss carry-forward	_	_	_
	(12) Tax credit carry-forward	_	_	_
	(13) Other (including items <5% of total ordinary tax assets)	141,956	161,627	(19,671)
	(99) Subtotal	212,228	409,493	(197,265)
(b)	Statutory valuation allowance adjustment	_	_	_
(c)	Nonadmitted	12,647	37,883	(25,236)
(d)	Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	199,581	371,610	(172,029)
(e)	Capital:	121151	4.45.050	42.500
	(1) Investments	134,164	147,950	(13,786)
	(2) Net capital loss carry-forward	_	_	_
	(3) Real estate (4) Other (including items <5% of total ordinary tay assets)	_	_	_
	(4) Other (including items <5% of total ordinary tax assets)(99) Subtotal	134,164	147,950	(13,786)
(f)	Statutory valuation allowance adjustment	134,104	147,950	(13,780)
(g)	Nonadmitted	18,387	147,930	18,387
(h)	Admitted capital deferred tax assets (2e99 - 2f - 2g)	115,777		115,777
(i)	Admitted deferred tax assets (2d + 2h)	315,358	371,610	(56,252)
	erred Tax Liabilities:	ŕ	ŕ	
3. Def	Ordinary:			
(a)	(1) Investments	6,540	22,377	(15,837)
	(2) Fixed assets	0,540	22,377	(15,657)
	(3) Deferred and uncollected premium			
	(4) Policyholder reserves			
	(5) Other (including items <5% of total ordinary tax liabilities)	35,832	42,998	(7,166)
	(99) Subtotal	42,372	65,375	(23,003)
(b)	Capital:	,	,	()
` '	(1) Investments	80,625	_	80,625
	(2) Real estate	_	_	_
	(3) Other (including items <5% of total capital tax liabilities)	_	_	_
	(99) Subtotal	80,625	_	80,625
(c)	Deferred tax liabilities (3a99 + 3b99)	122,997	65,375	57,622
4. Net	deferred tax assets/liabilities (2i - 3c)	\$ 192,361	\$ 306,235	\$ (113,874)

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

_	12/31/2019	12/31/2018	Change
Total Deferred Tax Assets	\$ 346,392 \$	409,493 \$	(63,101)
Total Deferred Tax Liabilities	(122,997)	(65,375)	(57,622)
Net Deferred Tax Assets/(Liabilities)	223,395	344,118	(120,723)
Tax Effect of Unrealized Gains/(Losses)			
Change in Net Deferred Income Tax		\$	(120,723)

The valuation allowance adjustment to gross DTAs was \$0 and \$147,950 for December 31, 2019 and 2018, respectively. The Company bases its estimates of the future realization of DTAs primarily on historic taxable income and existing DTLs.

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

		12/31/2019	Effective Tax Rate		12/31/2018	Effective Tax Rate
Provision computed at statutory rate		650,057	21.0 %	\$	814,367	21.0 %
Health Insurer Fee		_	0.0 %		887,519	22.9 %
Transfer Pricing Adjustment		(17,673)	(0.6)%		(80,444)	(2.1)%
Tax-Exempt Interest		(61,163)	(2.0)%		(183,420)	(4.7)%
Change in Nonadmitted Assets		19,117	0.6 %		343,150	8.9 %
Prior Year True-Up		(10,535)	(0.3)%		334,025	8.6 %
Change in Valuation Allowance Adjustment		(147,950)	(4.8)%		147,950	3.8 %
Other		1,986	0.1 %	_	1	0.0 %
Total	\$	433,839	14.0 %	\$	2,263,148	58.4 %
		_			_	
Federal and foreign income taxes incurred	\$	313,116	10.1 %	\$	1,873,373	48.3 %
Change in net deferred income taxes		120,723	3.9 %	_	389,775	10.1 %
Total statutory income taxes	\$	433,839	14.0 %	\$	2,263,148	58.4 %

The transfer pricing adjustment allows taxpayers to apply different methods to price current period intercompany services at arm's length prices (i.e., prices at which unrelated entities would be willing to transact), which results in a permanent deduction for tax reporting purposes.

E.

- At December 31, 2019 and 2018, the Company had no net capital loss or net operating loss carryforwards for tax purposes.
- (2) The amount of federal income taxes incurred that is available for recoupment in the event of future net losses is as

Year	(Ordinary	Capital	Total	
2019	\$	288,275 \$	34,234 \$	322,509	
2018		135,048	9,878	144,926	
2018		N/A	_		
Total	\$	423,323 \$	44,112 \$	467,435	

(3) The Company did not report any deposits as admitted assets under Internal Revenue Code Section 6603 at December 31, 2019 and 2018.

F

(1) At December 31, 2019, the Company's Federal Income Tax Return was consolidated with the following entities:

@ Credentials Inc. ACCENDO INSURANCE COMPANY ACS ACOCO CORP. Active Health Management, Inc. Adminco, Inc. Administrative Enterprises, Inc. ADVANCED CARE SCRIPTS, INC

Aetna Better Health of Florida, Inc. (F/K/A Coventry Health Care of Florida, Inc.)

Aetna Better Health Inc. (Georgia) Aetna Better Health Inc. (IL) Aetna Better Health Inc. (NJ) Aetna Better Health Inc. (NY) Aetna Better Health Inc. (OH) Aetna Better Health Inc. (Tennessee) Aetna Better Health of California, Inc. Aetna Better Health of Kansas Inc. Aetna Better Health of Kentucky Insurance Co. Aetna Better Health of Michigan, Inc. Aetna Better Health of Missouri LLC Aetna Better Health of Nevada Inc. Aetna Better Health of North Carolina, Inc. Aetna Better Health of Oklahoma Inc. Aetna Better Health of Washington, Inc.

Aetna Better Health of Texas, Inc. Aetna Better Health, Inc. (Connecticut) Aetna Better Health, Inc. (LA) Aetna Better Health, Inc. (PA) Aetna Dental Inc. (NJ) Aetna Dental Inc. (Texas) Aetna Dental of California, Inc. Aetna Florida, Inc. Aetna Health Inc. (Connecticut) Aetna Health Inc. (Florida) Aetna Health Inc. (Georgia)

Aetna Health Inc. (LA) Aetna Health Inc. (Maine) Aetna Health of Michigan (FKA Aetna Health Inc. (MI)) Aetna Health Inc. (New Jersey)

Aetna Health Inc. (NY) Aetna Health Inc. (Pennsylvania)

Aetna Health Inc. (Texas)

Aetna Health Insurance Company of New York

Aetna Health of Iowa, Inc. Aetna Health of Utah, Inc.

Aetna Inc.

Aetna International Inc.

Aetna Life & Casualty (Bermuda) Limited Aetna Student Health Agency, Inc. American Health Holding, Inc. AUSHC Holdings, Inc. (CT)

bswift, LLC

CAREMARK ULYSSES HOLDING CORP.

CORAM ALTERNATE SITE SERVICES, INC.

CORAM HEALTHCARE CORPORATION OF ALABAMA CORAM HEALTHCARE CORPORATION OF GREATER D.C.

CORAM HEALTHCARE CORPORATION OF INDIANA CORAM HEALTHCARE CORPORATION OF MISSISSIPPI CORAM HEALTHCARE CORPORATION OF NORTH TEXAS

CORAM HEALTHCARE CORPORATION OF SOUTHERN CALIFORNIA

CORAM HEALTHCARE CORPORATION OF UTAH

Coventry Health and Life Insurance Company Coventry Health Care National Network, Inc. Coventry Health Care of Kansas, Inc. Coventry Health Care of Nebraska, Inc. Coventry Health Care of West Virginia, Inc. Coventry Health Plan of Florida, Inc.

Coventry Prescription Management Services, Inc.

Coventry Transplant Network, Inc. CVS ARCLIGHT, INC.

CVS FOREIGN, INC. CVS PHARMACY, INC. CVS RX SERVICES, INC.

DELAWARE CVS PHARMACY, L.L.C.

ETB INC

ECKERD CORPORATION OF FLORIDA, INC.

First Health Group Corp. First Script Network Services, Inc. FOCUS Healthcare Management, Inc. Group Dental Service, Inc.

Health Data & Management Solutions, Inc. HealthAssurance Pennsylvania, Inc. IOWA CVS PHARMACY, L.L.C. JHC ACOUISITION, LLC Managed Care Coordinators, Inc.

MASSACHUSETTS CVS PHARMACY, INC.

MELVILLE REALTY CO., INC.

Mental Health Network of New York IPA. Inc.

MetraComp, Inc. MHNet of Florida, Inc.

MinuteClinic Physician Practice of Texas

NCS HEALTHCARE OF KENTUCKY, INC. NEIGHBORCARE HOLDINGS, INC.

NEIGHBORCARE SERVICES CORPORATION

Niagara Re, Inc.

OKLAHOMA CVS PHARMACY, L.L.C.

OMNICARE, INC. PayFlex Systems USA, Inc. Performax, Inc.

PrimeNet, Inc. Professional Risk Management, Inc.

RETRAC, INC.

Schaller Anderson Medical Administrators Inc

SKY ACQUISITION LLC

TENNESSEE CVS PHARMACY, L.L.C. U.S. Health Care Properties, Inc. VIRGINIA CVS PHARMACY, L.L.C.

Aetna Health Insurance Co

Aetna Health of California Inc.

Aetna Health of Ohio, Inc. (F/K/A Aetna Better Health of Iowa, Inc.)

Aetna HealthAssurance Pennsylvania, Inc.

Aetna Integrated Informatics, Inc.

Aetna Ireland Inc.

Aetna Risk Assurance Company of Connecticut ALABAMA CVS PHARMACY, L.L.C. APRIA FINANCE HOLDINGS, INC. BRUIN ACOUISITION CO., INC. Carefree Insurance Services, Inc.

Claims Administration Corporation CONNECTICUT CVS PHARMACY, L.L.C.

CORAM CLINICAL TRIALS INC.

CORAM HEALTHCARE CORPORATION OF FLORIDA CORAM HEALTHCARE CORPORATION OF GREATER NEW YORK

CORAM HEALTHCARE CORPORATION OF MASSACHUSETTS CORAM HEALTHCARE CORPORATION OF NEVADA CORAM HEALTHCARE CORPORATION OF NORTHERN CALIFORNIA

CORAM HEALTHCARE CORPORATION OF SOUTHERN FLORIDA

Coventry Consumer Advantage, Inc.

Coventry Health Care National Accounts, Inc. Coventry Health Care of Illinois, Inc. Coventry Health Care of Missouri, Inc. Coventry Health Care of Virginia, Inc.

Coventry Health Care Workers Compensation, Inc. Coventry HealthCare Management Corporation

CVS AOC Corporation

CVS CAREMARK INDEMNITY LTD. CVS INTERNATIONAL, L.L.C. CVS PR CENTER, INC. CVS WWRE, INC.

Coventry Rehabilitation Services, Inc.

Delaware Physicians Care, Inc. Echo Merger Sub. Inc

EVERGREEN PHARMACEUTICAL OF CALIFORNIA, INC.

First Health Life and Health Insurance Company Florida Health Plan Administrators, LLC Group Dental Service of Maryland, Inc. Health and Human Resource Center, Inc.

Health Re. Inc. HOLIDAY CVS, L.L.C. JEC FUNDING, INC.

KENTUCKY CVS PHARMACY, L.L.C. MARYLAND CVS PHARMACY, L.L.C. MED WORLD ACQUISITION CORP.

Meritain Health, Inc.

Mental Health Associates, Inc.

MHNet Life and Health Insurance Company

MINUTECLINIC DIAGNOSTIC OF ILLINOIS, L.L.C. MinuteClinic Telehealth Services of Texas Association

NCS HEALTHCARE, LLC

NEIGHBORCARE PHARMACY SERVICES, INC.

NEIGHBORCARE, INC.

NORTH CAROLINA CVS PHARMACY, L.L.C.

OMNICARE HOLDING COMPANY

PayFlex Holdings, Inc.

PENNSYLVANIA LIFE INSURANCE COMPANY

Precision Benefit Services, Inc. Prodigy Health Group, Inc. Resources for Living, LLC

RICHMOND HEIGHTS ACQUISITION CORP. SILVERSCRIPT INSURANCE COMPANY

T2 MEDICAL, INC. The Vasquez Group, Inc. UAC HOLDING, INC. Work & Family Benefits, Inc.

- (2) As explained in Note 1, the Company participates in a tax sharing agreement with its parent and affiliates.
- G. The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.
- H. The Company was not subject to the Repatriation Transition Tax at December 31, 2019.
- I. The Company did not recognize any gross Alternative Minimum Tax credit at December 31, 2019.
- 10. Information Concerning Parent, Subsidiaries, Affiliates, and Other Related Parties

A., B. and C.

The Company did not have any transactions during 2019 or 2018 with its parent, subsidiaries and affiliates excluding reinsurance transactions and non-insurance transactions involving less the $\frac{1}{2}$ of 1% of the Company's total admitted assets.

D. At December 31, 2019 and 2018, 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.

	December 31				
	 2019	2018			
A					
Amounts due to affiliates					
Coventry Health & Life Insurance Company	\$ 47,140 \$	93,944			
Aetna Health Management, Inc	24,177	687,891			
Coventry Prescription Management Service		9,106			
	\$ 71,317 \$	790,941			

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

- E. The Company does not have any guarantees or undertakings, written or otherwise at December 31, 2019.
- F. As of and for the years ended December 31, 2019 and 2018, the Company had the following significant transactions with affiliates:

The Company and Aetna Health Management, LLC ("AHM") are parties to an administrative services agreement, under which AHM provides certain administrative services, including accounting and processing of premiums and claims. Under this agreement, the Company remits a percentage of its earned commercial, Medicaid and Medicare premium revenue, as applicable, to AHM as a fee, subject to an annual true up mechanism as defined in the agreement. Under the agreement, this true-up is due to be settled with the affiliate by April 15th of the following contract year (which is January 1 to December 31 annually). The terms of settlement require that these amounts be settled within 45 days after the end of the calendar quarter. For these services, the Company was charged \$854,305 and \$3,672,064 in 2019 and 2018, respectively.

The Company is a party to an agreement which enables the Company to receive manufacturers' pharmacy rebates from AHM under which the Company remits a percentage of its earned pharmaceutical rebates to AHM as a fee. The Company earned pharmaceutical rebates of \$237,695 and \$1,860,345, which were recorded as a reduction of medical costs, in 2019 and 2018, respectively. The Company was charged \$26,674 and \$186,548, which were recorded as administrative expenses, for these services in 2019 and 2018, respectively.

MHNet Specialty Services, LLC ("MHNet"), a related party, provides mental health services to the Company's members. The Company pays MHNet a monthly fee based on a PMPM capitation rate. The rates are amended annually and the amendments are approved by the Iowa Insurance Division. The Company paid MHNet \$0 and \$93,758 in capitation fees for the years ended December 31, 2019 and 2018, respectively.

These agreements also provide for interest on all intercompany balances. Interest earned on amounts due from affiliates was \$4,369 in 2019 and \$15,509 in 2018. Interest incurred on amounts due to affiliates was \$9,768 in 2019 and \$96,132 in 2018.

As explained in Note 1, Aetna and its wholly-owned subsidiaries, including the Company, participate in a tax sharing agreement with CVS Health. All federal income tax receivables/payables are due from/due to CVS Health.

- G. All outstanding shares of the Company are owned by Aetna Health Holdings, LLC, whose ultimate parent is CVS Health.
- H. At December 31, 2019, the Company did not own shares of an upstream intermediate entity or CVS Health, either directly or indirectly.
- I. At December 31, 2019, the Company did not hold any investments in any subsidiary, controlled or affiliated ("SCA") entity that exceeded 10% of the Company's admitted assets.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AETNA HEALTH OF IOWA INC

NOTES TO FINANCIAL STATEMENTS

- J. At December 31, 2019, the Company did not hold any investments in any impaired SCA entity.
- K. At December 31, 2019, the Company did not hold any investments in any foreign insurance subsidiaries.
- L. At December 31, 2019, the Company did not hold any investments in a downstream noninsurance holding company.
- M. At December 31, 2019, the Company did not have any SCA investments.
- N. At December 31, 2019, the Company did not have any investments in an insurance SCA.
- O. The Company did not have any SCA or SSAP No. 48 entity investments where the Company's share of losses in the SCA exceeds its investment in the SCA.

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at December 31, 2019.
- B. The Company did not have any Federal Home Loan Bank agreements at December 31, 2019.
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at December 31, 2019 or 2018.

- 13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations
 - (1) The Company had 1,000,000 shares of authorized common capital stock, with a par value of \$5 per share and 253,567 shares issued and outstanding as of December 31, 2019 and 2018.
 - (2) The Company had no shares of preferred stock issued and outstanding at December 31, 2019 and 2018.
 - (3) Dividend Restrictions

Dividends on the Company's common capital stock are paid as declared by its Board of Directors, from earned surplus of the Company, not including surplus arising from the sale of stock. Generally, dividends may be paid on the Company's common capital stock without obtaining regulatory approval at an amount up to the greater of: a) the prior year net gain from operations, or b) ten percent of the prior year ending capital and surplus. In addition the minimum Risk Based Capital requirements of the NAIC and, if applicable, the Iowa Insurance Division must be maintained.

(4) The Company did not pay any dividends in 2019 or 2018.

The Company did not receive any capital contributions or pay any returns of capital in 2019 or 2018.

- (5) Within the limitations of (3) above, there are no other restrictions placed on the portion of the Company profits that may be paid as ordinary dividends to the stockholder.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- (7) The Company had no advances to surplus not repaid.
- (8) The Company did not hold any stock for any special purposes at December 31, 2019 or 2018.
- (9) Changes in the balances of special surplus funds from the prior year are due to the accrual of estimated 2020 ACA health insurer fees reclassified from unassigned funds (surplus) to aggregate write-ins for special surplus funds as discussed more fully in Notes 1 and 22.
- (10) At December 31, 2019 and 2018, there were no unassigned funds that was represented or reduced by unrealized gains and losses.
- (11) The Company has not issued any surplus notes or debentures or similar obligations at December 31, 2019 or 2018.
- (12) The Company did not participate in any quasi-reorganizations during the statement year.
- (13) The Company did not participate in any quasi-reorganizations in the past 10 years.
- 14. Liabilities, Contingencies and Assessments
 - A. The Company did not have any contingent commitments at December 31, 2019 or 2018.
 - B. Assessments

Guaranty Fund Assessments

(1) Under guaranty fund laws existing in all states, insurers doing business in those states can be assessed (in most states up to prescribed limits) for certain obligations of insolvent insurance companies to policyholders and claimants. The life and health insurance guaranty associations in which the Company participates that operate under these laws respond to insolvencies of long-term care insurers as well as health insurers. The Company's assessments generally are based on a formula relating to the Company's health care premiums in the state compared to the premiums of other insurers. Certain states allow assessments to be recovered over time as offsets to premium taxes. Some states have similar laws relating to HMOs and/or other payers such as not-for-profit consumer-governed health plans established under the ACA.

The Company did not have any contingent assessments at December 31, 2019 or 2018.

- C. The Company did not have any gain contingencies at December 31, 2019 or 2018.
- D. The Company did not have any claims related extra contractual obligation and bad faith losses stemming from lawsuits at December 31, 2019 or 2018.
- E. The Company did not have any joint and several liability arrangements at December 31, 2019 or 2018.
- F. Various liabilities arise in the normal course of the Company's business and have been recorded. In the opinion of management, any ultimate contingent losses will not have a material adverse effect on the Company's future results of operations and financial position. The Company, to the best of its knowledge, has no assets that it considers impaired that are not already recorded in the Company's books.

The Company maintains insurance coverage for certain litigation exposures in an amount it believes is reasonable.

15. Leases

The Company did not have any material lease obligations at December 31, 2019 or 2018.

 Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

The Company did not have any financial instruments with off-balance sheet risk or financial instruments with concentrations of credit risk at December 31, 2019 or 2018.

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

The Company did not have any transfers of receivables reported as sales for the years ending December 31, 2019 or 2018.

- B. Transfer and Servicing of Financial Assets
 - (1) The Company did not have any loaned securities at December 31, 2019 or 2018.
 - (2) and (3)

The Company did not have any servicing assets or liabilities at December 31, 2019 or 2018.

- (4) The Company did not have any securitized financial assets at December 31, 2019 or 2018.
- (5) The Company did not have any transfers of financial assets accounted for as secured borrowing at December 31, 2019 or 2018.
- (6) The Company did not have any transfers of receivables with recourse at December 31, 2019 or 2018.
- (7) The Company did not have any dollar repurchase or reverse repurchase agreements at December 31, 2019 or 2018.

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 year for the year ended December 31, 2019 and reacquired within 30 days of the sale date.
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
 - A. The Company did not serve as an Administrative Services Only plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2019.
 - B. The Company did not serve as an Administrative Services Contract (ASC) plan administrator for uninsured accident and health plans or the uninsured portion of partially insured plans for the period ended December 31, 2019.

C. The Company did not have any Medicare or other similarly structured cost based reimbursement contracts for the period ended December 31, 2019.

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

The Company did not have any material direct premiums written through/produced by managing general agents or third party administrators for the years ended December 31, 2019 and 2018.

20. Fair Value Measurements

A. and B.

The Company had no material assets and liabilities that are measured and reported at fair value as of December 31, 2019 and 2018.

Certain of the Company's financial instruments are measured at fair value in the financial statements. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy. 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.

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

There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2019 or 2018.

Transfers in and out of all levels are recognized at the end of the reporting period of which the transfer occurred.

C. The carrying values and estimated fair values of the Company's financial instruments at December 31, 2019 and 2018 were as follows:

December 31, 2019

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, and Cash Equivalents	\$ 37,316,813	\$ 36,203,721	\$ 2,429,428	\$ 34,887,385	s —	\$ —	s —

December 31, 2018

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, and Cash Equivalents	\$ 41,071,873	\$ 40,992,598	\$ 2,296,743	\$ 38,775,130	s —	s —	\$ —

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

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

21. Other Items

A. Unusual or Infrequent Items

The Company did not have any unusual or infrequent items for the years ended December 31, 2019 and 2018.

B. Troubled Debt Restructuring

The Company did not have any troubled debt restructuring in the years ended December 31, 2019 and 2018.

C. Other Disclosures

Minimum Capital and Surplus

The Company is subject to certain regulations found in the Iowa Administrative Code, which require the Company to maintain capital and surplus of at least \$1 million. At both December 31, 2019 and 2018, the Company was in compliance with the minimum surplus and capital stock requirements of the State of Iowa in which it is licensed to do business.

The NAIC utilizes risk-based capital ("RBC") standards for health organizations, including HMOs, that are designed to identify weakly capitalized companies by comparing each company's adjusted capital and surplus to its required capital and surplus (the "RBC Ratio"). The RBC Ratio is designed to reflect the risk profile of the company. Within certain ratio ranges, regulators have increasing authority to take action as the RBC Ratio decreases. There are four levels of regulatory action, ranging from requiring insurers to submit a comprehensive plan to the state insurance commissioner to requiring the state insurance commissioner to place the insurer under regulatory control. At December 31, 2019 and 2018, the Company had capital and surplus that exceeded the highest threshold specified by the RBC rules.

Health Care Reform

The Patient Protection and Affordable Care Act and the Health Care and Education Reconciliation Act (collectively, the "ACA"), made broad-based changes to the United States health care system. While the Company anticipates continued efforts in 2020 and beyond to invalidate, modify, repeal or replace the ACA, the Company expects aspects of the ACA to continue to significantly impact the Company's business operations and financial results, including pricing, medical benefit ratios ("MBRs") and the geographies in which the Company's products are available.

While most of the significant aspects of the ACA became effective during or prior to 2014, parts of the ACA continue to evolve through the promulgation of executive orders, legislation, regulations and guidance as well as ongoing litigation. Additional changes to the ACA and those regulations and guidance at the federal and/or state level are likely, and those changes are likely to be significant. Growing federal and state budgetary pressures make it more likely that any changes, including changes at the state level in response to changes to, or invalidation, repeal or replacement of, the ACA and/or changes in the funding levels and/or payment mechanisms of federally supported benefit programs, will be adverse to the Company. For example, if any elements of the ACA are invalidated or repealed at the federal level, the Company expects that some states would seek to enact similar requirements, such as prohibiting pre-existing condition exclusions, prohibiting rescission of insurance coverage, requiring coverage for dependents up to age 26, requiring guaranteed renewability of insurance coverage and prohibiting lifetime limits on insurance coverage.

Potential repeal of the ACA, ongoing legislative, regulatory and administrative policy changes to the ACA, the results of federal and state level elections, pending litigation challenging the constitutionality of the ACA or funding for the law and federal budget negotiations continue to create uncertainty about the ultimate impact of the ACA. The time frame for conclusion and final outcome and ultimate impact of this litigation are uncertain. Given the inherent difficulty of foreseeing the nature and scope of future changes to the ACA and how states, businesses and individuals will respond to those changes, the Company cannot predict the impact on it of future changes to the ACA. It is reasonably possible that invalidation, repeal or replacement of or other changes to the ACA and/or states' responses to such changes, in the aggregate, could have a significant adverse effect on the Company's businesses, results of operations and cash flows.

Federal Employees Health Benefits Program

The Company contracts with the OPM to provide managed health care services under the FEHB program in its service areas. These contracts with the OPM and applicable government regulations establish premium rating arrangements for this program. OPM regulations require that community-rated FEHB plans meet a FEHB program-specific MLR by plan code and market. Managing to these rules is complicated by the simultaneous application of the minimum MLR standards and associated premium rebate requirements of the ACA. The OPM also is auditing the Company and its other contractors to, among other things, verify that plans meet their applicable FEHB program-specific MLR and the premiums established under the OPM's Insured contracts and costs allocated pursuant to the OPM's cost-based contracts are in compliance with the requirements of the applicable FEHB program. The OPM may seek premium refunds or institute other sanctions against the Company if the Company fails to comply with the FEHB program requirements.

- D. The Company did not have any business interruption insurance recoveries for the years ending December 31, 2019 or 2018.
- E. The Company did not have any state transferable and non-transferable tax credits for the years ending December 31, 2019 or 2018.
- F. The Company did not have any subprime mortgage related risk exposures at December 31, 2019 or 2018.

- G. The Company did not have any retained assets at December 31, 2019 or 2018.
- H. The Company did not have any insurance-linked securities ("ILS") contracts at December 31, 2019 or 2018
- I. The Company did not have amounts that could be realized on life insurance at December 31, 2019

22. Events Subsequent

Type I - Recognized Subsequent Events

Subsequent events have been considered through February 27, 2020 for the statutory statement issued on February 28, 2020.

The Company had no known reportable recognized subsequent events.

Type II - Nonrecognized Subsequent Events

Subsequent events have been considered through February 27, 2020 for the statutory statement issued on February 28, 2020.

On January 1, 2020, the Company will be subject to an annual fee under Section 9010 of the Federal Affordable Care Act ("ACA"). This annual fee will be allocated to individual health insurers based on the ratio of the amount of the entity's net premiums written during the preceding calendar year to the amount of health insurance for any U.S. health risk that is written during the preceding calendar year. A health insurance entity's portion of the annual fee becomes payable once the entity provides health insurance for any U.S. health risk for each calendar year beginning on or after January 1 of the year the fee is due. As of December 31, 2019, the Company has written health insurance subject to the ACA assessment, expects to conduct health insurance business in 2020, and estimates its portion of the annual health insurance industry fee to be payable on September 30, 2020 to be \$120,000. This amount is reflected in special surplus. This assessment is expected to impact risk based capital ("RBC") by 0%. Reporting the ACA assessment as of December 31, 2019, would not have triggered an RBC action level.

On January 22, 2018, Public Law No: 115-120 was signed into law and it imposes a moratorium on the health insurer fee for calendar year 2019. As a result, there was no annual health insurance industry fee payable on September 30, 2019 and there were no amounts reflected in the Company's aggregate write-ins for special surplus funds related to this payable at December 31, 2018. There was also no resulting impact to the Company's RBC to assess as of December 31, 2018 as a result of this suspension.

			C	urrent Year	Prior Year
A.	Did the reporting entity write accident and health insurance premium that is subject to Section 9010 of the Federal Affordable Care Act (YES/NO)?	Yes			
В.	ACA fee assessment payable for the upcoming year		\$	120,000	\$ _
C.	ACA fee assessment paid			_	4,226,283
D.	Premium written subject to ACA 9010 assessment			5,959,512	_
E.	Total Adjusted Capital before surplus adjustment			42,633,508	
	(Five-Year Historical Line 14)				
F.	Total Adjusted Capital after surplus adjustment			42,513,508	
	(Five-Year Historical Line 14 minus 22B above)				
G.	Authorized Control Level			785,823	
	(Five-Year Historical Line 15)				
H.	Would reporting the ACA assessment as of Dec. 31, 2019 have triggered an RBC action level (YES/NO)?	No			

Administrative Services Agreement by and between Aetna Health of Iowa Inc. and Aetna Health Management, LLC was amended effective January 1, 2020 and approved by the State of Iowa on September 13, 2019. The amendment allows other affiliates to provide services in accordance to a schedule of services and fees.

23. Reinsurance

The Company did not have any reinsurance recoverables in dispute, uncollectible reinsurance, commutation of ceded reinsurance or retroactive reinsurance at December 31, 2019 or 2018.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. Premium revenue subject to the minimum MLR rebate requirements of the ACA is recorded net of the estimated minimum MLR rebates for the current calendar year. The Company estimates the minimum MLR rebates by projecting MLRs for certain markets, as defined by the ACA, for each state in which the Company operates. The claims and premiums used in estimating such rebates are modified for certain adjustments allowed by the ACA and include a statistical credibility adjustment for those states with a number of members that is not statistically credible.

B. Accrued retrospective are recorded through premiums and are estimated based on calculations that compare the Company's expected financial results for the contract against the appropriate medical benefit ratio target.

C. Contracts Subject to Retrospective Rating Features

The Company accrues amounts payable to or receivable from the federal government related to its contracts with the OPM to provide or arrange health services under the FEHB program for federal employees, annuitants and their dependents. These contracts with the OPM and applicable government regulations establish premium rating requirements for the FEHB program. For the years ended December 31, 2019 and 2018, the Company had premiums related to its contracts with the OPM of \$0 and \$231,982, respectively, representing 0% and 1% of the Company's total premiums in December 31, 2019 and 2018, respectively.

The OPM, through its Office of the Inspector General, conducts periodic audits of its contractors to, among other things, verify that the premiums charged to the OPM were established in compliance with the community rating and other requirements under the FEHB program. These audits often result in findings for which the Company establishes a specific reserve. For those years under contract which have not been audited by the OPM, the Company establishes a general audit liability which is the result of a historical study of average audit payments. In addition, for all years under contract, the Company annually performs rate reconciliations which may result in amounts owed to or receivable from the OPM.

Audit findings, historical study of audit payments, and rate reconciliations have resulted in reserves of \$669,103 and \$669,103, which were recorded as aggregate health policy reserves in the Statutory Statements of Liabilities, Capital and Surplus at December 31, 2019 and 2018, respectively.

The Company contracts with OPM to provide managed health care services under the FEHB program in its service areas. OPM regulations require that FEHB plans meet a FEHB program-specific MLR by plan code and market. The Company reported FEHB MLR reserves of \$700,000 and \$700,000 in aggregate policy reserves at December 31, 2019 and 2018, respectively.

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

		1 Individual	2 Small Group Employer	3 Large Group Employer	4 Other Categories with rebates	5 Total
Prior	Reporting Year					
(1)	Medical Loss Ratio Rebates Incurred	\$	\$	\$ (253,814)	\$	\$ (253,814)
(2)	Medical Loss Ratio Rebates Paid	_	_	14,225	_	14,225
(3)	Medical Loss Ratio Rebates Unpaid	_	_	4,176,399	_	4,176,399
(4)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	_
(5)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	_
(6)	Rebates Unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,176,399
Curr	ent Reporting Year-to-Date					
(1)	Medical Loss Ratio Rebates Incurred	\$	\$	\$ 417,640	\$	\$ 417,640
(2)	Medical Loss Ratio Rebates Paid	_	_	_	_	_
(3)	Medical Loss Ratio Rebates Unpaid	_	_	4,594,039	_	4,594,039
(4)	Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	_
(5)	Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	_
(6)	Rebates Unpaid net of reinsurance	XXX	XXX	XXX	XXX	4,594,039

E. Risk Sharing Provisions of the Affordable Care Act (ACA)

- (1) Did the reporting entity write accident and health insurance premium which is subject to the 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	73,807
	Liabilities (including high-risk pool payments)	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	74
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	2,093
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	149,230
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	(72)
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	25,819
	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)	

(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.

1,253

	Accrued During on Busine	g the Prior Year ss Written	Received or l Current Year	Paid as of the on Business	Differ	rences	A	djustments			ances as of the ng Date	
	Before December 31 of the Prior Year		Written Before	December 31	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)	
	1	2	3	4	5	6	7	8		9	10	
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)	
a. Permanent ACA Risk Adjustment Program												
Premium adjustments receivable (including high-risk)	\$ 210,219	s —	\$ 296,408	s –	\$ (86,189)	s —	\$ 86,189	s —	A	s —	s —	
2. Premium adjustments (payable) (including high-risk pool payments)	_	_	_	8,673	_	(8,673)	_	10,096	В	_	1,423	
3. Subtotal ACA Permanent Risk Adjustment Program	210,219	_	296,408	8,673	(86,189)	(8,673)	86,189	10,096		_	1,423	
b. Transitional ACA Reinsurance Program												
1. Amounts recoverable for claims paid	49,070	_	74,889	_	(25,819)	_	25,819	_	C	_	_	
2. Amounts recoverable for claims unpaid (contra liability)	_	_	_	_	_	_	_	_	D	_	_	
3. Amounts receivable relating to uninsured plans	_	_	_	_	_	_	_	_	Е	_	_	
Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	_	_	_	_	_	_	_	_	F	_	_	
5. Ceded reinsurance premiums payable	_	_	_	_	_	_	_	_	G	_	_	
Liability for amounts held under uninsured plans	_	_	_	_	_	_	_	_	Н	_	_	
7. Subtotal ACA Transitional Reinsurance Program	49,070	_	74,889	_	(25,819)	_	25,819	_		_	_	
c. Temporary ACA Risk Corridors Program												
1. Accrued retrospective premium	1,253	_	_	_	1,253	_	(1,253)	_	I	_	_	
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	J	_	_	
3. Subtotal ACA Risk Corridors Program	1,253	_	_	_	1,253	_	(1,253)	_		_	_	
d. Total for ACA Risk Sharing Provisions	\$ 260,542	s –	\$ 371,297	\$ 8,673	\$ (110,755)	\$ (8,673)	\$ 110,755	\$ 10,096		s —	\$ 1,423	

Explanations of Adjustments

A. Due to updates to the data available to the Company to calculate the risk adjustment.

4. Effect of ACA Risk Corridors on change in reserves for rate credits

B. Due to updates to the data available to the Company to calculate the risk adjustment.

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AETNA HEALTH OF IOWA INC

NOTES TO FINANCIAL STATEMENTS

υ.	
E.	
F.	
G.	
H.	
I.	Due to updated data available to the Company to calculate the risk corridor payables. Also includes the impact of the adjustments to the reinsurance recoveries and risk adjustments.
J.	

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Risk Corridors Program Year	Acci	rued During on Busine				eceived or urrent Year				Differ	ences		A	djustment	justments				nces as ng Date	
	Before December 31 of the Prior Year			Written Before December 31 of the Prior Year			Accru	r Year ed Less ments	Prior Year Accrued Less Payments (Col 2 - 4)		Prior Year Balances	To Prior Year Balances			Cumula Balance Prior Yea 1 - 3 +	from rs (Col	Balan Prior Y	aulative ace from (ears (Col 4 + 8)		
		1		2		3		4		5	6		7	8			9			10
	Re	eceivable	(F	ayable)	Re	ceivable	(Pa	yable)	Rece	eivable	(Payable)	R	eceivable	(Payal	ole)	Ref	Receiv	able	(Pa	yable)
a. 2014																				
Accrued retrospective premium	\$	1,253	\$	_	\$	_	\$	_	\$	1,253	\$	\$	(1,253)	\$	_	A	\$	_	\$	_
2. Reserve for rate credits or policy experience rating refunds		_		_		_		_		_	_		_		_	В		_		_
b. 2015																				
Accrued retrospective premium		_		_		_		_		_	_		_		_	C		_		_
2. Reserve for rate credits or policy experience rating refunds		_		_		_		_		_	_		_		_	D		_		_
c. 2016																				
Accrued retrospective premium		_		_		_		_		_	_	-	_		_	E		_		_
2. Reserve for rate credits or policy experience rating refunds		_		_		_		_		_	_		_		_	F		_		_
d. Total for Risk Corridors	\$	1,253	\$	_	\$	_	\$	_	\$	1,253	\$	\$	(1,253)	\$	_		\$	_	\$	_

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

C. Due to additional claims run-out after the December 31, 2016 period.

Explanations of Adjustments

A. Due to updated data available to the Company to calculate the risk corridor payables. Also includes the impact of the adjustments to the reinsurance recoveries and risk adjustments.

В.

C. D.

E. F.

(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	4 Asset Balance (Gross of Non- admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4-5)
a.	2014	\$ 2,706,455	\$ 2,253,037	\$ 453,418	\$ —	\$ —	\$ —
b.	2015	705,180	705,180	_			_
c.	2016	1,370,536	1,370,536	_	_	_	_
d.	Total $(a + b + c)$	\$ 4,782,171	\$ 4,328,753	\$ 453,418	\$ —	\$ —	\$ —

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 Claims Adjustment Expense

The following table shows the components of the change in claims unpaid, unpaid claims adjustment expense and aggregate health claim reserves for the years ended December 31, 2019 and 2018.

	 2019	2018
Balance, January 1	\$ 6,737,768 \$	33,542,768
Health care receivable	 (68,715)	(348,307)
Balance, January 1, net of health care receivable	6,669,053	33,194,461
Incurred related to:		
Current year	5,639,886	24,897,716
Prior years	 (2,881,660)	(5,682,541)
Total incurred	2,758,226	19,215,175
Paid related to:		
Current year	5,253,537	21,904,213
Prior years	 580,657	23,836,369
Total paid	5,834,194	45,740,582
Balance, December 31, net of health care receivable	3,593,085	6,669,053
Health care receivable	 34,818	68,715
Balance, December 31	\$ 3,627,903 \$	6,737,768

- A. Reserves as of December 31, 2018 were \$6,737,768. As of December 31, 2019, \$580,657 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$3,275,451 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$2,881,660 favorable prior-year development since December 31, 2018 to December 31, 2019. 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 \$0 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 claims and claim adjustment expenses.

26. Intercompany Pooling Arrangements

The Company did not have any intercompany pooling arrangements at December 31, 2019 or 2018.

27. Structured Settlements

The Company did not have any structured settlements at December 31, 2019 or 2018.

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

The Company receives pharmaceutical rebates through an agreement with AHM. AHM has contractual agreements with pharmaceutical companies for rebates, which cover the Company's membership as well as the membership of other Aetna affiliates. The Company receives those rebates from AHM that relate to the Company's membership. The Company estimates pharmaceutical rebate receivables based upon the historical payment trends, actual utilization and other variables. Actual rebates collected are applied to the collection periods below, using a first in first out methodology. At December 31, 2019 and 2018, the Company had pharmaceutical rebate receivables of \$30,141 and \$68,715, respectively (refer to the Company's accounting practices related to pharmaceutical rebate receivables in Note 1).

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

ANNUAL STATEMENT FOR THE YEAR 2019 OF THE AETNA HEALTH OF IOWA INC

NOTES TO FINANCIAL STATEMENTS

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing		Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
12/31/2019	\$ 36,071	\$ —	\$ 26,907	1	\$	\$ —
09/30/2019	66,085	60,177	60,177		_	_
06/30/2019	87,942	75,303	75,303		_	_
03/31/2019	93,178	65,385	65,385		_	_
12/31/2018	224,300	247,843	226,866		_	_
09/30/2018	283,878	298,244	298,244		_	_
06/30/2018	269,934	271,733	271,733		_	_
03/31/2018	248,774	355,179	355,179			_
12/31/2017	929,718	2,302,807	2,302,807			
09/30/2017	596,264	1,269,143	1,269,143			
06/30/2017	587,531	1,328,259	1,328,259			
03/31/2017	952,540	932,918	932,918			

B. Risk sharing receivables

The Company did not have any admitted risk sharing receivables at December 31, 2019 or 2018.

29. Participating Policies

The Company did not have any participating policies at December 31, 2019 or 2018.

30. Premium Deficiency Reserves

December 31, 2019

Liability carried for premium deficiency reserves \$80,450
 Date of the most recent evaluation of this liability 12/31/2019
 Was anticipated investment income utilized in the calculation? Yes

31. Anticipated Salvage and Subrogation

The Company did not reduce its liability for unpaid claims/losses by any estimated anticipated salvage and subrogation at December 31, 2019 or 2018 as the Company records salvage and subrogation on a paid basis when cash is received.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES GENERAL

1.1		stem consisting of two or more affiliated persons, one or more of which	Yes [X] No []
1.2	If yes, did the reporting entity register and file with its domiciliary State such regulatory official of the state of domicile of the principal insurer is providing disclosure substantially similar to the standards adopted by the tist Model Insurance Holding Company System Regulatory Act and mosubject to standards and disclosure requirements substantially similar	n the Holding Company System, a registration statement the National Association of Insurance Commissioners (NAIC) in	(] No [] N/A []
1.3	State Regulating?		Iowa
1.4	Is the reporting entity publicly traded or a member of a publicly traded	group?	Yes [X] No []
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code	issued by the SEC for the entity/group.	0000064803
2.1	Has any change been made during the year of this statement in the chreporting entity?	narter, by-laws, articles of incorporation, or deed of settlement of the	Yes [] No [X]
2.2	If yes, date of change:		
3.1	State as of what date the latest financial examination of the reporting e	entity was made or is being made	12/31/2015
3.2	State the as of date that the latest financial examination report became entity. This date should be the date of the examined balance sheet and	e available from either the state of domicile or the reporting d not the date the report was completed or released.	12/31/2015
3.3	State as of what date the latest financial examination report became a domicile or the reporting entity. This is the release date or completion examination (balance sheet date).	date of the examination report and not the date of the	07/06/2017
3.4	By what department or departments? lowa Insurance Division		
3.5	Have all financial statement adjustments within the latest financial exa statement filed with Departments?	mination report been accounted for in a subsequent financial] No [] N/A [X]
3.6	Have all of the recommendations within the latest financial examinatio	n report been complied with?Yes [] No [] N/A [X]
4.1	a substantial part (more than 20 percent of any major line of business 4.11 sale 4.12 rene During the period covered by this statement, did any sales/service org	yees of the reporting entity), receive credit or commissions for or control measured on direct premiums) of: es of new business?ewals?ewals?ear of measured in whole or in part by the reporting entity or an affiliate,	Yes [] No [X] Yes [] No [X]
	receive credit or commissions for or control a substantial part (more the premiums) of: 4.21 sale	an 20 percent of any major line of business measured on direct es of new business?	Yes [] No [X]
	4.22 rene	ewals?	Yes [] No [X]
5.1	Has the reporting entity been a party to a merger or consolidation during lf yes, complete and file the merger history data file with the NAIC.	ng the period covered by this statement?	Yes [] No [X]
5.2	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) for any entity that has	
	1 Name of Entity	2 3 NAIC Company Code State of Domicile	
6.1		egistrations (including corporate registration, if applicable) suspended or	Yes [] No [X]
6.2	If yes, give full information:		
7.1	Does any foreign (non-United States) person or entity directly or indire	ctly control 10% or more of the reporting entity?	Yes [] No [X]
7.2	If yes, 7.21 State the percentage of foreign control;		0.0 %
	1 Nationality	2 Type of Entity	
	- Tournainty	. , , , , , , , , , , , , , , , , , , ,	

8.1 8.2	Is the company a subsidiary of a bank holding company regulated by the Feder If response to 8.1 is yes, please identify the name of the bank holding company	<i>'</i> .				Yes []	No [X]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities firms?	d state of the main office) of any affiliates r the Comptroller of the Currency (OCC), the	egulated ne Feder	by a fed	deral	Yes []	No [X]
	1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC			
	Allillate Name	Location (City, State)	FRD	000	FDIC	SEC			
9.	What is the name and address of the independent certified public accountant o	r accounting firm retained to conduct the a	annual au	dit?			_		
	Ernst & Young LLP; 200 Clarendon Street; Boston, MA 02116								
10.1	Has the insurer been granted any exemptions to the prohibited non-audit servic requirements as allowed in Section 7H of the Annual Financial Reporting Mode law or regulation?	Regulation (Model Audit Rule), or substa	intially sir	nilar sta	te	Yes []	No [X]
10.2	If the response to 10.1 is yes, provide information related to this exemption:								
10.3 10.4	1 71	of the Annual Financial Reporting Model e law or regulation?	Regulation	on as		Yes []	No [X]
10.5	Has the reporting entity established an Audit Committee in compliance with the	domiciliary state insurance laws?				1 No f	1	N/A [-
10.6		,			C3 [X) NO [1	IV/A [
11.	What is the name, address and affiliation (officer/employee of the reporting entifirm) of the individual providing the statement of actuarial opinion/certification? Jeffrey J. Drzazgowski, F.S.A., M.A.A.A.; Aetna Inc; 151 Farmington Avenue; H.	ty or actuary/consultant associated with ar	n actuaria	al consu	Iting				
12.1	, , ,					Yes []	No [X]
	12.11 Name of real estate ho	9 . ,				0			
		lvedrrying value							(
12.2	If, yes provide explanation:	rrying value			Φ)			
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONL								
13.1		or the United States trustees of the reporting	• .						
13.2	Does this statement contain all business transacted for the reporting entity thro	ugh its United States Branch on risks whe	rever loc	ated?		Yes []	No []
13.3	Have there been any changes made to any of the trust indentures during the year					Yes [-	No []
13.4 14.1	If answer to (13.3) is yes, has the domiciliary or entry state approved the chang Are the senior officers (principal executive officer, principal financial officer, prin] No []	N/A [
14.1	similar functions) of the reporting entity subject to a code of ethics, which include a. Honest and ethical conduct, including the ethical handling of actual or appare relationships; b. Full, fair, accurate, timely and understandable disclosure in the periodic repo	les the following standards?ent conflicts of interest between personal a	and profe			Yes [X]	No []
	c. Compliance with applicable governmental laws, rules and regulations;d. The prompt internal reporting of violations to an appropriate person or person	as identified in the code; and							
	e. Accountability for adherence to the code.	is identified in the code, and							
14.11	If the response to 14.1 is No, please explain:								
14.2	Has the code of ethics for senior managers been amended?					Yes [X]	No []
14.21	If the response to 14.2 is yes, provide information related to amendment(s). Added a statement at the end of the Privacy and Security of Personal Information Added additional examples of what may present an actual or potential conflict of sale, exchange of alcohol on CVS premises, or at any time when representing approved business meal or legitimate business event. Updated content related policy and procedure governing MG&E. Clarified that antitrust laws are designed Added that our Medicare FWA program also includes processes to manage ide example of FWA activities to include reviewing for abnormal Part C provider clare.	of interest. Clarified that the unauthorized CVS is strictly prohibited except when assil to Meals, Gifts, and Entertainment to alight to protect competition by prohibiting mountified issues through corrective actions.	use, possociated was with the constant of the	session, vith an e latest tion as v dditional	vell.	-		•	
14.3 14.31	Have any provisions of the code of ethics been waived for any of the specified of the response to 14.3 is yes, provide the nature of any waiver(s).	officers?				Yes []	No [X]

	Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming						
	1 American	er of Credit and describe the circumstances in which the Letter of Credit i	s triggered.	4			
	Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name Circum	stances That Can Trigger the Letter of Credit	Amount			
10	la 4haahaaa	BOARD OF DIREC		_			
16.	thereof?	or sale of all investments of the reporting entity passed upon either by the		Yes [X] No []			
17.	thereof?	ing entity keep a complete permanent record of the proceedings of its boo		Yes [X] No []			
18.		g entity an established procedure for disclosure to its board of directors officers, directors, trustees or responsible employees that is in conflict w					
		FINANCIAL					
19.		ent been prepared using a basis of accounting other than Statutory Accouciples)?		V 2 0 1 1 00 1 1 20 V			
20.1	Total amount loa	aned during the year (inclusive of Separate Accounts, exclusive of policy	loans): 20.11 To directors or other officers	\$			
			20.12 To stockholders not officers				
			20.13 Trustees, supreme or grand (Fraternal Only)	\$			
20.2		loans outstanding at the end of year (inclusive of Separate Accounts, exc					
	policy loans):		20.21 To directors or other officers 20.22 To stockholders not officers				
			20 23 Truetage supreme or grand				
			(Fraternal Only)	\$			
21.1	Were any assets obligation being	s reported in this statement subject to a contractual obligation to transfer reported in the statement?	to another party without the liability for such	Yes [] No [X]			
21.2		amount thereof at December 31 of the current year:	21.21 Rented from others	\$			
			21.22 Borrowed from others	\$			
			21.23 Leased from others				
22.1	Does this staten	nent include payments for assessments as described in the Annual State	21.24 Otherment Instructions other than guaranty fund or				
	guaranty associ	ation assessments?		Yes [X] No []			
22.2	If answer is yes:		22.21 Amount paid as losses or risk ac 22.22 Amount paid as expenses	ijustment \$			
			22.22 Amount paid as expenses				
23.1	Does the reporti	ing entity report any amounts due from parent, subsidiaries or affiliates or	Page 2 of this statement?	Yes [] No [X]			
23.2	If yes, indicate a	ny amounts receivable from parent included in the Page 2 amount:		\$			
		INVESTMEN	ΙΤ				
24.01		cks, bonds and other securities owned December 31 of current year, ove ession of the reporting entity on said date? (other than securities lending p					
24.02		nd complete information relating thereto					
24.03	whether collater	ding programs, provide a description of the program including value for correct is carried on or off-balance sheet. (an alternative is to reference Note	17 where this information is also provided)				
24.04	Does the Comp Instructions?	any's security lending program meet the requirements for a conforming p	rogram as outlined in the Risk-Based Capital	Yes [] No [] N/A [X			
4.05	If answer to 24.0	04 is yes, report amount of collateral for conforming programs.		\$			
4.06	If answer to 24.0	04 is no, report amount of collateral for other programs.		\$			
4.07		rities lending program require 102% (domestic securities) and 105% (forentract?		Yes [] No [] N/A [X			
24.08	Does the reporti	ing entity non-admit when the collateral received from the counterparty fa	Ils below 100%?	Yes [] No [] N/A [X			
24.09		ing entity or the reporting entity 's securities lending agent utilize the Mast es lending?		Yes [] No [] N/A [X			

24.10	For the reporting entity's security lending program state the an	nount of the following as December 31 of the current year:					
	24 101 Total fair value of reinvested colleteral	aggets reported on Schodule DI. Darte 1 and 2	c				٥
		assets reported on Schedule DL, Parts 1 and 2.					
		reinvested collateral assets reported on Schedule DL, Parts 1 and 2					
25.1		entity owned at December 31 of the current year not exclusively under the	.\$				0
20.1	control of the reporting entity, or has the reporting entity sold o	r transferred any assets subject to a put option contract that is currently in 1.03).	Yes	[]	No [Х]
25.2	If yes, state the amount thereof at December 31 of the current	VAST' OF 04 Cubicat to requirebone agreements	æ				٨
25.2	if yes, state the amount thereof at December 31 of the current	year: 25.21 Subject to repurchase agreements					
		25.23 Subject to dollar repurchase agreements	\$				0
		25.24 Subject to reverse dollar repurchase agreements	\$				0
		25.25 Placed under option agreements	⊅				0
		excluding FHLB Capital Stock	•				0
		25.27 FHLB Capital Stock	Ψ				٥٥
		25.28 On deposit with states					
		25.29 On deposit with other regulatory bodies					
		25.30 Pledged as collateral - excluding collateral pledged					
		an FHLB	\$				0
		25.31 Pledged as collateral to FHLB - including assets					
		backing funding agreements	\$				0
		25.32 Other	\$				0
25.3	For category (25.26) provide the following:						
	1	2		:	3		
	Nature of Restriction	Description		Amo	ount		_
26.1 26.2		red on Schedule DB?					
INES 2	6.3 through 26.5: FOR LIFE/FRATERNAL REPORTING ENTI	FIES ONLY:					
26.3	Does the reporting entity utilize derivatives to hedge variable a	nnuity guarantees subject to fluctuations as a result of interest rate sensitivity?	Yes	[]	No [Х]
26.4	If the response to 26.3 is YES, does the reporting entity utilize:						
	26.41 Special accounting provision of SSAP No. 108					No [
		6.42 Permitted accounting practice		•	•	No [-
	2	6.43 Other accounting guidance	Yes	[]	No []
26.5		ounting provisions of SSAP No. 108, the reporting entity attests to the	Yes	1	1	No [1
	 The reporting entity has obtained explicit approval fro Hedging strategy subject to the special accounting pro Actuarial certification has been obtained which indicates reserves and provides the impact of the hedging strates. 	m the domiciliary state. Divisions is consistent with the requirements of VM-21. The stat the hedging strategy is incorporated within the establishment of VM-21 egy within the Actuarial Guideline Conditional Tail Expectation Amount.					
		h indicates that the hedging strategy meets the definition of a Clearly Defined efined Hedging Strategy is the hedging strategy being used by the company in					
27.1	Were any preferred stocks or bonds owned as of December 3 issuer, convertible into equity?	1 of the current year mandatorily convertible into equity, or, at the option of the	Yes	[]	No [Х]
27.2	If yes, state the amount thereof at December 31 of the current	year	\$				0
28.	offices, vaults or safety deposit boxes, were all stocks, bonds custodial agreement with a qualified bank or trust company in	l estate, mortgage loans and investments held physically in the reporting entity's and other securities, owned throughout the current year held pursuant to a accordance with Section 1, III - General Examination Considerations, F. greements of the NAIC Financial Condition Examiners Handbook?	Yes	[X	[]	No []
28.01	For agreements that comply with the requirements of the NAIC	Financial Condition Examiners Handbook, complete the following:					
	1	2					7
	State Street Bank and Trust Company	Custodian's Address tate Street Financial Center; One Lincoln Street; Boston, MA 02111-2900					

1 Name	(s)	2 Location(s		3 Complete Explanatio		
Have there been any changes If yes, give full and complete	s, including name changes, in the information relating thereto:	custodian(s) identified ir	28.01 during the current year	ar?	Yes []	No [
1 Old Custodia	n N	2 lew Custodian	3 Date of Change	4 Reason		
make investment decisions of	entify all investment advisors, inventible to the reporting entity. For the investment accounts"; "har	r assets that are managed	ed internally by employees of			
Na	1 me of Firm or Individual	2 Affilia				
,	vestment Officer					
total assets under m	unaffiliated with the reporting entit anagement aggregate to more tha listed in the table for 28.05 with ar	in 50% of the reporting e	entity's invested assets?		Yes []	No
1	2		3	4	Inve Mana	5 estme
Central Registration Depository Number	Name of Firm or Indiv	ridual	Legal Entity Identifier (LEI	Registered With	Agre	eeme A) Fil
Kevin	J. Casey			. Not registered		
	e any diversified mutual funds repo) in the Investment Company Act o schedule:				Yes []	No
1		2		E	3 Book/Adjust	ed
CUSIP # 29.2999 - Total		Name of Mutual	Fund		Carrying Val	
	the table above, complete the following	lowing schedule:				
	1		2	3	4	

GENERAL INTERROGATORIES

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

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
30.1 Bonds	36,201,991	37,315,083	1,113,092
30.2 Preferred stocks	0	0	0
30.3 Totals	36,201,991	37,315,083	1,113,092

30.4	Describe the sources or methods utilized in determining the fair values: Fair value of long term bonds and preferred stocks are determined based on quoted market prices when available, fair values using valuation methodologies based on available and observable market information, or by using matrix pricing. If quoted market prices are not available, we determine fair value using broker quoted or an internal analysis of each investment's financial performance and cash flow projections. Short-term investments are carried at amortized cost which approximated fair value. The carrying value of cash equivalents approximated fair value.				
31.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes []	No [Х]
31.2	If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes []	No []
31.3	If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:				
32.1 32.2		Yes [[X]	No []
33.	By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. Has the reporting entity self-designated 5GI securities?	Vac I	. 1	No. I	Y 1
34.	By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. Has the reporting entity self-designated PLGI securities?			No [
35.	By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?	Yes	. 1	No [Х]
	OTHER				
36.1	Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?	\$			386
36.2	List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations service organizations and statistical or rating bureaus during the period covered by this statement.	; ,			
	1 2 Name Amount Paid Council for Affordable Quality Healthcare				

Council for Affordable Quality Healthcare	186
,	

37.1	Amount of payments for legal expenses, if any?		\$	4,786
37.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment during the period covered by this statement.	nents for legal expenses		
	1 Name	2 Amount Paid		
38.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or department.	ents of government, if a	ny?\$	0
38.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment connection with matters before legislative bodies, officers or departments of government during the period co			
	1 Name	2 Amount Paid		

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1 1.2	Does the reporting entity have any direct Medicare Supplement Insurance in for If yes, indicate premium earned on U.S. business only.] 0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance 1.31 Reason for excluding				0
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien	not included in Item (1.2) above	\$		0
1.5	Indicate total incurred claims on all Medicare Supplement Insurance.				0
1.6	Individual policies:	Most current three years:	.Ψ		
1.0	munidual policies.	1.61 Total premium earned	c		٥
		1.62 Total incurred claims	.\$		0
		1.63 Number of covered lives			0
		All years prior to most current three years:			
		1.64 Total premium earned			
		1.65 Total incurred claims	.\$		0
		1.66 Number of covered lives			
1.7	Group policies:	Most current three years:			
		1.71 Total premium earned	.\$		0
		1.72 Total incurred claims			
		1.73 Number of covered lives			0
		All years prior to most current three years:			
		1.74 Total premium earned			0
		1.75 Total incurred claims			
		1.76 Number of covered lives			
		1.76 Number of covered lives			0
2.	Health Test:				
		1 2			
	2.1 Premium Numerator	5 050 510 21 105 777			
	2.2 Premium Denominator				
	2.3 Premium Ratio (2.1/2.2)				
	2.4 Reserve Numerator				
	2.5 Reserve Denominator	9,663,71613,030,239			
	2.6 Reserve Ratio (2.4/2.5)	1.0001.000			
3.1	Has the reporting entity received any endowment or gift from contracting hospits returned when, as and if the earnings of the reporting entity permits?	als, physicians, dentists, or others that is agreed will be	Yes [] No [X]
3.2	If yes, give particulars:				
4.1	Have copies of all agreements stating the period and nature of hospitals', physic dependents been filed with the appropriate regulatory agency?	cians', and dentists' care offered to subscribers and	Yes [X] No [1
4.2] No [
4.2	If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do the		_		
5.1	Does the reporting entity have stop-loss reinsurance?		Yes [] No [X]
5.2	If no, explain: The Company is of sufficient size to absorb large losses and does not require relarge claim.	einsurance to protect against the occasional			
- ^	Mandanian antaland data (and to to all to to	F.04.0	c		^
5.3	Maximum retained risk (see instructions)	5.31 Comprehensive Medical			
		5.32 Medical Only	\$		0
		5.33 Medicare Supplement	\$		0
		5.34 Dental & Vision			
		5.35 Other Limited Benefit Plan			
		5.36 Other	.\$		0
6.	Describe arrangement which the reporting entity may have to protect subscriber hold harmless provisions, conversion privileges with other carriers, agreements agreements:	with providers to continue rendering services, and any other			
	Provider contracts contain hold harmless and continuity of coverage provisions.				
7.1	Does the reporting entity set up its claim liability for provider services on a servi-	ce date basis?	Yes [X] No []
7.2	If no, give details				
8.	Provide the following information regarding participating providers:	8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year			
0.1	December condition on the bound have been explicitly to the conditions of the condit				
9.1	Does the reporting entity have business subject to premium rate guarantees?		169 [ινυ [λ	1
9.2	If yes, direct premium earned:	9.21 Business with rate guarantees between 15-36 months. 9.22 Business with rate guarantees over 36 months			

10.1	Does the reporting entity have Incentive Pool, Withh	old or Bonus Ar	rangements in its p	provider contracts?			Yes [X] No []
10.2	If yes:		10 10	0.22 Amount actua 0.23 Maximum am	lly paid for year bo ount payable withh	sesoldshholds	\$ \$	9	94,727 0
11.1	Is the reporting entity organized as:			11.13 An Individ	ll Group/Staff Mode dual Practice Asso Model (combination		Yes [] No [] No [] No [Χ]
11.2 11.3 11.4 11.5	Is the reporting entity subject to Statutory Minimum 0 If yes, show the name of the state requiring such min If yes, show the amount required. Is this amount included as part of a contingency rese	nimum capital ar	nd surplus.				\$		lowa 71,646
11.6	If the amount is calculated, show the calculation See Notes to Financial Statement - Note 21, Other I	tems, C., Other	Disclosures.						
12.	List service areas in which reporting entity is license	d to operate:							
				e Area					
13.1	Do you act as a custodian for health savings accoun	ts?					Yes [] No [Х]
13.2	If yes, please provide the amount of custodial funds	held as of the re	porting date				\$		0
13.3	Do you act as an administrator for health savings ac	counts?					Yes [] No [Х]
13.4	If yes, please provide the balance of funds administe	ered as of the re	porting date				\$		0
14.1 14.2	Are any of the captive affiliates reported on Schedule If the answer to 14.1 is yes, please provide the follow		orized reinsurers?			Yes [] No [] N/A	(X]
	1	2	3	4		Supporting Reserv			
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other		
15.	Provide the following for individual ordinary life insur ceded):	ance* policies (l	J.S. business only	15.1 🗅	Direct Premium Wri	tten			
						is Lives			
	Towns (c.b. albert C. C. V.		nary Life Insurance		"\				
	Term(whether full und Whole Life (whether f								
	Variable Life (with or Universal Life (with or		, ,						
	Variable Universal Life			antee)					
16.	Is the reporting entity licensed or chartered, registered	ed, qualified, elig	lible or writing busi	ness in at least two	o states?		Yes [] N	lo [X]	
16.1	If no, does the reporting entity assume reinsurance to domicile of the reporting entity?						Yes [] N	lo [X]	

FIVE-YEAR HISTORICAL DATA

	114	1	2	3	4	5
		2019	2018	2017	2016	2015
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)					
2.	Total liabilities (Page 3, Line 24)				58,083,134	
3.	Statutory minimum capital and surplus requirement .				1,000,000	
4.	Total capital and surplus (Page 3, Line 33)	42,633,508	39,873,513	37,492,972	29,413,170	39, 135, 932
	Income Statement (Page 4)					
5.	Total revenues (Line 8)					
6.	Total medical and hospital expenses (Line 18)					
7.	Claims adjustment expenses (Line 20)					
8.	Total administrative expenses (Line 21)				39,424,560	
9.	Net underwriting gain (loss) (Line 24)					
10.	Net investment gain (loss) (Line 27)					
11.	Total other income (Lines 28 plus 29)					
12.	Net income or (loss) (Line 32)	2,782,400	2,004,575	8,346,000	(7,295,647)	(2,142,276
	Cash Flow (Page 6)					
13.	Net cash from operations (Line 11)	(344,887)	(29,502,607)	28,260,770	7,359,014	16,319,120
	Risk-Based Capital Analysis					
14.	Total adjusted capital	42,633,508	39,873,513	37,492,972	29,413,170	39 , 135 , 932
15.	Authorized control level risk-based capital	785,823	1, 155,358	6,919,526	8,541,079	10,500,281
	Enrollment (Exhibit 1)					
16.	Total members at end of period (Column 5, Line 7)	437	4,025	37,863	50 , 127	68,848
17.	Total members months (Column 6, Line 7)	11,835	67,758	527,788	686,635	902,114
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)	46.8	58.6	79.0	87.7	86.0
20.	Cost containment expenses		1.2		1.5	
21.	Other claims adjustment expenses			0.2	0.3	0.4
22.	Total underwriting deductions (Line 23)				105.9	
23.	Total underwriting gain (loss) (Line 24)	33.4	10.1	4.2	(5.9)	(1.0
	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 13, Col. 5)	3,805,195	27,453,703	18,923,435	36,550,735	30,353,063
25.	Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	6,618,140	32,787,937	28,930,099	34,484,946	27,104,012
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)	0	0	0	0	0
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)					
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	0	0	0	0	0
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)					
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31					
33.	Total investment in parent included in Lines 26 to 31 above.	0	0	0		
	If a party to a marger, have the two most recent years		-	-		1 0

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

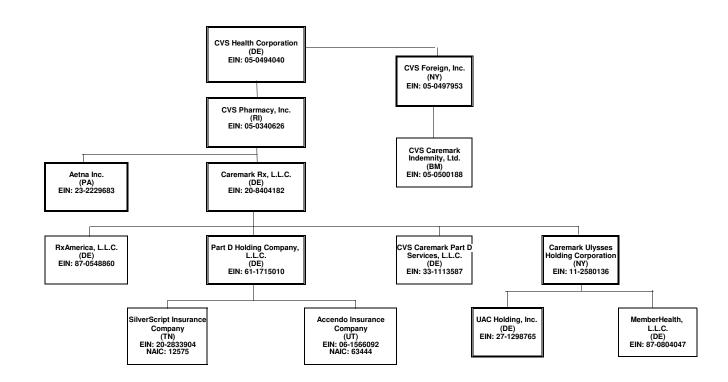
Allocated by States and Territories										
		1	2	3	4	Direct Bus 5	siness Only 6	7	8	9
				ა	4	5 Federal		,	°	9
						Employees				
		A . C				Health	Life & Annuity	_ ,,		
		Active Status	Accident & Health	Medicare	Medicaid	Benefits Plan	Premiums & Other	Property/ Casualty	Total Columns 2	Deposit-Type
	States, etc.	(a)	Premiums	Title XVIII	Title XIX	Premiums	Considerations	Premiums	Through 7	Contracts
1.	Alabama AL	N.	0	0	0	0	0	0	0	0
2.	Alaska AK	N	0	0	0	0	0	0	0	0
3.	Arizona AZ	N	0	0	0	0	0	0	0	0
4.	Arkansas AR	N	0	0	0	0	0	0	0	0
5.	California CA	N	0	0	0	0	0	0	0	0
6. 7.	Colorado CO	NN	U				J	U		U
8.	Delaware DE	NN		0	 0	 0	n	n		
9.	District of Columbia DC	N	0	0	0	0	0	0	0	0
10.	Florida FL	N	0	0	0	0	0	0	0	0
11.	Georgia GA	N	0	0	0	0	0	0	0	0
12.	Hawaii HI	N.	0	0	0	0	0	0	0	0
13.	Idaho ID	N	0	0	0	0	0	0	0	0
14.	Illinois IL	NN.	0	0	0 	0	0	0	0	0
15. 16.	Indiana IN Iowa IA	IV	5,959,512		0	U	n	0	5,959,512	U
17.	Kansas KS	N		0	0	0	0	0	0,000,012	0
18.	Kentucky KY	N.	0	0	0	0	0	0	0	0
19.	Louisiana LA	N	0	0	0	0	0	0	0	0
20.	Maine ME	N	0	0	0	0	0	0	0	0
21.	Maryland MD	N	0	0	0	0	0	<u> </u>	0	0
22. 23.	Massachusetts MA Michigan MI	N	0	0	0	0	ļ	0	0	0
23. 24.	Michigan MI Minnesota MN	NN	u		 n		u	U		0
25.	Mississippi MS	N	0	0	0	0	0	n	0	0
26.	Missouri MO	N		0	0	0	0	0	0	0
27.	Montana MT	N	0	0	0	0	0	0	0	0
28.	Nebraska NE	N	0	0	0	0	0	0	0	0
29.	Nevada NV	N	0	0	0	0	0	0	0	0
30.	New Hampshire NH	N	0	0	0	0	0	0	0	0
31. 32.	New Jersey NJ New Mexico NM	NN	U				J	U		U
33.	New York NY	N	0	0		0	0	0	0	0
34.	North Carolina NC	N.	0	0	0	0	0	0	0	0
35.	North Dakota ND	N	0	0	0	0	0	0	0	0
36.	Ohio OH	N	0	0	0	0	0	0	0	0
37.	Oklahoma OK	N	0	0	0	0	0	0	0	0
38.	Oregon OR	N	0	0	0	0	0	0	0	0
39. 40.	Pennsylvania PA Rhode Island RI	NN	0	0 0	0 0	0		0		
41.	Rhode Island RI South Carolina SC	N	0	0	 0	 0		n	0	0 n
42.	South Dakota SD	N	0	0	0	0	0	0	0	0
43.	Tennessee TN	N	0	0	0	0	0	0	0	0
44.	Texas TX	N	0	0	0	0	0	0	0	0
45.	Utah UT	N	0	0	0	0	0	0	0	0
46.	Vermont VT	N	0	0	0	0	0	0	0	0
47. 48.	Virginia VA	NNN.	0	0	0 0	0	0	0	0	0 0
49.	Washington WA West Virginia WV	NN.	0	0	0 0	0	0	0 0	0	U
50.	Wisconsin WI	N.	0	0	0	0	0	0	0	0
51.	Wyoming WY	N	0	0	0	0	0	0	0	0
52.	American Samoa AS	N	0	0	0	0	0	0	0	0
53.	Guam GU	N	0	0	0	0	0	0	0	0
54.	Puerto Rico PR	N	0	0	0	0	0	0	0	0
55. 56.	U.S. Virgin Islands VI	N	0	0	0	0	ļ0	0	0	0
50.	Northern Mariana Islands MP	N.	0	0	0	0	0	0	0	0
57.	Canada CAN	N	0	0	0	0	0	0	0	0
58.	Aggregate other			_	•	_		_		_
59.	alien OT Subtotal	XXX	5,959,512	0	0 0	0	0 0	0	5,959,512	0
60.	Reporting entity	··XXX			U		ļ			U
55.	contributions for Employee	:								
	Benefit Plans	XXX	0	0	0	0	0	0	0	0
61.	Total (Direct Business)	XXX	5,959,512	0	0	0	0	0	5,959,512	0
58001.	DETAILS OF WRITE-INS	xxx								
58001.		XXX					İ			
58003.		XXX					I			
	Summary of remaining									
	write-ins for Line 58 from	1001	0	0	0	0	0	0	0	0
58999	overflow page Totals (Lines 58001 through	XXX	U	U		0	ļ	0	0	0
	58003 plus 58998)(Line 58									
<u></u>	above)	XXX	0	0	0	0	0	0	0	0
(a) Active	a) Active Status Counts:									

⁽a) Active Status Counts: L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG...

⁰

⁽b) Explanation of basis of allocation by states, premiums by state, etc. lowa is a single state company therefore all premiums are lowa.

R - Registered - Non-domiciled RRGs......0
Q - Qualified - Qualified or accredited reinsurer.....0



This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers.

The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.

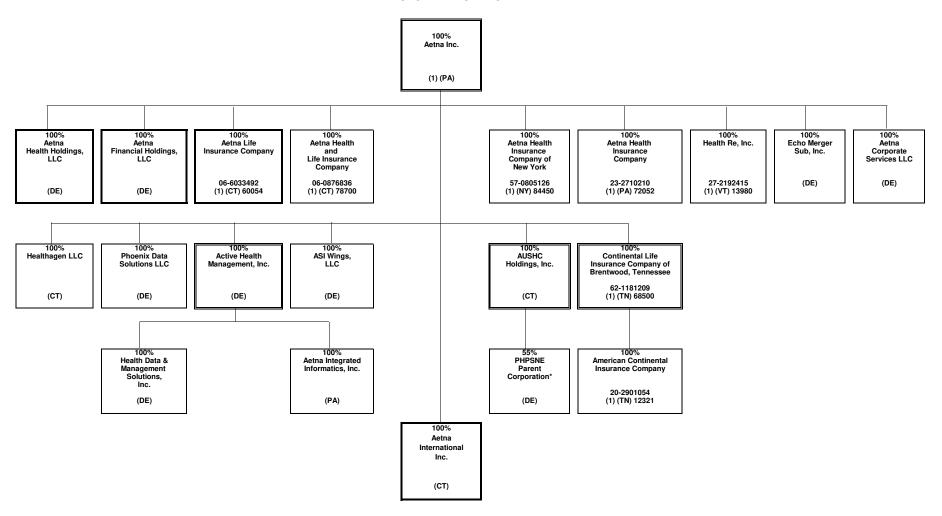
⁽¹⁾ Insurers/HMO's

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

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

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

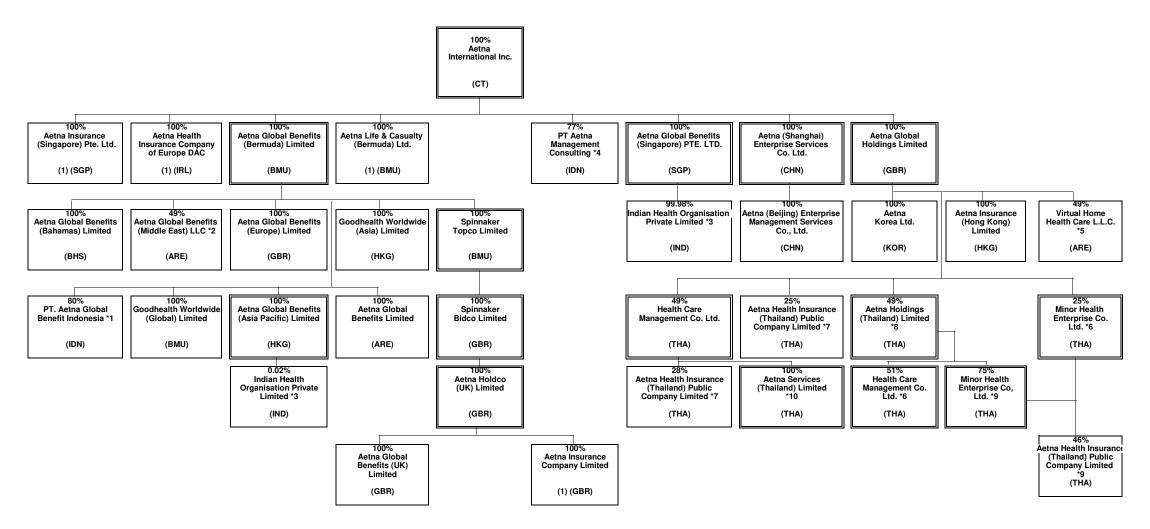
PART 1 - ORGANIZATIONAL CHART



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

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

PART 1 - ORGANIZATIONAL CHART



^{*1} PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.

¹ P1. Actna Global Benefits (Middle East) LLC (is also 51% owned by Sunatsyan Hival, Actna's Nominee.

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

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

4 PT Asuransi Actna Asia is also 23% owned by PT Asuransi Central Asia.

5 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Actna's Nominee

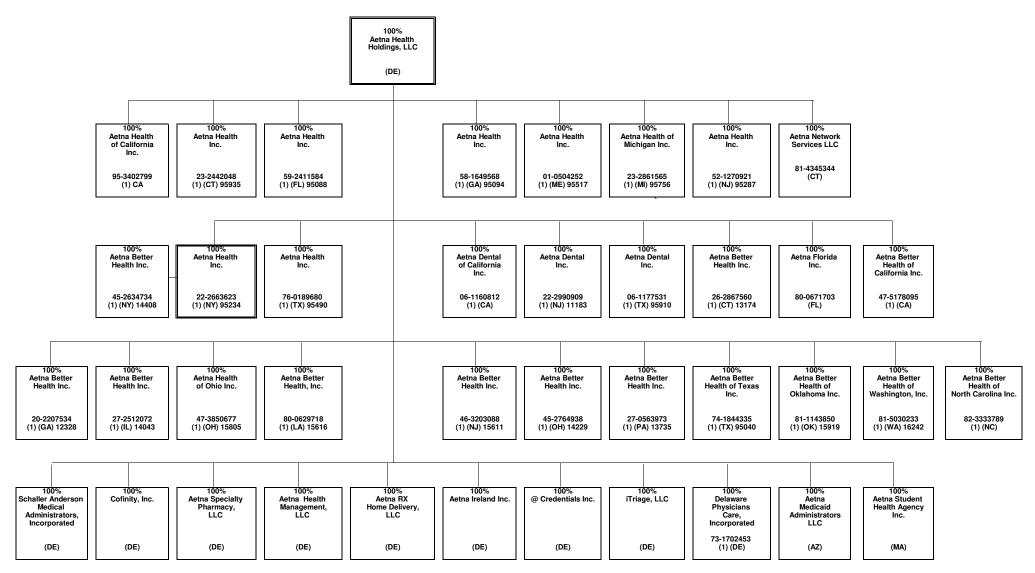
6 Health Care Management Co. Ltd. Is also owned by Actna Global Benefits (Bermuda) Limited (1 share).

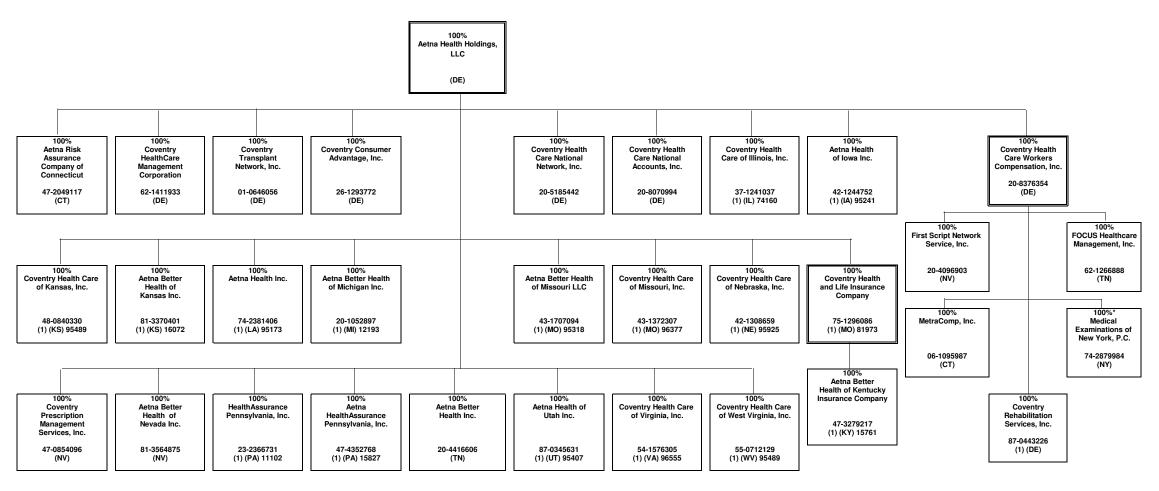
7 Actna Health Insurance (Thailand) Public Company Limited is also owned by Actna Global Benefits (Bermuda) Limited (1 share), Mr. Sansanapongpherchar (1 Share), Mr. Jitphasong Itsaraphakded (1 Share): Mrs. Suphee Wattana (1 Share); and Mr. Buncha Tamphragom (1 Share)

^{*8} Aetna Holdings (Thailand) Limited is also 51% owned by Mr. Paiboon Sutantivorakoon plus Aetna Benefits (Bermuda) Limited owns 1 share.

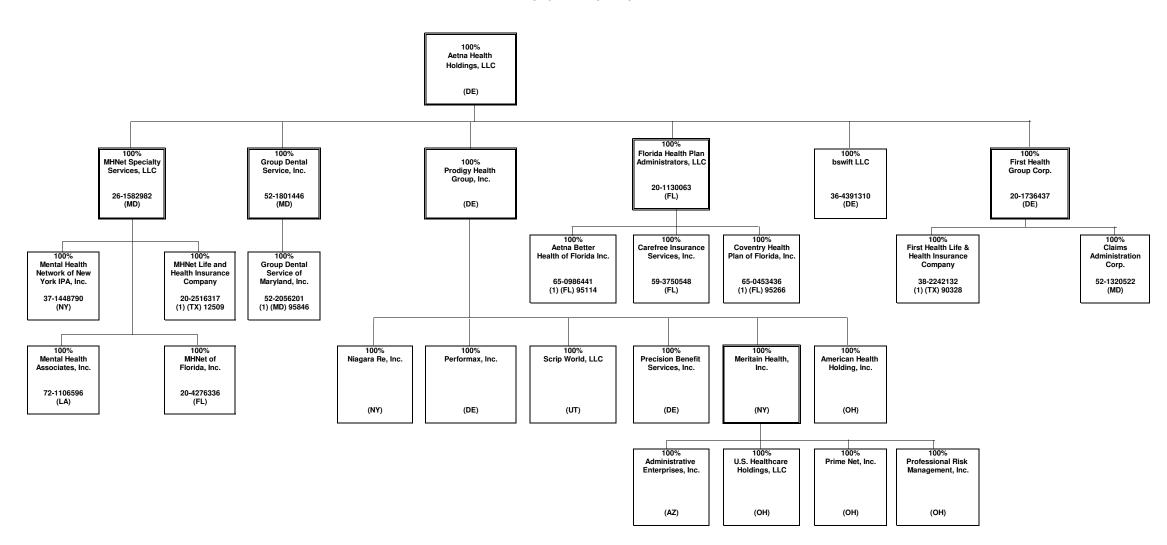
^{*9} Minor Health Enterprise Co. Ltd is is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited

^{*10} Aetna Services (Thailand) Limited is also (1 share) owned by Aetna Global Benefits (Bermuda) Limited and (1 share) owned by Aetna Global Holdings Limited



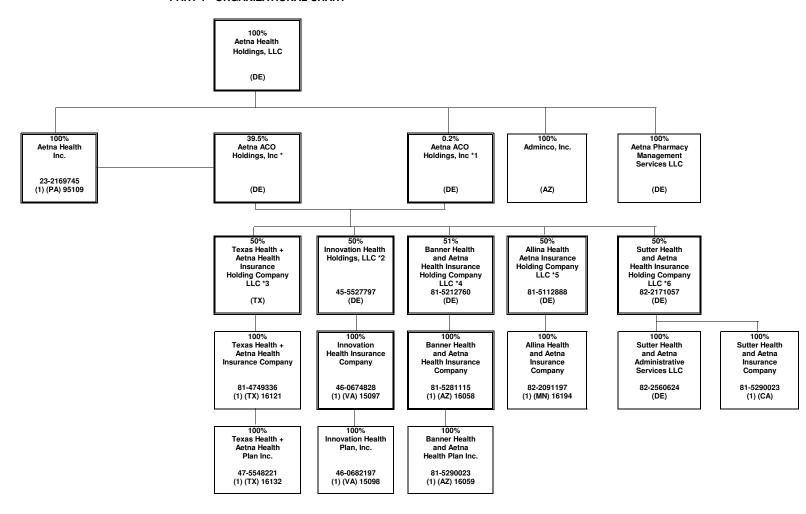


^{*100%} owned through Aetna's nominees



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 Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

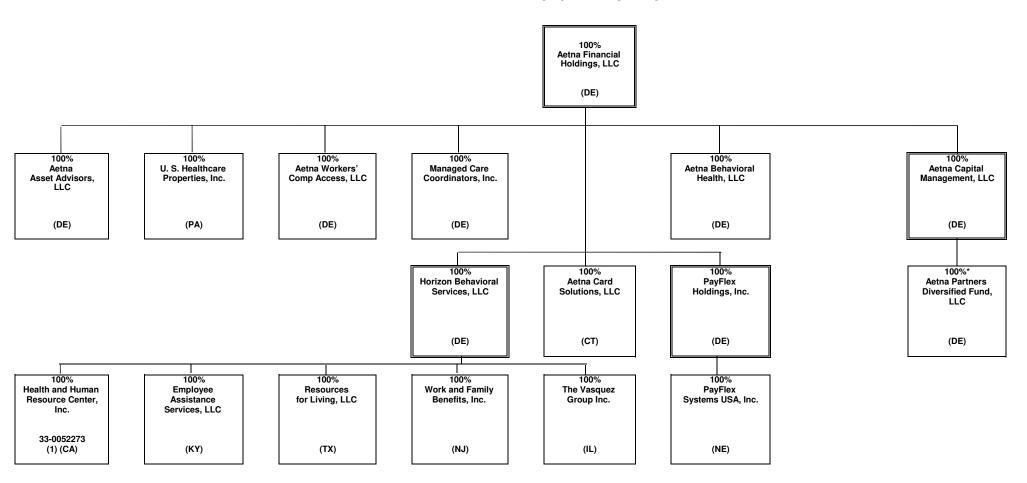
² initivation realm rotingis, LLC is also 30% owned by intovarient system rotingiation.

3 Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

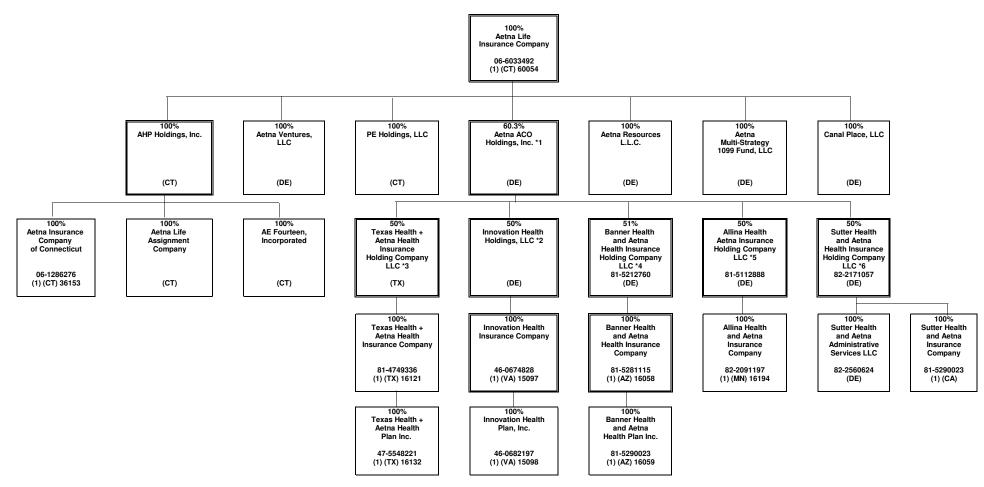
4 Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.

5 Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.

6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.



^{*} Aetna Life Insurance Company owns substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.



^{*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} Innovation Health Holdings, LLC is also 50% owned by Inova Health System Foundation.

^{*3} Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.

^{*4} Banner Health and Aetna Health Insurance Holding Company LLC is also 49% owned by Banner Health.

^{*5} Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health.
*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Underwriting and Investment Exhibit Part 3 Line 25							
	Claim Adjustment Expenses		3	4	5		
	1	2					
	Cost	Other Claim	General				
	Containment	Adjustment	Administrative	Investment			
	Expenses	Expenses	Expenses	Expenses	Total		
2504. Interest expense	0	(7)	5,406	0	5,399		
2597. Summary of remaining write-ins for Line 25 from							
overflow page	0	(7)	5,406	0	5,399		

OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Exhibit 1 Line 6

	Total Members at End of				6	
	1	2	3	4	5	Current Year Member Months
Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Member Months
0604.	0	0	0	0	0	0
0605.	0	0	0	0	0	0
0606.	0	0	0	0	0	0
0697. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0

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