

HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2022

OF THE CONDITION AND AFFAIRS OF THE

Aotna Health of Iowa Inc

		чеша пеани	or iowa mc	-
NAIC	Group Code	0001 NAIC Company Co	de <u>95241</u> Employer'	s ID Number 42-1244752
Organized under the Laws of	, ,	, .	State of Domicile or Port of	Entry IA
Country of Domicile		United States	of America	
Licensed as business type:		Health Maintenand	ce Organization	·
Is HMO Federally Qualified?	Yes[] No[X]			
Incorporated/Organized	02/07/1985		Commenced Business	01/01/1986
Statutory Home Office	6165 NW 86th Stree	et, Suite 114		Johnston, IA, US_50131
	(Street and N			or Town, State, Country and Zip Code)
Main Administrative Office		6165 NW 86 th Str (Street and		
	Johnston, IA, US 50131		,	800-872-3862
(City or T	Town, State, Country and Zip			(Area Code) (Telephone Number)
Mail Address	151 Farmington Avenue (Street and Number or P			Hartford, CT, US 06156 or Town, State, Country and Zip Code)
Driver and the officer of Dealer and	,	6165 NW 86 th SI		
Primary Location of Books and		(Street and		
(City or	Johnston, IA, US 50131 Town, State, Country and Zip	Code)		800-872-3862 (Area Code) (Telephone Number)
Internet Website Address		www.aetr	na.com	
Statutory Statement Contact		im E. Roth		215-775-6508 (Area Code) (Telephone Number)
St				860-262-7767
	(E-mail Address)			(FAX Number)
		OFFICI		
President	James Benjamin Boyman	V	ice President and Secretary	/Edward Chung-I Lee
		OTH		
Derek Scott Blunt, Sen Amy Christine Fletcher,	tior Investment Officer Chief Financial Officer	Peter Keller, Ass	III, Assistant Controller istant Controller President and Treasurer	Steven Matthew Conte, Corporate Controller # Whitney Dorothy Lavoie, Assistant Controller
James Benja	min Boyman	DIRECTORS OF James Dean	0	Richard Noble Sloma
all of the herein described ass statement, together with relater condition and affairs of the said in accordance with the NAIC Ar or regulations require difference Furthermore, the scope of this a	sets were the absolute proper d exhibits, schedules and expl d reporting entity as of the repor- nual Statement Instructions an ces in reporting not related to attestation by the described off	rty of the said reporting entity, lanations therein contained, ar orting period stated above, and ind Accounting Practices and Po accounting practices and pro ficers also includes the related	free and clear from any lie nnexed or referred to, is a fu d of its income and deductio trocedures manual except to coedures, according to the corresponding electronic fili	reporting entity, and that on the reporting period stated above, ens or claims thereon, except as herein stated, and that this ill and true statement of all the assets and liabilities and of the ons therefrom for the period ended, and have been completed o the extent that: (1) state law may differ; or, (2) that state rules best of their information, knowledge and belief, respectively. ng with the NAIC, when required, that is an exact copy (except by various regulators in lieu of or in addition to the enclosed
	njamin Boyman		_	Edward Churig-I Lee
Pre State of Pennsylvania County of Montgomery	esident			Vice President and Secretary State of Connecticut County of Hartford
Subscribed and sworn to before	e me this		s	Subscribed and sworn to before me this
14th day of Octob		2		
day or <u>CCLUU</u>	, 2022	2		, 2022
			(John October , 2022 Inthia Montand
NOTARY PUBLIC (Seal)			N	IOTÁRY PUBLIC (Seal)
Commonwealth of Pennsylva KIM E. ROTH, Nota Montgomery Co My Commission Expires A Commission Number	ry Public punty pril 25, 2025			CYNTHIA MONTANO Notary Public, State of Connecticut

Notary Public, State of Connecticut My Commission Expires Mar. 31, 2026

- a. Is this an original filing? Yes [X] No [] b. If no,
 - 1. State the amendment number.....
 - Date filed
 Number of pages attached......

	A55	ETS			
			Current Statement Date	4	
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds				
	Stocks:	,,,,,		,. , .	
	2.1 Preferred stocks	0	0	0	0
	2.2 Common stocks				0
			0	U	
3.	Mortgage loans on real estate: 3.1 First liens	0	0	0	0
	3.2 Other than first liens	0	0	0	0
4.	Real estate:				
	4.1 Properties occupied by the company (less \$0 encumbrances)	0	0	0	0
	4.2 Properties held for the production of income (less				
	\$0 encumbrances)	0	0	0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)	0	0	0	0
5	Cash (\$11, 146, 845), cash equivalents				
0.					
	(\$1,029,344) and short-term	10 170 100		10 170 100	0.000.005
	investments (\$				
	Contract loans (including \$0 premium notes)				
	Derivatives				
8.	Other invested assets				
9.	Receivables for securities				0
	Securities lending reinvested collateral assets				
	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)		0		
13.	Title plants less \$0 charged off (for Title insurers				
	only)	0	0	0	0
14.	Investment income due and accrued		0		
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection				
	15.2 Deferred premiums, agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)	0	0	0	0
	15.3 Accrued retrospective premiums (\$				
	contracts subject to redetermination (\$1,135,518)	1 293 474	0	1 293 474	1 233 380
16.	Reinsurance:	1,200,474	0		1,200,000
10.	16.1 Amounts recoverable from reinsurers	٥	0	0	0
	16.2 Funds held by or deposited with reinsured companies				0
	18.2 Funds held by or deposited with reinsured companies	0	0	0	
	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				
	Net deferred tax asset				
	Guaranty funds receivable or on deposit				0
20.	Electronic data processing equipment and software	0	0	0	0
21.	Furniture and equipment, including health care delivery assets				
	(\$				
	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates	0	0	0	0
	Health care (\$1,597,331) and other amounts receivable				
	Aggregate write-ins for other than invested assets				
	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	Total (Lines 26 and 27)	34,633,868	12,903		31,969,343
20.	DETAILS OF WRITE-INS	04,000,000	12,000	04,020,000	01,000,040
4404					
1101.	· · · · · · · · · · · · · · · · · · ·				
1102.					
1103.					
	Summary of remaining write-ins for Line 11 from overflow page				
	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)			-	0
	Guaranty fund assessments				
2502.	Recoverable of state income taxes	0	0	0	
2503.	Recoverable state premium taxes		0	774	0
	Summary of remaining write-ins for Line 25 from overflow page				
	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	20,592			

ASSETS

LIABILITIES, CAPITAL AND SURPLUS

			Current Period		Prior Year
	-	1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$			7,866,234 1,158,914	
2. 3.	Accrued medical incentive pool and bonus amounts Unpaid claims adjustment expenses				
3. 4.	Aggregate health policy reserves, including the liability of	100,004	0	100,004	
4.	\$				
	Health Service Act	8 684 400	0		5 845 805
5.	Aggregate life policy reserves				
5. 6.	Property/casualty unearned premium reserve				.0
0. 7.	Aggregate health claim reserves				
8.	Premiums received in advance				
9.	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon				
10.1	(including \$0 on realized gains (losses))	80 107	0	80 107	
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable			-	.0
12.	Amounts withheld or retained for the account of others			.0	
13.	Remittances and items not allocated				
14.	Borrowed money (including \$0 current) and	100		100	20,020
	interest thereon \$0 (including				
	\$0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates				
16.	Derivatives		0		
17.	Payable for securities				0
18.	Payable for securities lending		.0		.0
19.	Funds held under reinsurance treaties (with \$0				
10.	authorized reinsurers, \$				
	reinsurers and \$0 certified reinsurers)	170 721	0	170 721	39 526
20.	Reinsurance in unauthorized and certified (\$0)		_		
20.	companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates				.0
22.	Liability for amounts held under uninsured plans		0		0
23.	Aggregate write-ins for other liabilities (including \$0	, ,,,,		, ,,,,	
	current)	627	0		
24.	Total liabilities (Lines 1 to 23)				
25.	Aggregate write-ins for special surplus funds				0
26.	Common capital stock			1,267,835	
27.	Preferred capital stock				0
28.	Gross paid in and contributed surplus				
29.	Surplus notes				0
30.	Aggregate write-ins for other than special surplus funds				0
31.	Unassigned funds (surplus)				
32.	Less treasury stock, at cost:				
	32.10 shares common (value included in Line 26				
	\$0)			0	0
	32.2				
	\$0)			0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)			15 011 005	
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	34,620,965	31,969,343
	DETAILS OF WRITE-INS	T		Т	
2301.	Abandoned property liability		0		
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	627	0	627	1,015
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				0
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.					
3002.					
3003.					
3098.	Summary of remaining write-ins for Line 30 from overflow page			0	0
3099.	Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	xxx	0	0

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REV	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	-	1	2	3 Total	4 Total
1.	Member Months	Uncovered XXX	Total 37 224		
2.	Net premium income (including \$				
	premium income)				
3.	Change in unearned premium reserves and reserve for rate credits				
4.	Fee-for-service (net of \$				
5.	Risk revenue				0
6.	Aggregate write-ins for other health care related revenues				0
7.	Aggregate write-ins for other non-health revenues				
8.	Total revenues (Lines 2 to 7)	XXX			
	Hospital and Medical:				
9.	Hospital/medical benefits				
10.	Other professional services				
11.	Outside referrals				
12.	Emergency room and out-of-area		, ,	, ,	
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				0
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)	2,263,222			
47	Less: Net reinsurance recoveries		040 540	070 700	040 500
17.	Net reinsurance recoveries Total hospital and medical (Lines 16 minus 17)			,	,
18.	Non-health claims (net)				
19. 20.	Claims adjustment expenses, including \$				0
20.	containment expenses	0	1 023 105	580 700	
21.	General administrative expenses				
21.	Increase in reserves for life and accident and health contracts			2,700,000	
22.	(including \$0 increase in reserves for life only)	0	0	0	0
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23)				
25.	Net investment income earned				
26.	Net realized capital gains (losses) less capital gains tax of		,	,	
	\$	0	(235,150)		
27.	Net investment gains (losses) (Lines 25 plus 26)	0			
	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$0)				
	(amount charged off \$	0		0	0
29.					.0
30.	Net income or (loss) after capital gains tax and before all other federal				
	income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX		2,945,918	4,282,976
31.	Federal and foreign income taxes incurred	XXX	1,120,802		
32.	Net income (loss) (Lines 30 minus 31)	XXX	4,700,963	2,461,234	3,549,301
	DETAILS OF WRITE-INS				
0601.	Misc other income	XXX		0	0
0602.		XXX			
0603.					
0698.	Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699.	Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	132,651	0	0
0701.		XXX			
0702.		XXX			
0703.		XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799.	Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.					
1402.					
1403					
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499.	Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.					
2902.					
2903					
2998.	Summary of remaining write-ins for Line 29 from overflow page			0	0
2999.	Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EA	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	20,340,062	46 , 809 , 793	46,809,793
34.	Net income or (loss) from Line 32	4,700,963	2,461,234	3,549,301
35.	Change in valuation basis of aggregate policy and claim reserves	0	0	0
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$0	0	0	0
37.	Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38.	Change in net deferred income tax	0	0	(49,233)
39.	Change in nonadmitted assets		1,566	
40	Change in unauthorized and certified reinsurance	0	0	0
41.	Change in treasury stock	0	0	0
42.	Change in surplus notes	0	0	0
43.	Cumulative effect of changes in accounting principles	0	0	0
44.	Capital Changes:			
	44.1 Paid in	0	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0	0
	44.3 Transferred to surplus	0	0	0
45.	Surplus adjustments:			
	45.1 Paid in	(15,832,946)	0	0
	45.2 Transferred to capital (Stock Dividend)	0	0	0
	45.3 Transferred from capital	0	0	0
46.	Dividends to stockholders		(30,000,000)	(30,000,000)
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	(5,298,827)	(27,537,200)	(26,469,731)
49.	Capital and surplus end of reporting period (Line 33 plus 48)	15,041,235	19,272,593	20,340,062
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.		-		
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

		1 Current Year	2 Prior Year	3 Prior Year Ended
		To Date	To Date	December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance			
2.	Net investment income	639,603		
3.	Miscellaneous income	132,651	0	0
4.	Total (Lines 1 to 3)	57,169,727	31,700,624	43,768,589
5.	Benefit and loss related payments	, ,	, ,.	
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
7.	Commissions, expenses paid and aggregate write-ins for deductions		4,580,317	6,895,904
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of \$0 tax on capital			
	gains (losses)	1,115,542	2,473,560	2,377,598
10.	Total (Lines 5 through 9)	42,546,363	31,818,787	43,747,864
11.	Net cash from operations (Line 4 minus Line 10)	14,623,364	(118,163)	20,725
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	2,539,040		
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(25)		
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	2,539,015		
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	0	7,811,146	
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	250,000	250,000
	13.7 Total investments acquired (Lines 13.1 to 13.6)	0	8,061,146	8,061,146
14.	Net increase (or decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	2,539,015	12,810,194	13,060,196
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock			0
	16.3 Borrowed funds			0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders			
	16.6 Other cash provided (applied)	(992,195)	137,527	154,628
17.	Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(10,992,195)	(29,862,473)	(29,845,372
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			(10 704
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	6, 170, 184	(17,170,442)	(16,764,451
19.	Cash, cash equivalents and short-term investments:	0.000.000	00 770 17-	
	19.1 Beginning of year			
	19.2 End of period (Line 18 plus Line 19.1)	12,176,189	5,600,014	6,006,005
lote: Si	upplemental disclosures of cash flow information for non-cash transactions:			
20 00	01.	0	0	

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compre (Hospital &	hensive & Medical)	4	5	5 6		8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at end of:		marriada	Croup	Cappionion	Only	Citiy	T Idit	modibaro	modicald	
1. Prior Year	2,820	0		0	0	0	0		0	
2. First Quarter		0	45	0	0	0	0		0	
3. Second Quarter		0		0	0	0	0		0	
4. Third Quarter		0		0	0	0	0		0	
5. Current Year	0	0	0	0	0	0	0	0	0	
6. Current Year Member Months	37,224	0	473	0	0	0	0	36,751	0	
Total Member Ambulatory Encounters for Period:										
7 Physician		0		0	0	0	0		0	
8. Non-Physician		0	538	0	0	0	0	161,873	0	
9. Total	296,822	0	1,079	0	0	0	0	295,743	0	
10. Hospital Patient Days Incurred	7,272	0	16	0	0	0	0	7,256	0	
11. Number of Inpatient Admissions	834	0	5	0	0	0	0	829	0	
12. Health Premiums Written (a)		0		0	0	0	219,144		0	
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	
15. Health Premiums Earned		0		0	0	0			0	
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	
17. Amount Paid for Provision of Health Care Services			(2,075)	0	0	0	(157)		0	
18. Amount Incurred for Provision of Health Care Services a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$	42,635,269	197,845	43,098	0	0	0	(157)	42,394,483	0	

7

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

Aging Analysis of Unpaid Claims								
1	2	3	4	5	6	7		
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total		
Claims Unpaid (Reported)								
0299999 Aggregate accounts not individually listed-uncovered	23,446	20	0	(2)	7,189	30,653		
0399999 Aggregate accounts not individually listed-covered	2,468,671	303	0	(23)		2,580,387		
0499999 Subtotals	2,492,117	323	0	(25)		2,611,040		
0599999 Unreported claims and other claim reserves					, .	5,411,867		
0699999 Total amounts withheld						0,111,111		
0799999 Total claims unpaid						8,022,907		
089999 Accrued medical incentive pool and bonus amounts						1,158,914		
						1,100,014		

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

		Claims Paid Year to Date			5	6
Line of Business	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)			4,225		(181,940)	
2. Medicare Supplement	0	0	0	0	0	0
3. Dental Only	0	0	0	0	0	0
4. Vision Only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	(157)	0	0	0	(157)	0
6. Title XVIII - Medicare	2,914,693			7,724,881		
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)				7,784,136		4,372,694
10. Healthcare receivables (a)	0		0	0	0	
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts				1,094,176		
13. Totals (Lines 9-10+11+12)	2,909,834	33,554,196	147,275	8,878,312	3,057,109	3,697,896

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Aetna Health 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 only 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").

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Iowa for the periods ended September 30, 2022 and December 31, 2021 is as follows:

		SSAP #	F/S Page	F/S Line #	2022		2021
NET II	NCOME						
(1)	Aetna Health of Iowa Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 4,700,963	\$	3,549,301
(2)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						
(3)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
(4)	Net Income NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 4,700,963	\$	3,549,301
SURPI	LUS						
(5)	Aetna Health of Iowa Inc. State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 15,041,235	\$	20,340,062
(6)	State Prescribed Practices that are an increase/(decrease) from NAIC SAP:						
(7)	State Permitted Practices that are an increase/(decrease) from NAIC SAP:						
(8)	Statutory Surplus NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 15,041,235	\$	20,340,062

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 revenues and expenses. Actual results could differ from those estimates.

C. <u>Accounting Policies</u>

The Company applies the following significant accounting policies:

- (1) No significant change.
- (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 had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at September 30, 2022. Bonds include all investments whose maturity is greater than one year when purchased. All adjustments between amortized cost and carrying value are reflected in unrealized capital gains and losses and are reported as direct adjustments to surplus.

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

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

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

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

- (3) through (5): No significant change.
- (6) Loan-Backed and Structured Securities

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

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

(7) through (21): No significant change.

D. Going Concern

As of November 10, 2022, 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

Certain prior period financial information has been reclassified to conform with the current period presentation.

3. Business Combinations and Goodwill

No significant change.

4. <u>Discontinued Operations</u>

No significant change.

5. Investments

A. through C.: No significant change.

- D. Loan-Backed Securities
 - (1) 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 impairment ("OTTI") on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time

sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with Statements of Statutory Accounting Principles ("SSAP") No. 43R, Loan-Backed and Structured Securities ("SSAP No. 43R") at September 30, 2022.

- (3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis at the reporting date September 30, 2022.
- (4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at September 30, 2022 is as follows:

a.	The aggregate amount of unrealized losses:	
	1. Less than 12 Months	\$ _
	2. 12 Months or Longer	(116,303)
b.	The aggregate related fair value of securities with unrealized losses:	
	1. Less than 12 Months	\$ _
	2. 12 Months or Longer	660,612

- (5) The Company has reviewed the loan-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at September 30, 2022 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
 - (1) and (2): No significant change.
 - (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of September 30, 2022.

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

- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at September 30, 2022.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at September 30, 2022.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at September 30, 2022.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at September 30, 2022.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at September 30, 2022.
- 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 September 30, 2022.
- O. through Q .: No significant change.
- R. The Company did not participate in any Qualified Cash Pools at September 30, 2022.
- 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. Investment Income

No significant change.

8. <u>Derivative Instruments</u>

The Company did not have any derivative instruments at September 30, 2022.

9. Income Taxes

No significant change.

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

A. and B.:

Transactions occurring between the Company and its parent, subsidiaries and affiliates excluding reinsurance transactions and non-insurance transactions involving less than $\frac{1}{2}$ of 1% of the Company's total admitted assets and cost allocation transactions follow:

				Assets receiv	ed by insurer	Assets transferred by insur		
Date of transaction	Explanation of transaction	Name of reporting entity	Name of affiliate	Statement value	Statement description	Statement value	Statement description	
August 10, 2022	Extraordinary Dividend	Aetna Health of Iowa Inc.	Aetna Health Holdings, LLC			\$ 10,000,000	Cash	

C. through O.: No significant change.

11. <u>Debt</u>

- A. The Company did not have any items related to debt, including capital notes at September 30, 2022.
- B. The Company did not have any Federal Home Loan Bank agreements at September 30, 2022.
- 12. <u>Retirement Plans</u>, <u>Deferred Compensation</u>, <u>Postemployment Benefits and Compensated Absences and Other Postretirement</u> <u>Benefit Plans</u>

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at September 30, 2022.

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

A. through C.: No significant change.

- D. The Company paid \$10,000,000 as an extraordinary dividend to its parent on August 10, 2022. The Iowa Insurance Division acknowledged this distribution on August 2, 2022.
- E. through M.: No significant change.
- 14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

No significant change.

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

No significant change.

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

No significant change.

- B. Transfer and Servicing of Financial Assets
 - (1) No significant change.
 - (2) and (3): The Company did not have any servicing assets or liabilities at September 30, 2022.
 - (4) The Company did not have any securitized financial assets at September 30, 2022.
 - (5) through (7): No significant change.
- C. Wash Sales
 - (1) In the course of the Company's asset management, securities are sold and reacquired within 30 days of the sale date to enhance the Company's yield on its investment portfolio.
 - (2) The Company had no securities sold during the quarter ended September 30, 2022 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

No significant change.

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

No significant change.

20. Fair Value Measurements

А.

- (1) The Company had no material assets and liabilities that are measured and reported at fair value in the financial statements as of September 30, 2022.
- (2) There were no material realized and unrealized capital gains, purchases, sales, settlements, or transfers into or out of the Company's Level 3 financial assets during 2022.
- (3) Transfers in and out of all levels are recognized at the end of the reporting period of which the transfer occurred.
- (4) The Company's fair value measurement valuation techniques are described in B. below.
- (5) The Company did not have any derivative instruments at September 30, 2022.
- B. The fair values of these instruments are based on valuations that include inputs that can be classified within one of three levels of a hierarchy. The following are the levels of the hierarchy and a brief description of the type of valuation information ("inputs") that qualifies a financial asset or liability for each level:

Level 1 - Unadjusted quoted prices for identical assets or liabilities in active markets. Level 2 - Inputs other than Level 1 that are based on observable market data. These include: quoted prices for similar assets in active markets, quoted prices for identical assets in inactive markets, inputs that are observable that are not prices (such as interest rates and credit risks) and inputs that are derived from or corroborated by observable markets. Level 3 - Developed from unobservable data, reflecting the Company's own assumptions.

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

C. The carrying values and estimated fair values of the Company's financial instruments at September 30, 2022 were as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds, short-term investments, and cash equivalents	\$ 17,893,202	\$ 18,575,962	\$ 2,253,310	\$ 15,639,892	\$ —	\$ —	\$ —

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

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

No significant change.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

Subsequent events have been considered through November 10, 2022 for the statutory statement issued on November 11, 2022.

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through November 10, 2022 for the statutory statement issued on November 11, 2022.

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

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination

A. through D.: No significant change.

E. Risk Sharing Provisions of the Affordable Care Act

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

		AMOUNT
a.	Permanent ACA Risk Adjustment Program	
	Assets	
	1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments)	\$ 21,682
	Liabilities	
	2. Risk adjustment user fees payable for ACA Risk Adjustment	26
	3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)	308
	Operations (Revenue & Expense)	
	4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	17,002
	5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	38
b.	Transitional ACA Reinsurance Program	
	Assets	
	1. Amounts recoverable for claims paid due to ACA Reinsurance	_
	2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)	_
	3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	—
	Liabilities	
	4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	—
	5. Ceded reinsurance premiums payable due to ACA Reinsurance	—
	6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	_
	Operations (Revenue & Expense)	
	7. Ceded reinsurance premiums due to ACA Reinsurance	—
	8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	—
	9. ACA Reinsurance contributions - not reported as ceded premium	—
c.	Temporary ACA Risk Corridors Program	
	Assets	
	1. Accrued retrospective premium due to ACA Risk Corridors	—
	Liabilities	
	2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	—
	Operations (Revenue & Expense)	
	3. Effect of ACA Risk Corridors on net premium income (paid/received)	—
	4. Effect of ACA Risk Corridors on change in reserves for rate credits	—

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

[I	
	Accrued Du Year on Bus	ring the Prior iness Written		Paid as of the on Business	Diffe	rences	A	djustments			ances as of the ng Date
		mber 31 of the Year	Written Before of the Pr		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	eceivable (Payable) Receiv		(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program	Teeerrasie	(ruyuoto)	Receivable	(ruyuoto)	literentable	(ruyuoto)	Teccinado	(rujuoto)	101		(rujuoto)
1. Premium adjustments receivable (including high risk pool payments)	\$ 1	s —	\$ 1	\$	s —	s —	s —	s —	А	\$ _	\$ —
2. Premium adjustments (payable) (including high risk pool premium)	_	31,186	_	35,558		(4,372)	_	4,372	В	_	_
3. Subtotal ACA Permanent Risk Adjustment Program	1	31,186	1	35,558	_	(4,372)	_	4,372		_	_
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid	_	_	_	_	_	_	_	_	С	_	_
2. Amounts recoverable for claims unpaid (contra liability)	_	_	_	_	_	_	_	_	D	_	_
3. Amounts receivable relating to uninsured plans	_	_	_	_	_	_	_	_	Е	_	_
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium	_	_	_	_	_	_	_	_	F	_	_
5. Ceded reinsurance premiums payable	_	_	_	_	_	_	_	_	G	_	_
6. Liability for amounts held under uninsured plans	_	_	_	_	_	_	_	_	Н	_	_
7. Subtotal ACA Transitional Reinsurance Program	_	_	_	_	_	_	_	_		_	_
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium	—	_	—	—	_	_	_	—	Ι		—
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	J	_	_
3. Subtotal ACA Risk Corridors Program	_	_	_	_	_	_	_	_		_	_
d. Total for ACA Risk Sharing Provisions	\$ 1	\$ 31,186	\$ 1	\$ 35,558	\$	\$ (4,372)	\$	\$ 4,372		s —	\$ —

Explanations of Adjustments

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

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

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

Risk Corridors Program Year	Accrued Du Year on Bu	ring the Prior siness Written		Paid as of the r on Business	Diffe	rences	A	djustments			ances as of the ng Date
		mber 31 of the r Year	Written Befor of the Pi	e December 31 rior Year	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium	\$	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	А	\$ —	\$ —
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	_	В	_	_
b. 2015											
1. Accrued retrospective premium	_	-	-	_	_	_	_	—	С	_	—
2. Reserve for rate credits or policy experience rating refunds	_	_	_	_	_	_	_	—	D	_	_
c. 2016											
1. Accrued retrospective premium	_	-	-	_	_	_	—	—	Е	—	—
2. Reserve for rate credits or policy experience rating refunds	_		_	_	_	_	_	—	F	_	—
d. Total for Risk Corridors	\$	\$	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —		\$ —	\$

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

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

	Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non- admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4-5)
a.	2014	\$ 2,707,708	\$ —	\$ 2,707,708	\$	\$ —	\$ —
b.	2015	705,180	_	705,180	_	_	_
c.	2016	1,370,536	_	1,370,536		_	_
d.	Total $(a + b + c)$	\$ 4,783,424	\$	\$ 4,783,424	\$	\$ —	\$

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

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of December 31, 2021 were \$4,512,499. As of September 30, 2022, \$2,977,947 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$147,275 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$1,387,277 favorable prior-year development since December 31, 2021 to September 30, 2022. 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 \$1,187,714 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.
- B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

No significant change.

30. Premium Deficiency Reserves

No significant change.

31. Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the Stat Domicile, as required by the Model Act?		Yes []	No [X]
1.2	If yes, has the report been filed with the domiciliary state?		Yes []	No []
2.1	Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlemen reporting entity?		Yes []	No [X]
2.2	If yes, date of change:			
3.1	Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or mor is an insurer? If yes, complete Schedule Y, Parts 1 and 1A.		Yes [X]	No []
3.2	Have there been any substantial changes in the organizational chart since the prior quarter end?		Yes [X]	No []
3.3	If the response to 3.2 is yes, provide a brief description of those changes. Effective July 1, 2022, Aetna Insurance Company of Connecticut was sold to Continental Casualty Company, a subsidiary of Loew. Corporation. Effective August 23, 2022, Aetna Integrated Informatics, Inc.'s name was changed to CVS Accountable Care Organiz			
3.4	Is the reporting entity publicly traded or a member of a publicly traded group?		Yes [X]	No []
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.		000006	64803
4.1	Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?		Yes []	No [X]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity to ceased to exist as a result of the merger or consolidation.	nat has		
	1 2 3 Name of Entity NAIC Company Code State of Domicile	_		
5.	If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), atto in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation. On 4/1/22, the management services and global capitation network agreement with Group Dental Service, Inc. was terminated. Of the administrative services agreement with Coventry Health and Life Insurance Company was terminated. On 1/1/22, the Shared S and Refund on Investment Guarantee section of the Affiliates Services and Fee Schedule of the existing administrative services agreement was updated.	9 Yes [n 4/15/22, Savings	X] No [] N/A []
6.1	State as of what date the latest financial examination of the reporting entity was made or is being made.		12/31/	/2020
6.2	State the as of date that the latest financial examination report became available from either the state of domicile or the reporting e date should be the date of the examined balance sheet and not the date the report was completed or released.		12/31/	/2020
6.3	State as of what date the latest financial examination report became available to other states or the public from either the state of or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (bala date).	nce sheet	06/23/	/2022
6.4	By what department or departments?			
6.5	lowa Insurance Division Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financia statement filed with Departments?] No [] N/A [X]
6.6	Have all of the recommendations within the latest financial examination report been complied with?	Yes [] No [] N/A [X]
7.1	Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) su revoked by any governmental entity during the reporting period?	spended or	Yes []	No [X]
7.2	If yes, give full information:			
8.1	Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?		Yes []	No [X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding company.			
8.3	Is the company affiliated with one or more banks, thrifts or securities firms?		Yes []	No [X]
8.4	If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated l regulatory services agency (i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal			

Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	000	FDIC	SEC

GENERAL INTERROGATORIES

9.1	 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships; (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity; (c) Compliance with applicable governmental laws, rules and regulations; (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and 	Yes [X] No []	
0.44	(e) Accountability for adherence to the code.		
9.11	If the response to 9.1 is No, please explain:		
9.2	Has the code of ethics for senior managers been amended?	Yes [X] No []	
9.21	If the response to 9.2 is Yes, provide information related to amendment(s). In the second quarter the Code of Conduct was updated to include Office of Workplace Assistance and the CVS Health Ombuds Team content. Refer to page 6 and various references to the OWA/Ombuds team throughout the Code. In the first quarter the code of conduct was updated to revise the definition of PII to be included before PHI. This was to clarify that PII was not a subset of PHI.		
9.3	Have any provisions of the code of ethics been waived for any of the specified officers?	Yes [] No [X]	
9.31	If the response to 9.3 is Yes, provide the nature of any waiver(s).		
	FINANCIAL		
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?	Yes [] No [X]	
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$)
	INVESTMENT		
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for		
44.0	use by another person? (Exclude securities under securities lending agreements.)	Yes [] No [X]	
11.2	If yes, give full and complete information relating thereto:		
12.	Amount of real estate and mortgages held in other invested assets in Schedule BA:	0)
13.	Amount of real estate and mortgages held in short-term investments:		

10.	A mount of roar colute and mongaged held in chort term invoctmente.		······································		
14.1	Does the reporting entity have any investments in parent, subsidiaries and affiliates?			Yes [] No [X]
14.2	If yes, please complete the following:				
			1		2
			Prior Year-End		rrent Quarter
			Book/Adjusted		ok/Adjusted
			Carrying Value	Ca	rrying Value
	Bonds		0	\$	0
14.22	Preferred Stock	\$	0	\$	0
	Common Stock			\$	0
14.24	Short-Term Investments	\$	0	\$	0
14.25	Mortgage Loans on Real Estate	\$	0	\$	0
14.26	All Other	\$	0	\$	0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$	0	\$	0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	0	\$	0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes [] No [X]
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?		Yes [] No [] N/A []
	If no, attach a description with this statement.		-		
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement d	ate:			
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2		\$		0
	16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL,				
	16.3 Total payable for securities lending reported on the liability page.				
			φ		0

GENERAL INTERROGATORIES

Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F.
 Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook?

Yes [X] No []

7.1			quirements of the NAIC Finar								
		1 Jame of Custod	lian(c)			2 Custodian Addr	000				
	State Street Bank and Tr	ust Company	iiaii(5)			Center; One Linco	un Street; Boston, MA				
7.2	For all agreements that do location and a complete ex		n the requirements of the NAI	C Financial Con	dition Exam	iners Handbook, pi	rovide the name,				
	1 Name(s)		2 Location(s)			3 Complete Expla	nation(s)				
7.3 7.4	If yes, give full information			an(s) identified ir		g the current quarte		Yes	[]	No (Χ]
	1 Old Custodian		2 New Custodian	Date	3 of Change		4 Reason				
7.5	make investment decisions	s on behalf of th	estment advisors, investment le reporting entity. For assets ent accounts"; "handle sec	that are manage curities"]	ed internally						
		1 Name of Firm o		2 Affilia	ation						
			ficer								
	17.5097 For those firms/inc	dividuals listed i	n the table for Question 17.5, ore than 10% of the reporting	, do any firms/in	dividuals un			Yes	[No	[X
			vith the reporting entity (i.e. de aggregate to more than 50% o					Yes	[No	[X
7.6	For those firms or individua table below.	als listed in the t	able for 17.5 with an affiliatio	n code of "A" (a	filiated) or "	U" (unaffiliated), pr	ovide the information for the	he			
	1		2			3	4			5 stmer	
	Central Registration Depository Number		Name of Firm or Individual			tity Identifier (LEI)	Registered With		(IMA	emer) File	nt d
	N/A Dere	к 5. війні			N/A		Not registered		NÖ		
3.1 3.2		ents of the Purp	ooses and Procedures Manua	al of the NAIC In	vestment Ar	nalysis Office been	•		[X]	No	[
9.	a. Documentation nece security is not availa b. Issuer or obligor is c c. The insurer has an a	essary to permi able. surrent on all co actual expectati	orting entity is certifying the fo t a full credit analysis of the so ntracted interest and principa on of ultimate payment of all 6I securities?	ecurity does not al payments. contracted intere	exist or an l est and prine	NAIC CRP credit ra	ating for an FE or PL	Yes	[]]	No	[X
0.	 a. The security was pur b. The reporting entity is c. The NAIC Designation on a current private logonal 	chased prior to s holding capita on was derived t etter rating held	porting entity is certifying the January 1, 2018. Il commensurate with the NAI from the credit rating assigne I by the insurer and available to share this credit rating of th	IC Designation r d by an NAIC C for examination	eported for t RP in its leg by state ins	the security. al capacity as a NF urance regulators.					
		•	_GI securities?					Yes	[]	No	[X
1.	FÉ fund: a. The shares were pur b. The reporting entity is	chased prior to s holding capita	gistered private fund, the repo January 1, 2019. Il commensurate with the NAI g(s) with annual surveillance	IC Designation r	eported for	the security.					
	January 1, 2019. d. The fund only or prec e. The current reported in its legal capacity a	dominantly hold NAIC Designat s an NRSRO.	s bonds in its portfolio. ion was derived from the pub	blic credit rating(s) with annu	al surveillance assi					
			al surveillance assigned by an chedule BA non-registered pri		•		a?	Yes	[]	No	[X

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent			9.4 %
	1.2 A&H cost containment percent		1	1.4 %
	1.3 A&H expense percent excluding cost containment expenses		10	0.4 %
2.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]	
2.2	If yes, please provide the amount of custodial funds held as of the reporting date\$			0
2.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]	
2.4	If yes, please provide the balance of the funds administered as of the reporting date			0
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [] No [X]	
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No [X]	

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

	Showing All New Reinsurance Treaties - Current Year to Date								
1	2	3	4	5	6	7	8	9	10
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
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SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

	Current Year to Date - Allocated by States and Territories 1 Direct Business Only										
			2	3	4	5	6	7	8	9	10
							Federal				
							Employees	Life and			
		Active	A solid and and				Health	Annuity	Dreve entry/	Tatal	
		Status		Medicare	Medicaid	CHIP Title	Benefits Program	Premiums & Other	Property/ Casualty	Total Columns 2	Deposit-Type
	States, etc.	(a)	Premiums	Title XVIII	Title XIX	XXI	Premiums	Considerations	Premiums	Through 8	Contracts
1.	Alabama AL	N.					0	0	0	0	0
											0
2.	Alaska Ał		0	0	0	0	0	0	0	0	0
3.	Arizona Az	N	0	0	0	0	0	0	0	0	0
4.	Arkansas AF	N	0	0	0	0	0	0	0	0	0
5.	California CA	N	0	0	0	0	0	0	0	0	0
6.	Colorado Co	N	0	0	0	0	0	0	0	0	0
7.	Connecticut	N	0	0	0	0	0	0	0	0	0
8.			0	0	0	0	0	0	0	0	0
-	Delaware DE								•	0	0
9.	District of Columbia . Do		0	0	0	0	0	0	0	0	0
10.	Florida FL	N	0	0	0	0	0	0	0	0	0
11.	Georgia Gr	N	0	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	0
14.	Illinois IL	N	0	0	0	0	0	0	0	0	0
										0	0
15.	Indiana IN	N		0	0	0	0	0	0	0	0
16.	Iowa IA	L		56, 307, 885	0	0		0	0	56,868,409	0
17.	Kansas KS	N	0	0	0	0	0	0	0	0	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 MI		0	0	0	0	0	0	0	0	0
21.	Maryland MI		0	0	0	0	0	0		۰. ۱	0
	,								0	0	0
	Massachusetts M		0	0	0	0	0	0	0	0	0
23.	Michigan MI	N	0	0	0	0	0	0	0	0	0
24.	Minnesota MI	IN	0	0	0	0	0	0	0	0	0
25.	Mississippi M	N	0	0	0	0	0	0	0	0	0
26.	Missouri Mo)N		0	0	0	0	0	0		0
	Montana M		0	0	0	0	0	0	۰. ۱	n	۰. ۱
	Nebraska NE		0	0	0	0	0	0	0		0
										0	0
29.	Nevada N		0	0	0	0	0	0	0	0	0
30.	New Hampshire NI		0	0	0	0	0	0	0	0	0
31.	New Jersey N.	N	0	0	0	0	0	0	0	0	0
32.	New Mexico NI	1N	0	0	0	0	0	0	0	0	0
33.	New York N	N	0	0	0	0	0	0	0	0	0
34.	North Carolina N		0	0	0	0	0	0		۰. ۱	
						0		0	0	0	0
35.	North Dakota NI		0	0	0	•••••	0		0	0	0
36.	Ohio Ol		0	0	0	0	0	0	0	0	0
37.	Oklahoma Ol		0	0	0	0	0	0	0	0	0
38.	Oregon Of	N	0	0	0	0	0	0	0	0	0
39.	Pennsylvania PA		0	0	0	0	0	0	0	0	0
40.	Rhode Island RI	N	0	0	0	0	0	0	0	0	0
	South Carolina S(0	0	0	0	0	0	0	0
											0
42.	South Dakota SI		0	0	0	0	0	0	0	0	0
43.	Tennessee TN	N	0	0	0	0	0	0	0	0	0
44.	Texas T>	N	0	0	0	0	0	0	0	0	0
45.	Utah U	N	0	0	0	0	0	0	0	0	0
46.	Vermont	N		0	0			0	0	0	0
47.	Virginia VA	N.	0	0	0	0	0	0	0	0	·····0
	•										0
48.	Washington W		0	0	0	0	0	0	0	0	0
49.	West Virginia W		0	0	0	0	0	0	0	0	0
50.	Wisconsin W	N	0	0	0	0	0	0	0	0	0
51.	Wyoming W	/N		0	0	0	0	0	0	0	0
52.	American Samoa As			0	0	0	0	0	0	0	0
53.	Guam Gl			0		0	0	0	0	0	0
			0		0	0	0	0	0	0	·····0
54.	Puerto Rico PF			0							0
	U.S. Virgin Islands VI	N	0	0	0	0	0	0	0	0	0
56.	Northern Mariana								-		
	Islands MI			0	0	0	0	0	0	0	0
57.	Canada CA	NN	0	0	0	0	0	0	0	0	0
58.	Aggregate Other										
	Aliens O	XXX.	0	0	0	0	0	0	0	0	0
59.	Subtotal	XXX.		56, 307, 885	0	0		0	0	56,868,409	0
60.	Reporting Entity										
	Contributions for Emplo	vee									
	Benefit Plans		0	0	0	0	0	0	0	0	0
61.	Totals (Direct Business)	XXX	341,380	56,307,885	0	0	219,144	0	0	56,868,409	0
U 1.	DETAILS OF WRITE-IN		0,000	00,007,000	5	<u> </u>	210,177	5	0	00,000,400	0
58001.		xxx									
58001.				t	t	+	t	<u> </u>		t	
				+							
58003.	0	XXX.		+							
58998.	Summary of remaining										
	write-ins for Line 58 from		0	0	0	0	0	0	0	0	_
		XXX.		ŀ0	······	U	0	0	0	0	0
E0000	overflow page	ich									
58999.	Totals (Lines 58001 thro	ugh									
58999.		ugh 58 XXX	0	0	0	0	0	0	0	0	

 above)
 XXX
 0
 0
 0

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

 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state......

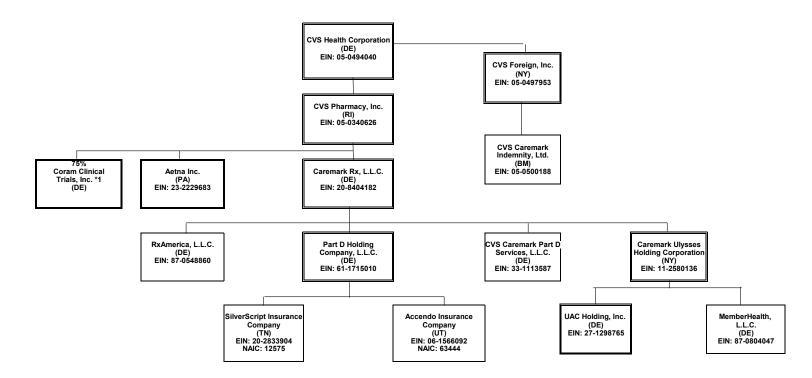
 N - None of the above - Not allowed to write business in the state......

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

.0 .56

.1

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



This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 7 company with numerous subsidiaries, the majority of which do not interact with the insurance entities. (1) Insurers/HMO's

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

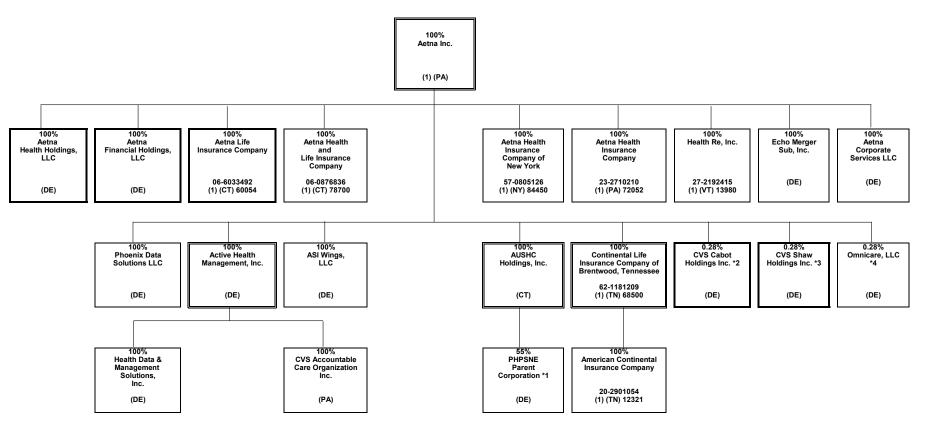
Double borders indicate entity has subsidiaries shown on the same page.

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

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

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

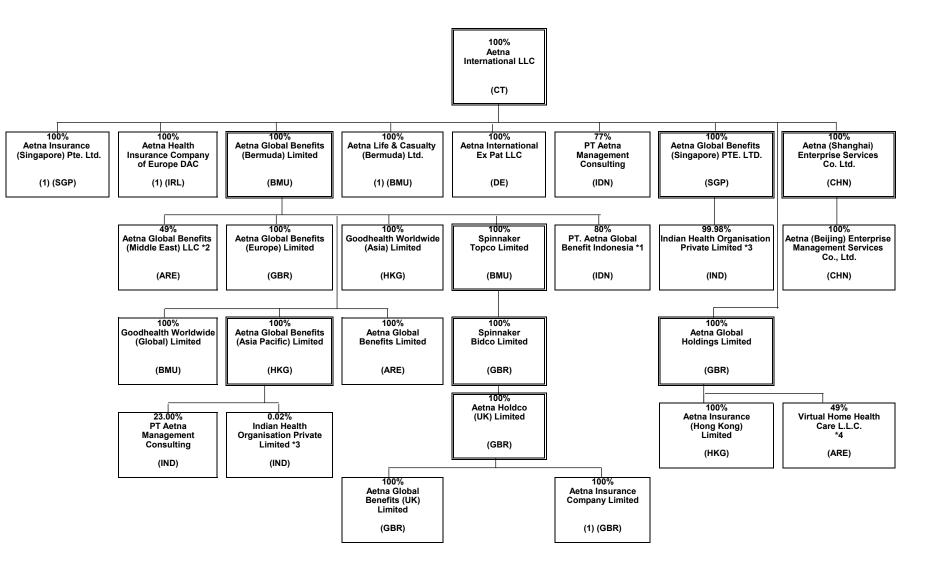
PART 1 - ORGANIZATIONAL CHART



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

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

PART 1 - ORGANIZATIONAL CHART

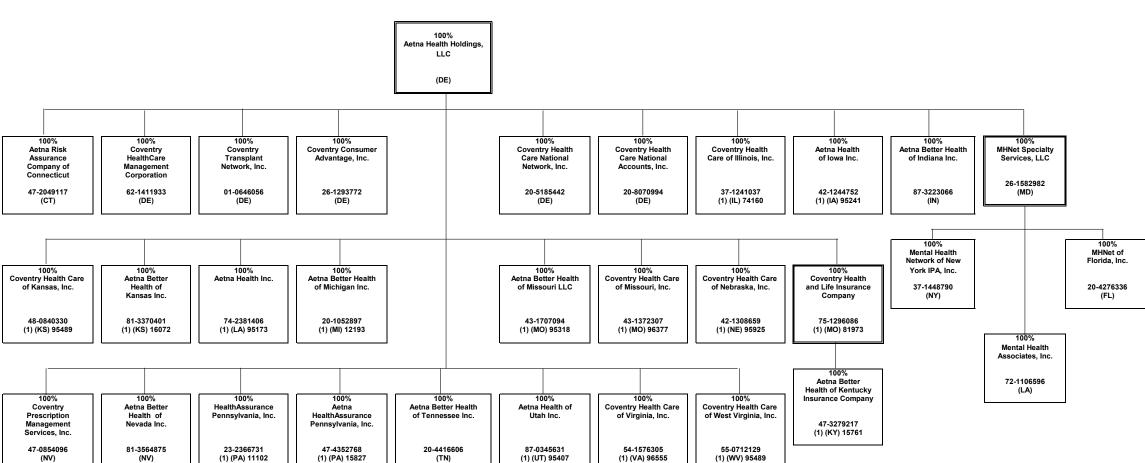


*1 PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee. *2 Aetna Global Benefits (Middle East) LLC is also 51% is owned by Euro Gulf LLC, Aetna's Nominee. *3 Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD. *4 Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee

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

100% Aetna Health Holdings, LLC (DE) 100% 100% 100% 100% 100% 100% 100% 100% Aetna Health Aetna Health Aetna Health Aetna Health Aetna Health Aetna Health of Aetna Health Aetna Network of California Michigan Inc. Services LLC Inc Inc Inc Inc Inc Inc. 81-4345344 95-3402799 23-2442048 59-2411584 58-1649568 01-0504252 23-2861565 52-1270921 (CT) (1) CA (1) (CT) 95935 (1) (FL) 95088 (1) (GA) 95094 (1) (ME) 95517 (1) (MI) 95756 (1) (NJ) 95287 100% 100% 100% 100% 100% 00% 100° 100% 100% Aetna Better Aetna Health Aetna Health Aetna Dental Aetna Dental Aetna Dental Aetna Better Aetna Florida Aetna Better Health Inc. Inc. Inc. of California Inc. Inc. Health Inc. Inc. Health of California Inc. Inc. 06-1160812 45-2634734 22-2663623 76-0189680 22-2990909 06-1177531 26-2867560 80-0671703 47-5178095 (1) (CT) 13174 (1) (NY) 14408 (1) (NY) 95234 (1) (TX) 95490 (1) (CA) (1) (NJ) 11183 (1) (TX) 95910 (FL) (1) (CA) 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% Aetna Better Aetna Health Aetna Better Health Inc. Health Premier of Ohio Inc. Health, Inc. Health Inc. Health Inc. Health of Texas Health of Health of Health of Health Inc. Plan MMAI Inc. Inc. Oklahoma Inc. Washington, Inc. North Carolina Inc. 20-2207534 27-2512072 47-3850677 80-0629718 46-3203088 45-2764938 27-0563973 74-1844335 81-1143850 81-5030233 82-3333789 (1) (GA) 12328 (1) (IL) 14043 (1) (OH) 15805 (1) (LA) 15616 (1) (NJ) 15611 (1) (OH) 14229 (1) (PA) 13735 (1) (TX) 95040 (1) (OK) 15919 (1) (WA) 16242 (1) (NC) 100% 100% 100% 100% 100% 100% 100% 100% 100% 100% 100 Schaller Anderso Cofinity, Inc. Aetna Specialty Aetna Health Aetna RX Aetna Ireland Inc. @ Credentials Inc. iTriage, LLC Delaware Aetna Aetna Student Medical Pharmacy, Management, LLC Home Delivery, LLC Physicians Medicaid Health Agency Administrators LLC Care, Administrators Inc. LLC Incorporated Incorporated 73-1702453 (DE) (DE) (DE) (DE) (DE) (DE) (DE) (DE) (AZ) (MA) (1) (DE)

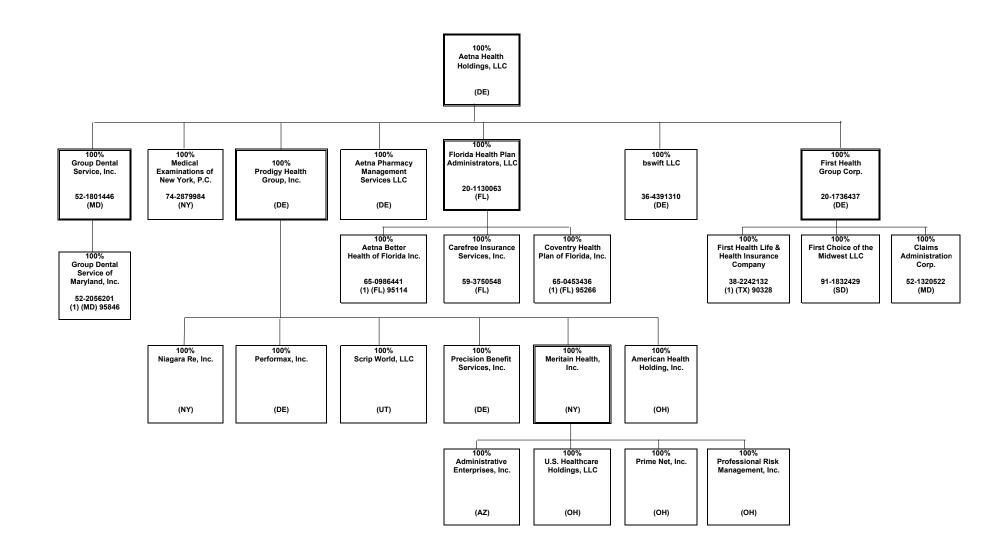
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP



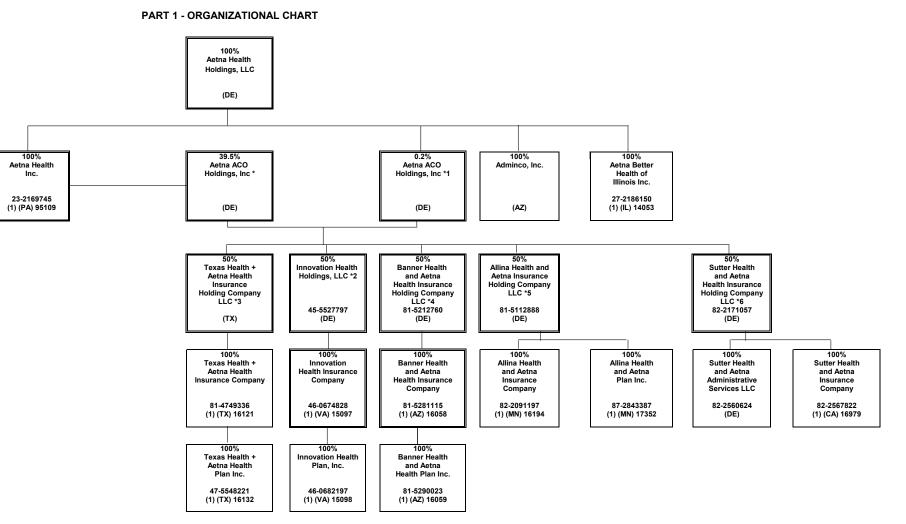
PART 1 - ORGANIZATIONAL CHART

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

PART 1 - ORGANIZATIONAL CHART



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

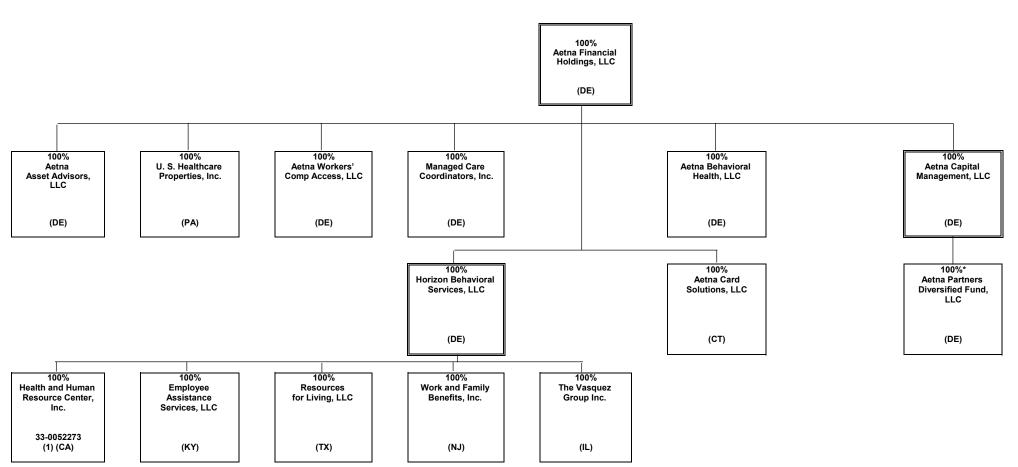


*1 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

*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 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.



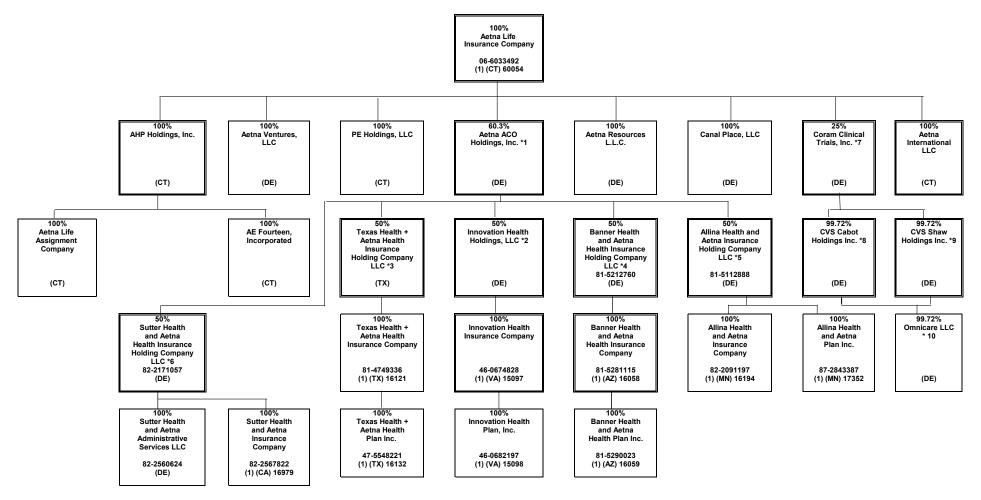
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

* Aetna Capital Management, LLC owns 100% of the voting rights of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF.

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.

*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 System.

*6 Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC. *7 Coram Clinical Trials, Inc. is also 75% owned by CVS Pharmacy, Inc.

*8 CVS Cabot Holdings Inc. is also .28% owned by Aetna Inc.

*9 CVS Shaw Holdings Inc. is also .28% owned by Aetna Inc.

*10 Remaining .28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.

1	2	3 4	5	6 7	8	9	10	11	12	13	14	15	16
									Туре	lf			
									of Control	Control			
									(Ownership,	is		ls an	
				Name of Securities			Relation-		Board,	Owner-		SCA	
				Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC		if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Grou	q	Company ID	Federal	(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Cod	e Group Name	Code Number	RSSD	CIK International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	*
0001	CVS HEALTH GROUP			0000064803 NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	63444 06-1566092 .			Accendo Insurance Company	UT	IA	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	12575 20-2833904 .			SilverScript Insurance Company	TN	IA	Part D Holding Company, L.L.C	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000 05-0340626 .			CVS Pharmacy, Inc.	RI	UIP	CVS Health Corporation	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 20-8404182 .			Caremark Rx, L.L.C.	DE	NIA	CVS Pharmacy, Inc Caremark, Rx., L.L.C.	Ownership Ownership		CVS Health Corporation CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP CVS HEALTH GROUP	00000 61–1715010 . 00000 33–1113587			Part D Holding Company, L.L.C. CVS Caremark Part D Services. L.L.C.	DE DE	NIA NIA	Caremark, RX., L.L.C.	Ownership Ownership	100.000 100.000	CVS Health Corporation	NO NO	0 0
0001	CVS HEALTH GROUP				RxAmerica. L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 11-2580136			Caremark Ulvsses Holding Corporation	NY	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				MemberHealth. L.L.C.		NIA	Caremark Ulysses Holding Corporation	Ownership.	100.000	CVS Health Corporation	NO	
0001	CVS HEALTH GROUP				CVS Caremark Indemnity, Ltd.	BMU	IA	CVS Foreign, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				UAC Holding, Inc.	DE	NIA	Caremark Ulysses Holding Corporation	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 05-0497953 .			CVS Foreign, Inc.	NY	NIA	CVS Health Corporation	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				Coram Clinical Trials, Inc	DE	NIA	CVS Pharmacy, Inc	Ownership		CVS Health Corporation	N0	13
0001	CVS HEALTH GROUP	00000 23-2229683 .		0001122304	Aetna Inc.	PA	UIP	CVS Pharmacy, Inc	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 30-0123754 .			Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	0000095–3402799 . 9593523–2442048 .			Aetna Health of California Inc Aetna Health Inc.	CA CT.	IA	Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation	NO NO	0
0001	CVS HEALTH GROUP	95935			Aetna Health Inc.		IA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership		CVS Health Corporation CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Health Inc.	FL GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Health Inc.	UA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95287 52-1270921 .			Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95234 22-2663623 .			Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	14408 45-2634734 .			Aetna Better Health Inc	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95490 76-0189680 .			Aetna Health Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	95040 74-1844335 .			Aetna Better Health of Texas Inc.	TX	IA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP CVS HEALTH GROUP	12328 20-2207534 .			Aetna Better Health Inc. Aetna Dental of California Inc.	GA CA	IA IA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO NO.	0 0
0001	CVS HEALTH GROUP				Aetna Dental of California Inc	CA NJ	IA IA	Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP				Aetna Rx Home Delivery, LLC		NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 22-3187443 .			Aetna Ireland Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
. 0001	CVS HEALTH GROUP	00000 20-1274723 .			Cofinity, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				@Credentials Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				Aetna Better Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP CVS HEALTH GROUP	13174 26–2867560 . 00000 47–5178095 .			Aetna Better Health Inc. Aetna Better Health of California Inc	CT CA	IA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO	0 0
0001	CVS HEALTH GROUP				Aetna Better Health of California Inc	CA IL	IA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO	
0001	CVS HEALTH GROUP	14043			Aetha Health of Ohio Inc.	0H	IA IA	Aetha Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	15616 80-0629718			Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership.	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Florida Inc.	FL	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Better Health Inc.	OH	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Aetna Better Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	15919 81–1143850 .			Aetna Better Health of Oklahoma Inc	0K	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP				Aetna Student Health Agency Inc.	MA	NIA	Aetna Health Holdings, LLC	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000 73-1702453 .			Delaware Physicians Care, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000 01-0826783			Schaller Anderson Medical Administrators,	DE	NIA	Actes Health Haldings 110	Ownership	100.000	CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	00000 01-0826783 . 00000 86-0842559 .			Aetna Medicaid Adminstrators LLC	DE AZ	NIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO	0 0
0001	CVS HEALTH GROUP				iTriage. LLC	AZ DE	NIA NIA	Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP				Prodigy Health Group. Inc.	DL DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
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Cod		Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
0001	CVS HEALTH GROUP		45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	0.200	CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP		74-2879984				Medical Examinations of New York, P.C.	NY	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	45-5527797				Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50,000	CVS Health Corporation	NO	
0001	CVS HEALTH GROUP		46-0674828				Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership		CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	15098	46-0682197				Innovation Health Plan. Inc.	VA	IA	Innovation Health Insurance Company	Ownership		CVS Health Corporation	NO	0
			10 0002101				Texas Health + Aetna Health Insurance Holding			milovacion nearth meanance company	owner on p				
0001	CVS HEALTH GROUP	00000	81-3789357				Company LLC	ТХ	NIA	Aetna ACO Holdings, Inc.	Ownership.	50,000	CVS Health Corporation	NO	
	GVS HEALTH GROUP		01-3/09337					۱۸	NIA		owner simp		SVS Hearth Corporation	INU	9
0004		10101	04 4740000				Texas Health + Aetna Health Insurance Company	TV		Texas Health + Aetna Health Insurance	a 1.:	400,000		10	
0001	CVS HEALTH GROUP	16121	81-4749336					TX	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	N0	0
1										Texas Health + Aetna Health Insurance				1	
0001	CVS HEALTH GROUP	16132	47-5548221				Texas Health + Aetna Health Plan Inc	TX	IA	Company	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	95109	23-2169745				Aetna Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership		CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP	00000	20-0438576				Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		52-2200070				Performax. Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	87-0632355				Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		27-1760756				Precision Benefit Services, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	31-1368946				American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Owner ship		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		16-1264154				Meritain Health. Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
			86-0537707								Ownership			NO	
0001	CVS HEALTH GROUP				•••••		Adminco, Inc.	AZ	NIA	Aetna Health Holdings, LLC			CVS Health Corporation		0
0001	CVS HEALTH GROUP	00000	86-0527428				Administrative Enterprises, Inc	AZ	NIA	Meritain Health, Inc	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	16-1684061				U.S. Healthcare Holdings, LLC	0H	NIA	Meritain Health, Inc	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	34-1670299				Prime Net, Inc	0H	NIA	Meritain Health, Inc	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	34-1348032				Professional Risk Management, Inc.	0H	NIA	Meritain Health, Inc	Ownership		CVS Health Corporation	N0	0
							Continental Life Insurance Company of								
0001	CVS HEALTH GROUP		62-1181209				Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
										Continental Life Insurance Company of					
0001	CVS HEALTH GROUP		20-2901054				American Continental Insurance Company	TN	IA	Brentwood. Tennessee	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		06-6033492				Aetna Life Insurance Company	CT	IA.	Aetna Inc.	Ownership.		CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	YES	3
0001	CVS HEALTH GROUP		06-1270755				AHP Holdings, Inc.	CT	NIA	Aetha Life Insurance Company	Ownership.		CVS Health Corporation	NO.	0
0001	CVS HEALTH GROUP	00000	06-1028469				AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc.	Ownership		CVS Health Corporation	NO	0
		00000	06-1028469					CT			Ownership			NO NO	
0001	CVS HEALTH GROUP						Aetna Life Assignment Company		NIA	AHP Holdings, Inc.			CVS Health Corporation		0
0001	CVS HEALTH GROUP	00000	20-3678339				PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	06-1423207				Aetna Resources L.L.C.	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-3180700				Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials, Inc	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	N0	13
0001	CVS HEALTH GROUP		85-3918720				CVS Cabot Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Ownership		CVS Health Corporation	N0	14
0001	CVS HEALTH GROUP		85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc	Ownership		CVS Health Corporation	NO	
0001	CVS HEALTH GROUP		31-1001351				Omnicare, LLC		NIA	CVS Cabot Holdings Inc	Ownership		CVS Health Corporation	NO	
0001	CVS HEALTH GROUP		31-1001351				Omnicare, LLC	DE	NIA	CVS Shaw Holdings Inc	Ownership		CVS Health Corporation	NO	
0001	CVS HEALTH GROUP	00000	41-2035961				Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc.	Owner ship		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		26-2030792				Aetna Asset Advisors, LLC	DE DE	NIA	Aetna Financial Holdings. LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		23-2354500				U.S. Healthcare Properties, Inc.	PA	NIA NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	38-3704481	.			Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	11-3667142	(0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership		CVS Health Corporation	N0]
0001	CVS HEALTH GROUP	00000	20-0446676				Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	20-0446713				Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP	00000	23-2670015				Managed Care Coordinators, Inc	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		59-3269144				Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP		61-1193498				Employee Assistance Services, LLC	КҮ	NIA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	33-0052273				Health and Human Resource Center, Inc.	CA.	IA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership		CVS Health Corporation	N0	0
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Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	2
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Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No) *
0001	CVS HEALTH GROUP	00000	36-3681261				The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP							NJ	NIA		Ownership				0
		00000	22-3178125				Work and Family Benefits, Inc			Horizon Behavioral Services, LLC			CVS Health Corporation	NO	
0001	CVS HEALTH GROUP	00000	27-1773021				Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		06-0876836				Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
								NY	IA					NO	
	CVS HEALTH GROUP	84450	57-0805126				Aetna Health Insurance Company of New York			Aetna Inc.	Ownership		CVS Health Corporation		0
	CVS HEALTH GROUP	00000	06-1571642				Aetna International LLC	CT	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		98-0211470				Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000					Aetna Insurance (Singapore) PTE. LTD.	SGP	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation		0
	CVS HEALTH GROUP	00000	86-1455140				Aetna International Ex Pat LLC	DE	NIA	Aetna International LLC	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP						Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP						Aetna Global Benefits (Europe) Limited		NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000					Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP						PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership.	80.000	CVS Health Corporation	NO	4
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	5
							Aetna Global Benefits (Asia Pacific) Limited								
0001	CVS HEALTH GROUP							HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Aetna International LLC	Ownership	77.000	CVS Health Corporation	NO	0
						•••••									
	CVS HEALTH GROUP	00000					Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	N0	0
0001	CVS HEALTH GROUP						Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership.		CVS Health Corporation	NO	0
										Aetna Global Benefits (Asia Pacific)	owner arrp				
0001	CVS HEALTH GROUP	00000					PT Aetna Management Consulting	IDN	NIA	Limited	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP						Aetna Insurance Company Limited	GBR	I.A	Aetna Holdco (UK) Limited	Ownership.		CVS Health Corporation	NO	0
							Aetha mourance company Limiteu				owner simp				
										Aetna Global Benefits (Asia Pacific)					
0001	CVS HEALTH GROUP	00000					Indian Health Organisation Private Limited	IND	NIA	Limited	Ownership	0.020	CVS Health Corporation	NO	2
							Aetna Health Insurance Company of Europe DAC								
0001	CVS HEALTH GROUP	00000						IBI	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
	GVS HEALTH GROUP						· · · · · · · · · · · · · · · · · · ·	InL	IA	Aetha International LLC	owner simp		GVS Hearth corporation		
							Aetna (Shanghai) Enterprise Services Co. Ltd.								
0001	CVS HEALTH GROUP	00000						CHN	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
							Aetna (Beijing) Enterprise Management			Aetna (Shanghai) Enterprise Services Co.	·				
0001	CVS HEALTH GROUP	00000					Services Co., Ltd.	CHN	NIA	Ltd.	Ownership	100.000	CVS Health Corporation	NO	0
											Ownership				
0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Singapore) PTE. LTD	SGP	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
			1					1		Aetna Global Benefits (Singapore) PTE, LTD.				1	1
0001	CVS HEALTH GROUP		1				Indian Health Organisation Private Limited	IND	NIA	(, , , , , , , , , , , , , , , , , , ,	Ownership		CVS Health Corporation	NO	2
			22-2578985					CT	NIA.	Aetna Inc.			CVS Health Corporation	NO	0
	CVS HEALTH GROUP		22-23/8983				AUSHC Holdings, Inc.				Ownership	100.000			
	CVS HEALTH GROUP	00000					Aetna Global Holdings Limited	GBR	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP						Aetna Insurance (Hong Kong) Limited	HKG	IA	Aetna Global Holdings Limited	Ownership		CVS Health Corporation	NO	
	CVS HEALTH GROUP		06-1182176				PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership		CVS Health Corporation	NO	
	CVS HEALTH GROUP	00000	52-2182411				Active Health Management, Inc	DE	NIA	Aetna Inc	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	47-0970432				Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2604867				CVS Accountable Care Organization Inc.	PA	NIA	Active Health Management, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	13980	27-2192415				Health Re, Inc.	VT	ΙΑ	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	81-0579372				Phoenix Data Solutions LLC	DE	NIA	Aetna Inc	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	51-0029326				ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	47-4556274				Echo Merger Sub, Inc.	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP		47-4547145				Aetna Corporate Services, LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP	00000	85-3918720				CVS Cabot Holdings Inc	DE	NIA	Aetna Inc	Ownership	0.280	CVS Health Corporation	N0	14
0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	15
	CVS HEALTH GROUP	00000	31-1001351				Omnicare. LLC	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	
	CVS HEALTH GROUP	81973	75-1296086					DL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	10
	UNS TEALITI UKUUP	¤19/3	13-1290080				Coventry Health and Life Insurance Company	MU	IA	Aetha meaith Holdings, LLC	owner snip		UVO REALLE COPPORATION		

1	2	3	4	5	6	7	8	9	10	11	12	13 If	14	15	16
											Туре				
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.Ś. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Éntity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
						,	Aetna Better Health of Kentucky Insurance		ĺ ĺ	Coventry Health and Life Insurance Company	,	Ŭ		ľ í	/
0001	CVS HEALTH GROUP		47-3279217				Company	КҮ	IA		Ownership		CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP		52-1801446				Group Dental Service, Inc.	MD	NIA.	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95846	52-2056201				Group Dental Service of Maryland, Inc.	MD	IA	Group Dental Service, Inc.	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		81-4345344				Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	95241	42-1244752				Aetna Health of Iowa Inc.	I A	RE	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		42-1308659				Coventry Health Care of Nebraska, Inc.	NE	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
							Aetna Risk Assurance Company of Connecticut								
0001	CVS HEALTH GROUP	00000	47-2049117				Inc	CT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	95173	74-2381406				Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	11102	23-2366731				HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
1			1	1			Coventry Prescription Management Services,								
0001	. CVS HEALTH GROUP	00000	47-0854096				Inc	NV	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	16148	81-3564875				Aetna Better Health of Nevada Inc.	NV	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	96555	54-1576305				Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	00000	01-0646056				Coventry Transplant Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	96377	43-1372307				Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	95318	43-1702094				Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	95408	55-0712129				Coventry Health Care of West Virginia, Inc	WV	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	00000	62-1411933				Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	15827	47-4352768				Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	95489	48-0840330				Coventry Health Care of Kansas, Inc.	KS	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP		81-3370401				Aetna Better Health of Kansas Inc	KS	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	12193	20-1052897				Aetna Better Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	95407	87-0345631				Aetna Health of Utah Inc.	UT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP		20-4416606 37-1241037				Aetna Better Health of Tennessee Inc.	TN	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001	. CVS HEALTH GROUP	74160	37-1241037				Coventry Health Care of Illinois, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	N0	0
0001		00000	20-8070994				Coventry Health Care National Accounts, Inc.	DE	NILA		0	100.000	OVO the lab Organization	N0	0
0001	CVS HEALTH GROUP	00000	20-8070994 20-5185442				Coventry Health Care National Network. Inc.	DE DE	NIA NIA	Aetna Health Holdings, LLC Aetna Health Holdings, LLC	Ownership Ownership	100.000	CVS Health Corporation CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	26-1293772				Coventry Health Care National Network, Inc.	DE	NIA	Aetha Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		20-1293772				First Health Group Corp.	DE	NIA	Aetha Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
	CV3 HEALTH GROUP		20-1/3043/				First Health Life & Health Insurance Company	VE	NIA	Aetha Hearth Horungs, LLC	owner simp				
0001	CVS HEALTH GROUP	90328	38-2242132					ТХ	IA	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	91-1832429				First Choice of the Midwest LLC	SD	NIA	First Health Group Corp.	Owner ship	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	52-1320522				Claims Administration Corp.		NIA.	First Health Group Corp.	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		20-1130063				Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	95114	65-0986441				Aetna Better Health of Florida Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		65-0453436				Coventry Health Plan of Florida, Inc.	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		59-3750548				Carefree Insurance Services, Inc.	FL	NIA	Florida Health Plan Administrators, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP		36-4391310				bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	Ő
	CVS HEALTH GROUP						Virtual Home Healthcare L.L.C.	ARE	NIA	Aetna Global Holdings Limited	Ownership		CVS Health Corporation	NO	
0001	CVS HEALTH GROUP		26-1582982				MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	37-1448790				Mental Health Network of New York IPA, Inc.	NY	NIA	MHNet Specialty Services, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	72-1106596				Mental Health Associates, Inc.	LA	NIA	MHNet Specialty Services, LLC	Ownership		CVS Health Corporation	NO	0
0001	CVS HEALTH GROUP	00000	20-4276336				MHNet of Florida, Inc.	FL	NIA	MHNet Specialty Services, LLC	Ownership		CVS Health Corporation	NO	0
0001	. CVS HEALTH GROUP	16242	81-5030233				Aetna Better Health of Washington, Inc	WA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
			1		1		Banner Health and Aetna Health Insurance								1
0001	CVS HEALTH GROUP	00000	81-5212760				Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership		CVS Health Corporation	N0	9
			1		1		Banner Health and Aetna Health Insurance			Banner Health and Aetna Health Insurance					1
0001	CVS HEALTH GROUP	16058	81-5281115				Company	AZ	IA	Holding Company LLC	Ownership		CVS Health Corporation	N0	0
			1		1					Banner Health and Aetna Health Insurance					1
0001	CVS HEALTH GROUP	16059	81-5290023				Banner Health and Aetna Health Plan Inc.	AZ	IA	Company	Ownership		CVS Health Corporation	NO	0

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											Туре	lf			
											of Control	Control			
											(Ownership,	is		ls an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or		Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
	·						Allina Health and Aetna Health Insurance			· · · ·					1
0001	CVS HEALTH GROUP		81-5112888				Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc	Ownership		CVS Health Corporation	NO	10
										Allina Health and Aetna Health Insurance					
0001	CVS HEALTH GROUP	16194	82-2091197				Allina Health and Aetna Insurance Company	MN		Holding Company LLC	Ownership		CVS Health Corporation	NO	0
										Allina Health and Aetna Health Insurance					
0001	CVS HEALTH GROUP	17352	87-2843387				Allina Health and Aetna Health Plan Inc	MN	IA	Holding Company LLC	Ownership		CVS Health Corporation	NO	0
							Sutter Health and Aetna Insurance Holding								
0001	CVS HEALTH GROUP	00000	82-2171057				Company LLC	DE			Ownership		CVS Health Corporation	N0	11
0004		00000	00.0500004				Sutter Health and Aetna Administrative	DE		Sutter Health and Aetna Insurance Holding		400,000		10	
	CVS HEALTH GROUP	00000	82-2560624				Services LLC	DE		Company LLC Sutter Health and Aetna Insurance Holding	Ownership		CVS Health Corporation	NU	0
	CVS HEALTH GROUP	16979	82-2567822				Sutter Health and Aetna Insurance Company	CA		Company LLC	Ownership	100,000	CVS Health Corporation	NO	0
	CVS HEALTH GROUP		82-3031812				Aetna Pharmacy Management Services LLC	UA DE		Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	INU	······ 0 ·····
	CVS HEALTH GROUP		82-3333789				Aetna Better Health of North Carolina Inc	NC		Aetna Health Holdings, LLC	Ownership Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		27-2186150				Aetna Better Health of Illinois Inc.		١۵	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
	CVS HEALTH GROUP		87-3223066				Aetna Better Health of Indiana Inc.	IL	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
							notia sotto noarte or indiana mor								

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Asteris	Explanation
1	Actna Life Insurance Company owns substantially all of the non-managing membership interests of Actna Partners Diversified Fund LLC.
2	Indian Health Organisation Private Limited is 0.019857% owned by Aetna Global Benefits (Asia Pacific) and 99.980143% owned by Aetna Global Benefits (Singapore) PTE. LTD.
3	Actna ACO Holdings Inc. is owned by Actna Life Insurance Company (302 shares); Actna Health Inc. (PA) (198 shares); and Actna Health Holdings, LLC (1 share).
4	PT. Aetna Global Benefits Indonesia is also 20% owned by Suhatsyah Rivai, Aetna's Nominee.
5	Aetna Global Benefits (Middle East) LLC is also 51% owned by Euro Gulf LLC, Aetna's Nominee.
6	Innovation Health Holdings LLC. Is also 50% owned by Inova Health System Foundation.
7	PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
8	Texas Health + Aetna Health Insurance Holding Company LLC is also 50% owned by Texas Health Resources.
9	Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.
10	Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.
11	Sutter Health and Aetna Insurance Holding Company LLC is also 50% owned by Sutter Health Plan Products Organization, LLC.
12	Virtual Home Health Care L.L.C. is also 51% owned by CBD Commercial Brokers LLC, Aetna's Nominee.
13	Coram Clinical Trials, Inc. is 75% owned by CVS Pharmacy, Inc. and 25% owned by Aetna Life Insurance Company.
14	CVS Cabot Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
15	CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
16	Omnicare, LLC is 0.28% owned by Aetna Inc. The Company is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership.

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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

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

SCHEDULE A - VERIFICATION Real Estate

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

SCHEDULE B - VERIFICATION

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

SCHEDULE BA - VERIFICATION

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2.	Cost of bonds and stocks acquired	0	7,811,146
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration for bonds and stocks disposed of	2,539,040	21, 121, 327
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		20,412,211
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	17,546,619	20,412,211

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

	1		3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)								
2. NAIC 2 (a)		0	0	(92,526)	6,300,028	6,142,527		
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	27,451,451	25,842,039	34,612,591	(105,234)	19,601,177	27,451,451	18,575,665	21,246,056
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock		0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	27,451,451	25,842,039	34,612,591	(105,234)	19,601,177	27,451,451	18,575,665	21,246,056

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

Schedule DA - Part 1 - Short-Term Investments

Schedule DA - Verification - Short-Term Investments **NONE**

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

Schedule DB - Part B - Verification - Futures Contracts

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

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

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

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SCHEDULE E - PART 2 - VERIFICATION (Cash Equivalents)

	, , , , , , , , , , , , , , , , , , ,	1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of cash equivalents acquired	74,619,120	
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		142,110,423
7.	Deduct amortization of premium	0	0
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	0	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	1,029,344	
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	1,029,344	836,192

Schedule A - Part 2 - Real Estate Acquired and Additions Made

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

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

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

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

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

Schedule D - Part 3 - Long-Term Bonds and Stocks Acquired

NONE

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of **NONE**

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

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

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

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

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

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To **NONE** Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees **NONE**

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

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

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SCHEDULE E - PART 1 - CASH Month End Depository Balances345 Book Balance at End of Each Month 2 1 During Current Quarter Amount of Interest Accrued at Current Statement Date Amount of 6 Interest Received During Current Quarter Rate of Depository San Francisco, CA Second Month9, 163,587 Third Month9, 164, 797 First Month7,243,203 Interest Code Wells Fargo Bank, N.A.0.000 ..0 ..0 CitiBank,NA New Castle, DE 0199998. Deposits in ... 1 depositories that do not exceed the allowable limit in any one depository (See ..0.000 ...0 ..0 1,083,917 1,083,917 1,882,048 0 0 100,000 100,000 instructions) - Open Depositories XXX XXX

CitiBank,ÑA

XXX	XXX	0	0	8,427,120	10,347,504	11,146,845	XXX
ot							
XXX	XXX	0	0	0	0	0	XXX
XXX	XXX	0	0	0	0	0	XXX
XXX	XXX	0	0	8,427,120	10,347,504	11,146,845	XXX
XXX	XXX	XXX	XXX	0	0	0	XXX
							1
VVV			0	8 427 120	10 347 504	11 146 845	VVV
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SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

CUSIP Description Code Date Acquired Rate of Interest Maturity Date Book/Adjusted Anound of Interest 01009999990. Total - U.S. Government Bonds 0 0 0 0 0 0200999990. Total - U.S. Rates, Territories and Possessions Bonds 0 0 0 0 020099990. Total - U.S. Rates, Territories and Possessions Bonds 0 0 0 0 020099990. Total - U.S. Policies Suborisions Bonds 0 0 0 0 0 020099900. Total - U.S. Policies Suborisions Bonds 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
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050999999. Total - U.S. States, Territories and Possessions Bonds 0 070999999. Total - U.S. Political Subdivisions Bonds 0 0809999999. Total - U.S. Special Revenues Bonds 0 ALLIMF EERSY OPE 07 4(2) 1444. 09/28/2022 3:30 10/05/2022 752 70 PRIVLE BMARK Note & Sc 07 4(2) 1444. 09/28/2022 3:300 10/02/2022 752 70 109999999. Total - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations 0/26/2022 3:300 10/24/202 276 27 1109999999. Total - Hybrid Securities 1,029,947 1,029,947 1,029,947 1,029,947 1309999999. Total - Hybrid Securities 1,029,947 1,029,947 1,029,947 1,029,947 1309999999. Total - Industrial and Miscellaneous (Unaffiliated Bonds 0 1,029,947 1,029,947 1309999999. Total - Net Subsidiaries and Affiliates Bonds 0 0 1,029,947 1909999999. Total - Unaffiliated Bank Loans 0 1,029,947 1,029,947 2429999999. Total - Commercial Mortgage-Backed Securities 0 1,029,947 1,029,947 1,029,947 1,029,947 1,029,947 1,029,947 1,029,947 <td>00</td>	00
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60934N-50-0 FEDERATED INVESTORS INC TREASURY OBLIGATION FUND	0 356
60934N-50-0	0
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