



# HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE

## Aetna Health of Iowa Inc.

NAIC Group Code 0001 (Current) 0001 (Prior) NAIC Company Code 95241 Employer's ID Number 42-1244752

Organized under the Laws of Iowa, State of Domicile or Port of Entry IA

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes  No

Incorporated/Organized 02/07/1985 Commenced Business 01/01/1986

Statutory Home Office 4170 NW 114th Street (Street and Number) Urbandale, IA, US 50322 (City or Town, State, Country and Zip Code)

Main Administrative Office 4170 NW 114th Street (Street and Number) Urbandale, IA, US 50322 (City or Town, State, Country and Zip Code) 800-872-3862 (Area Code) (Telephone Number)

Mail Address Attn: Stat Compliance: P.O. Box 818048 (Street and Number or P.O. Box) Cleveland, OH, US 44181-8048 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 4170 NW 114th Street (Street and Number) Urbandale, IA, US 50322 (City or Town, State, Country and Zip Code) 800-872-3862 (Area Code) (Telephone Number)

Internet Website Address www.aetna.com

Statutory Statement Contact Kim E. Roth (Name) 215-775-6508 (Area Code) (Telephone Number)  
StatutoryReporting@aetna.com (E-mail Address) 860-262-7767 (FAX Number)

### OFFICERS

President Michael Thomas Avotins  
Vice President and Secretary Edward Chung-I Lee

### OTHER

Amy Christine Fletcher, Chief Financial Officer Tracy Louise Smith, Vice President and Treasurer Derek Scott Blunt, Senior Investment Officer  
Steven Matthew Conte, Corporate Controller Frank Ferris Chronister III, Assistant Controller Peter Keller, Assistant Controller  
Whitney Dorothy Todisco, Assistant Controller

### DIRECTORS OR TRUSTEES

Richard Noble Sloma James Dean Christensen Michael Thomas Avotins

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

Michael Thomas Avotins  
President

Edward Chung-I Lee  
Vice President and Secretary

State of..... Connecticut  
County of.... Hartford

State of..... Connecticut  
County of.... Hartford

Subscribed and sworn to before me this

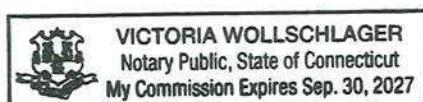
Subscribed and sworn to before me this

21 day of October, 2025

day of \_\_\_\_\_, 2025

Notary Public (Seal)

Notary Public (Seal)



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



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Edward Chung-I Lee  
Vice President and Secretary

Michael Thomas Avotins  
President

State of..... Connecticut  
County of.... Hartford

Subscribed and sworn to before me this

\_\_\_\_ day of \_\_\_\_\_, 2025

State of..... Connecticut  
County of.... Hartford  
Subscribed and sworn to before me this  
\_\_\_\_ day of October, 2025

Cynthia Montano  
Notary Public (Seal)



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

## ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	8,616,035	0	8,616,035	8,555,807
2. Stocks:				
2.1 Preferred stocks .....	0	0	0	0
2.2 Common stocks .....	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens .....	0	0	0	0
3.2 Other than first liens.....	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....	0	0	0	0
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....	0	0	0	0
4.3 Properties held for sale (less \$ encumbrances) .....	0	0	0	0
5. Cash (\$ ..... 9,103,767 ), cash equivalents (\$ ..... 20,107,102 ) and short-term investments (\$ ..... ) .....	29,210,869	0	29,210,869	31,055,580
6. Contract loans (including \$ ..... premium notes) .....	0	0	0	0
7. Derivatives .....				
8. Other invested assets .....				
9. Receivables for securities .....	0	0	0	0
10. Securities lending reinvested collateral assets .....				
11. Aggregate write-ins for invested assets .....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	37,826,904	0	37,826,904	39,611,387
13. Title plants less \$ ..... charged off (for Title insurers only) .....	0	0	0	0
14. Investment income due and accrued .....	105,399	0	105,399	98,442
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	84,448	16,662	67,786	90,010
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	0	0	0	0
15.3 Accrued retrospective premiums (\$ ..... 462,751 ) and contracts subject to redetermination (\$ ..... 2,737,109 ) .....	3,199,860	0	3,199,860	4,837,007
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	0	0	0	0
16.2 Funds held by or deposited with reinsured companies .....	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts .....	0	0	0	0
17. Amounts receivable relating to uninsured plans .....	6,293,063	0	6,293,063	4,412,137
18.1 Current federal and foreign income tax recoverable and interest thereon .....	0	0	0	253,050
18.2 Net deferred tax asset .....	143,332	1,433	141,899	141,899
19. Guaranty funds receivable or on deposit .....	0	0	0	0
20. Electronic data processing equipment and software .....	0	0	0	0
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates .....	0	0	0	0
24. Health care (\$ ..... 910,532 ) and other amounts receivable .....	1,504,572	594,040	910,532	1,430,367
25. Aggregate write-ins for other-than-invested assets .....	4,201	0	4,201	45,170
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	49,161,779	612,135	48,549,644	50,919,469
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27)	49,161,779	612,135	48,549,644	50,919,469
<b>DETAILS OF WRITE-INS</b>				
1101. ....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. State taxes recoverable .....			0	40,969
2502. Guaranty fund assessments .....	4,201		4,201	4,201
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	4,201	0	4,201	45,170

## LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ 216,702 reinsurance ceded) .....	6,560,349	201,104	6,761,453	9,277,916
2. Accrued medical incentive pool and bonus amounts .....	825,261		825,261	903,214
3. Unpaid claims adjustment expenses .....	71,356		71,356	110,383
4. Aggregate health policy reserves, including the liability of \$ 0 for medical loss ratio rebate per the Public Health Service Act .....	816,876		816,876	6,525,730
5. Aggregate life policy reserves .....	0		0	0
6. Property/casualty unearned premium reserve .....	0		0	0
7. Aggregate health claim reserves .....	237		237	238
8. Premiums received in advance .....	99		99	149
9. General expenses due or accrued .....	83,665		83,665	5,633
10.1 Current federal and foreign income tax payable and interest thereon (including \$ 0 on realized gains (losses)) .....	202,476		202,476	0
10.2 Net deferred tax liability .....	0		0	0
11. Ceded reinsurance premiums payable .....	0		0	0
12. Amounts withheld or retained for the account of others .....	0		0	0
13. Remittances and items not allocated .....	0		0	143,134
14. Borrowed money (including \$ 0 current) and interest thereon \$ 0 (including \$ 0 current) .....	0		0	0
15. Amounts due to parent, subsidiaries and affiliates .....	10,267,744		10,267,744	12,508,503
16. Derivatives .....	0		0	0
17. Payable for securities .....	0		0	0
18. Payable for securities lending .....	0		0	0
19. Funds held under reinsurance treaties (with \$ 0 authorized reinsurers, \$ 342,654 unauthorized reinsurers and \$ 0 certified reinsurers) .....	342,654		342,654	22,644
20. Reinsurance in unauthorized and certified (\$ 0 ) companies .....	0		0	163,479
21. Net adjustments in assets and liabilities due to foreign exchange rates .....	0		0	0
22. Liability for amounts held under uninsured plans .....	1,686,141		1,686,141	157,526
23. Aggregate write-ins for other liabilities (including \$ 0 current) .....	223	0	223	223
24. Total liabilities (Lines 1 to 23) .....	20,857,081	201,104	21,058,185	29,818,772
25. Aggregate write-ins for special surplus funds .....	XXX	XXX	0	0
26. Common capital stock .....	XXX	XXX	0	0
27. Preferred capital stock .....	XXX	XXX	0	0
28. Gross paid in and contributed surplus .....	XXX	XXX	13,336,506	13,336,506
29. Surplus notes .....	XXX	XXX	0	0
30. Aggregate write-ins for other-than-special surplus funds .....	XXX	XXX	0	0
31. Unassigned funds (surplus) .....	XXX	XXX	14,154,953	7,764,191
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$ 0 ) .....	XXX	XXX	0	0
32.2 shares preferred (value included in Line 27 \$ 0 ) .....	XXX	XXX	0	0
33. Total capital and surplus (Lines 25 to 31 minus Line 32) .....	XXX	XXX	27,491,459	21,100,697
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	48,549,644	50,919,469
<b>DETAILS OF WRITE-INS</b>				
2301. Abandoned property liability .....	223		223	223
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)	223	0	223	223
2501. .....	XXX	XXX		
2502. .....	XXX	XXX		
2503. .....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001. .....	XXX	XXX		
3002. .....	XXX	XXX		
3003. .....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months .....	....XXX.....	....30,329	....39,267	....52,956
2. Net premium income ( including \$ ..... non-health premium income).....	....XXX.....	....61,809,333	....62,790,596	....86,303,824
3. Change in unearned premium reserves and reserve for rate credits.....	....XXX.....	....5,558,787	....1,314,407	....1,314,407
4. Fee-for-service (net of \$ ..... medical expenses).....	....XXX.....	....0	.....	.....
5. Risk revenue .....	....XXX.....	....0	.....	.....
6. Aggregate write-ins for other health care related revenues .....	....XXX.....	....0	....0	....0
7. Aggregate write-ins for other non-health revenues .....	....XXX.....	....0	....0	....0
8. Total revenues (Lines 2 to 7) .....	....XXX.....	....67,368,120	....64,105,003	....87,618,231
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits .....	....1,156,526	....30,515,202	....40,639,571	....53,363,852
10. Other professional services .....	....139,428	....3,678,833	....3,917,219	....5,904,846
11. Outside referrals .....	....423,369	....423,369	....612,134	....2,207,105
12. Emergency room and out-of-area .....	....95,166	....2,510,965	....2,926,512	....3,975,163
13. Prescription drugs .....	....0	....16,803,701	....10,310,191	....14,279,014
14. Aggregate write-ins for other hospital and medical .....	....0	....0	....0	....0
15. Incentive pool, withhold adjustments and bonus amounts .....		....835,441	....(1,486,272)	....561,386
16. Subtotal (Lines 9 to 15) .....	....1,814,489	....54,767,511	....56,919,355	....80,291,366
<b>Less:</b>				
17. Net reinsurance recoveries .....		....1,507,828	....1,569,089	....2,171,000
18. Total hospital and medical (Lines 16 minus 17) .....	....1,814,489	....53,259,683	....55,350,266	....78,120,366
19. Non-health claims (net) .....		....0	.....	.....
20. Claims adjustment expenses, including \$ ..... 814,624 cost containment expenses .....		....1,195,300	....1,357,377	....1,564,511
21. General administrative expenses .....		....5,998,176	....5,795,009	....8,567,129
22. Increase in reserves for life and accident and health contracts (including \$ ..... increase in reserves for life only) .....		....0	....775,673	....0
23. Total underwriting deductions (Lines 18 through 22).....	....1,814,489	....60,453,159	....63,278,325	....88,252,006
24. Net underwriting gain or (loss) (Lines 8 minus 23) .....	....XXX.....	....6,914,961	....826,678	....(633,775)
25. Net investment income earned .....		....870,287	....782,872	....1,095,978
26. Net realized capital gains (losses) less capital gains tax of \$ ..... (2,712) .....		....3,949	....(118,382)	....(116,690)
27. Net investment gains (losses) (Lines 25 plus 26) .....	....0	....874,236	....664,490	....979,288
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ ..... )] (amount charged off \$ ..... )].....		....0	.....	....0
29. Aggregate write-ins for other income or expenses .....	....0	....(509)	....0	....0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	....XXX.....	....7,788,688	....1,491,168	....345,513
31. Federal and foreign income taxes incurred .....	....XXX.....	....1,499,818	....221,073	....(73,289)
32. Net income (loss) (Lines 30 minus 31) .....	....XXX.....	....6,288,870	....1,270,095	....418,802
<b>DETAILS OF WRITE-INS</b>				
0601. ....	....XXX.....			
0602. ....	....XXX.....			
0603. ....	....XXX.....			
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.....	....0	....0	....0
0701. ....	....XXX.....			
0702. ....	....XXX.....			
0703. ....	....XXX.....			
0798. Summary of remaining write-ins for Line 7 from overflow page .....	....XXX.....	....0	....0	....0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above) .....	....XXX.....	....0	....0	....0
1401. ....				
1402. ....				
1403. ....				
1498. Summary of remaining write-ins for Line 14 from overflow page .....	....0	....0	....0	....0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) .....	....0	....0	....0	....0
2901. Regulatory fines & penalties .....		....(509)	....0	....0
2902. ....				
2903. ....				
2998. Summary of remaining write-ins for Line 29 from overflow page .....	....0	....0	....0	....0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) .....	....0	....(509)	....0	....0

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
33. Capital and surplus prior reporting year.....	21,100,697	21,174,133	21,174,133
34. Net income or (loss) from Line 32 .....	6,288,870	1,270,095	418,802
35. Change in valuation basis of aggregate policy and claim reserves .....			0
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ .....	2,775	10,441	(9,988)
37. Change in net unrealized foreign exchange capital gain or (loss).....			0
38. Change in net deferred income tax .....	2,775	476,831	89,600
39. Change in nonadmitted assets .....	(74,803)	(2,234,895)	(408,371)
40. Change in unauthorized and certified reinsurance .....	163,479	0	(163,479)
41. Change in treasury stock .....	0	0	0
42. Change in surplus notes .....	0	0	0
43. Cumulative effect of changes in accounting principles.....			0
44. Capital Changes:			
44.1 Paid in .....			(1,267,835)
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....			0
45. Surplus adjustments:			
45.1 Paid in .....	0	0	1,267,835
45.2 Transferred to capital (Stock Dividend) .....			0
45.3 Transferred from capital .....			0
46. Dividends to stockholders .....			0
47. Aggregate write-ins for gains or (losses) in surplus .....	0	0	0
48. Net change in capital & surplus (Lines 34 to 47) .....	6,390,762	(487,516)	(73,436)
49. Capital and surplus end of reporting period (Line 33 plus 48)	27,491,459	20,686,617	21,100,697
<b>DETAILS OF WRITE-INS</b>			
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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	63,302,713	65,089,183	86,557,173
2. Net investment income .....	822,335	805,781	1,119,087
3. Miscellaneous income .....	0	0	0
4. Total (Lines 1 to 3) .....	64,125,048	65,894,964	87,676,260
5. Benefit and loss related payments .....	55,393,194	54,794,652	76,428,141
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	7,466,322	7,857,583	9,748,222
8. Dividends paid to policyholders .....			
9. Federal and foreign income taxes paid (recovered) net of \$ ..... tax on capital gains (losses) .....	1,041,580	(417,546)	9,143
10. Total (Lines 5 through 9) .....	63,901,096	62,234,689	86,185,506
11. Net cash from operations (Line 4 minus Line 10) .....	223,952	3,660,275	1,490,754
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	1,492,000	7,017,852	8,770,897
12.2 Stocks .....	0	0	0
12.3 Mortgage loans .....	0	0	0
12.4 Real estate .....	0	0	0
12.5 Other invested assets .....	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments .....	0	(2)	107
12.7 Miscellaneous proceeds .....	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	1,492,000	7,017,850	8,771,004
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	1,496,780	4,922,310	4,922,310
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	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	1,496,780	4,922,310	4,922,310
14. Net increase/(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) .....	(4,780)	2,095,540	3,848,694
<b>Cash from Financing and Miscellaneous Sources</b>			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes .....	0	0	0
16.2 Capital and paid in surplus, less treasury stock .....	0	0	0
16.3 Borrowed funds .....	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities .....	0	0	0
16.5 Dividends to stockholders .....	0	0	0
16.6 Other cash provided (applied) .....	(2,063,883)	6,298,280	7,765,184
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(2,063,883)	6,298,280	7,765,184
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(1,844,711)	12,054,095	13,104,632
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	31,055,580	17,950,948	17,950,948
19.2 End of period (Line 18 plus Line 19.1) .....	29,210,869	30,005,043	31,055,580

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

20.0001. .....	.....	.....	.....
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## EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
<b>Total Members at end of:</b>														
1. Prior Year .....	4,511	0	52	0	0	0	0	4,459	0	0	0	0	0	0
2. First Quarter .....	3,414	0	56	0	0	0	0	3,358	0	0	0	0	0	0
3. Second Quarter .....	3,355	0	54	0	0	0	0	3,301	0	0	0	0	0	0
4. Third Quarter .....	3,175		82					3,093						
5. Current Year .....	0		0					0						
6. Current Year Member Months	30,329		597					29,732						
<b>Total Member Ambulatory Encounters for Period:</b>														
7. Physician .....	131,050		573					130,477						
8. Non-Physician .....	148,235		480					147,755						
9. Total .....	279,285	0	1,053	0	0	0	0	278,232	0	0	0	0	0	0
10. Hospital Patient Days Incurred	7,611		8					7,603						
11. Number of Inpatient Admissions	903		4					899						
12. Health Premiums Written (a) .....	63,498,089		552,359					62,945,730						
13. Life Premiums Direct .....	0													
14. Property/Casualty Premiums Written .....	0													
15. Health Premiums Earned .....	69,056,876		6,111,146					62,945,730						
16. Property/Casualty Premiums Earned .....	0													
17. Amount Paid for Provision of Health Care Services .....	56,870,442	183,791	115,634					56,571,017						
18. Amount Incurred for Provision of Health Care Services .....	54,767,511	183,791	118,241					54,465,479						

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 62,945,730

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

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

### Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
<b>Claims Unpaid (Reported)</b>						
0299999 Aggregate accounts not individually listed-uncovered	4,649	2	16	(54)	(2)	4,611
0399999 Aggregate accounts not individually listed-covered	1,789,931	51	418	(1,373)	(63)	1,788,964
0499999 Subtotals	1,794,580	53	434	(1,427)	(65)	1,793,575
0599999 Unreported claims and other claim reserves						5,184,580
0699999 Total amounts withheld						
0799999 Total claims unpaid						6,978,155
0899999 Accrued medical incentive pool and bonus amounts						825,261

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

## UNDERWRITING AND INVESTMENT EXHIBIT

### ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	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		
1. Comprehensive (hospital and medical) individual .....	183,791	0	0	0	183,791	0
2. Comprehensive (hospital and medical) group .....	(3,459)	119,093	2,323	37,020	(1,136)	34,076
3. Medicare Supplement .....	0	0	0	0	0	0
4. Vision only .....	0	0	0	0	0	0
5. Dental only .....	0	0	0	0	0	0
6. Federal Employees Health Benefits Plan .....	0	0	0	0	0	0
7. Title XVIII - Medicare .....	7,751,313	46,429,062	275,967	6,446,380	8,027,280	9,244,078
8. Title XIX - Medicaid .....	0	0	0	0	0	0
9. Credit A&H .....					0	0
10. Disability Income .....					0	0
11. Long-term care .....					0	0
12. Other health .....	0	0	0	0	0	0
13. Health subtotal (Lines 1 to 12) .....	7,931,645	46,548,155	278,290	6,483,400	8,209,935	9,278,154
14. Health care receivables (a) .....	0	1,504,572	0	0	0	1,965,478
15. Other non-health .....	0	0	0	0	0	0
16. Medical incentive pools and bonus amounts .....	679,539	233,855	359,729	465,532	1,039,268	903,214
17. Totals (Lines 13 - 14 + 15 + 16)	8,611,184	45,277,438	638,019	6,948,932	9,249,203	8,215,890

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

## NOTES TO FINANCIAL STATEMENTS

### 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, 2025 and December 31, 2024 is as follows:

	SSAP #	F/S Page	F/S Line #	2025	2024
<b>NET INCOME</b>					
(1) Aetna Health of Iowa Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 6,288,870	\$ 418,802
(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	\$ 6,288,870	\$ 418,802
<b>SURPLUS</b>					
(5) Aetna Health of Iowa Inc. State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 27,491,459	\$ 21,100,697
(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	\$ 27,491,459	\$ 21,100,697

#### 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. Accounting Policies

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 determines fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. The Company had no investments where fair value was determined using broker quotes or an internal analysis of financial performance and cash flow projections at September 30, 2025. 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.

## NOTES TO FINANCIAL STATEMENTS

The Company periodically reviews its bonds to determine whether a decline in fair value below the carrying value is other-than-temporary. For bonds, other than asset-backed securities ("ABS") 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) Asset-Backed Securities**

Asset Backed Securities ("ABS") are carried at amortized cost adjusted for unamortized premiums and discounts and are accounted for using the retrospective adjustment method. Premiums and discounts on asset-backed securities are amortized using the scientific method over the estimated remaining term of the securities, adjusted for anticipated prepayments.

For ABS, the Company records OTTI when the fair value of the asset-backed 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 asset-backed security's effective interest rate and this difference is also accounted for as a realized capital loss.

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

**D. Going Concern**

As of November 12, 2025, management evaluated whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Company's ability to continue as a going concern and management has determined that it is not probable that the Company will be unable to meet its obligations as they become due within one year after the financial statements are available to be issued. Management will continuously evaluate the Company's ability to continue as a going concern and will take appropriate action and will make appropriate disclosures if there is any change in any condition or events that would raise substantial doubt about the Company's ability to continue as a going concern.

**2. Accounting Changes and Corrections of Errors**

The Company did not have any accounting changes or corrections of errors in the period ended September 30, 2025.

**3. Business Combinations and Goodwill**

No significant change.

**4. Discontinued Operations**

No significant change.

**5. Investments**

A. through C.: No significant change.

**D. Asset-Backed Securities**

- (1) Prepayment assumptions for single class and multi-class mortgage-backed/asset-backed securities were obtained from industry market sources.
- (2) The Company did not recognize any OTTI on asset-backed 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

## NOTES TO FINANCIAL STATEMENTS

with Statements of Statutory Accounting Principles ("SSAP") No. 43, Asset-Backed Securities ("SSAP No. 43") at September 30, 2025.

- (3) The Company had no recognized OTTI on asset-backed 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, 2025.
- (4) The Company had no unrealized loss position on asset-backed securities held by the Company at September 30, 2025.
- (5) Not applicable.

**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, 2025.
- (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at September 30, 2025.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at September 30, 2025.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at September 30, 2025.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at September 30, 2025.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at September 30, 2025.
- 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, 2025.
- O. through Q.: No significant change.
- R. Reporting Entity's Share of Cash Pool by Asset Type:

The Company's investment in the qualified cash pool is reported in cash equivalents. The Company's investment in the qualified cash pool is \$20,107,102 as of September 30, 2025. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of September 30, 2025:

Asset Type	Percent Share
(1) Cash	— %
(2) Cash Equivalents	99.82 %
(3) Short-Term Investments	0.18 %
(4) Total	100.00 %

**S. No significant change.**

**6. Joint Ventures, Partnerships and Limited Liability Companies**

No significant change.

**7. Investment Income**

No significant change.

**8. Derivative Instruments**

The Company did not have any derivative instruments at September 30, 2025.

**9. Income Taxes**

No significant change.

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

No significant change.

## NOTES TO FINANCIAL STATEMENTS

11. Debt

- A. The Company did not have any items related to debt, including capital notes at September 30, 2025.
- B. The Company did not have any Federal Home Loan Bank agreements at September 30, 2025.

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at September 30, 2025.

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

No significant change.

14. Liabilities, Contingencies and Assessments

No significant change.

15. Leases

No significant change.

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

No significant change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported as Sales

No significant change.

B. Transfer and Servicing of Financial Assets

(1) No significant change.

(2) and (3): The Company did not have any servicing assets or liabilities at September 30, 2025.

(4) The Company did not have any securitized financial assets at September 30, 2025.

(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, 2025 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

A.

(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, 2025.

(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 2025.

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

## NOTES TO FINANCIAL STATEMENTS

(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, 2025.

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, 2025 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)
Issuer Credit Obligations	\$ 6,696,538	\$ 6,623,279	\$ 2,432,015	\$ 4,264,523	\$ —	\$ —	\$ —
Asset-Backed Securities	2,003,802	1,992,756	—	2,003,802	—	—	—
Cash Equivalents and Money Market Funds	20,107,102	20,107,102	—	20,107,102	—	—	—

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

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

E. The Company has not elected to use the net asset value practical expedient to fair value to measure its investments.

### 21. Other Items

A. and B.: No significant change.

### C. Other Disclosures

U.S. ex rel. Andrew Shea v. Aetna Life Insurance Company, et al.(U.S. District Court for the District of Massachusetts). In May 2025, the U.S. Attorney's Office for the District of Massachusetts filed a complaint-in-intervention in this previously sealed qui tam case. The complaint alleges that the Company and two other large health insurance companies paid kickbacks to insurance brokers to induce them to direct patients to their Medicare Advantage plans and, as a result, claims made to the government in connection with those plans violated the federal False Claims Act and Anti-Kickback Statute. The complaint also alleges that the Company engaged in discriminatory conduct. The Company is defending itself against these claims.

D. through I.: No significant change.

### 22. Events Subsequent

#### A. Type I - Recognized Subsequent Events

Subsequent events have been considered through November 12, 2025 for the statutory statement issued on November 12, 2025.

The Company had no known reportable recognized subsequent events.

#### B. Type II - Non-Recognized Subsequent Events

Subsequent events have been considered through November 12, 2025 for the statutory statement issued on November 12, 2025.

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

## NOTES TO FINANCIAL STATEMENTS

### 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)		\$ —
Liabilities		
2. Risk adjustment user fees payable for ACA Risk Adjustment		—
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool payments)		—
Operations (Revenue & Expense)		
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment		—
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)		—

(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:

	Accrued During the Prior Year on Business Written		Received or Paid as of the Current Year on Business		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	\$ —	A	\$ —	\$ —
2. Premium adjustments (payable) (including high risk pool premium)	—	—	—	—	—	—	—	—	B	—	—
3. Subtotal ACA Permanent Risk Adjustment Program	—	—	—	—	—	—	—	—		—	—

### 25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reserves as of December 31, 2024 were \$10,291,751. As of September 30, 2025, \$8,721,567 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$638,019 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$932,165 favorable prior-year development since December 31, 2024 to September 30, 2025. 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 \$1,080,752 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.

## **NOTES TO FINANCIAL STATEMENTS**

**29. Participating Policies**

No significant change.

**30. Premium Deficiency Reserves**

No significant change.

**31. Anticipated Salvage and Subrogation**

No significant change.

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

**GENERAL**

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]

1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]

2.2 If yes, date of change: \_\_\_\_\_

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... 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 9, 2025, Aetna Insurance Hong Kong Limited was dissolved.

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. ..... 0000064803

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 that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.  
.....

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. ..... 12/31/2020

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This 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 domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). ..... 06/23/2022

6.4 By what department or departments?  
Iowa Insurance Division .....

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] 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) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]

7.2 If yes, give full information:  
.....

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? ..... Yes [ ] No [ X ]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? ..... Yes [ ] No [ X ]

8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

## **GENERAL INTERROGATORIES**

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... Yes [  ] No [  ]

(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c) Compliance with applicable governmental laws, rules and regulations;

(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e) Accountability for adherence to the code.

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

9.2 Has the code of ethics for senior managers been amended? ..... Yes [  ] No [  ]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).  
In the first quarter of 2025 the Code of Conduct was amended. The changes made were updating the name of a section, report, and policy, and made minor improvements to the spacing and formatting. .....

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

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

## FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]  
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$ ..... 0

## INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [ 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: ..... \$ ..... 0  
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 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds .....	\$ .....0	\$ .....0
14.22 Preferred Stock .....	\$ .....0	\$ .....0
14.23 Common Stock .....	\$ .....0	\$ .....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 date:

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, Parts 1 and 2. ....	\$ ..... 0
16.3 Total payable for securities lending reported on the liability page. ....	\$ ..... 0

**STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.**  
**GENERAL INTERROGATORIES**

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

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

1 Name of Custodian(s)	2 Custodian Address
State Street Bank and Trust Company .....	State Street Financial Center; Corporate Headquarters; One Congress Street; Boston, MA 02114-2016 .....

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

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

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

17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Derek S. Blunt as Senior Investment Officer .....	A.....

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets? ..... Yes [ ] No [ X ]

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? ..... Yes [ ] No [ X ]

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	Derek S. Blunt .....	N/A .....	Not registered .....	NO.....

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? ..... Yes [ X ] No [ ]

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

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? ..... Yes [ ] No [ X ]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? ..... Yes [ ] No [ X ]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? ..... Yes [ ] No [ X ]

**GENERAL INTERROGATORIES****PART 2 - HEALTH**

## 1. Operating Percentages:

1.1 A&H loss percent .....	80.267 %
1.2 A&H cost containment percent .....	1.209 %
1.3 A&H expense percent excluding cost containment expenses .....	9.469 %
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 ]

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

## **SCHEDULE S - CEDED REINSURANCE**

Showing All New Reinsurance Treaties - Current Year to Date

# NON E

**SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS**

Current Year to Date - Allocated by States and Territories

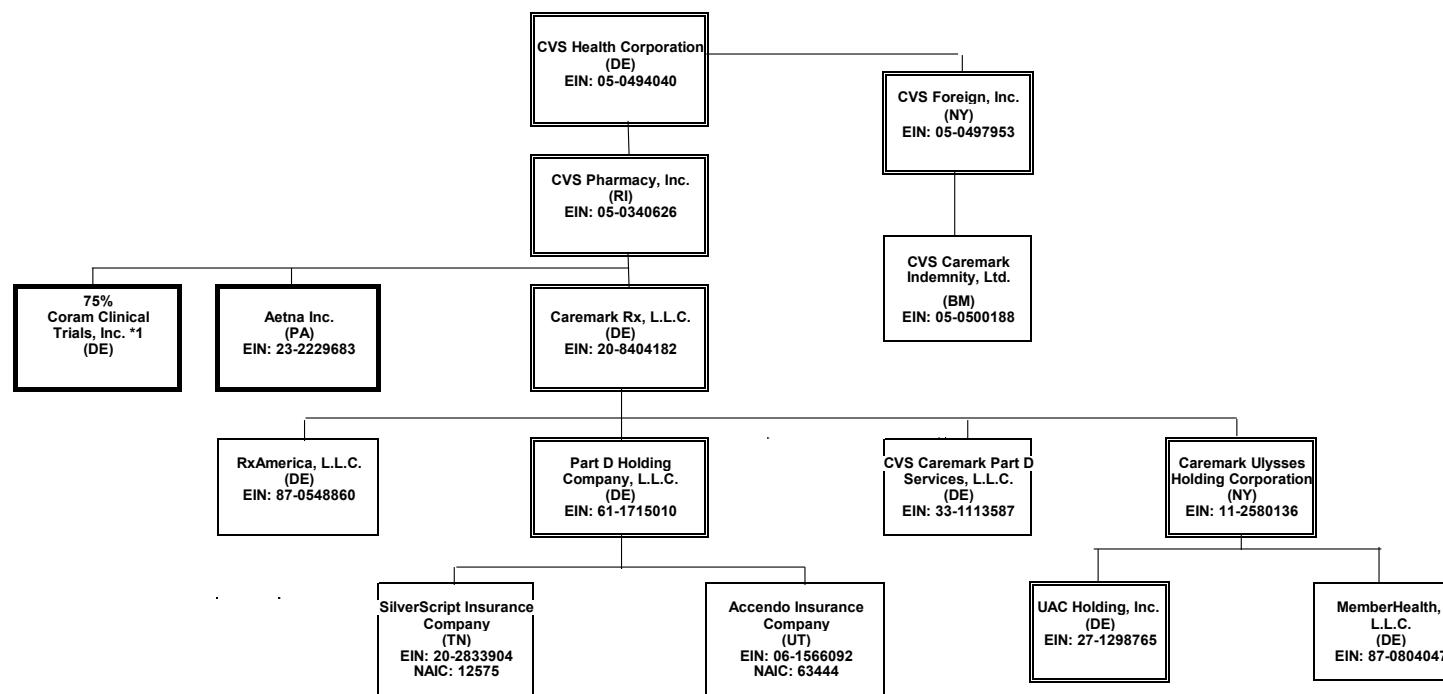
States, etc.	1 Active Status (a)	Direct Business Only								
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Program Premiums	7 Life and Annuity Premiums & Other Considerations	8 Property/ Casualty Premiums	9 Total Columns 2 Through 8	10 Deposit-Type Contracts
1. Alabama .....	AL .....	N .....							0 .....	
2. Alaska .....	AK .....	N .....							0 .....	
3. Arizona .....	AZ .....	N .....							0 .....	
4. Arkansas .....	AR .....	N .....							0 .....	
5. California .....	CA .....	N .....							0 .....	
6. Colorado .....	CO .....	N .....							0 .....	
7. Connecticut .....	CT .....	N .....							0 .....	
8. Delaware .....	DE .....	N .....							0 .....	
9. District of Columbia	DC .....	N .....							0 .....	
10. Florida .....	FL .....	N .....							0 .....	
11. Georgia .....	GA .....	N .....							0 .....	
12. Hawaii .....	HI .....	N .....							0 .....	
13. Idaho .....	ID .....	N .....							0 .....	
14. Illinois .....	IL .....	N .....							0 .....	
15. Indiana .....	IN .....	N .....							0 .....	
16. Iowa .....	IA .....	L .....	552,359 .....	62,945,730 .....					63,498,089 .....	
17. Kansas .....	KS .....	N .....							0 .....	
18. Kentucky .....	KY .....	N .....							0 .....	
19. Louisiana .....	LA .....	N .....							0 .....	
20. Maine .....	ME .....	N .....							0 .....	
21. Maryland .....	MD .....	N .....							0 .....	
22. Massachusetts .....	MA .....	N .....							0 .....	
23. Michigan .....	MI .....	N .....							0 .....	
24. Minnesota .....	MN .....	N .....							0 .....	
25. Mississippi .....	MS .....	N .....							0 .....	
26. Missouri .....	MO .....	N .....							0 .....	
27. Montana .....	MT .....	N .....							0 .....	
28. Nebraska .....	NE .....	N .....							0 .....	
29. Nevada .....	NV .....	N .....							0 .....	
30. New Hampshire .....	NH .....	N .....							0 .....	
31. New Jersey .....	NJ .....	N .....							0 .....	
32. New Mexico .....	NM .....	N .....							0 .....	
33. New York .....	NY .....	N .....							0 .....	
34. North Carolina .....	NC .....	N .....							0 .....	
35. North Dakota .....	ND .....	N .....							0 .....	
36. Ohio .....	OH .....	N .....							0 .....	
37. Oklahoma .....	OK .....	N .....							0 .....	
38. Oregon .....	OR .....	N .....							0 .....	
39. Pennsylvania .....	PA .....	N .....							0 .....	
40. Rhode Island .....	RI .....	N .....							0 .....	
41. South Carolina .....	SC .....	N .....							0 .....	
42. South Dakota .....	SD .....	N .....							0 .....	
43. Tennessee .....	TN .....	N .....							0 .....	
44. Texas .....	TX .....	N .....							0 .....	
45. Utah .....	UT .....	N .....							0 .....	
46. Vermont .....	VT .....	N .....							0 .....	
47. Virginia .....	VA .....	N .....							0 .....	
48. Washington .....	WA .....	N .....							0 .....	
49. West Virginia .....	WV .....	N .....							0 .....	
50. Wisconsin .....	WI .....	N .....							0 .....	
51. Wyoming .....	WY .....	N .....							0 .....	
52. American Samoa .....	AS .....	N .....							0 .....	
53. Guam .....	GU .....	N .....							0 .....	
54. Puerto Rico .....	PR .....	N .....							0 .....	
55. U.S. Virgin Islands ..	VI .....	N .....							0 .....	
56. Northern Mariana Islands .....	MP .....	N .....							0 .....	
57. Canada .....	CAN .....	N .....							0 .....	
58. Aggregate Other Aliens .....	OT .....	XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
59. Subtotal .....		XXX .....	552,359 .....	62,945,730 .....	0 .....	0 .....	0 .....	0 .....	63,498,089 .....	0 .....
60. Reporting Entity Contributions for Employee Benefit Plans .....		XXX .....								0 .....
61. Totals (Direct Business)		XXX .....	552,359 .....	62,945,730 .....	0 .....	0 .....	0 .....	0 .....	63,498,089 .....	0 .....
DETAILS OF WRITE-INS										
58001 .....		XXX .....								
58002 .....		XXX .....								
58003 .....		XXX .....								
58998. Summary of remaining write-ins for line 58 from overflow page .....		XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....	0 .....

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 4. Q - Qualified - Qualified or accredited reinsurer..... 0  
 2. R - Registered - Non-domiciled RRGs..... 0 5. N - None of the above - Not allowed to write business in the state..... 56  
 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. .... 0

## 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 500 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.

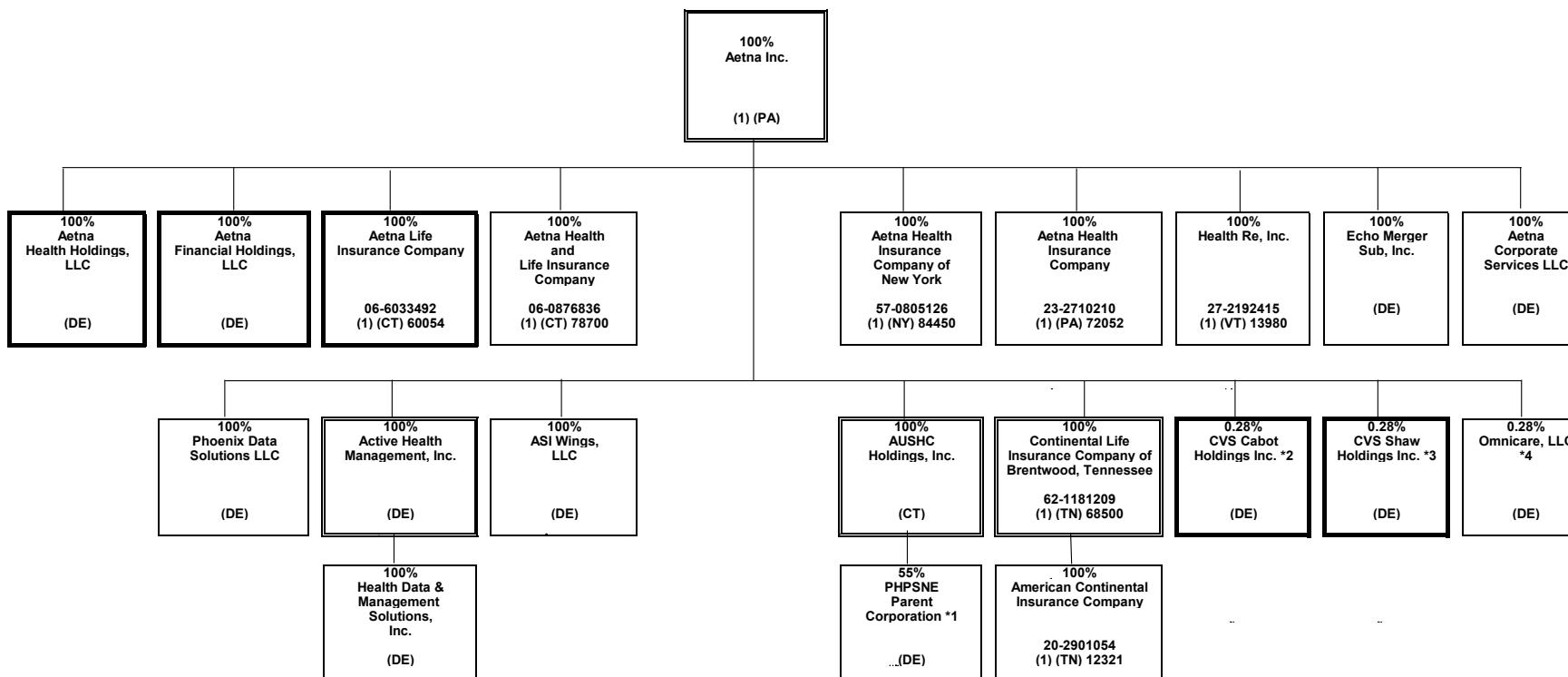
Double borders indicate entity has subsidiaries shown on the same page.

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.

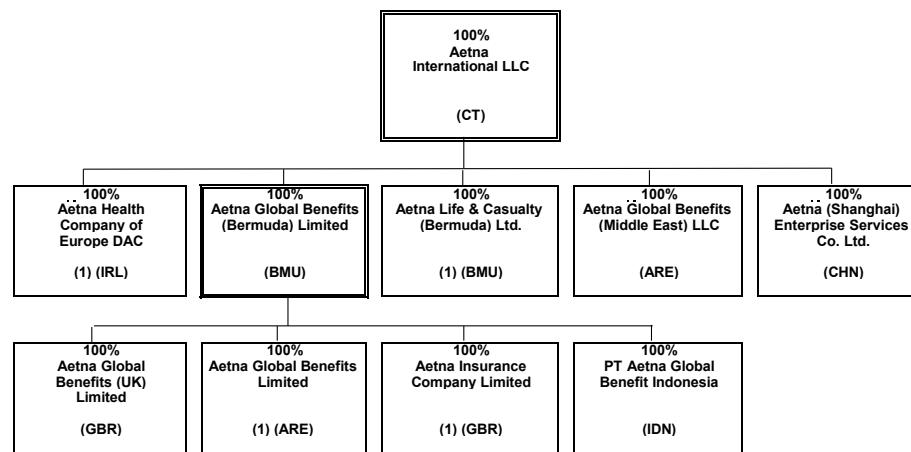
\*2 CVS Cabot Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

\*3 CVS Shaw Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

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

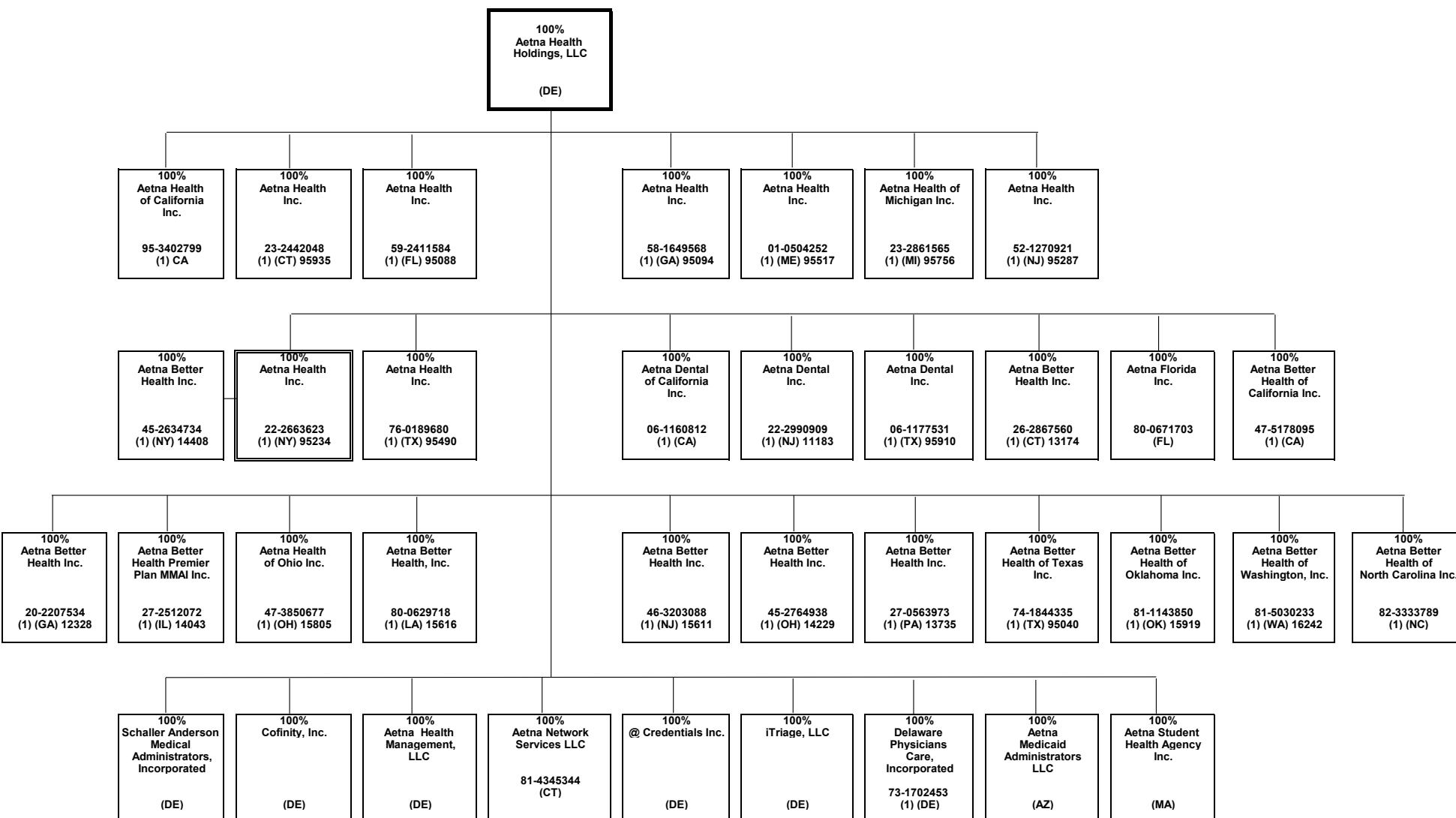
SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART



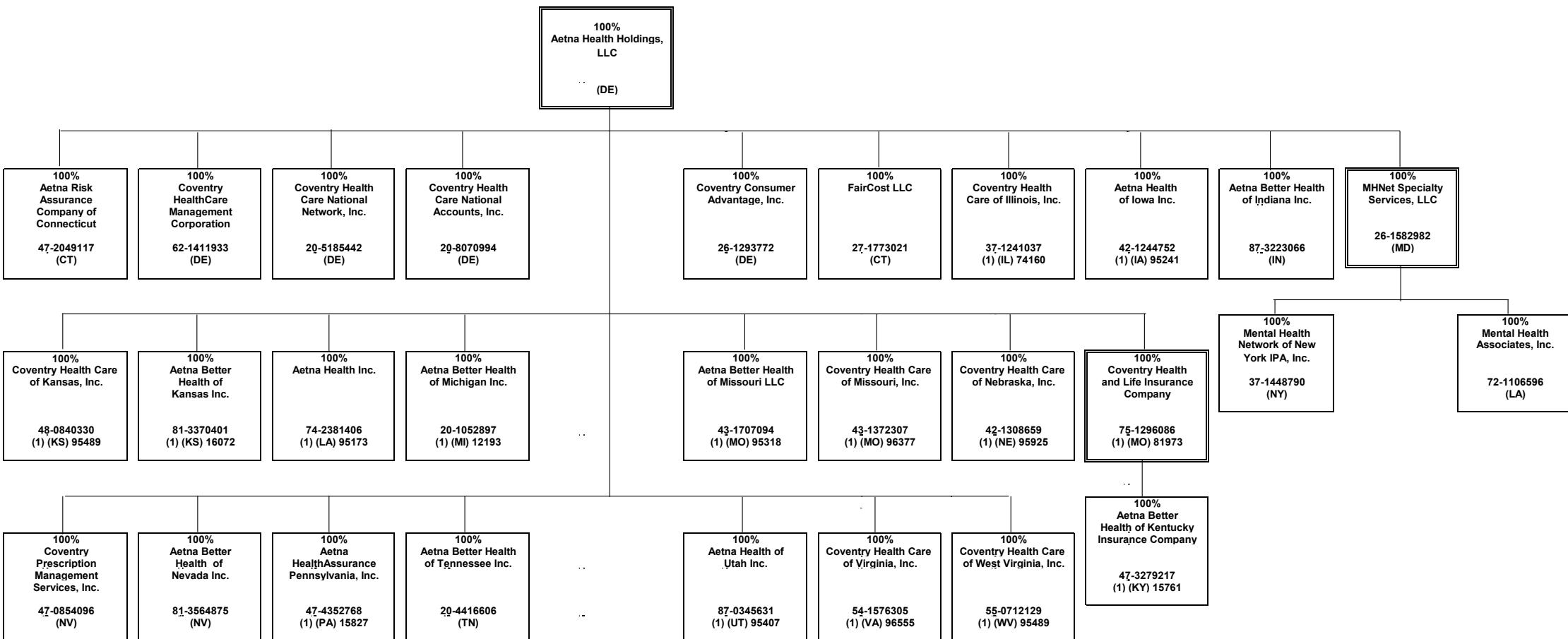
## SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART



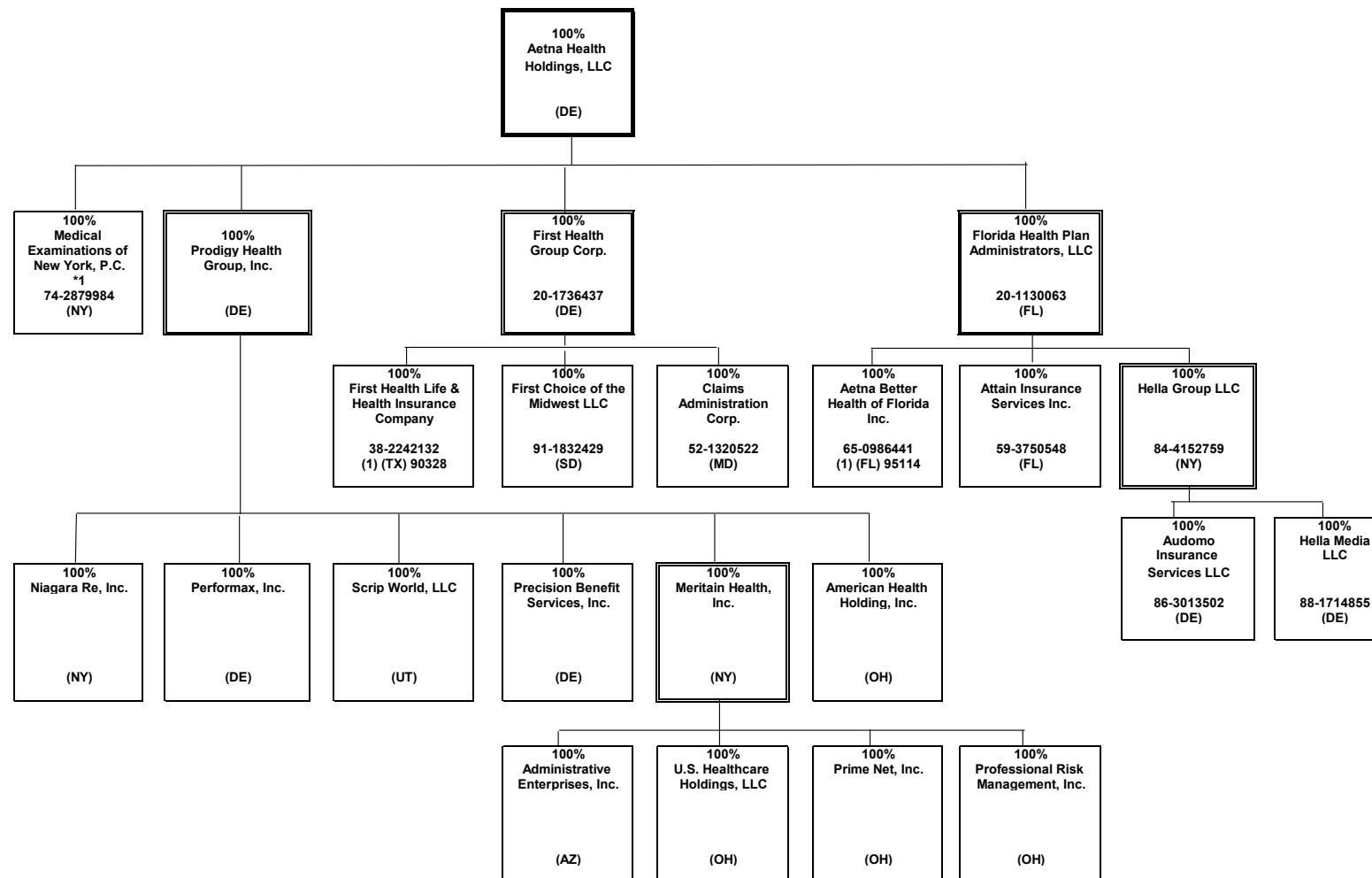
## SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURANCE MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART



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

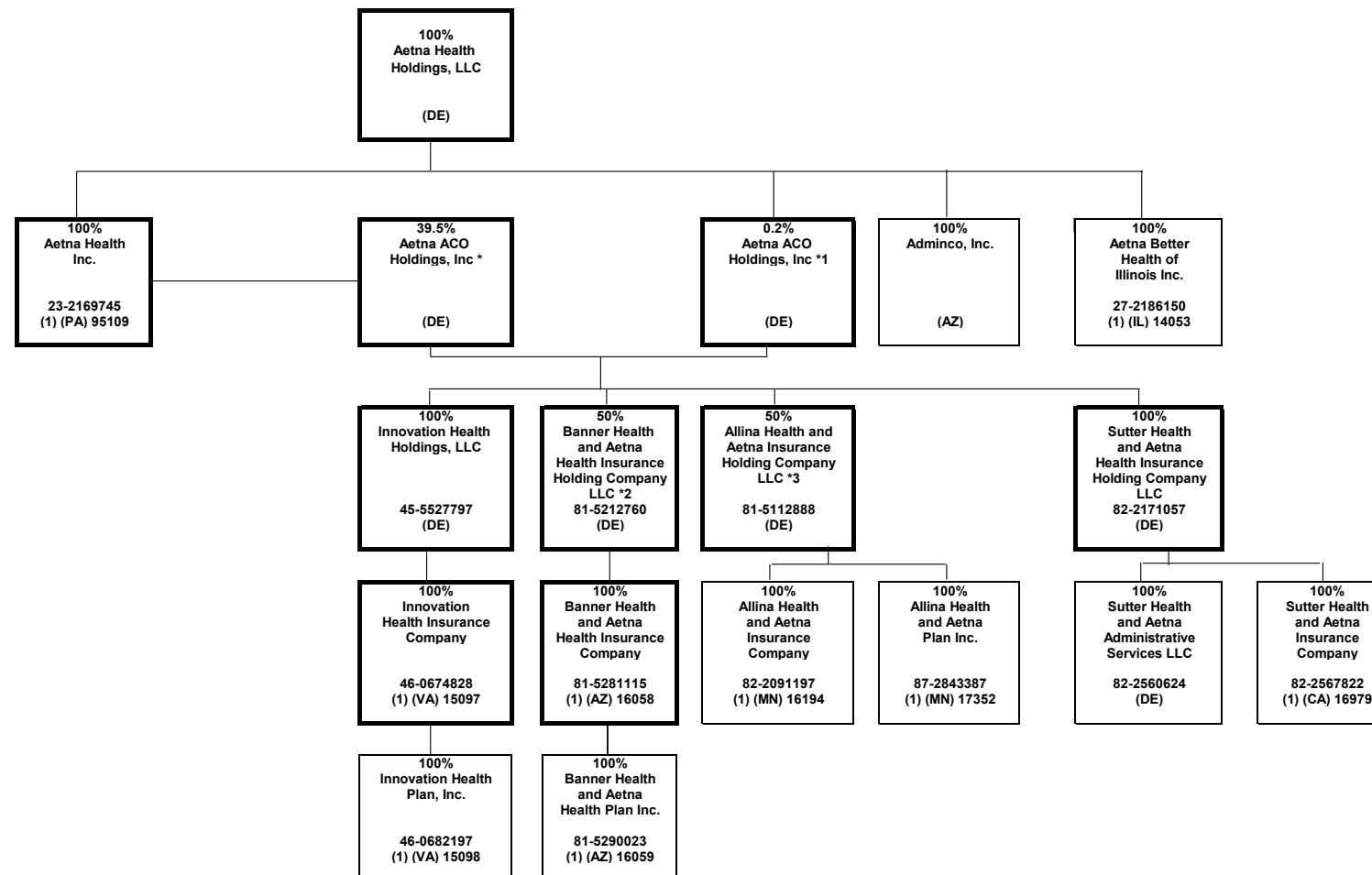
## PART 1 - ORGANIZATIONAL CHART



\*1 Owned via a nominee

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

## PART 1 - ORGANIZATIONAL CHART



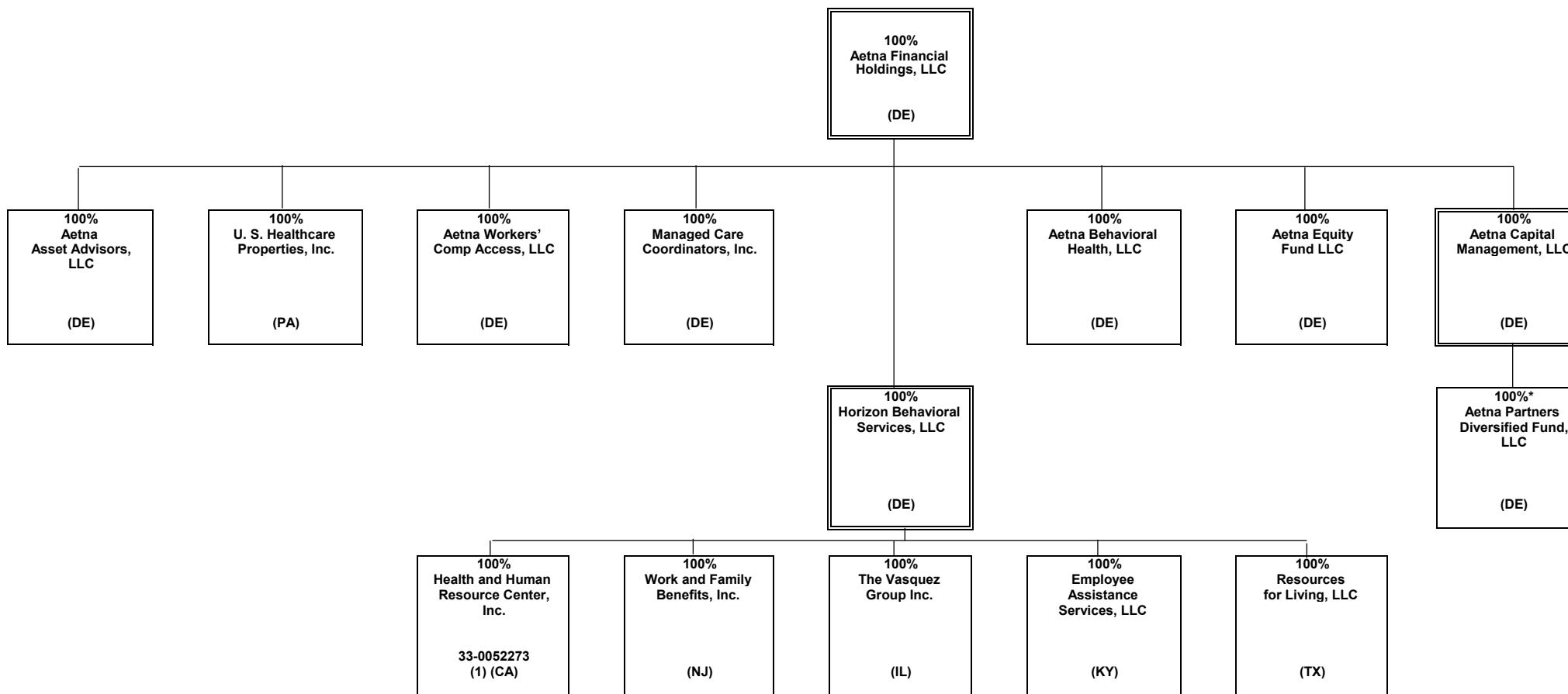
\*1 Aetna ACO Holdings Inc. is owned by Aetna Life Insurance Company (302 shares); Aetna Health Inc. (PA) (198 shares); and Aetna Health Holdings, LLC (1 share).

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

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

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

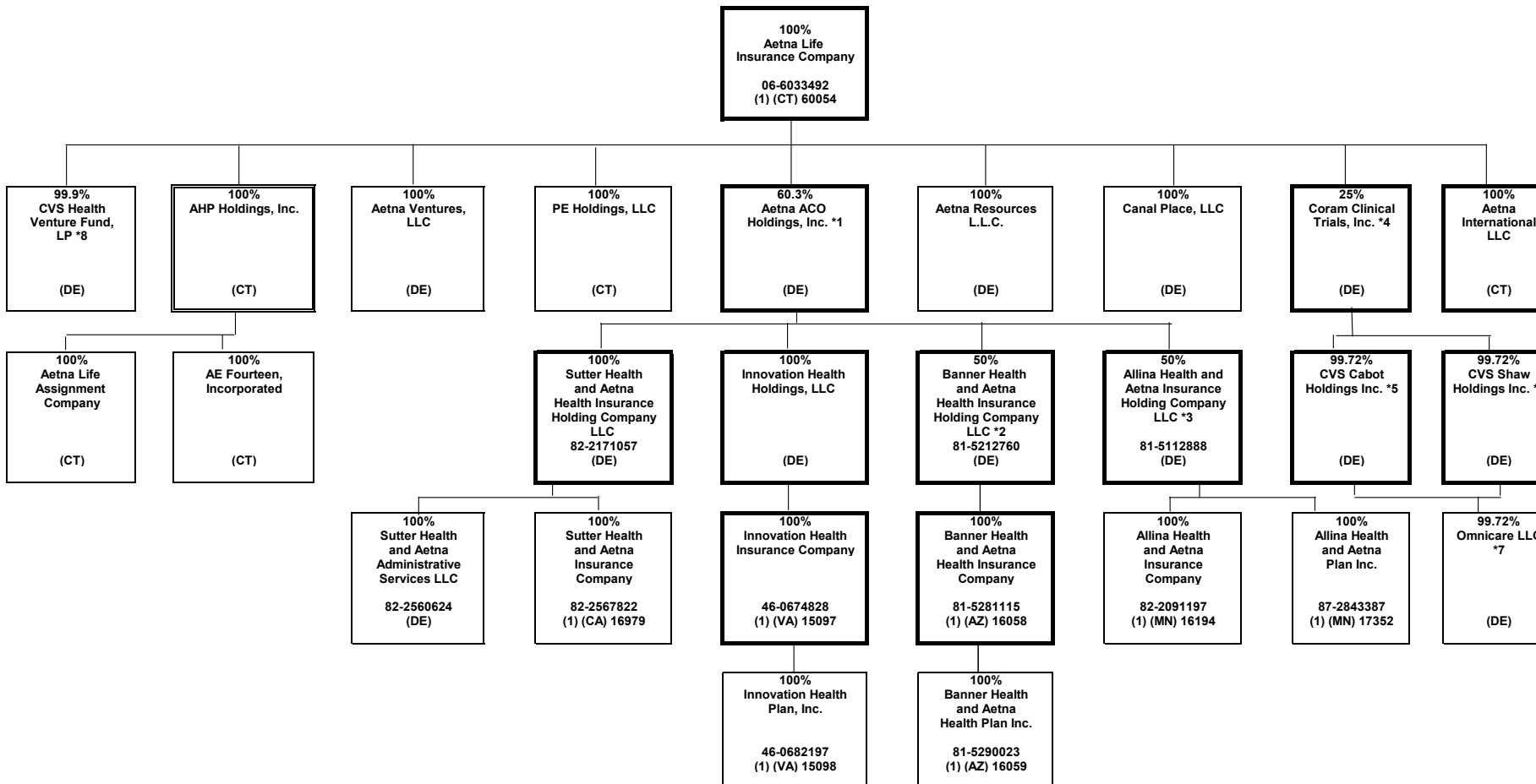
## PART 1 - ORGANIZATIONAL CHART



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

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

## PART 1 - ORGANIZATIONAL CHART



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

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

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

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

\*5 CVS Cabot Holdings Inc. is also 0.28% owned by Aetna Inc.

\*6 CVS Shaw Holdings Inc. is also 0.28% owned by Aetna Inc.

\*7 Remaining 0.28% owned by Aetna Inc. CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc. each owning 49.86%.

\*8 CVS Health Venture Fund, LP is also 0.1% owned by CVS Health Ventures Fund GP, LLC

**SCHEDULE Y**  
**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Per-centage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0001 ...	CVS HEALTH GROUP .....	.....	05-0494040 .....	.....	0000064803 .....	NYSE .....	CVS Health Corporation .....	..DE.....	....UIP.....	Board of Directors .....	Board of Directors.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	63444 .....	06-1566092 .....	.....	.....	Accendo Insurance Company .....	.....	..UT.....	....IA.....	Part D Holding Company, L.L.C. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	12575 .....	20-2833904 .....	.....	.....	SilverScript Insurance Company .....	.....	..TN.....	....IA.....	Part D Holding Company, L.L.C. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	05-0340626 .....	.....	.....	CVS Pharmacy, Inc. .....	.....	..RI.....	....UIP.....	CVS Health Corporation .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	20-8404182 .....	.....	.....	Caremark Rx, L.L.C. .....	.....	..DE.....	....NIA.....	CVS Pharmacy, Inc .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	61-1715010 .....	.....	.....	Part D Holding Company, L.L.C. .....	.....	..DE.....	....NIA.....	Caremark, Rx., L.L.C. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	33-1113587 .....	.....	.....	CVS Caremark Part D Services, L.L.C. .....	.....	..DE.....	....NIA.....	Caremark, Rx., L.L.C. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	87-0548860 .....	.....	.....	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 .....	.....	3060706 .....	Caremark Ulysses Holding Corporation .....	.....	..NY.....	....NIA.....	Caremark, Rx., L.L.C. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	87-0804047 .....	.....	.....	MemberHealth, L.L.C. .....	.....	..DE.....	....NIA.....	Caremark Ulysses Holding Corporation .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	05-0500188 .....	.....	.....	CVS Caremark Indemnity, Ltd. .....	.....	..BMU.....	....IA.....	CVS Foreign, Inc. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	27-1298765 .....	.....	.....	UAC Holding, Inc. .....	.....	..DE.....	....NIA.....	Caremark Ulysses Holding Corporation .....	Ownership.....	100.000 .....	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 .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	58-2160656 .....	.....	0001122304 .....	Coram Clinical Trials, Inc. .....	.....	..DE.....	....NIA.....	CVS Pharmacy, Inc .....	Ownership.....	75.000 .....	CVS Health Corporation .....	...NO.....	6 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	23-2229683 .....	3060706 .....	.....	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.....	....UPD.....	Aetna Inc. .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	95-3402799 .....	.....	.....	Aetna Health of California Inc. .....	.....	..CA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95935 .....	23-2442048 .....	.....	.....	Aetna Health Inc. .....	.....	..CT.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95088 .....	59-2411584 .....	.....	.....	Aetna Health Inc. .....	.....	..FL.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95094 .....	58-1649568 .....	.....	.....	Aetna Health Inc. .....	.....	..GA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95517 .....	01-0504252 .....	.....	.....	Aetna Health Inc. .....	.....	..ME.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95756 .....	23-2861565 .....	.....	.....	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.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95234 .....	22-2663623 .....	.....	.....	Aetna Health Inc. .....	.....	..NY.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	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 .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95040 .....	74-1844335 .....	.....	.....	Aetna Better Health of Texas Inc. .....	.....	..TX.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	12328 .....	20-2207534 .....	.....	.....	Aetna Better Health Inc. .....	.....	..GA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	06-1160812 .....	.....	.....	Aetna Dental of California Inc. .....	.....	..CA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	11183 .....	22-2990909 .....	.....	.....	Aetna Dental Inc. .....	.....	..NJ.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	95910 .....	06-1177531 .....	.....	.....	Aetna Dental Inc. .....	.....	..TX.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	13-3670795 .....	.....	.....	Aetna Health Management, LLC .....	.....	..DE.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	20-1274723 .....	.....	.....	Cofinity, Inc. .....	.....	..DE.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	23-2671370 .....	.....	.....	@Credentials Inc. .....	.....	..DE.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	13735 .....	27-0563973 .....	.....	.....	Aetna Better Health Inc. .....	.....	..PA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	13174 .....	26-2867560 .....	.....	.....	Aetna Better Health Inc. .....	.....	..CT.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	47-5178095 .....	.....	.....	Aetna Better Health of California Inc. .....	.....	..CA.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	14043 .....	27-2512072 .....	.....	.....	Aetna Better Health Premier Plan MMAI Inc. .....	.....	..IL.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	15805 .....	47-3850677 .....	.....	.....	Aetna Health of Ohio Inc. .....	.....	..OH.....	....IA.....	Aetna 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 .....	00000 .....	80-0671703 .....	.....	.....	Aetna Florida Inc. .....	.....	..FL.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	14229 .....	45-2764938 .....	.....	.....	Aetna Better Health Inc. .....	.....	..OH.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	15611 .....	46-3203088 .....	.....	.....	Aetna Better Health Inc. .....	.....	..NJ.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	15919 .....	81-1143850 .....	.....	.....	Aetna Better Health of Oklahoma Inc. .....	.....	..OK.....	....IA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	04-2708160 .....	.....	.....	Aetna Student Health Agency Inc. .....	.....	..MA.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	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 .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	01-0826783 .....	.....	.....	Incorporated .....	.....	..DE.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....
.0001 ...	CVS HEALTH GROUP .....	00000 .....	86-0842559 .....	.....	.....	Aetna Medicaid Administrators LLC .....	.....	..AZ.....	....NIA.....	Aetna Health Holdings, LLC .....	Ownership.....	100.000 .....	CVS Health Corporation .....	...NO.....	0 .....

**SCHEDULE Y**  
**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(es)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
.0001	CVS HEALTH GROUP	00000	45-2944270			iTriage, LLC		.DE.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	16-1471176			Prodigy Health Group, Inc.		.DE.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	45-4901541			Aetna ACO Holdings, Inc.		.DE.	.NIA.	Aetna Health Holdings, LLC	Ownership.	0.200	CVS Health Corporation	NO	2
.0001	CVS HEALTH GROUP	00000	74-2879984			Medical Examinations of New York, P.C.		.NY.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	11
.0001	CVS HEALTH GROUP	00000	45-5527797			Innovation Health Holdings, LLC		.DE.	.NIA.	Aetna ACO Holdings, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	15097	46-0674828			Innovation Health Insurance Company		.VA.	.IA.	Innovation Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	15098	46-0682197			Innovation Health Plan, Inc.		.VA.	.IA.	Innovation Health Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	95109	23-2169745			Aetna Health Inc.		.PA.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	YES	0
.0001	CVS HEALTH GROUP	00000	45-4901541			Aetna ACO Holdings, Inc.		.DE.	.NIA.	Aetna Health Inc. (PA)	Ownership.	.39.500	CVS Health Corporation	NO	2
.0001	CVS HEALTH GROUP	00000	20-0438576			Niagara Re, Inc.		.NY.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	52-2200070			Performax, Inc.		.DE.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	87-0632355			Scrip World, LLC		.UT.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	27-1760756			Precision Benefit Services, Inc.		.DE.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	31-1368946			American Health Holding, Inc.		.OH.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	16-1264154			Meritain Health, Inc.		.NY.	.NIA.	Prodigy Health Group, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	86-0537707			Adminco, Inc.		.AZ.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	86-0527428			Administrative Enterprises, Inc.		.AZ.	.NIA.	Meritain Health, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	16-1684061			U.S. Healthcare Holdings, LLC		.OH.	.NIA.	Meritain Health, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	34-1670299			Prime Net, Inc.		.OH.	.NIA.	Meritain Health, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	34-1348032			Professional Risk Management, Inc.		.OH.	.NIA.	Meritain Health, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	68500	62-1181209			Continental Life Insurance Company of Brentwood, Tennessee		.TN.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	12321	20-2901054			American Continental Insurance Company		.TN.	.IA.	Continental Life Insurance Company of Brentwood, Tennessee	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	60054	06-6033492			Aetna Life Insurance Company		.CT.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	YES	0
.0001	CVS HEALTH GROUP	00000	45-4901541			Aetna ACO Holdings, Inc.		.DE.	.NIA.	Aetna Life Insurance Company	Ownership.	.60.300	CVS Health Corporation	NO	2
.0001	CVS HEALTH GROUP	00000	06-1270755			AHP Holdings, Inc.		.CT.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	06-1028469			AE Fourteen, Incorporated		.CT.	.NIA.	AHP Holdings, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	06-1373153			Aetna Life Assignment Company		.CT.	.NIA.	AHP Holdings, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	20-3678339			PE Holdings, LLC		.CT.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	06-1423207			Aetna Resources L.L.C.		.DE.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Canal Place, LLC		.DE.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	20-3180700			Aetna Ventures, LLC		.DE.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	58-2160656			Coram Clinical Trials, Inc.		.DE.	.NIA.	Aetna Life Insurance Company	Ownership.	.25.000	CVS Health Corporation	NO	6
.0001	CVS HEALTH GROUP	00000	85-3918720			CVS Cabot Holdings Inc.		.DE.	.NIA.	Coram Clinical Trials, Inc.	Ownership.	.99.720	CVS Health Corporation	NO	7
.0001	CVS HEALTH GROUP	00000	85-3918567			CVS Shaw Holdings Inc.		.DE.	.NIA.	Coram Clinical Trials, Inc.	Ownership.	.99.720	CVS Health Corporation	NO	8
.0001	CVS HEALTH GROUP	00000	31-1001351			Omnicare, LLC		.DE.	.NIA.	CVS Cabot Holdings Inc.	Ownership.	.49.860	CVS Health Corporation	NO	9
.0001	CVS HEALTH GROUP	00000	31-1001351			Omnicare, LLC		.DE.	.NIA.	CVS Shaw Holdings Inc.	Ownership.	.49.860	CVS Health Corporation	NO	9
.0001	CVS HEALTH GROUP	00000	41-2035961			Aetna Financial Holdings, LLC		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	26-2030792			Aetna Asset Advisors, LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	23-2354500			U.S. Healthcare Properties, Inc.		.PA.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	38-3704481			Aetna Capital Management, LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	32-0786680			Aetna Equity Fund LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	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.	100.00	CVS Health Corporation	NO	1
.0001	CVS HEALTH GROUP	00000	20-0446676			Aetna Workers' Comp Access, LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	20-0446713			Aetna Behavioral Health, LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	23-2670015			Managed Care Coordinators, Inc.		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	59-3269144			Horizon Behavioral Services, LLC		.DE.	.NIA.	Aetna Financial Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	61-1193498			Employee Assistance Services, LLC		.KY.	.NIA.	Horizon Behavioral Services, LLC	Ownership.	100.00	CVS Health Corporation	NO	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE Y**  
**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0001	CVS HEALTH GROUP	00000	33-0052273			Health and Human Resource Center, Inc.		.CA.	.IA.	Horizon Behavioral Services, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	75-2420973			Resources for Living, LLC		.TX.	.NIA.	Horizon Behavioral Services, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	36-3681261			The Vasquez Group Inc.		.IL.	.NIA.	Horizon Behavioral Services, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	22-3178125			Work and Family Benefits, Inc.		.NJ.	.NIA.	Horizon Behavioral Services, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	27-1773021			FairCost LLC		.CT.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	78700	06-0876836			Aetna Health and Life Insurance Company		.CT.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	72052	23-2710210			Aetna Health Insurance Company		.PA.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	84450	57-0805126			Aetna Health Insurance Company of New York		.NY.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	06-1571642			Aetna International LLC		.CT.	.NIA.	Aetna Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	98-0211470			Aetna Life & Casualty (Bermuda) Ltd.		.BMU.	.IA.	Aetna International LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Global Benefits (Bermuda) Limited		.BMU.	.NIA.	Aetna International LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Global Benefits Limited		.ARE.	.NIA.	Aetna Global Benefits (Bermuda) Limited	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				PT Aetna Global Benefits Indonesia		.IDN.	.NIA.	Aetna Global Benefits (Bermuda) Limited	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Global Benefits (Middle East) LLC		.ARE.	.NIA.	Aetna International LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Global Benefits (UK) Limited		.GBR.	.NIA.	Aetna Global Benefits (Bermuda) Limited	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Insurance Company Limited		.GBR.	.IA.	Aetna Global Benefits (Bermuda) Limited	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna Health Company of Europe DAC		.IRL.	.IA.	Aetna International LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000				Aetna (Shanghai) Enterprise Services Co. Ltd.		.CHN.	.NIA.	Aetna International LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	22-2578985			AUSHC Holdings, Inc.		.CT.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	06-1182176			PHPSNE Parent Corporation		.DE.	.NIA.	AUSHC Holdings, Inc.	Ownership.	.55.00	CVS Health Corporation	NO	3
.0001	CVS HEALTH GROUP	00000	52-2182411			Active Health Management, Inc.		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	47-0970432			Health Data & Management Solutions, Inc.		.DE.	.NIA.	Active Health Management, Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	13980	27-2192415			Health Re, Inc.		.VT.	.IA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	81-0579372			Phoenix Data Solutions LLC		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	51-0029326			ASI Wings, LLC		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	47-4556274			Echo Merger Sub, Inc.		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	47-4547145			Aetna Corporate Services, LLC		.DE.	.NIA.	Aetna Inc.	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	85-3918720			CVS Cabot Holdings, Inc.		.DE.	.NIA.	Aetna Inc.	Ownership.	.280.	CVS Health Corporation	NO	7
.0001	CVS HEALTH GROUP	00000	85-3918567			CVS Shaw Holdings Inc.		.DE.	.NIA.	Aetna Inc.	Ownership.	.280.	CVS Health Corporation	NO	8
.0001	CVS HEALTH GROUP	00000	31-1001351			Omnicare, LLC		.DE.	.NIA.	Aetna Inc.	Ownership.	.280.	CVS Health Corporation	NO	9
.0001	CVS HEALTH GROUP	81973	75-1296086			Coventry Health and Life Insurance Company		.MO.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	15761	47-3279217			Aetna Better Health of Kentucky Insurance Company		.KY.	.IA.	Coventry Health and Life Insurance Company	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	81-4345344			Aetna Network Services LLC		.CT.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	95241	42-1244752			Aetna Health of Iowa Inc.		.IA.	.RE.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	95925	42-1308659			Coventry Health Care of Nebraska, Inc.		.NE.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	47-2049117			Aetna Risk Assurance Company of Connecticut Inc.		.CT.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	95173	74-2381406			Aetna Health Inc.		.LA.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	47-0854096			Coventry Prescription Management Services, Inc.		.NV.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	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.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	96555	54-1576305			Coventry Health Care of Virginia, Inc.		.VA.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	96377	43-1372307			Coventry Health Care of Missouri, Inc.		.MO.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	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.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	95408	55-0712129			Coventry Health Care of West Virginia, Inc.		.WV.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	00000	62-1411933			Coventry HealthCare Management Corporation		.DE.	.NIA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0
.0001	CVS HEALTH GROUP	15827	47-4352768			Aetna HealthAssurance Pennsylvania, Inc.		.PA.	.IA.	Aetna Health Holdings, LLC	Ownership.	100.00	CVS Health Corporation	NO	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE Y**  
**PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Rela-tion-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Per-centage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0001	CVS HEALTH GROUP	95489	48-0840330			Coventry Health Care of Kansas, Inc.		..KS...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	16072	81-3370401			Aetna Better Health of Kansas Inc.		..KS...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	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.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	95407	87-0345631			Aetna Health of Utah Inc.		..UT...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	20-4416606			Aetna Better Health of Tennessee Inc.		..TN...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	74160	37-1241037			Coventry Health Care of Illinois, Inc.		..IL...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
						Coventry Health Care National Accounts, Inc.									
.0001	CVS HEALTH GROUP	00000	20-8070994					..DE...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	20-5185442			Coventry Health Care National Network, Inc.		..DE...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	26-1293772			Coventry Consumer Advantage, Inc.		..DE...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	20-1736437			First Health Group Corp.		..DE...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
						First Health Life & Health Insurance Company									
.0001	CVS HEALTH GROUP	90328	38-2242132					..TX...	..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.	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	52-1320522			Claims Administration Corp.		..MD...	..NIA...	First Health Group Corp.	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	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.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	95266	84-4152759			Hella Group LLC		..NY...	..NIA...	Florida Health Plan Administrators, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	86-3013502			Audomo Insurance Services LLC		..DE...	..NIA...	Hella Group LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	88-1714855			Hella Media LLC		..DE...	..NIA...	Hella Group LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	59-3750548			Attain Insurance Services Inc.		..FL...	..NIA...	Florida Health Plan Administrators, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	26-1582982			MNNet Specialty Services, LLC		..MD...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	37-1448790			Mental Health Network of New York IPA, Inc.		..NY...	..NIA...	MNNet Specialty Services, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	72-1106596			Mental Health Associates, Inc.		..LA...	..NIA...	MNNet Specialty Services, LLC	Ownership.....	100.000	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.....	100.000	CVS Health Corporation	..NO.....	0.....
						Banner Health and Aetna Health Insurance Holding Company LLC		..DE...	..NIA...	Aetna ACO Holdings, Inc.	Ownership.....	50.000	CVS Health Corporation	..NO.....	4.....
.0001	CVS HEALTH GROUP	00000	81-5212760			Banner Health and Aetna Health Insurance Company		..AZ...	..IA.....	Banner Health and Aetna Health Insurance Holding Company LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	16058	81-5281115					..AZ...	..IA.....	Banner Health and Aetna Health Insurance Company	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	16059	81-5290023			Banner Health and Aetna Health Plan Inc.		..AZ...	..IA.....						
.0001	CVS HEALTH GROUP	00000	81-5112888			Allina Health and Aetna Health Insurance Holding Company LLC		..DE...	..NIA...	Aetna ACO Holdings, Inc.	Ownership.....	50.000	CVS Health Corporation	..NO.....	5.....
.0001	CVS HEALTH GROUP	16194	82-2091197			Allina Health and Aetna Insurance Company		..MN...	..IA.....	Allina Health and Aetna Health Insurance Holding Company LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	17352	87-2843387			Allina Health and Aetna Health Plan Inc.		..MN...	..IA.....	Allina Health and Aetna Health Insurance Holding Company LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	82-2171057			Sutter Health and Aetna Insurance Holding Company LLC		..DE...	..NIA...	Aetna ACO Holdings, Inc.	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	82-2560624			Sutter Health and Aetna Administrative Services LLC		..DE...	..NIA...	Sutter Health and Aetna Insurance Holding Company LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	16979	82-2567822			Sutter Health and Aetna Insurance Company		..CA...	..IA.....	Sutter Health and Aetna Insurance Holding Company LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	16558	82-3333789			Aetna Better Health of North Carolina Inc.		..NC...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	14053	27-2186150			Aetna Better Health of Illinois Inc.		..IL...	..IA.....	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	87-3223066			Aetna Better Health of Indiana Inc.		..IN...	..NIA...	Aetna Health Holdings, LLC	Ownership.....	100.000	CVS Health Corporation	..NO.....	0.....
.0001	CVS HEALTH GROUP	00000	87-3223066			CVS Health Venture Fund, LP		..DE...	..NIA...	Aetna Life Insurance Company	Ownership.....	100.000	CVS Health Corporation	..NO.....	10.....

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

Asterisk	Explanation
1 .....	Aetna Capital Management, LLC is the managing member of Aetna Partners Diversified Fund, LLC ("APDF"). APDF is a fund of hedge funds and certain other subsidiaries of CVS Health Group invest in this fund, which does not confer any managing or controlling ownership interests in APDF. Aetna Life Insurance Company is the largest investor in APDF and currently owns a majority of the non-managing member interests of APDF. ....
2 .....	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). ....
3 .....	PHSNE 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. ....
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 .....	Coram Clinical Trials, Inc. is 75% owned by CVS Pharmacy, Inc. and 25% owned by Aetna Life Insurance Company. ....
7 .....	CVS Cabot Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc. ....
8 .....	CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc. ....
9 .....	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. ....
10 .....	CVS Health Venture Fund, LP is also 0.1% owned by CVS Health Ventures Fund GP, LLC ....
11 .....	Medical Examinations of New York, P.C. is owned via a nominee. ....

## 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.

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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. Business not written

Bar Code:

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



**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....		
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 carrying value .....		
7. Deduct current year's other than temporary impairment 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) .....		

**NONE****SCHEDULE B - VERIFICATION**

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year .....		
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 interest paid and commitment fees .....		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest .....		
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) .....		

**NONE****SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....		
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, depreciation and proportional amortization .....		
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) .....		

**NONE****SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	8,555,807	12,542,603
2. Cost of bonds and stocks acquired .....	1,496,780	4,922,310
3. Accrual of discount .....	55,208	78,685
4. Unrealized valuation increase/(decrease) .....	13,216	(12,643)
5. Total gain (loss) on disposals .....	1,237	(152,202)
6. Deduct consideration for bonds and stocks disposed of .....	1,492,000	8,780,897
7. Deduct amortization of premium .....	14,213	50,494
8. Total foreign exchange change in book/adjusted carrying value .....	0	0
9. Deduct current year's other than temporary impairment recognized .....	0	1,555
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....	0	10,000
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	8,616,035	8,555,807
12. Deduct total nonadmitted amounts .....	0	0
13. Statement value at end of current period (Line 11 minus Line 12) .....	8,616,035	8,555,807

## STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>ISSUER CREDIT OBLIGATIONS (ICO)</b>								
1. NAIC 1 (a) .....	2,431,788	0	0	8,451	3,428,479	2,431,788	2,440,239	3,421,528
2. NAIC 2 (a) .....	3,235,791	0	0	1,722	3,213,592	3,235,791	3,237,513	3,207,208
3. NAIC 3 (a) .....	943,750	0	0	1,776	936,910	943,750	945,526	927,070
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 ICO .....	6,611,329	0	0	11,949	7,578,981	6,611,329	6,623,278	7,555,806
<b>ASSET-BACKED SECURITIES (ABS)</b>								
8. NAIC 1 .....	1,992,512	0	0	244	1,496,359	1,992,512	1,992,756	1,000,000
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 ABS .....	1,992,512	0	0	244	1,496,359	1,992,512	1,992,756	1,000,000
<b>PREFERRED STOCK</b>								
15. NAIC 1 .....	0	0	0	0	0	0	0	0
16. NAIC 2 .....	0	0	0	0	0	0	0	0
17. NAIC 3 .....	0	0	0	0	0	0	0	0
18. NAIC 4 .....	0	0	0	0	0	0	0	0
19. NAIC 5 .....	0	0	0	0	0	0	0	0
20. NAIC 6 .....	0	0	0	0	0	0	0	0
21. Total Preferred Stock .....	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock .....	8,603,841	0	0	12,193	9,075,340	8,603,841	8,616,034	8,555,806

(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:

NAIC 1 \$ .....0 ; NAIC 2 \$ .....0 ; NAIC 3 \$ .....0 NAIC 4 \$ .....0 ; NAIC 5 \$ .....0 ; NAIC 6 \$ .....0

Schedule DA - Part 1 - Short-Term Investments  
**N O N E**

Schedule DA - Verification - Short-Term Investments  
**N O N E**

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards  
**N O N E**

Schedule DB - Part B - Verification - Futures Contracts  
**N O N E**

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

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open  
**N O N E**

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE E - PART 2 - VERIFICATION**

(Cash Equivalents)

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	21,799,806	6,945,380
2. Cost of cash equivalents acquired .....	25,295,962	82,283,037
3. Accrual of discount .....	0	121,028
4. Unrealized valuation increase/(decrease) .....	0	0
5. Total gain (loss) on disposals .....	0	108
6. Deduct consideration received on disposals .....	26,988,666	67,549,747
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) .....	20,107,102	21,799,806
11. Deduct total nonadmitted amounts .....	0	0
<b>12. Statement value at end of current period (Line 10 minus Line 11)</b>	<b>20,107,102</b>	<b>21,799,806</b>

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

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

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

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

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

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

Schedule D - Part 3 - 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  
**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned  
**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned  
**N O N E**

## STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE E - PART 1 - CASH**

## Month End Depository Balances

1 Depository	2 Restricted Asset Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Wells Fargo Bank, N.A. .... San Francisco, CA .....					6,333,069	6,333,069	6,333,069	XXX
Citi Bank ..... New Castle, DE .....					914,210	2,362,793	2,670,698	XXX
0199998. Deposits in ... 1 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX			100,000	100,000	100,000	XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	7,347,279	8,795,862	9,103,767	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	7,347,279	8,795,862	9,103,767	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
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.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....	.....
0599999. Total - Cash	XXX	XXX	0	0	7,347,279	8,795,862	9,103,767	XXX

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Aetna Health of Iowa Inc.

**SCHEDULE E - PART 2 - CASH EQUIVALENTS**

### Show Investments Owned End of Current Quarter