

HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2025 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health of Iowa Inc.

NAIC Gro	The state of the s	0001 NAIC Company C	ode <u>95241</u> Employer	r's ID Number42-1244752	
Organized under the Laws of	lov	va	State of Domicile or Port of	EntryIA	
Country of Domicile		United State	s of America		
Licensed as business type:		Health Maintenar	nce Organization		
Is HMO Federally Qualified? Yes] No[X]				
Incorporated/Organized	02/07/1985		Commenced Business	01/01/1986	
Statutory Home Office	4170 NW 114 th	Street		Urbandale, IA, US 50322	
	(Street and Nu		(City	or Town, State, Country and Zip Code)	
Main Administrative Office			14th Street		
Urb	andale, IA, US 50322	(Street and	l Number)	800-872-3862	
	n, State, Country and Zip (Code)	8 (a	(Area Code) (Telephone Number)	
Mail Address At	n: Stat Compliance; P.O. I	3ox 818048		Cleveland, OH, US 44181-8048	
	(Street and Number or P.		(City	or Town, State, Country and Zip Code)	
Primary Location of Books and Rec	cords	4170 NW	114 th Street		
Urb	andale, IA, US 50322	(Street and	d Number)	800-872-3862	
	n, State, Country and Zip C	Code)		(Area Code) (Telephone Number)	
Internet Website Address		www.ae	tna.com	n it was to be the common of the part of the part of the common of the c	
GARBOL IN THE LAW WINDOW IN AN	1950	2007 IB 2007	(Ha.56))	TO THE SAME STATE OF	ie i
Statutory Statement Contact		n E. Roth (Name)		215-775-6508 (Area Code) (Telephone Number)	
Statuto	oryReporting@aetna.com	-		860-262-7767	
Derek Scott Blunt, Senior I Amy Christine Fletcher, Chi	nvestment Officer	OTH Frank Ferris Chronister Peter Keller, As		Steven Matthew Conte, Corporate Co Tracy Louise Smith, Vice President and	
Michael Thomas	Avotins	DIRECTORS O James Dear		Richard Noble Sloma	
all of the herein described assets statement, together with related ex condition and affairs of the said repin accordance with the NAIC Annua or regulations require differences is Furthermore, the scope of this attest	were the absolute propert nibits, schedules and explaorting entity as of the report I Statement Instructions an reporting not related to tation by the described officectronic filing) of the enclose.	y of the said reporting entity anations therein contained, a rting period stated above, and do Accounting Practices and accounting practices and pure process also includes the related	free and clear from any li innexed or referred to, is a find of its income and deducting Procedures manual except to ocedures, according to the discorresponding electronic fill	reporting entity, and that on the reporting period iens or claims thereon, except as herein stated ull and true statement of all the assets and liabilitions therefrom for the period ended, and have be to the extent that: (1) state law may differ; or, (2) best of their information, knowledge and belied ing with the NAIC, when required, that is an exact by various regulators in lieu of or in addition to be stated that it is a state of the control of the	d, and that this ities and of the een completed that state rules f, respectively. ct copy (except
Preside	ent			Vice President and Secretary	
State of Connecticut County of Hartford				State of Connecticut County of Hartford	
Subscribed and sworn to before me	e this.		33	Subscribed and sworn to before me this.	
day of April NOTARY PUBLIC (Seal)	, 2025		·	day of NOTARY PUBLIC (Seal)	, 2025
7				A TOTAL A TOTA	

VICTORIA WOLLSCHLAGER Notary Public, State of Connecticut My Commission Expires Sep. 30, 2027

a.	Is this an original filing?	Yes [X] No [1
b.	If no,		

- 1. State the amendment number
- Date filed

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



HEALTH QUARTERLY STATEMENT

AS OF MARCH 31, 2025 OF THE CONDITION AND AFFAIRS OF THE

Aetna Health of Iowa Inc.

NAIC	Group Code 0001 000 (Current) (Prior	The second secon	ode <u>95241</u> Employer's II	Number <u>42-1244752</u>
Organized under the Laws of	lowa	· ·	State of Domicile or Port of Ent	try IA
Country of Domicile		United State	s of America	
Licensed as business type:	141	Health Maintenar	nce Organization	
Is HMO Federally Qualified?	Yes[] No[X]			
Incorporated/Organized	02/07/1985		Commenced Business	01/01/1986
Statutory Home Office	4170 NW 114 th Str	reet	· ·	Urbandale, IA, US 50322
	(Street and Numb	er)	(City or	Town, State, Country and Zip Code)
Main Administrative Office _		4170 NW 1 (Street and	14 th Street	
	Urbandale, IA, US 50322	(Street and	- Number)	800-872-3862
(City or	Town, State, Country and Zip Code	e)	(Ar	ea Code) (Telephone Number)
Mail Address	Attn: Stat Compliance; P.O. Box	818048	Cle	eveland, OH, US 44181-8048
The transfer of the second of	(Street and Number or P.O. I	Box)	(City or	Town, State, Country and Zip Code)
Primary Location of Books and	d Records		114 th Street	
	Urbandale, IA, US 50322	(Street and	d Number)	800-872-3862
(City or	Town, State, Country and Zip Code	e)	(An	ea Code) (Telephone Number)
Internet Website Address		www.ae	etna.com	
			ara.sem	245 775 2522
Statutory Statement Contact	Kim E	me)		215-775-6508 (Area Code) (Telephone Number)
S	tatutoryReporting@aetna.com	······································		860-262-7767
	(E-mail Address)			(FAX Number)
	nior Investment Officer Chief Financial Officer	Peter Keller, As	HER r III, Assistant Controller sistant Controller sco, Assistant Controller	Steven Matthew Conte, Corporate Controller Tracy Louise Smith, Vice President and Treasurer
	ŭ			
Michael Tho	mas Avotins	DIRECTORS O James Dear	OR TRUSTEES Christensen	Richard Noble Sloma
all of the herein described as: statement, together with relate condition and affairs of the sai in accordance with the NAIC A or regulations require differen Furthermore, the scope of this	sets were the absolute property of d exhibits, schedules and explanat d reporting entity as of the reporting nnual Statement Instructions and A ces in reporting not related to acc attestation by the described officers	f the said reporting entity tions therein contained, a g period stated above, ar accounting Practices and ounting practices and pre- s also includes the related	y, free and clear from any liens annexed or referred to, is a full a nd of its income and deductions Procedures manual except to the rocedures, according to the best d corresponding electronic filing	orting entity, and that on the reporting period stated above or claims thereon, except as herein stated, and that this nd true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed e extent that: (1) state law may differ; or, (2) that state rules of their information, knowledge and belief, respectively with the NAIC, when required, that is an exact copy (except various regulators in lieu of or in addition to the enclosed
Michael T	homas Avotins		0)	Edward Chung-I Lee
Pr	esident			Vice President and Secretary
State of Connecticut				e of Connecticut
County of Hartford			Cou	nty of Hartford
Subscribed and sworn to before	re me this.		-	scribed and sworn to before me this.
day of	, 2025		22	
NOTARY PUBLIC (Seal)			NO	ARY PUBLIC (See)
TO TAIN TO DETO (Geal)			NO	Jan Jan J

KATRINA COFFEY
NOTARY PUBLIC
My Commission Expires Feb. 28, 2027

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

ASSETS

		Current Statement Date 4					
		1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets		
1.	Bonds	9,075,341		9,075,341	8,555,807		
	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 (\$8,377,663), cash equivalents						
	(\$						
	investments (\$	25,954,714	0	25,954,714	31,055,580		
6.	Contract loans (including \$ premium notes)				0		
7.	Derivatives			0	0		
8.	Other invested assets			0	0		
9.	Receivables for securities			0	0		
10.	Securities lending reinvested collateral assets				0		
11.	Aggregate write-ins for invested assets				0		
12.	Subtotals, cash and invested assets (Lines 1 to 11)			35,030,055	39,611,387		
13.	Title plants less \$ charged off (for Title insurers						
	only)	0	0	0	0		
14.	Investment income due and accrued	104,592	0	104,592	98,442		
	Premiums and considerations:						
	15.1 Uncollected premiums and agents' balances in the course of collection	118,131	8,758	109,373	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 (\$						
	contracts subject to redetermination (\$5,578,935)	5,793,948	0	5,793,948	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	5,464,098	0	5,464,098	4,412,137		
	Current federal and foreign income tax recoverable and interest thereon			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		
22.	Net adjustment in assets and liabilities due to foreign exchange rates			0	0		
23.	Receivables from parent, subsidiaries and affiliates			0	0		
24.	Health care (\$1,186,974) and other amounts receivable			1,186,974			
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	40, 400, 004	000 001	47 005 440	E0 040 400		
	Protected Cell Accounts (Lines 12 to 25)		602,891	47,835,140	50,919,469		
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0		
28.	Total (Lines 26 and 27)	48,438,031			50,919,469		
	DETAILS OF WRITE-INS	, , ,	, , ,	,,	,		
1101.							
1101.							
1103.							
1198.	Summary of remaining write-ins for Line 11 from overflow page				0		
1199.	Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0		n	0		
2501.	State taxes recoverable			0	40,969		
2501.	Guaranty fund assessments			4,201	,		
2502. 2503.	Guaranty Tunu assessments			4,201	4,201		
2503. 2598.	Summary of remaining write-ins for Line 25 from overflow page			0	0		
	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	4,201			45,170		
2599.	Totals (Lines 2001 tillough 2003 plus 2090)(Line 25 above)	4,201	U	4,201	40, 170		

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAP		Current Period		Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$388,477 reinsurance ceded)				9,277,916
2.	Accrued medical incentive pool and bonus amounts	558,252		558,252	903,214
3.	Unpaid claims adjustment expenses	86,985		86,985	110,383
4.	Aggregate health policy reserves, including the liability of				
	\$5,558,787 for medical loss ratio rebate per the Public				
	Health Service Act	7,051,064		7,051,064	6,525,730
5.	Aggregate life policy reserves	0		0	0
6.	Property/casualty unearned premium reserve				0
7.	Aggregate health claim reserves				238
8.	Premiums received in advance				
9.	General expenses due or accrued				
	Current federal and foreign income tax payable and interest thereon	20,700		20,700	
10.1		157,000		157,000	0
	(including \$ on realized gains (losses))				
10.2	Net deferred tax liability				0
11.	Ceded reinsurance premiums payable				0
12.	Amounts withheld or retained for the account of others				
13.	Remittances and items not allocated	60,365		60,365	143 , 134
14.	Borrowed money (including \$ current) and				
	interest thereon \$ (including				
	\$ current)	0		0	0
15.	Amounts due to parent, subsidiaries and affiliates	8,972,509		8,972,509	12,508,503
16.	Derivatives	0		0	0
17.	Payable for securities				
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties (with \$				
10.	authorized reinsurers, \$				
	reinsurers and \$ certified reinsurers)	<i>1</i> 5 971		/5 Q71	22 644
00		45,671		43,071	22,044
20.	Reinsurance in unauthorized and certified (\$	040.000		040,000	400 470
	companies			·	
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans	1,088,824		1,088,824	157,526
23.	Aggregate write-ins for other liabilities (including \$				
	current)				
24.	Total liabilities (Lines 1 to 23)	24,535,103	618,202	25,153,305	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	
30.	Aggregate write-ins for other-than-special surplus funds				0
31.	Unassigned funds (surplus)				7.764.191
32.	Less treasury stock, at cost:			2,2 2,2 2	, , ,
02.	32.1shares common (value included in Line 26				
	\$	YYY	YYY	0	0
	·			0	0
	32.2shares preferred (value included in Line 27	2007	2007	0	0
	\$				0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)				21,100,697
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	47,835,140	50,919,469
	DETAILS OF WRITE-INS				
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.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		XXX	0	0
3001.					
3002.		XXX	XXX		
3003.					
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 Yo To Date)	Prior Year To Date	Prior Year Ended December 31
		1 Uncovered	2 Total	3 Total	4 Total
1. N	Member Months				52,956
2. N	let premium income (including \$ non-health				
	premium income)	XXX	20,726,766	20,821,878	86,303,824
3. C	Change in unearned premium reserves and reserve for rate credits	XXX	0	0	1,314,407
	ee-for-service (net of \$ medical expenses)				
	Risk revenue				
	aggregate write-ins for other health care related revenues				0
	aggregate write-ins for other non-health revenues				
8. T	otal revenues (Lines 2 to 7)	XXX	20,726,766	20,821,878	87,618,231
	lospital and Medical:				
	lospital/medical benefits				
	Other professional services		1,212,297		
	Outside referrals		399,446	<i>'</i>	2,207,105
	mergency room and out-of-area	,	772,913		3,975,163
	Prescription drugs		4,840,608		14,279,014
	eggregate write-ins for other hospital and medicalncentive pool, withhold adjustments and bonus amounts				0
	Subtotal (Lines 9 to 15)				561,386
		1,000,101	10,302,300	10,409,291	60,291,300
	.ess: let reinsurance recoveries	_	710 550	650 060	2 171 000
	otal hospital and medical (Lines 16 minus 17)				
	Ion-health claims (net)				
	Claims adjustment expenses, including \$279,410 cost				
20.	containment expenses	0	410 727	458 343	1 564 511
21. 0	General administrative expenses				8,567,129
	ncrease in reserves for life and accident and health contracts		2,270,000		
	(including \$ increase in reserves for life only)	0	257.830	2.674.491	0
23. T	otal underwriting deductions (Lines 18 through 22)				
	let underwriting gain or (loss) (Lines 8 minus 23)				(633,775)
	let investment income earned		298,362		1,095,978
26. N	let realized capital gains (losses) less capital gains tax of				
	\$				
27. N	let investment gains (losses) (Lines 25 plus 26)	0	298,362	309,673	979,288
28. N	let gain or (loss) from agents' or premium balances charged off [(amount				
	recovered \$)				
	(amount charged off \$)])]				0
	aggregate write-ins for other income or expenses	0	0	0	0
30. N	let income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	VVV	2 228 023	199.463	345,513
	ederal and foreign income taxes incurred			(5,373)	
	let income (loss) (Lines 30 minus 31)	XXX	1,817,707	204,836	418,802
	DETAILS OF WRITE-INS	WW.	1,017,707	204,000	410,002
0601	ALIANO OF WILLIAMS	YYY			
0603					
	Summary of remaining write-ins for Line 6 from overflow page			0	0
	otals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701			v	-	
0702					
0702					
	Summary of remaining write-ins for Line 7 from overflow page				
	other form of the first of the	XXX	0	0	٥
1401	· · · · · · · · · · · · · · · · · · ·	***	0	•	
1401					
1402					
	Cummany of completing write ine for Line 14 from everflow page				^
	Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
	otals (Lines 1401 through 1403 plus 1498)(Line 14 above)	U	U	U	0
2901					
2902					
2903					
	Summary of remaining write-ins for Line 29 from overflow page			0	
2999. T	otals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	

STATEMENT OF REVENUE AND EXPENSES (Continued)

	STATEMENT OF REVENUE AND EX	1 Current Year	2 Prior Year	3 Prior Year Ended
		to Date	to Date	December 31
	CAPITAL AND SURPLUS ACCOUNT			
33.	Capital and surplus prior reporting year	21,100,697	21, 174, 133	21, 174, 133
34.	Net income or (loss) from Line 32			
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets			
40	Change in unauthorized and certified reinsurance			
41.	Change in treasury stock			
42.	Change in surplus notes		0	
	Cumulative effect of changes in accounting principles			
43.				0
44.	Capital Changes:			(4.007.005
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus	0		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		0
47.	Aggregate write-ins for gains or (losses) in surplus	0	0	0
48.	Net change in capital & surplus (Lines 34 to 47)	1,581,138	217,411	(73,436
49.	Capital and surplus end of reporting period (Line 33 plus 48)	22,681,835	21,391,544	21,100,697
	DETAILS OF WRITE-INS			
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799.	Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	CASH FLOW			
		1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
	Cash from Operations			
1.	Premiums collected net of reinsurance	20,009,996	18, 152, 108	86,557,173
2.	Net investment income	277 , 145	262,897	1,119,087
3.	Miscellaneous income	0	0	0
4.	Total (Lines 1 to 3)	20,287,141	18,415,005	87,676,260
5.	Benefit and loss related payments	18,523,916	14,450,282	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	2,772,205	326,740	9,748,222
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of \$	0	0	9,143
10.	Total (Lines 5 through 9)	21,296,121	14,777,022	86,185,506
				1.490.754
11.	Net cash from operations (Line 4 minus Line 10)	(1,008,980)	3,637,983	1,490,754
	Cash from Investments			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds		,	
	12.2 Stocks			0
	12.3 Mortgage loans			0
	12.4 Real estate			0
	12.5 Other invested assets			
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			107
	12.7 Miscellaneous proceeds	0	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	0	500,000	8,771,004
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	496,350	749,375	4,922,310
	13.2 Stocks			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)	496,350	749,375	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)	(496,350)	(249,375)	3,848,694
	Cash from Financing and Miscellaneous Sources			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes	0	0	0
	16.2 Capital and paid in surplus, less treasury stock	0	0	0
	16.3 Borrowed funds	0	0	0
	16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
	16.5 Dividends to stockholders	0	0	0
	16.6 Other cash provided (applied)	(3,595,536)	(3,706,809)	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)	(3,595,536)	(3,706,809)	7,765,184
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
1Ω		(5,100,866)	(318-201)	13 104 632
18. 10	, , , , , , , , , , , , , , , , , , , ,	(5,100,600)	(310,201)	10, 104,032
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	21 055 590	17 050 040	17 050 040

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

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

					VIIOIVIO,				· · · – · – /					
	1	Compre		4	5	6	7	8	9	10	11	12	13	14
		(Hospital 8	x iviedical)				Federal							
		_	J				Employees							
	T. ()	1. 45 54		Medicare	\ <i>r</i>	D. Hall O. I	Health	Title XVIII	Title XIX	0 - 12 4 0 1 1	Disability	Long-Term	000	Other
	Total	Individual	Group	Supplement	Vision Only	Dental Only	Benefits Plan	Medicare	Medicaid	Credit A&H	Income	Care	Other Health	Non-Health
Total Members at end of:														
1. Prior Year	4,511	0	52 .	0	0	0	0	4,459	0	0	0	0	0	0
2. First Quarter	3,414		56					3,358						
3. Second Quarter	0													
4. Third Quarter	0													
5. Current Year	0													
6. Current Year Member Months	10,435		164					10,271						
Total Member Ambulatory Encounters for Period:														
7 Physician	37,625		189					37,436						
8. Non-Physician	39,515		104					39,411						
9. Total	77,140	0	293	0	0	0	0	76,847	0	0	0	0	0	0
10. Hospital Patient Days Incurred	1,970		0					1,970						
11. Number of Inpatient Admissions	265		0					265						
12. Health Premiums Written (a)	21,258,198		179,110					21,079,088						
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned	21,258,198		179,110					21,079,088						
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services	19,032,120	183,791	16,336					18,831,993						
18. Amount Incurred for Provision of Health Care Services	16,562,568	183,791	3,548	04.070.00				16,375,229						

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$21,079,088

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

Aging Analysis of Unpa	id Claims					
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)		-	•			
0299999 Aggregate accounts not individually listed-uncovered	14,273	0	(31)	0	1	14,243
0399999 Aggregate accounts not individually listed-covered	1,873,151	0	(241)	0	7	1,872,917
0499999 Subtotals	1,887,424	0	(272)	0	8	1,887,160
0599999 Unreported claims and other claim reserves						5,266,581
0699999 Total amounts withheld						
0799999 Total claims unpaid						7,153,741
0899999 Accrued medical incentive pool and bonus amounts	·	·	·	·		558,252

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

ANALYSIS OF CLAIMS UNPAI	D - PRIOR YEAR - NET OF REINSL				Г	
	Claims		Liabi		5	6
	Year to		End of Curre	ent Quarter		
	1	2	3	4		
						Estimated Claim
	On	_	On			Reserve and
	Claims Incurred Prior	On	Claims Unpaid	On	Claims Incurred in	Claim Liability
	to January 1 of	Claims Incurred	Dec. 31	Claims Incurred	Prior Years	December 31 of
Line of Business	Current Year	During the Year	of Prior Year	During the Year	(Columns 1 + 3)	Prior Year
Comprehensive (hospital and medical) individual	183,791	0	0	0	183,791	(
	(200)					
Comprehensive (hospital and medical) group	(209)	16,545	7,679	14,2/3	7,470	34,076
3. Medicare Supplement					0	(
4. Vision only					0	(
5. Dental only					0	(
6. Federal Employees Health Benefits Plan					0	(
7. Title XVIII - Medicare	7,413,279	10,461,306	785,787	5,957,666	8,199,066	9,244,078
8 Title XIX - Medicaid					0	(
9. Credit A&H					0	(
10. Disability Income					0	(
11. Long-term care					0	(
12. Other health					0	(
13. Health subtotal (Lines 1 to 12)	7,596,861	10,477,851	793,466	5,971,939	8,390,327	9,278,154
14. Health care receivables (a)	0	1,779,674	0	0	0	1,965,478
15. Other non-health					0	(
16. Medical incentive pools and bonus amounts	458,275	(9,071)	408,896	149,356	867, 171	903,214
17. Totals (Lines 13 - 14 + 15 + 16)	8,055,136	8,689,106	1,202,362	6,121,295	9,257,498	8,215,890

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

A reconciliation of the Company's net income and surplus between NAIC SAP and practices prescribed and permitted by the State of Iowa for the periods ended March 31, 2025 and December 31, 2024 is as follows:

		SSAP#	F/S Page	F/S Line #	2025	2024
NET IN	NCOME					
(1)	Aetna Health of Iowa Inc. state basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 1,817,707	\$ 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	\$ 1,817,707	\$ 418,802
SURPI	US					
(5)	Aetna Health of Iowa Inc. State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 22,681,835	\$ 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	\$ 22,681,835	\$ 21,100,697

B. <u>Use of Estimates in the Preparation of the Financial Statements</u>

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 March 31, 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.

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 May 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 March 31, 2025.

3. Business Combinations and Goodwill

No significant change.

4. <u>Discontinued Operations</u>

No significant change.

5. <u>Investments</u>

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

with Statements of Statutory Accounting Principles ("SSAP") No. 43, Asset-Backed Securities ("SSAP No. 43") at March 31, 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 March 31, 2025.
- (4) The Company's unrealized loss position on asset-backed securities held by the Company at March 31, 2025 is as follows:
 - a. The aggregate amount of unrealized losses:
 1. Less than 12 Months
 2. 12 Months or Longer
 —
 b. The aggregate related fair value of securities with unrealized losses:
 1. Less than 12 Months
 \$ 999,321
- (5) The Company has reviewed the asset-backed securities in accordance with SSAP No. 43 in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at March 31, 2025 before their cost can be recovered and does have the intent and ability to retain the securities for the time sufficient to recover the amortized cost basis; therefore, no OTTI write-down to fair value was determined to have occurred on these securities.
- E. <u>Dollar Repurchase Agreements and/or Securities Lending Transactions</u>
 - (1) and (2): No significant change.

2. 12 Months or Longer

- (3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of March 31, 2025.
- (4) through (7): No significant change.
- F. The Company did not have any repurchase agreements transactions accounted for as secured borrowing at March 31, 2025.
- G. The Company did not have any reverse repurchase agreements transactions accounted for as secured borrowing at March 31, 2025.
- H. The Company did not have any repurchase agreements transactions accounted for as a sale at March 31, 2025.
- I. The Company did not have any reverse repurchase agreements transactions accounted for as a sale at March 31, 2025.
- J. through L.: No significant change.
- M. The Company did not have any working capital finance investments at March 31, 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 March 31, 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 \$17,577,051 as of March 31, 2025. The following table presents the percent share distribution by underlying asset type of the total qualified cash pool balance as of March 31, 2025:

	Asset Type	Percent Share
(1)	Cash	— %
(2)	Cash Equivalents	99.72 %
(3)	Short-Term Investments	0.28 %
(4)	Total	100.00 %

- S. No significant change.
- 6. Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

7. <u>Investment Income</u>

8. Derivative Instruments

The Company did not have any derivative instruments at March 31, 2025.

9. <u>Income Taxes</u>

No significant change.

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

No significant change.

11. Debt

- A. The Company did not have any items related to debt, including capital notes at March 31, 2025.
- B. The Company did not have any Federal Home Loan Bank agreements at March 31, 2025.
- 12. <u>Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans</u>

The Company did not have a retirement plan, deferred compensation plan or other postretirement benefit plan at March 31, 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. <u>Information About Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit</u> 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 March 31, 2025.
 - (4) The Company did not have any securitized financial assets at March 31, 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 March 31, 2025 and reacquired within 30 days of the sale
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No significant change.

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

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 March 31, 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.
- (4) The Company's fair value measurement valuation techniques are described in B. below.
- (5) The Company did not have any derivative instruments at March 31, 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 March 31, 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)
Bonds, short-term investments, and cash equivalents	\$ 26,668,704	\$ 26,652,392	\$ 2,400,586	\$ 24,268,118	s —	s —	s —

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

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

21. Other Items

No significant change.

22. Events Subsequent

A. Type I - Recognized Subsequent Events

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

The Company had no known reportable recognized subsequent events.

B. Type II - Non-Recognized Subsequent Events

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

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

23. Reinsurance

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:

Permanent ACA Risk Adjustment Program

Assets

1. Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments)

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:

		ring the Prior		Paid as of the	Diffe	rences	A	ljustments			ances as of the ng Date
	Before December 31 of the Prior Year Writt			Written Before December 31 of the Prior Year		Prior Year Accrued Less Payments (Col 1 - 3) Prior Year Accrued Less Payments (Col 2 - 4)		To Prior Year Balances To Prior Year Balances		Cumulative Balance from Prior Years (Col 1 - 3 + 7)	Cumulative Balance from Prior Years (Col 2 - 4 + 8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
Premium adjustments receivable (including high risk pool payments)	\$ _	s —	s —	\$ —	s —	s —	s –	\$ —	A	s —	s —
Premium adjustments (payable) (including high risk pool premium)	_	_	_	_	_	_	_	_	В	_	_
3. Subtotal ACA Permanent Risk Adjustment Program	_	_	_		_	l	l			_	_

25. Change in Incurred Claims and Claim Adjustment Expenses

- A. Reserves as of December 31, 2024 were \$10,291,751. As of March 31, 2025, \$8,165,519 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,202,362 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$923,870 favorable prior-year development since December 31, 2024 to March 31, 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 \$1,081,054 of favorable prior year claim development on retrospectively rated policies. However, the business to which it relates is subject to premium adjustments.
- B. There has been no significant change in the Company's methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

26. Intercompany Pooling Arrangements

No significant change.

27. Structured Settlements

No significant change.

28. Health Care Receivables

No significant change.

29. Participating Policies

30. Premium Deficiency Reserves

March 31, 2025

Liability carried for premium deficiency reserves ("PDR") \$257,830
 Date of the most recent evaluation of this liability 3/31/2025

3. Was anticipated investment income utilized in the calculation? $$\operatorname{\textsc{No}}$$

The Company recorded PDR of \$257,830 related to its Medicare business.

31. Anticipated Salvage and Subrogation

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Did the reporting entity experience any material transactions requiring to 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 chareporting entity?			Yes [] No [X]
2.2	If yes, date of change:				
3.1	Is the reporting entity a member of an Insurance Holding Company Sys 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 sin	nce the prior quarter end?		Yes [X] No []
3.3	If the response to 3.2 is yes, provide a brief description of those change Effective March 9, 2025, Aetna Global Benefits (Asia Pacific) Limited w Limited was dissolved. Effective March 18, 2025, Aetna Global Benefit	ras dissolved. Effective March 9, 2025, Goodhea			
3.4	Is the reporting entity publicly traded or a member of a publicly traded g	roup?		Yes [X] No []
3.5	If the response to 3.4 is yes, provide the CIK (Central Index Key) code is	issued by the SEC for the entity/group		0000	0064803
4.1	Has the reporting entity been a party to a merger or consolidation during	g the period covered by this statement?		Yes [] No [X]
4.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	of domicile (use two letter state abbreviation) for	any entity that has		
	1 Name of Entity	2 NAIC Company Code State of	3 of Domicile		
	· · · · · · · · · · · · · · · · · · ·				
5.	If the reporting entity is subject to a management agreement, including in-fact, or similar agreement, have there been any significant changes if yes, attach an explanation.			[] No [X] N/A []
6.1	State as of what date the latest financial examination of the reporting e	ntity was made or is being made		12/3	1/2020
6.2	State the as of date that the latest financial examination report became date should be the date of the examined balance sheet and not the date			. 12/3	31/2020
6.3	State as of what date the latest financial examination report became as the reporting entity. This is the release date or completion date of the e date).	xamination report and not the date of the examir	nation (balance sheet	06/2	23/2022
6.4	By what department or departments? lowa Insurance Division			-	
6.5	Have all financial statement adjustments within the latest financial exar statement filed with Departments?	nination report been accounted for in a subseque	ent financial 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 re revoked by any governmental entity during the reporting period?] No [X]
7.2	If yes, give full information:				
8.1	Is the company a subsidiary of a bank holding company regulated by the] No [X]
8.2	If response to 8.1 is yes, please identify the name of the bank holding o				
8.3	Is the company affiliated with one or more banks, thrifts or securities fin] No [X]
8.4	If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commission	Office of the Comptroller of the Currency (OCC),	the Federal Deposit		
	1 Affiliate Name	2 Location (City, State)		5 6 DIC SEC	
		,			

GENERAL INTERROGATORIES

9.1	Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?			Yes [X]	No []	I
	(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the report	ing 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:					
0.0	Has the code of ethics for senior managers been amended?			V [V 1	Na F 1	1
9.2 9.21	If the response to 9.2 is Yes, provide information related to amendment(s).			Yes [X]	NO [i
3.21	In the first quarter of 2025 the Code of Conduct was amended. The changes made were updating the name of a se	ection report and policy				
	and made minor improvements to the spacing and formatting.					
9.3 9.31	Have any provisions of the code of ethics been waived for any of the specified officers?			Yes []	No [X]	I
	FINANCIAL		•••			
10.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?					-
10.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:		.\$. 0
	INVESTMENT					
	INVESTIMENT					
11.1	Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or other			v r 1	N F V 1	,
11.2	use by another person? (Exclude securities under securities lending agreements.)			Yes []	NO [X]	1
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:					
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		Curre	2 ent Quarte	ır
		Book/Adjusted			k/Adjusted	
		Carrying Value		Carr	ying Value)
	Bonds			\$		
	Preferred Stock			\$		
	Common Stock			\$		
	Short-Term Investments			\$		
	Mortgage Loans on Real Estate			\$		
14.26	All Other	\$0		\$		
	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)			\$		
14.20	Total Investment in Parent included in Lines 14.21 to 14.26 above	ΦU		\$		0
15.1	Has the reporting entity entered into any hedging transactions reported on Schedule DB?			Yes []	No [X]	j
15.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	Yes	s [] No [] N/A []
16.	For the reporting entity's security lending program, state the amount of the following as of the current statement date	e:				
	16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2					
	16.2 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, P					
	16.3 Total payable for securities lending reported on the liability page.		\$			U

GENERAL INTERROGATORIES

	1				2				
State Street Bank	Name of Custo	odian(s)	State Street	Custo Financial Center:	odian Address Corporate Headqu	arters: One Congr	ess		
	aa ao								
For all agreements to		ith the requirements of the NAIC	C Financial Condi	tion Examiners Ha	indbook, provide th	ne name,			
1 Nam		2 Location(s)		Comp	3 olete Explanation(s)			
Have there been an		name changes, in the custodian to:	n(s) identified in 1	7.1 during the cur	rent quarter?		Yes	[]	No [X
Old Cus		2 New Custodian	Date o	3 f Change	Rea	1 Ison			
make investment de	cisions on behalf of	vestment advisors, investment r the reporting entity. This include e as such. ["that have access	es both primary ar s to the investmer	nd sub-advisors. F	or assets that are				
	1 Name of Firm		2 Affiliati						
Derek S. Blunt as	Senior Investment O	Officer	A						
		d in the table for Question 17.5, more than 10% of the reporting					Yes	[]	No [X
17.5098 For firms/ir	dividuals unaffiliated	with the reporting entity (i.e. de	esignated with a "	J") listed in the tat	ole for Question 17	.5, does the			
total assets	under management	t aggregate to more than 50% o	of the reporting en	tity's invested asse	ets?		Yes	[]	No [X
For those firms or in table below.	dividuals listed in the	e table for 17.5 with an affiliation	າ code of "A" (affil	iated) or "U" (unaf	filiated), provide th	e information for tl	he		
1		2		3		4		Inves	5 stment gement
Central Registratio Depository Numbe		Name of Firm or Individual		Legal Entity Identi	ifier (LEI)	Registered With		Agre	ement) Filed
	. Derek S. Blunt		N	I/A	Not reg	gistered			
Have all the filing re	•	urposes and Procedures Manual	of the NAIC Inve	estment Analysis C	Office been followed	d?	Yes	[X]	No [
	GI securities, the re	porting entity is certifying the fol	llowing elements	for each self-design	nated 5GI security				
By self-designating a. Documentation		nit a full credit analysis of the se	•		•	an FE or PL			
By self-designating a. Documentation security is not b. Issuer or obli	t available. gor is current on all c	contracted interest and principal	ecurity does not ex	xist or an NAIC CF	•	an FE or PL			
By self-designating and Documentation security is not be lessuer or oblice. The insurer h	t available. gor is current on all c as an actual expecta	•	ecurity does not extended and the second and the se	kist or an NAIC CF	RP credit rating for		Yes	[]	No [X
By self-designating a. Documentation security is not b. Issuer or oblice. The insurer heads the reporting er By self-designating	t available. gor is current on all c as an actual expecta tity self-designated t PLGI securities, the i	contracted interest and principal ation of ultimate payment of all comments of securities?	ecurity does not expression of	xist or an NAIC CF	RP credit rating for		Yes	[]	No [X
By self-designating a. Documentation security is not b. Issuer or oblice. The insurer has the reporting er By self-designating a. The security was self-designating a. The security was self-designating a.	t available. gor is current on all cas an actual expectatity self-designated for the large purchased prior to the large purchased purchase	contracted interest and principal ation of ultimate payment of all comments of securities?	ecurity does not explored in the contracted interesting following element	kist or an NAIC CF t and principal. s of each self-desi	RP credit rating for		Yes	[]	No [X
By self-designating a. Documentation security is not be a security is not be. Issuer or oblice. The insurer heat the reporting er. By self-designating a. The security volume b. The reporting c. The NAIC Designation as the security volume is not be.	t available. gor is current on all cas an actual expectatity self-designated self-designated self-designated self-designated self-designation was derived signation was derived.	contracted interest and principal ation of ultimate payment of all coordinates of securities?	ecurity does not explain the contracted interesting following element IC Designation regid by an NAIC CRI	t and principal. s of each self-desi ported for the secue in its legal capace	RP credit rating for grant of the security. Sity as a NRSRO we see the security.	rity:	Yes	[]	No [X
By self-designating a. Documentating security is not b. Issuer or oblic. The insurer h. Has the reporting er. By self-designating a. The security w. b. The reporting c. The NAIC Designating d. The reporting d. The reporting d. The reporting	t available. gor is current on all cas an actual expectatity self-designated self-designated self-designated self-designated self-designation as purchased prior tentity is holding capitignation was derived rivate letter rating he entity is not permitte	contracted interest and principal atton of ultimate payment of all coordinates of the securities?	ecurity does not experience of	t and principal. s of each self-desi ported for the secu in its legal capac y state insurance r the SVO.	gnated PLGI security. ity as a NRSRO wegulators.	rity: hich is shown			·
By self-designating a. Documentation security is not be a lessuer or oblicing. The insurer has the reporting er by self-designating a. The security with b. The reporting c. The NAIC Designation on a current production of the proporting designation. The reporting has the reporting er by assigning FE to a security in the security of t	t available. gor is current on all cas an actual expectatity self-designated self-designated self-designated self-designation was derived in the letter rating he entity is not permitte titty self-designated for the self-de	contracted interest and principal ation of ultimate payment of all coordinates of the securities?	l payments. contracted interes following element C Designation rep d by an NAIC CRI for examination by the PL security with	t and principal. s of each self-desi ported for the secu in its legal capacy state insurance in the SVO.	gnated PLGI security. ity as a NRSRO wegulators.	rity: hich is shown			No [X
By self-designating a. Documentation security is not be a lessue or oblining. The insurer has the reporting er. The security with b. The reporting c. The NAIC Design authorized by assigning FE to a FE fund: a. The shares with security is not a current process.	t available. gor is current on all cas an actual expectatity self-designated septicity self-designated septicity self-designated septicity is holding capisignation was derived rivate letter rating he entity is not permitte titty self-designated for a Schedule BA non-rere purchased prior terminal services.	contracted interest and principal ation of ultimate payment of all of SGI securities?	l payments. contracted interes following element C Designation reg d by an NAIC CRf for examination by the PL security with	t and principal. s of each self-desi corted for the secu in its legal capacy y state insurance r in the SVO.	gnated PLGI security. ity as a NRSRO wegulators.	rity: hich is shown			·
By self-designating a. Documentating security is not b. Issuer or obliding. The insurer has the reporting er. By self-designating a. The security with b. The reporting c. The NAIC Designation on a current pind. The reporting er. By assigning FE to a FE fund: a. The shares with b. The reporting c. The shares with the reporting c. The security high January 1, 20	t available. gor is current on all cas an actual expectatity self-designated self-designated self-designated self-designation was deriver invate letter rating he entity is not permitte titty self-designation was deriver a Schedule BA non-rere purchased prior tentity is holding capiad a public credit rating a a public credit rating a public credit rating a public credit rating a public credit rating and a public credit rating.	contracted interest and principal atton of ultimate payment of all of GGI securities?	l payments. contracted interes following element C Designation rep d by an NAIC CRF for examination by the PL security with corting entity is cert	t and principal. s of each self-desi corted for the secu in its legal capacy y state insurance r in the SVO. fying the following	gnated PLGI security. elements of each rity.	hich is shown			·
By self-designating a. Documentation security is not be a lessurer or oblicing. The insurer has the reporting er. The security with the reporting a. The security with the reporting c. The NAIC Designation on a current produced by assigning FE to a FE fund: a. The shares with the reporting c. The shares with the reporting c. The security high January 1, 20 d. The fund only e. The current results in the security in the current results in the security in the current results.	t available. gor is current on all cas an actual expectatity self-designated self-designated self-designated self-designated self-designation was derived invate letter rating he entity is not permitte titty self-designated for a Schedule BA non-rere purchased prior tentity is holding capital self-designated for a schedule BA non-rere purchased prior tentity is holding capital a public credit rating. or predominantly ho	contracted interest and principal ation of ultimate payment of all coordinates of solutions of ultimate payment of all coordinates of solutions of ultimate payment of all coordinates of solutions of ultimates of solutions of ultimates of u	l payments. contracted interes following element C Designation rep d by an NAIC CRI for examination by the PL security with crting entity is cert C Designation rep assigned by an N	t and principal. s of each self-desi ported for the secu ported its legal capac y state insurance r in the SVO. frying the following ported for the secu	gnated PLGI security. ity as a NRSRO wegulators. elements of each	hich is shown self-designated			·

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:

	1.1 A&H loss percent	79.1 %
	1.2 A&H cost containment percent	1.3 %
	1.3 A&H expense percent excluding cost containment expenses	11.6 %
2.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date\$\$	0
2.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]
2.4	If yes, please provide the balance of the funds administered as of the reporting date\$	0
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes [] No [X]
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	Yes [] No [X]

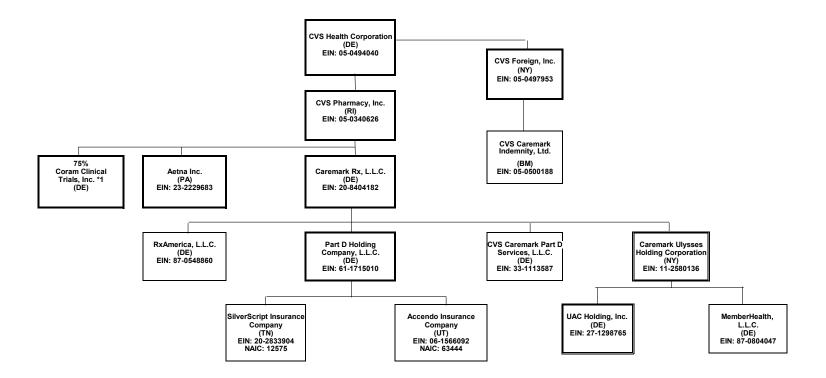
SCHEDULE S - CEDED REINSURANCE Showing All New Reinsurance Treaties - Current Year to Date

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

			1					rect Business C	, ,			10
	States, etc.		Active Status (a)	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.	,	۹L	N								0	
2.	Alaska	4K	N								0	
3.	Arizona	AΖ	N								0	
4.	Arkansas	AR	N								0	
5.	California (CA	N								0	
6.	Colorado (N								0	
7.	Connecticut	CT	N								0	
8.	Delaware [DE	N								0	
9.	District of Columbia [OC	N								0	
10.	Florida F	FL	N								0	
11.	Georgia		N								0	
12.	Hawaii I	-H	N								0	
13.	Idaho I	D	N								0	
14.	Illinois I	L	N								0	
15.	Indiana I	N	N								0	
16.	lowa [Α	L	179, 110	21,079,088						21, 258, 198	
17.	Kansas ł	KS	N								0	
18.	Kentucky ł	(Υ	N								0	
19.	Louisiana L	_A	N								0	
20.	Maine	ΜE	N								0	
21.	Maryland	MD	N								0	
22.	Massachusetts N	MA	N								0	
23.	Michigan	MΙ	N								0	
24.	Minnesota	MN	N								0	
25.	Mississippi	MS	N								0	
26.			N								0	
27.	Montana	MT	N								0	
28.	Nebraska	NE	N								0	
29.		۱. VV	N								0	
30.	New Hampshire	νH	N								0	
31.	New Jersey		N								0	
32.	New Mexico		N								0	
33.	New York		N								0	
34.			N								0	
35.			N								0	
36.			N								0	
37.	· ·		N								0	
38.		-	N								0	
39.	Pennsylvania F	-	N								0	
40.	Rhode Island		N								0	
41.			N								0	
42.			N								0	
43.			N								0	
4 4.			N								0	
			N								0	
45. 46.	Utah (-	N									
											0	
47. 48	•		N									
48. 40	-		N									
49. 50	West Virginia\		N								0	
50.	Wisconsin\		N								0	
51.	Wyoming\		N								0	
52.	American Samoa A		N								0	
53.	Guam (N								0	
54.	Puerto Rico F		N								0	
55.	U.S. Virgin Islands \	٧I	N								0	
56.	Northern Mariana Islands	мР	N								0	
57.	Canada (N								0	
58.	Aggregate Other											
50.	Aliens (ЭΤ	XXX	0	0	0	0	0	0	0	0	0
59.	Subtotal		XXX	179, 110	21,079,088	0	0	0	0	0	21, 258, 198	C
60.	Reporting Entity	["		, ,							' ' '	
	Contributions for Emp										1	
	Benefit Plans		XXX								0	
61.	Totals (Direct Business		XXX	179,110	21,079,088	0	0	0	0	0	21,258,198	C
-000:	DETAILS OF WRITE-I											
58001.			XXX								ļ	
58002.			XXX									
58003.			XXX									
აგყ98.	Summary of remaining										ĺ	
	write-ins for Line 58 fro overflow page		XXX	0	0	0	0	0	0	0	0	(
58999	Totals (Lines 58001 th		,								I	
	58003 plus 58998)(Lin										1	
	above)		XXX	0	0	0	0	0	0	0	0	0
	e Status Counts:											

a) Active Status Counts:	
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG 1	4. Q - Qualified - Qualified or accredited reinsurer0
2. R - Registered - Non-domiciled RRGs	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.	

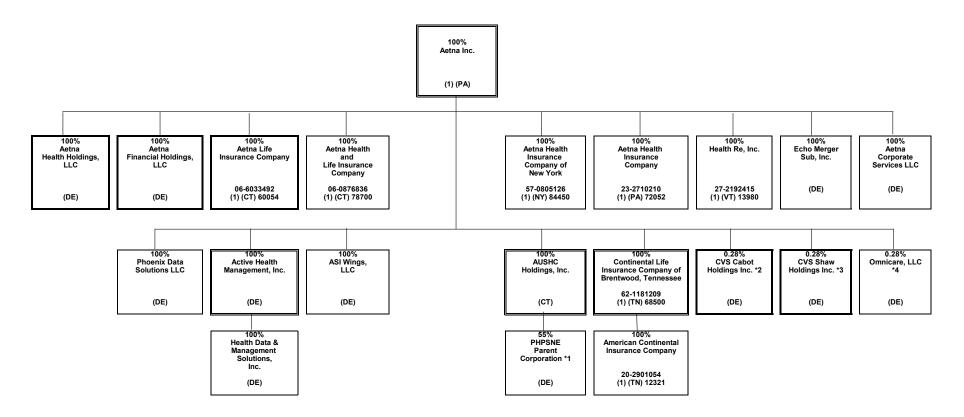


This organizational chart reflects the insurance entity reporting system and identifies the relationship between the ultimate parent and all member insurers. The ultimate controlling company is a Fortune 6 company with numerous subsidiaries, the majority of which do not interact with the insurance entities.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

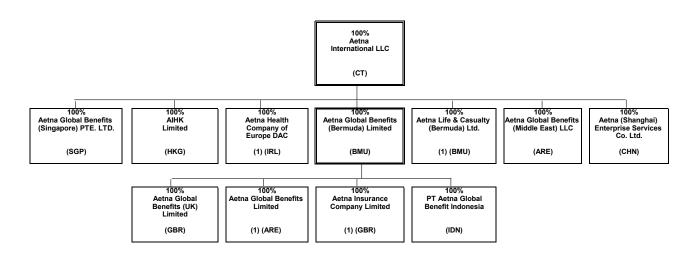


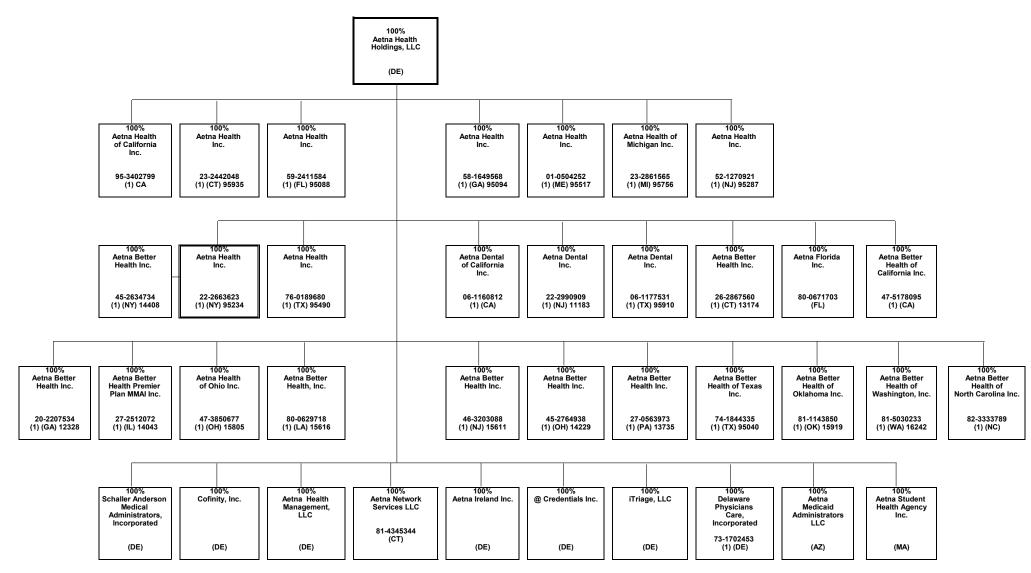
^{*1} PHPSNE Parent Corporation is also 45% owned by third parties.

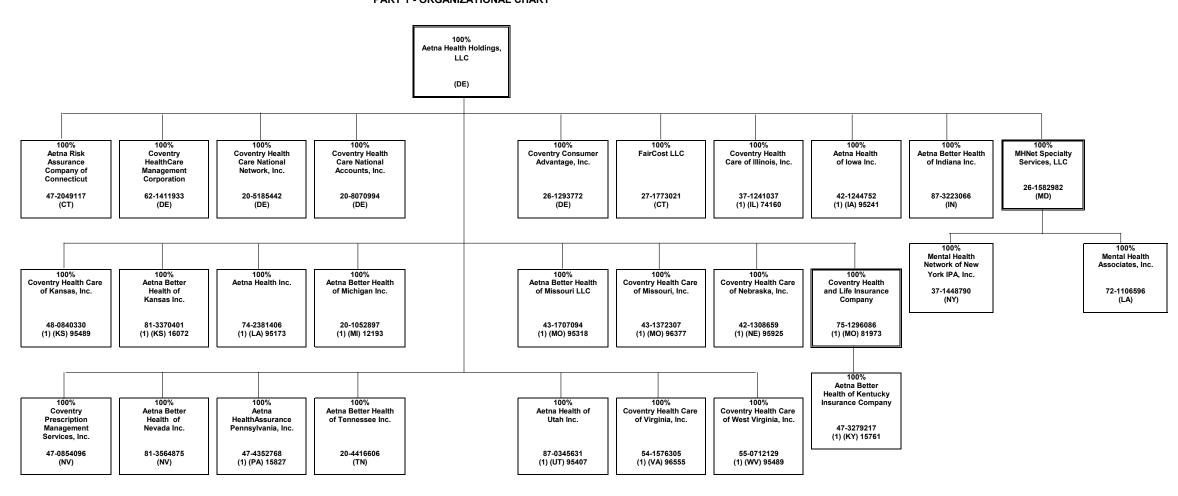
^{*2} CVS Cabot Holdings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

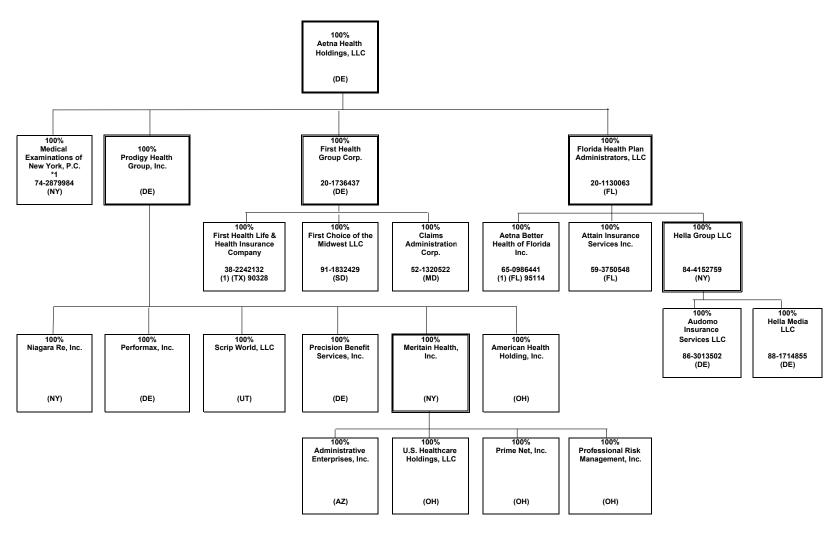
^{*3} CVS Shaw Hoidings Inc. is also 99.72% owned by Coram Clinical Trials, Inc.

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

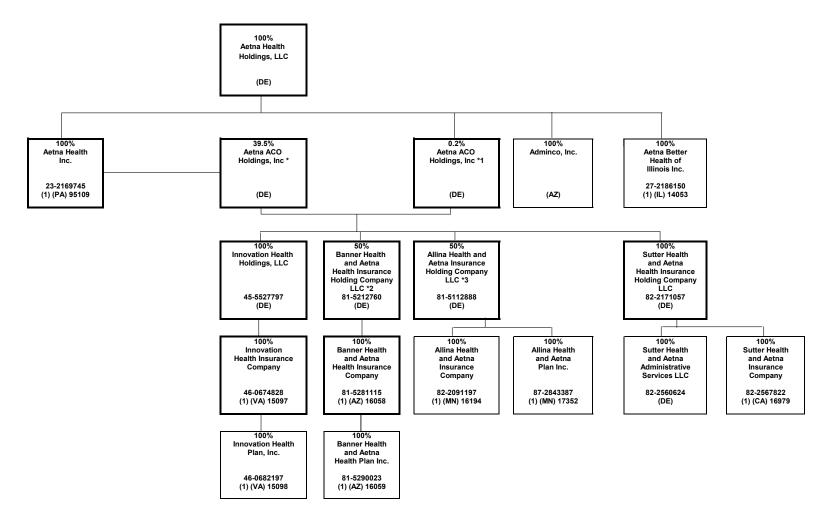




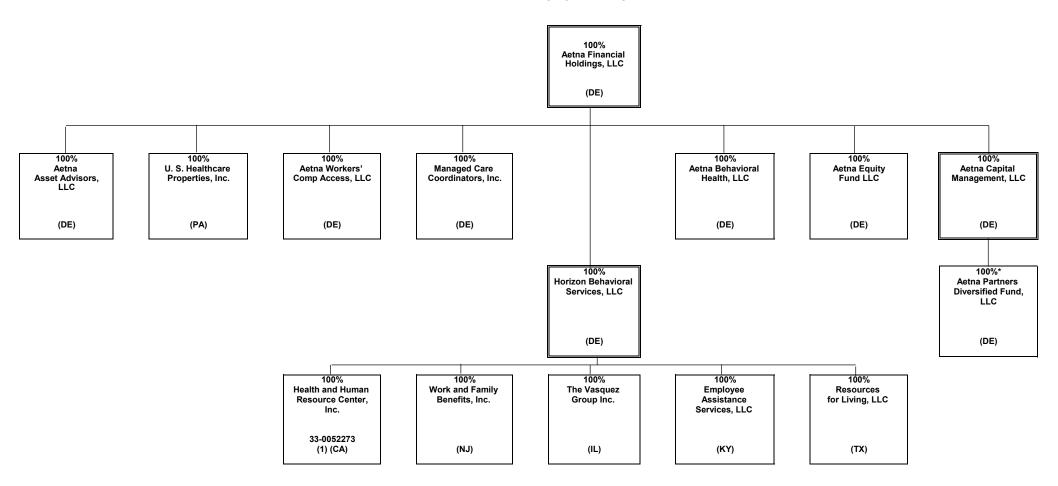




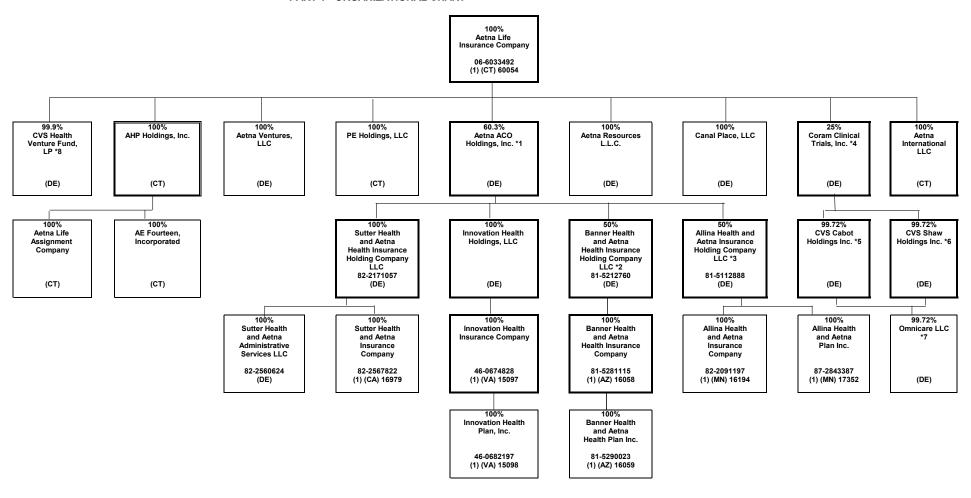
^{*1} Owned via a nominee



^{*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.



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



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

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

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

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

^{*5} CVS Cabot Holdings Inc. is also 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 Helath 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
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)	/
. 0001	CVS HEALTH GROUP		05-0494040		0000064803	NYSE	CVS Health Corporation	DE	UIP	Board of Directors	Board of Directors	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	63444	06-1566092				Accendo Insurance Company	UT	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	I A	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		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	61-1715010				Part D Holding Company, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	33-1113587				CVS Caremark Part D Services, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-0548860 11-2580136				RxAmerica, L.L.C.	DE	NIA	Caremark, Rx., L.L.C.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	11-2580136 87-0804047				Caremark Ulysses Holding Corporation	NY	NIA	Caremark, Rx., L.L.C.	Ownership		CVS Health Corporation	NO	0
. 0001		00000	87-0804047 05-0500188					DE		Caremark Ulysses Holding Corporation	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	05-0500188 27-1298765				CVS Caremark Indemnity, Ltd.	BMU	I A	CVS Foreign, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	05-0497953				UAC Holding, Inc	NY	NIA	Caremark Ulysses Holding Corporation CVS Health Corporation	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials. Inc.	NY	NIA	CVS Pharmacy. Inc	Ownership	75.000	CVS Health Corporation	NO	6
. 0001	CVS HEALTH GROUP	00000	23-2229683	3060706	0001122304		Aetna Inc.	PA	UIP	CVS Pharmacy, Inc	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	30-0123754	3000700			Aetna Health Holdings, LLC	DE	UDP	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	95-3402799				Aetna Health of California Inc.	CA	IA	Aetna Health Holdings. LLC	Owner Strip		CVS Health Corporation		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	95985	59-2411584				Aetna Health Inc.	FL	I A	Aetna Health Holdings, LLC	Owner Strip		CVS Health Corporation		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	95094	01-0504252				Aetna Health Inc.	ME	IA	Aetna Health Holdings, LLC	Owner Strip		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95756	23-2861565				Aetna Health of Michigan Inc.	MI	IA	Aetna Health Holdings, LLC	Owner Strip		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95287	52-1270921				Aetna Health Inc.	NJ	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95234	22-2663623				Aetna Health Inc.	NY	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	14408	45-2634734				Aetna Better Health Inc.	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	95490	76-0189680				Aetna Health Inc.	TX	14	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		0
. 0001	CVS HEALTH GROUP	12328	20-2207534				Aetna Better Health Inc.	GA	IA	Aetna Health Holdings, LLC	Ownership.		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	06-1160812				Aetna Dental of California Inc.	CA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	11183	22-2990909				Aetna Dental Inc.	NJ	I A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95910	06-1177531				Aetna Dental Inc.	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	13-3670795				Aetna Health Management, LLC	DE	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	22-3187443				Aetna Ireland Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	20-1274723				Cofinity, Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	23-2671370				@Credentials Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	13735	27-0563973				Aetna Better Health Inc.	PA	I A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13174	26-2867560				Aetna Better Health Inc	CT	I A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	47-5178095				Aetna Better Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	14043	27-2512072				Aetna Better Health Premier Plan MMAI Inc	IL	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		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		0
. 0001	CVS HEALTH GROUP	15616	80-0629718				Aetna Better Health, Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	80-0671703				Aetna Florida Inc.	FL	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	14229	45-2764938				Aetna Better Health Inc.	0H	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	15611	46-3203088				Aetna Better Health Inc.	NJ	I A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	15919	81-1143850				Aetna Better Health of Oklahoma Inc	0K	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	04-2708160				Aetna Student Health Agency Inc	MA	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation		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				Schaller Anderson Medical Administrators,	DE	NIA	Astro Health Heldings IIC	Ownership	100.000	CVC Haalth Corneration	NO	
. 0001	UVO NEALIN UNUUP	00000	U I-UOZ0/83				Incorporated	VE	N I A	Aetna Health Holdings, LLC	Owner Strip		CVS Health Corporation	IW	∪

6.1

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
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to	5: " 6 . " 11	Attorney-in-Fact,	Provide		Re-	
Group Code	Group Name	Company	ID Normalis a se	Federal RSSD	CIK	(U.S. or	Parent, Subsidiaries Or Affiliates	Loca- tion	Reporting	Directly Controlled by	Influence, Other)	Percen-	Ultimate Controlling	quired?	, .
. 0001	CVS HEALTH GROUP	Code 00000	Number 86-0842559	KSSD		International)	Aetna Medicaid Adminstrators LLC	AZ	Entity	(Name of Entity/Person) Aetna Health Holdings, LLC	Ownership	tage 100,000	Entity(ies)/Person(s) CVS Health Corporation	(Yes/No)	0
. 0001	CVS HEALTH GROUP	00000	45-2944270				iTriage, LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	16-1471176				Prodigy Health Group, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings. Inc.	DE	NI A	Aetna Health Holdings, LLC	Ownership		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.		CVS Health Corporation	NO	11
. 0001	CVS HEALTH GROUP	00000	45-5527797				Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15097	46-0674828				Innovation Health Insurance Company	VA	I A	Innovation Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15098	46-0682197				Innovation Health Plan, Inc	VA	IA	Innovation Health Insurance Company	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95109	23-2169745				Aetna Health Inc.	PA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	YES	0
. 0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Health Inc. (PA)	Ownership		CVS Health Corporation	NO	2
. 0001	CVS HEALTH GROUP	00000	20-0438576				Niagara Re, Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	52-2200070				Performax, Inc.	DE	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	1
. 0001	CVS HEALTH GROUP	00000	87-0632355 27-1760756				Precision Benefit Services. Inc.	UI	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	31-1368946				American Health Holding, Inc.	OH	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	16-1264154				Meritain Health Inc.	NY	NIA	Prodigy Health Group, Inc.	Ownership		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	00000	86-0537707				Adminco, Inc.	AZ	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	86-0527428				Administrative Enterprises, Inc.	AZ	NIA	Meritain Health Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	16-1684061				U.S. Healthcare Holdings, LLC	0H	NI A	Meritain Health, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	34-1670299				Prime Net, Inc.	0H	NI A	Meritain Health, Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	34-1348032				Professional Risk Management, Inc	0H	NI A	Meritain Health, Inc	Ownership	100.000	CVS Health Corporation	NO	0
							Continental Life Insurance Company of								
. 0001	CVS HEALTH GROUP	68500	62-1181209				Brentwood, Tennessee	TN	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	12321	20-2901054				American Continental Insurance Company	TN	I A	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	60054	06-6033492				Aetna Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	YES	0
. 0001	CVS HEALTH GROUP	00000	45-4901541				Aetna ACO Holdings, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	2
. 0001	CVS HEALTH GROUP	00000	06-1270755				AHP Holdings. Inc.	CT	NI A	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1028469				AE Fourteen, Incorporated	CT	NI A	AHP Holdings, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1373153				Aetna Life Assignment Company	CT	NI A	AHP Holdings, Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-3678339				PE Holdings, LLC	CT	NI A	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1423207				Aetna Resources L.L.C	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-3180700				Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	58-2160656				Coram Clinical Trials, Inc.	DE	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	6
. 0001	CVS HEALTH GROUP	00000	85-3918720 85-3918567				CVS Cabot Holdings Inc.	DE	NIA	Coram Clinical Trials, Inc.	Ownership	99.720	CVS Health Corporation	NO	7
. 0001	CVS HEALTH GROUP	00000	31-1001351				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 Shaw Holdings Inc	Owner Ship		CVS Health Corporation	NO	9
. 0001	CVS HEALTH GROUP	00000	41-2035961				Aetna Financial Holdings. LLC	DE	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	26-2030792				Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2354500				U.S. Healthcare Properties, Inc.	PA	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	38-3704481				Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	32-0786680				Aetna Equity Fund LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	11-3667142		0001314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership		CVS Health Corporation	NO	1
. 0001	CVS HEALTH GROUP	00000	20-0446676				Aetna Workers' Comp Access, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-0446713				Aetna Behavioral Health, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	23-2670015				Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	59-3269144				Horizon Behavioral Services, LLC	DE	NI A	Aetna Financial Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0

16.2

SCHEDULE Y

	PART 1A - DETAILS OF INSURANCE HULDING CUMPANT STSTEM														
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
. 0001	CVS HEALTH GROUP	00000	61-1193498				Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	33-0052273				Health and Human Resource Center, Inc	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	75-2420973				Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	36-3681261				The Vasquez Group Inc	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	22-3178125				Work and Family Benefits, Inc	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	27-1773021				FairCost LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	78700	06-0876836				Aetna Health and Life Insurance Company	CT	IA	Aetna Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	72052	23-2710210				Aetna Health Insurance Company	PA	IA	Aetna Inc	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	84450	57-0805126				Aetna Health Insurance Company of New York .	NY	IA	Aetna Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1571642				Aetna International LLC	CT	NIA	Aetna Life Insurance Company	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	98-0211470				Aetna Life & Casualty (Bermuda) Ltd	BMU	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					PT Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Insurance Company Limited	GBR	I A	Aetna Global Benefits (Bermuda) Limited	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Health Company of Europe DAC	IRL	IA	Aetna International LLC	Ownership	100.000	CVS Health Corporation	NO	0
							Aetna (Shanghai) Enterprise Services Co. Ltd.								
. 0001	CVS HEALTH GROUP	00000						CHN	NI A	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					Aetna Global Benefits (Singapore) PTE. LTD.	SGP	NI A	Aetna International LLC	Ownership		CVS Health Corporation	N0	0
. 0001	CVS HEALTH GROUP	00000	22-2578985				AUSHC Holdings, Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					AIHK Limited	HKG	IA	Aetna International LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	06-1182176				PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc.	Ownership	55.000	CVS Health Corporation	NO	3
. 0001	CVS HEALTH GROUP	00000	52-2182411				Active Health Management, Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-0970432				Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	13980	27-2192415				Health Re, Inc	VT	IA NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001			81-0579372						NIA	Aetna Inc.			CVS Health Corporation		0
. 0001	CVS HEALTH GROUP	00000	51-0029326 47-4556274				ASI Wings, LLC	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	47-4556274				Echo Merger Sub, Inc	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	85-3918720				CVS Cabot Holdings Inc.	DE	NIA	Aetna Inc.	Ownership	0.280	CVS Health Corporation	NO	7
. 0001	CVS HEALTH GROUP	00000	85-3918567				CVS Shaw Holdings Inc.	DE	NIA	Aetna Inc.	Ownership		CVS Health Corporation	NO	8
. 0001	CVS HEALTH GROUP	00000	31-1001351				Omnicare LLC	DE	NIA	Aetna Inc.	Ownership	0.280	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		CVS Health Corporation	NO	0
. 0001	CVS TEACHT GROOT	01373	75-1230000				Aetna Better Health of Kentucky Insurance	MU		Coventry Health and Life Insurance Company	Owner Sirip		CVS Hearth Corporation	١٧٠	•
. 0001	CVS HEALTH GROUP	15761	47-3279217	l			Company	кү	IA	coverity hearth and life misurance company	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	81-4345344				Aetna Network Services LLC	CT	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95241	42-1244752				Aetna Health of Iowa Inc.	IA	RE	Aetna Health Holdings, LLC	Ownership		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		CVS Health Corporation	NO	0
							Aetna Risk Assurance Company of Connecticut								
. 0001	CVS HEALTH GROUP	00000	47-2049117				Inc	CT	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95173	74-2381406				Aetna Health Inc.	LA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
							Coventry Prescription Management Services,								
. 0001	CVS HEALTH GROUP	00000	47-0854096				Inc	NV	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	16148	81-3564875				Aetna Better Health of Nevada Inc	NV	NI A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	0
. 0001	CVS HEALTH GROUP	96555	54-1576305				Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	96377	43-1372307				Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95318	43-1702094				Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	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
											Type	If			
											of Control	Control			
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board,	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact,	Provide		Re-	
Group		Company	ID	Federal		(U.S. or	Parent, Subsidiaries	Loca-	Reporting	Directly Controlled by	Influence,	Percen-	Ultimate Controlling	quired?	
Code	Group Name	Code	Number	RSSD	CIK	International)	Or Affiliates	tion	Entity	(Name of Entity/Person)	Other)	tage	Entity(ies)/Person(s)	(Yes/No)) *
. 0001	CVS HEALTH GROUP	95408	55-0712129				Coventry Health Care of West Virginia, Inc.	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	62-1411933				Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	15827	47-4352768				Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	95489	48-0840330				Coventry Health Care of Kansas, Inc	KS	I A	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	N0	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		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 Coventry Health Care National Accounts, Inc.	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-8070994				Coveritry hearth care National Accounts, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-6070994				Coventry Health Care National Network, Inc.	DE	NIA	Aetna Health Holdings, LLC	Owner Ship		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	26-1293772				Coventry Consumer Advantage, Inc.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	20-1293772				First Health Group Corp.	DE	NIA	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS TEACHT GROOT	00000	20-1/3043/				First Health Life & Health Insurance Company	UL	NIA	Aetha hearth hordings, LLO	Owner Simp		CVS Hearth corporation	١٧٠	0
. 0001	CVS HEALTH GROUP	90328	38-2242132				Thou hourth zire a hourth mourance company	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		CVS Health Corporation	NO	
. 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		CVS Health Corporation	NO	
. 0001	CVS HEALTH GROUP	95266	84-4152759				Hella Group LLC	NY	NIA	Florida Health Plan Administrators, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	86-3013502				Audomo Insurance Services LLC	DE	NIA	Hella Group LLC	Ownership		CVS Health Corporation	NO	
. 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				MHNet 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	NI A	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	72-1106596				Mental Health Associates, Inc	LA	NI A	MHNet Specialty Services, LLC	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	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								
. 0001	CVS HEALTH GROUP	00000	81-5212760				Holding Company LLC	DE	NIA	Aetna ACO Holdings, Inc.	Ownership	50.000	CVS Health Corporation	NO	4
. 0001	CVS HEALTH GROUP	16058	81-5281115				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 FIEALTH GROUP	10000	01-3201113				Company	AZ	IA	Banner Health and Aetna Health Insurance	Owner Sirrp	100.000	CVS Realth Corporation	NO	0
. 0001	CVS HEALTH GROUP	16059	81-5290023				Banner Health and Aetna Health Plan Inc	AZ	IA	Company	Ownership		CVS Health Corporation	NO	0
							Allina Health and Aetna Health Insurance								
. 0001	CVS HEALTH GROUP	00000	81-5112888				Holding Company LLC	DE	NI A	Aetna ACO Holdings, Inc	Ownership	50.000	CVS Health Corporation	NO	5
										Allina Health and Aetna Health Insurance					
. 0001	CVS HEALTH GROUP	16194	82-2091197				Allina Health and Aetna Insurance Company	MN	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NO	0
0004	CVS HEALTH GROUP	17352	87-2843387				Allina Health and Aetna Health Plan Inc	MN	IA	Allina Health and Aetna Health Insurance	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	CVS HEALTH GHOUP	1/302	87-2843387				Sutter Health and Aetha Insurance Holding	MIV	IA	Holding Company LLC	Ownership	100.000	CVS Health Corporation	NU	0
0001	CVS HEALTH GROUP	00000	82-2171057				Company LLC	DE	NIA	Aetna ACO Holdings. Inc.	Ownership	100.000	CVS Health Corporation	NO	0
. 0001	OVO FILALITI GIOGI	00000	02 217 1007				Sutter Health and Aetna Administrative			Sutter Health and Aetna Insurance Holding	Owner Strip		Ove hearth corporation	١٧٥	0
. 0001	CVS HEALTH GROUP	00000	82-2560624				Services LLC	DE	NIA	Company LLC	Ownership		CVS Health Corporation	NO	0
										Sutter Health and Aetna Insurance Holding			·	1	
. 0001	CVS HEALTH GROUP	16979	82-2567822				Sutter Health and Aetna Insurance Company	CA	IA	Company LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	16558	82-3333789				Aetna Better Health of North Carolina Inc	NC	I A	Aetna Health Holdings, LLC	Ownership		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		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000	87-3223066				Aetna Better Health of Indiana Inc	IN	NI A	Aetna Health Holdings, LLC	Ownership		CVS Health Corporation	NO	0
. 0001	CVS HEALTH GROUP	00000					CVS Health Venture Fund, LP	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	CVS Health Corporation	NO	10
			1	1	1			<u> </u>			1		1		1

Asterisk	Explanation
	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	PHPSNE Parent Corporation is 55% owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
	Banner Health and Aetna Health Insurance Holding Company LLC is also 50% owned by Banner Health.
	Allina Health and Aetna Insurance Holding Company LLC is also 50% owned by Allina Health System.
	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.
	CVS Shaw Holdings Inc is owned 99.72% by Coram Clinical Trials, Inc. and 0.28% owned by Aetna Inc.
	Omnicare, LLC is 0.28% owned by Aetna Inc. The Company is also owned by CVS Cabot Holdings Inc. and CVS Shaw Holdings Inc., with 49.86% each ownership.
	CVS Health 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.

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	Other Long-Term invested Assets							
		1	2					
			Prior Year Ended					
		Year to Date	December 31					
1.	Book/adjusted carrying value, December 31 of prior year							
2.	Cost of acquired:							
	2.1 Actual cost at time of acquisition							
	2.2 Additional investment made after acquisition							
3.	Capitalized deferred interest and other							
4.	Accrual of discount							
5.	Unrealized valuation increase/(decrease)							
6.	Total gain (loss) on disposals							
7.	Deduct amounts received on disposals							
8.	Deduct amortization of premium, 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)							

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
			Prior Year Ended
		Year to Date	December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	8,555,807	12,542,603
2.	Cost of bonds and stocks acquired		
3.	Accrual of discount		
4.	Unrealized valuation increase/(decrease)	8,117	(12,643)
5.	Total gain (loss) on disposals	0	(152,202)
6.	Deduct consideration for bonds and stocks disposed of	0	8,780,897
7.	Deduct amortization of premium	5,303	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)	9,075,341	8,555,807
12.	Deduct total nonadmitted amounts		0
13.	Statement value at end of current period (Line 11 minus Line 12)	9,075,341	8,555,807

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	During the Current Quarter to 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
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	3,421,528	0	0	6,951	3,428,479	0	0	3,421,528
2. NAIC 2 (a)	3,207,208	0	0	6,384	3,213,592	0	0	3,207,208
3. NAIC 3 (a)	927,070	0	0	9,840	936,910	0	0	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	7,555,806	0	0	23,175	7,578,981	0	0	7,555,806
8. NAIC 1		0	0	0	0	0		0
PREFERRED STOCK								
15. NAIC 1					0		0	
16. NAIC 2					0	0		
17. NAIC 3		0		0		0	0	
18. NAIC 4					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	8,555,806	496,350	0	23,184	9,075,340	0	0	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:

Schedule DA - Part 1 - Short-Term Investments

NONE

Schedule DA - Verification - Short-Term Investments

NONE

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

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

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	(Odon Equivalents)	1	2
		Year To Date	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		
3.	Accrual of discount		
4.	Unrealized valuation increase/(decrease)	0	0
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	11,492,173	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)	17,577,051	21,799,806
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	17,577,051	21,799,806

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

Schedule A - Part 3 - Real Estate Disposed **N O N E**

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

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

NONE

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

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

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

		Show All Long-1	enn bonds and Stock Acquired buning the Curre	in Quarter				
1	2	3	4	5	6	7	8	9
								NAIC
								Designation,
								NAIC
								Designation
								Modifier
								and
								SVO
				Number of			Paid for Accrued	Admini-
CUSIP		Date		Shares of			Interest and	strative
Identification	Description	Acquired	Name of Vendor	Stock	Actual Cost	Par Value	Dividends	Symbol
04899999999. Total - Issuer Cr					0	0	0	XXX
04999999999999999999999999999999999999	J				0	0	0	XXX
0509999997. Total - Issuer Cr		0	0	0	XXX			
0509999998. Total - Issuer Cr					XXX	XXX	XXX	XXX
0509999999. Total - Issuer Cr					0	0	0	XXX
	LTD. SERIES 19-14A CLASS A1R2 5.843% 01/20/38	03/24/2025 MORGAN STANLEY			496,350	500,000	2,506	
	-Backed Securities - Financial Asset-Backed - Self-	Liquidating - Non-Agency - CLOs/CBOs/CD0	Os (Unaffiliated)		496,350	500,000	2,506	XXX
18899999999. Total - Asset-Ba					496,350	500,000	2,506	XXX
18999999999999999999999999999999999999	acked Securities (Affiliated)				0	0	0	XXX
1909999997. Total - Asset-Ba	acked Securities - Part 3				496,350	500,000	2,506	
1909999998. Total - Asset-Ba	acked Securities - Part 5				XXX	XXX	XXX	XXX
19099999999999999999999999999999999999	acked Securities				496,350	500,000	2,506	XXX
20099999999. Total - Issuer Cr	redit Obligations and Asset-Backed Securities				496,350	500,000	2,506	XXX
4509999997. Total - Preferred	d Stocks - Part 3				0	XXX	0	XXX
4509999998. Total - Preferred	d Stocks - Part 5				XXX	XXX	XXX	XXX
450999999999999999999999999999999999999	d Stocks				0	XXX	0	XXX
5989999997. Total - Common	Stocks - Part 3				0	XXX	0	XXX
5989999998. Total - Common	Stocks - Part 5				XXX	XXX	XXX	XXX
59899999999999999999999999999999999999	Stocks				0	XXX	0	XXX
59999999999999999999999999999999999999	d and Common Stocks				0	XXX	0	XXX
6009999999 - Totals					496.350	XXX	2.506	

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 **N O N E**

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

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned NONE

SCHEDULE E - PART 1 - CASH Month End Depository Balances

1	2		3 4 5 Book Balance at End of Each Month 9						
'	_	J 3	7	3		uring Current Quar		3	
			Amount of	Amount of	6	7	8	-	
	Restricted		Interest Received	Interest Accrued	· ·	,	0		
	Asset	Rate of	During Current	at Current					
Depository	Code	Interest	Quarter	Statement Date	First Month	Second Month	Third Month	*	
Wells Fargo Bank, N.A San Francisco, CA					7,833,069	7,833,069	7,833,069	XXX.	
Citi Bank New Castle, DE					1,222,950	819,046		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	9,156,019	8,752,115	8,377,663	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	9,156,019	8,752,115	8,377,663	XXX	
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX	
	·····								
	·····			• • • • • • • • • • • • • • • • • • • •					
	·····								
				• • • • • • • • • • • • • • • • • • • •					
0599999. Total - Cash	XXX	XXX	0	0	9.156.019	8.752.115	8.377.663	XXX	
0033333. 10tai - Casii		^^^	U	U	5, 150,013	0,732,113	0,011,000		

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

Show Investments Owned End of Current Quarter										
1	2	3 Restricted	4	5	6	7	8	9		
		Asset		Stated Rate of		Book/Adjusted	Amount of Interest	Amount Received		
CUSIP	Description	Code	Date Acquired	Interest	Maturity Date	Carrying Value	Due and Accrued	During Year		
	otal - Issuer Credit Obligations (Unaffiliated)					0	0	0		
	otal - Issuer Credit Obligations (Affiliated)					0	0	0		
	otal - Issuer Credit Obligations					0	0	0		
	CASPOOL		02/28/2025	0.000 .			0	193,849		
	Subtotal - Other Cash Equivalents (Unaffiliated) Total Cash Equivalents (Unaffiliated)					17,577,051 17,577,051	0	193,849		
	otal Cash Equivalents (Orialiliated)					17,577,051	0	193,849		
0099999999	otal Cash Equivalents (Allinated)					U	0	0		
						•				
					<u></u>					
8609999999 -	Total Cash Equivalents					17,577,051	0	193,849		