1422920152010010102

HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2015

OF THE CONDITION AND AFFAIRS OF

Aetna Better Health Inc. (an Ohio corporation)

NAIC Group Code ..... **0001** **0001** (Current Period) (Prior Period) NAIC Company Code ..... **14229** Employer's ID Number **45-2764938**

Organized under the Laws of **Ohio** State of Domicile or Port of Entry …….. **Ohio** Country of Domicile …… **United States**

Licensed as business type: Life, Accident & Health [ ] Property/Casualty [ ] Hospital, Medical & Dental Service or Indemnity [ ]
Dental Service Corporation [ ] Vision Service Corporation [ ] Health Maintenance Organization [X]
Other [ ] Is HMO Federally Qualified? Yes [ ] No [X]

Incorporated/Organized ..... **July 15, 2011** Commenced Business ..... **March 16, 2012**

Statutory Home Office ……..... **7400 W. Campus Road** ..... **New Albany** ..... **OH** ... **US** ... **43054**
(Street and Number) (City, State, Country, and Zip Code)

Main Administrative Office ……..……...……..…..……... **7400 W. Campus Road**
(Street and Number)
…….. **New Albany** ..... **OH** ... **US** ... **43054** ……..…..... **614-933-7400**
(City, State, Country, and Zip Code) (Area Code) (Telephone Number)

Mail Address .....…….....…….... **980 Jolly Road, U11S** ..……..…..…..... **Blue Bell** ..... **PA** ... **US** ... **19422-1904**
(Street and Number or P. O. Box) (City, State, Country, and Zip Code)

Primary Location of Books and Records ....……..……..... **980 Jolly Road**
(Street and Number)
…….……. **Blue Bell** ..... **PA** ... **US** ... **19422-1904** ……..... **800-872-3862**
(City, State, Country, and Zip Code) (Area Code) (Telephone Number)

Internet Website Address ……..……..…….. **www.aetna.com**

Statutory Statement Contact ..... **Steven Matthew Conte** .....…….…..... **215-775-6508**
(Name) (Area Code) (Telephone Number) (Extension)
..... **Aetna.HMOReporting@aetna.com** .....…….….....…… **860-262-7767**
(E-mail Address) (Fax Number)

OFFICERS

Pamela Sue Sedmak, Chief Executive Officer and President
Robert Mark Kessler, Vice President and Secretary
Steven Matthew Conte, Principal Financial Officer and Controller

OTHER

Elaine Rose Cofrancesco, Vice President and Treasurer
Edward-Chung-I Lee, Vice President and Assistant Secretary
Kevin James Casey, Senior Investment Officer
Brian Christopher Winters, Assistant Controller

DIRECTORS OR TRUSTEES

Debra Jean Bacon
Michael Gene Murphy
Pamela Sue Sedmak

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

(Signature)	(Signature)	(Signature)
Pamela Sue Sedmak	**Robert Mark Kessler**	**Steven Matthew Conte**
Chief Executive Officer and President	**Vice President and Secretary@**	**Principal Financial Officer and Controller@@**
State of..... Arizona	State of..... Arizona	State of..... Pennsylvania
County of..... Maricopa	County of..... Maricopa	County of..... Montgomery
Subscribed and sworn to before me this	@Subscribed and sworn to before me this	@@Subscribed and sworn to before me this
____ day of _____ 2015	____ day of _____ 2015	____ day of August 2015
NOTARY PUBLIC (Seal)	NOTARY PUBLIC (Seal)	NOTARY PUBLIC (Seal)

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

ASSETS

	Current Statement Date			4
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1. Bonds	162,419,907	0	162,419,907	39,956,741
2. Stocks:				
2.1 Preferred stocks	0	0	0	0
2.2 Common stocks	0	0	0	0
3. Mortgage loans on real estate:				
3.1 First liens	0	0	0	0
3.2 Other than first liens	0	0	0	0
4. Real estate:				
4.1 Properties occupied by the company (less $.....0 encumbrances)	0	0	0	0
4.2 Properties held for the production of income (less $.....0 encumbrances)	0	0	0	0
4.3 Properties held for sale (less $.....0 encumbrances)	0	0	0	0
5. Cash ($.....(6,882,959)), cash equivalents ($.....30,829,734) and short-term investments ($.....380)	23,947,155	0	23,947,155	115,651,010
6. Contract loans (including $.....0 premium notes)	0	0	0	0
7. Derivatives	0	0	0	0
8. Other invested assets	0	0	0	0
9. Receivables for securities	9,141,652	0	9,141,652	0
10. Securities lending reinvested collateral assets	0	0	0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	195,508,714	0	195,508,714	155,607,751
13. Title plants less $.....0 charged off (for Title insurers only)	0	0	0	0
14. Investment income due and accrued	1,153,413	0	1,153,413	215,783
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	1,185,800	0	1,185,800	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $.....0 earned but unbilled premiums)	0	0	0	0
15.3 Accrued retrospective premiums	0	0	0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	0	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0	0
17. Amounts receivable relating to uninsured plans	8,618,959	0	8,618,959	0
18.1 Current federal and foreign income tax recoverable and interest thereon	221,437	0	221,437	3,311,031
18.2 Net deferred tax asset	24,709	0	24,709	0
19. Guaranty funds receivable or on deposit	0	0	0	0
20. Electronic data processing equipment and software	0	0	0	0
21. Furniture and equipment, including health care delivery assets ($.....0)	0	0	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0	0
23. Receivables from parent, subsidiaries and affiliates	883,426	0	883,426	0
24. Health care ($.....0) and other amounts receivable	11,478,891	11,478,891	0	0
25. Aggregate write-ins for other than invested assets	3,080,244	0	3,080,244	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	222,155,593	11,478,891	210,676,702	159,134,565
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0	0
28. Total (Lines 26 and 27)	222,155,593	11,478,891	210,676,702	159,134,565
DETAILS OF WRITE-INS				
1101.	0	0	0	0
1102.	0	0	0	0
1103.	0	0	0	0
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Medicaid Experience Rebate Receivable	3,080,244	0	3,080,244	0
2502.	0	0	0	0
2503.	0	0	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	3,080,244	0	3,080,244	0

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less $.....0 reinsurance ceded)	82,855,968	36,019,165	118,875,133	99,487,462
2.	Accrued medical incentive pool and bonus amounts	0	0	0	0
3.	Unpaid claims adjustment expenses	2,042,493	0	2,042,493	1,716,258
4.	Aggregate health policy reserves, including the liability of $.....0 for medical loss ratio rebate per the Public Health Service Act	4,741,988	0	4,741,988	0
5.	Aggregate life policy reserves	0	0	0	0
6.	Property/casualty unearned premium reserve	0	0	0	0
7.	Aggregate health claim reserves	0	0	0	0
8.	Premiums received in advance	0	0	0	0
9.	General expenses due or accrued	7,143,247	0	7,143,247	6,546,219
10.1	Current federal and foreign income tax payable and interest thereon (including $.....0 on realized gains (losses))	0	0	0	0
10.2	Net deferred tax liability	0	0	0	1,039
11.	Ceded reinsurance premiums payable	0	0	0	0
12.	Amounts withheld or retained for the account of others	0	0	0	0
13.	Remittances and items not allocated	0	0	0	0
14.	Borrowed money (including $.....0 current) and interest thereon $.....0 (including $.....0 current)	0	0	0	0
15.	Amounts due to parent, subsidiaries and affiliates	12,116,389	0	12,116,389	6,717,020
16.	Derivatives	0	0	0	0
17.	Payable for securities	12,170,427	0	12,170,427	0
18.	Payable for securities lending	0	0	0	0
19.	Funds held under reinsurance treaties with ($.....0 authorized reinsurers, $.....0 unauthorized reinsurers and certified $.....0 reinsurers)	0	0	0	0
20.	Reinsurance in unauthorized and certified ($.....0) companies	0	0	0	0
21.	Net adjustments in assets and liabilities due to foreign exchange rates	0	0	0	0
22.	Liability for amounts held under uninsured plans	0	0	0	0
23.	Aggregate write-ins for other liabilities (including $.....0 current)	0	0	0	0
24.	Total liabilities (Lines 1 to 23)	121,070,512	36,019,165	157,089,677	114,467,998
25.	Aggregate write-ins for special surplus funds	XXX	XXX	585,000	6,600,000
26.	Common capital stock	XXX	XXX	1	1
27.	Preferred capital stock	XXX	XXX	0	0
28.	Gross paid in and contributed surplus	XXX	XXX	67,999,999	67,999,999
29.	Surplus notes	XXX	XXX	0	0
30.	Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31.	Unassigned funds (surplus)	XXX	XXX	(14,997,975)	(29,933,433)
32.	Less treasury stock, at cost:				
	32.1 .....0.000 shares common (value included in Line 26 $.....0)	XXX	XXX	0	0
	32.2 .....0.000 shares preferred (value included in Line 27 $.....0)	XXX	XXX	0	0
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	53,587,025	44,666,567
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	210,676,702	159,134,565

DETAILS OF WRITE-INS

2301.		0	0	0	0
2302.		0	0	0	0
2303.		0	0	0	0
2398.	Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399.	Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	0	0	0	0
2501.	Estimated Health Insurer Fee Accrual	XXX	XXX	585,000	6,600,000
2502.				0	0
2503.				0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599.	Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	XXX	XXX	585,000	6,600,000
3001.				0	0
3002.				0	0
3003.				0	0
3098.	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099.	Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member months	XXX	122,974	13,120	137,443
2. Net premium income (including $.....0 non-health premium income)	XXX	402,432,799	21,532,673	335,337,638
3. Change in unearned premium reserves and reserve for rate credits	XXX	(1,661,744)	0	0
4. Fee-for-service (net of $.....0 medical expenses)	XXX	0	0	0
5. Risk revenue	XXX	0	0	0
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	400,771,055	21,532,673	335,337,638
Hospital and Medical:				
9. Hospital/medical benefits	56,168,276	270,498,070	21,101,644	278,182,322
10. Other professional services	0	1,208,414	377,776	1,220,566
11. Outside referrals	33,533,069	33,533,069	77	23,418,786
12. Emergency room and out-of-area	1,119,136	3,693,517	0	1,269,887
13. Prescription drugs	3,774,237	12,377,383	799,459	4,202,894
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts	0	0	0	0
16. Subtotal (Lines 9 to 15)	94,594,718	321,310,453	22,278,956	308,294,455
Less:				
17. Net reinsurance recoveries	0	0	0	0
18. Total hospital and medical (Lines 16 minus 17)	94,594,718	321,310,453	22,278,956	308,294,455
19. Non-health claims (net)	0	0	0	0
20. Claims adjustment expenses, including $.....5,850,389 cost containment expenses	0	12,707,307	0	12,321,699
21. General administrative expenses	0	44,536,762	4,389,460	43,204,667
22. Increase in reserves for life and accident and health contracts (including $.....0 increase in reserves for life only)	0	0	0	0
23. Total underwriting deductions (Lines 18 through 22)	94,594,718	378,554,522	26,668,416	363,820,821
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	22,216,533	(5,135,743)	(28,483,183)
25. Net investment income earned	0	1,275,390	3,434	94,181
26. Net realized capital gains (losses) less capital gains tax of $.....43,211	0	(66,164)	(1)	8,039
27. Net investment gains or (losses) (Lines 25 plus 26)	0	1,209,226	3,433	102,220
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $.....0) (amount charged off $.....0)]	0	0	0	0
29. Aggregate write-ins for other income or expenses	0	0	0	(25,000)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	23,425,759	(5,132,310)	(28,405,963)
31. Federal and foreign income taxes incurred	XXX	6,806,453	(1,865,290)	(8,817,774)
32. Net income (loss) (Lines 30 minus 31)	XXX	16,619,306	(3,267,020)	(19,588,189)

DETAILS OF WRITE-INS

0601.	XXX	0	0	0
0602.	XXX	0	0	0
0603.	XXX	0	0	0
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	XXX	0	0	0
0702.	XXX	0	0	0
0703.	XXX	0	0	0
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401.	0	0	0	0
1402.	0	0	0	0
1403.	0	0	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	0	0	0
2901. Regulatory Fines	0	0	0	(25,000)
2902.	0	0	0	0
2903.	0	0	0	0
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	0	0	(25,000)

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year	44,666,567	3,010,090	3,010,090
34. Net income or (loss) from Line 32	16,619,306	(3,267,020)	(19,588,189)
35. Change in valuation basis of aggregate policy and claim reserves	0	0	0
36. Change in net unrealized capital gains (losses) less capital gains tax of $.....0	0	0	0
37. Change in net unrealized foreign exchange capital gain or (loss)	0	0	0
38. Change in net deferred income tax	25,748	0	(1,039)
39. Change in nonadmitted assets	(7,724,596)	0	(3,754,295)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles	0	0	0
44. Capital changes:			
44.1 Paid in	0	0	0
44.2 Transferred from surplus (Stock Dividend)	0	0	0
44.3 Transferred to surplus	0	0	0
45. Surplus adjustments:			
45.1 Paid in	0	15,000,000	65,000,000
45.2 Transferred to capital (Stock Dividend)	0	0	0
45.3 Transferred from capital	0	0	0
46. Dividends to stockholders	0	0	0
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital and surplus (Lines 34 to 47)	8,920,458	11,732,980	41,656,477
49. Capital and surplus end of reporting period (Line 33 plus 48)	53,587,025	14,743,070	44,666,567

DETAILS OF WRITE-INS

4701.	0	0	0
4702.	0	0	0
4703.	0	0	0
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	0	0	0

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	401,246,999	21,166,283	335,337,638
2.	Net investment income	718,721	4,054	(95,733)
3.	Miscellaneous income	1,204,086	0	(2,071,045)
4.	Total (Lines 1 through 3)	403,169,806	21,170,337	333,170,860
5.	Benefit and loss related payments	310,851,464	545,892	210,490,243
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0	0
7.	Commissions, expenses paid and aggregate write-ins for deductions	56,320,806	1,874,860	47,288,889
8.	Dividends paid to policyholders	0	0	0
9.	Federal and foreign income taxes paid (recovered) net of $.....0 tax on capital gains (losses)	3,760,070	789	(5,502,404)
10.	Total (Lines 5 through 9)	370,932,340	2,421,541	252,276,728
11.	Net cash from operations (Line 4 minus Line 10)	32,237,466	18,748,796	80,894,132
	CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds	39,777,723	0	2,718,841
	12.2 Stocks	0	0	0
	12.3 Mortgage loans	0	0	0
	12.4 Real estate	0	0	0
	12.5 Other invested assets	0	0	0
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(83)	(1)	49
	12.7 Miscellaneous proceeds	3,028,775	0	0
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	42,806,415	(1)	2,718,890
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	162,644,720	0	42,180,996
	13.2 Stocks	0	0	0
	13.3 Mortgage loans	0	0	0
	13.4 Real estate	0	0	0
	13.5 Other invested assets	0	0	0
	13.6 Miscellaneous applications	0	0	0
	13.7 Total investments acquired (Lines 13.1 to 13.6)	162,644,720	0	42,180,996
14.	Net increase or (decrease) in contract loans and premium notes	0	0	0
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(119,838,305)	(1)	(39,462,106)
	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	15,000,000	65,000,000
	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)	(4,103,016)	354,700	6,717,020
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	(4,103,016)	15,354,700	71,717,020
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(91,703,855)	34,103,495	113,149,046
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	115,651,010	2,501,964	2,501,964
	19.2 End of period (Line 18 plus Line 19.1)	23,947,155	36,605,459	115,651,010

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

20.0001		0	0	0

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
		2	3	Medicare	Vision	Dental	Federal Employees	Title XVIII	Title XIX	
	Total	Individual	Group	Supplement	Only	Only	Health Benefit Plan	Medicare	Medicaid	Other
Total Members at End of:										
1. Prior Year	20,515	0	0	0	0	0	0	2,519	17,996	0
2. First Quarter	20,584	0	0	0	0	0	0	14,062	6,522	0
3. Second Quarter	20,247	0	0	0	0	0	0	13,660	6,587	0
4. Third Quarter	0	0	0	0	0	0	0	0	0	0
5. Current Year	0	0	0	0	0	0	0	0	0	0
6. Current Year Member Months	122,974	0	0	0	0	0	0	84,191	38,783	0
Total Member Ambulatory Encounters for Period:										
7. Physician	259,358	0	0	0	0	0	0	228,344	31,014	0
8. Non-Physician	984,866	0	0	0	0	0	0	740,875	243,991	0
9. Total	1,244,224	0	0	0	0	0	0	969,219	275,005	0
10. Hospital Patient Days Incurred	32,566	0	0	0	0	0	0	29,310	3,256	0
11. Number of Inpatient Admissions	5,832	0	0	0	0	0	0	5,160	672	0
12. Health Premiums Written (a)	402,494,184	0	0	0	0	0	0	118,926,244	283,567,940	0
13. Life Premiums Direct	0	0	0	0	0	0	0	0	0	0
14. Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0
15. Health Premiums Earned	400,832,440	0	0	0	0	0	0	122,006,488	278,825,952	0
16. Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0
17. Amount Paid for Provision of Health Care Services	310,851,464	0	0	0	0	0	0	96,220,167	214,631,297	0
18. Amount Incurred for Provision of Health Care Services	321,310,453	0	0	0	0	0	0	119,898,599	201,411,854	0

(a) For health premiums written: Amount of Medicare Title XVIII exempt from state taxes or fees $.....118,296,244.

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

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
Aging based on claims in process of adjudication as of 6/30/2015	0	0	0	0	0	0
0199999. Individually Listed Claims Unpaid	0	0	0	0	0	0
0299999. Aggregate Accounts Not Individually Listed-Uncovered	5,890,555	562,986	11,286	(4,881)	(17,817)	6,442,129
0399999. Aggregate Accounts Not Individually Listed-Covered	13,460,459	1,383,026	8,648	(5,986)	(11,017)	14,835,130
0499999. Subtotals	19,351,014	1,946,012	19,934	(10,867)	(28,834)	21,277,259
0599999. Unreported Claims and Other Claim Reserves						97,597,874
0799999. Total Claims Unpaid						118,875,133

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)	0	0	0	0	0	0
2. Medicare Supplement	0	0	0	0	0	0
3. Dental only	0	0	0	0	0	0
4. Vision only	0	0	0	0	0	0
5. Federal Employees Health Benefits Plan	0	0	0	0	0	0
6. Title XVIII - Medicare	11,961,184	84,258,983	1,911,568	37,107,847	13,872,752	5,556,597
7. Title XIX - Medicaid	56,995,503	157,635,794	7,226,616	72,629,102	64,222,119	93,930,865
8. Other health	0	0	0	0	0	0
9. Health subtotal (Lines 1 to 8)	68,956,687	241,894,777	9,138,184	109,736,949	78,094,871	99,487,462
10. Healthcare receivables (a)	0	10,611,932	0	0	0	1,683,250
11. Other non-health	0	0	0	0	0	0
12. Medical incentive pools and bonus amounts	0	0	0	0	0	0
13. Totals (Lines 9-10+11+12)	68,956,687	231,282,845	9,138,184	109,736,949	78,094,871	97,804,212

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of significant accounting policies

   A. Accounting practices

   The accompanying statutory financial statements of Aetna Better Health Inc. (an Ohio corporation) (the "Company"), a wholly-owned subsidiary of Aetna Health Holdings, LLC, whose ultimate parent is Aetna Inc. ("Aetna"), have been prepared in conformity with accounting practices prescribed or permitted by the Ohio Department of Insurance ("Ohio Department") ("Ohio Accounting Practices"). The Ohio Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio 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").

   The Ohio Accounting Practices vary from U.S. generally accepted accounting principles ("GAAP"). The primary differences include the following:

   A reconciliation of the Company's net income (loss) and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio for the periods ended June 30, 2015 and December 31, 2014 is as follows:

	State of Domicile	June 30, 2015	December 31, 2014
Net income (loss) (derived using Ohio Accounting Practices)	OH	$16,619,306	$(19,588,189)
State of Ohio Prescribed Practices:			
None	OH	-	-
State of Ohio Permitted Practices:			
None	OH	-	-
Net income (loss) (derived using NAIC SAP)		$16,619,306	$(19,558,189)
Capital and surplus (derived using Ohio Accounting Practices)	OH	$53,587,025	$44,666,567
State of Ohio Prescribed Practices:			
None	OH	-	-
State of Ohio Permitted Practices:			
None	OH	-	-
Capital and surplus (derived using NAIC SAP)		$53,587,025	$44,666,567

   B. Use of estimates in the preparation of the financial statements

   The preparation of these financial statements in conformity with Ohio 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.

2. Accounting changes and corrections of errors

   The Company did not have any accounting changes or corrections of errors in the period ended June 30, 2015.

3. Business combinations and goodwill

   No significant change.

4. Discontinued operations

   No significant change.

5. Investments

   A. – C. No significant change.

   D. Loan-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 had no other-than-temporary impairment ("OTTI") losses during the second quarter of 2015 on loan-backed and structured securities in which the Company had the (1) intent to sell, (2) did not have the intent and ability to retain for a period of time sufficient to recover the amortized cost basis or (3) present value of cash flows expected to be collected is less than the amortized cost basis of the securities in accordance with SSAP No. 43R, *Loan-Backed and Structured Securities* ("SSAP No. 43R").

(3) The Company had no recognized OTTI on loan-backed and structured securities currently held, in which the present value of cash flows expected to be collected is less than the amortized cost basis, at the reporting date June 30, 2015.

(4) The Company's unrealized loss position on loan-backed and structured securities held by the Company at June 30, 2015 is as follows:

a. The aggregate amount of unrealized losses:

1. Less than 12 months	$(4,509)
2. 12 months or longer	-

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 months	$3,080,559
2. 12 months or longer	-

(5) The Company has reviewed the loaned-backed and structured securities in accordance with SSAP No. 43R in the table above and has concluded that these are performing assets generating investment income to support the needs of the business. Furthermore, the Company has no intention to sell the securities at June 30, 2015 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. Repurchase Agreements and/or Securities Lending Transactions

(1) and (2): No significant change.

(3) Neither the Company nor its agent has accepted collateral that is permitted by contract or custom to sell or repledge as of June 30, 2015.

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

F., G. and H. No significant change.

I. The Company did not have any working capital finance investments at June 30, 2015.

J. The Company did not have any offsetting and netting of financial assets or liabilities at June 30, 2015.

K. No significant change.

6. Joint ventures, partnerships, and limited liability companies

No significant change.

7. Investment income

No significant change.

8. Derivative instruments

No significant change.

9. Income taxes

No significant change.

10. Information concerning parent, subsidiaries, affiliates, and related parties

No significant change.

11. Debt

A. The Company did not have any items related to debt, including capital notes at June 30, 2015.

B. The Company did not have any Federal Home Loan Bank agreements at June 30, 2015.

12. Retirement plans, deferred compensation, postemployment benefits and compensated absences and other postretirement benefit plans

    The Company did not have a retirement plan, deferred compensation plan, or other postretirement benefit plan at June 30, 2015.

13. Capital and surplus, shareholders' dividend restrictions and quasi-reorganizations

    No significant change.

14. Contingencies

    No significant change.

15. Leases

    No significant change.

16. Information about financial instruments with off-balance sheet risk and financial instruments with concentrations of credit risk

    No significant change.

17. Sale, transfer and servicing of financial assets and extinguishments of liabilities

    A. Transfers of receivables reported as sales

       No significant change.

    B. Transfer and servicing of financial assets

       (1) No significant change.

       (2) and (3): The Company did not have any servicing assets or liabilities at June 30, 2015.

       (4) The Company did not have any securitized financial assets at June 30, 2015.

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

    C. Wash sales

       (1) The Company did not have any wash sales for the period ended June 30, 2015.

18. Gain or loss to the reporting entity from uninsured plans and the uninsured portion of partially insured plans

    No significant change.

19. Direct premium written/produced by managing general agents/third party administrators

    No significant change.

20. Fair value measurements

    A. and B.

       The Company had no material assets or liabilities measured and reported at fair value at June 30, 2015.

    C. Certain of the Company's financial instruments are measured at fair value in our balance sheets. 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 established by U.S. generally accepted accounting principles. 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 our 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, we use these quoted market prices to determine the fair value of financial assets and liabilities and classify 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, we estimate 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, we determine fair value using broker quotes or an internal analysis of each investment's financial performance and cash flow projections. Thus, financial assets and liabilities may be classified in Level 3 even though there may be some significant inputs that may be observable.

The carrying values and estimated fair values of the Company's financial instruments at June 30, 2015 were as follows:

	Aggregate fair value	Admitted assets	Level 1	Level 2	Level 3	Not practicable (carrying value)
Bonds, short-term investments and cash equivalents	$191,932,033	$193,250,021	$57,321,548	$134,610,485	-	-
Total	$191,932,033	$193,250,021	$57,321,548	$134,610,485	-	-

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 the period ended June 30, 2015.

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.

21. Other items

No significant change.

22. Events subsequent

A. Type I - Recognized subsequent events

Subsequent events have been considered through August 12, 2015 for the statutory statement issued on August 15, 2015.

The Company had no known reportable recognized subsequent events.

B. Type II - Nonrecognized subsequent events

Subsequent events have been considered through August 12, 2015 for the statutory statement issued on August 15, 2015.

The Company had no known reportable nonrecognized subsequent events.

23. Reinsurance

No significant change.

24. Retrospectively rated contracts and contracts subject to redetermination

A. through D.: No significant change.

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

(1) Did the reporting entity write accident and health insurance premium which is subject to the ACA risk sharing provisions (YES/NO)? Yes

Line items below where the amount is zero are due to no activity as of the reporting date.

(2) Impact of Risk Sharing Provisions of the ACA on Admitted Assets, Liabilities and Revenue and Expenses for the Current Year:

	Amount
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to ACA Risk Adjustment	-
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	-
3. Premium adjustments payable due to ACA Risk Adjustment	-

	Amount
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)	-
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA Reinsurance	-
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	-
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	-
Liabilities	
4. Liabilities for contributions payable due to ACA Reinsurance not reported as ceded premium	-
5. Ceded reinsurance premiums payable due to ACA Reinsurance	-
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	-
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA Reinsurance	-
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	-
9. ACA Reinsurance contributions - not reported as ceded premium	-
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA Risk Corridors	-
Liabilities	
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	-
Operations (Revenue & Expense)	
3. Effect of ACA Risk Corridors on net premium income (paid/received)	-
4. Effect of ACA Risk Corridors on change in reserves for rate credits	-

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

	Accrued during the prior year on business written before December 31 of the prior year		Received or paid as of the current year on business written before December 31 of the prior year	
	1	2	3	4
	Receivable	(Payable)	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program				
1. Premium adjustments receivable	-	-	-	-
2. Premium adjustments (payable)	-	-	-	-
3 Subtotal ACA Permanent Risk Adjustment Program	-	-	-	-
b. Transitional ACA Reinsurance Program				
1. Amounts recoverable for claims paid	-	-	-	-
2. Amounts recoverable for claims unpaid (contra liability)	-	-	-	-
3. Amounts receivable relating to uninsured plans	-	-	-	-
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium	-	-	-	-
5. Ceded reinsurance premiums payable	-	-	-	-
6. Liability for amounts held under uninsured plans	-	-	-	-
7. Subtotal ACA Transitional Reinsurance Program	-	-	-	-
c. Temporary ACA Risk Corridors Program				
1. Accrued retrospective premium	-	-	-	-
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-
3. Subtotal ACA Risk Corridors Program	-	-	-	-
d. Total for ACA Risk Sharing Provisions	-	-	-	-

	Differences		Adjustments		
	Prior year accrued less payments (Col 1 - 3)	Prior year accrued less payments (Col 2 - 4)	To prior year balances	To prior year balances	
	5	6	7	8	
	Receivable	(Payable)	Receivable	(Payable)	Ref
a. Permanent ACA Risk Adjustment Program					
1. Premium adjustments receivable	-	-	-	-	N/A
2. Premium adjustments (payable)	-	-	-	-	N/A
3 Subtotal ACA Permanent Risk Adjustment Program	-	-	-	-	N/A
b. Transitional ACA Reinsurance Program					
1. Amounts recoverable for claims paid	-	-	-	-	N/A
2. Amounts recoverable for claims unpaid (contra liability)	-	-	-	-	N/A
3. Amounts receivable relating to uninsured plans	-	-	-	-	N/A
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium	-	-	-	-	N/A
5. Ceded reinsurance premiums payable	-	-	-	-	N/A
6. Liability for amounts held under uninsured plans	-	-	-	-	N/A
7. Subtotal ACA Transitional Reinsurance Program	-	-	-	-	N/A
c. Temporary ACA Risk Corridors Program					
1. Accrued retrospective premium	-	-	-	-	N/A
2. Reserve for rate credits or policy experience rating refunds	-	-	-	-	N/A
3. Subtotal ACA Risk Corridors Program	-	-	-	-	N/A
d. Total for ACA Risk Sharing Provisions	-	-	-	-	N/A

	Unsettled balances as of the reporting date	
	Cumulative balance from prior years (col 1 - 3 + 7)	Cumulative balance from prior years (col 2 - 4 + 8)
	9	10
	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program		
1. Premium adjustments receivable	-	-
2. Premium adjustments (payable)	-	-
3 Subtotal ACA Permanent Risk Adjustment Program	-	-
b. Transitional ACA Reinsurance Program		
1. Amounts recoverable for claims paid	-	-
2. Amounts recoverable for claims unpaid (contra liability)	-	-
3. Amounts receivable relating to uninsured plans	-	-
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium	-	-
5. Ceded reinsurance premiums payable	-	-
6. Liability for amounts held under uninsured plans	-	-
7. Subtotal ACA Transitional Reinsurance Program	-	-
c. Temporary ACA Risk Corridors Program		
1. Accrued retrospective premium	-	-
2. Reserve for rate credits or policy experience rating refunds	-	-
3. Subtotal ACA Risk Corridors Program	-	-
d. Total for ACA Risk Sharing Provisions	-	-

25. Change in incurred claims and claims adjustment expense

Reserves as of December 31, 2014 were $101,203,720. As of June 30, 2015, $71,703,200 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $9,295,195 as a result of re-estimation of unpaid claims and claim adjustment expenses on Medicaid insurance. Therefore, there has been a $18,522,075 favorable prior year development from December 31, 2014 to June 30, 2015. 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.

26. Intercompany pooling arrangements

No significant change.

27. Structured settlements

No significant change.

28. Health care receivables

No significant change.

29. Participating policies

No significant change.

30. Premium deficiency reserves

No significant change.

31. Anticipated salvage and subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

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

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

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

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No [ ]
If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [X] No [ ]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

On April 21, 2015, Coventry Health Care of Louisiana, Inc. changed its name to Aetna Health Inc. (LA). On April 24, 2015, Aetna Better Health of Iowa Inc. was formed. On May 1, 2015, Coventry Health Care of Texas, Inc. merged into Aetna Health Inc. (TX). On May 27, 2015, bSwift LLC changed its name to bswift LLC. On June 3, 2015, Aetna HealthAssurance Pennsylvania, Inc. was formed. On June 26, 2015, Echo Merger Sub, Inc. was formed. On June 26, 2015, Echo Merger Sub, LLC was formed. On June 29, 2015, HealthCare USA of Missouri L.L.C. changed its name to Aetna Better Health of Missouri LLC. Aetna Life Insurance Company's ownership interest in Aetna Multi-Strategy 1099 Fund changed to 75%.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]

4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
	0	

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

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. N/A

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. N/A

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). N/A

6.4 By what department or departments?

N/A

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with the Department? Yes [ ] No [ ] N/A [X]

6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [ ] No [ ] N/A [X]

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [ ] No [X]

7.2 If yes, give full information:

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

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

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

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

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

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

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

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

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

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

(e) Accountability for adherence to the code.

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

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

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

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

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

FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [X] No [ ]

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: $ 0

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [X]

11.2 If yes, give full and complete information relating thereto:

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: $ 0

13. Amount of real estate and mortgages held in short-term investments: $ 0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [ ] No [X]

14.2 If yes, please complete the following:

		1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21	Bonds	$ 0	$ 0
14.22	Preferred Stock	0	0
14.23	Common Stock	0	0
14.24	Short-Term Investments	0	0
14.25	Mortgage Loans on Real Estate	0	0
14.26	All Other	0	0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$ 0	$ 0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	$ 0	$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [X]

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: $ 0

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: $ 0

16.3 Total payable for securities lending reported on the liability page: $ 0

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

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

1 Name of Custodian(s)	2 Custodian Address
State Street Bank and Trust Company	State Street Financial Center, One Lincoln Street; Boston, MA 02111-2900

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
All agreements comply.		

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

17.4 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
N/A			

17.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address
N/A		

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Securities Valuation Office* been followed? Yes [X] No [ ]

18.2 If no, list exceptions:

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

1.	Operating Percentages:		
	1.1 A&H loss percent		81.6 %
	1.2 A&H cost containment percent		1.5 %
	1.3 A&H expense percent excluding cost containment expenses		12.8 %
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 amount of funds administered as of the reporting date.		0

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsuer Rating

NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

State, Etc.	1 Active Status	Direct Business Only 2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums and Other Considerations	7 Property/ Casualty Premiums	8 Total Columns 2 through 7	9 Deposit-Type Contracts
1. Alabama AL	N	0	0	0	0	0	0	0	0
2. Alaska AK	N	0	0	0	0	0	0	0	0
3. Arizona AZ	N	0	0	0	0	0	0	0	0
4. Arkansas AR	N	0	0	0	0	0	0	0	0
5. California CA	N	0	0	0	0	0	0	0	0
6. Colorado CO	N	0	0	0	0	0	0	0	0
7. Connecticut CT	N	0	0	0	0	0	0	0	0
8. Delaware DE	N	0	0	0	0	0	0	0	0
9. District of Columbia DC	N	0	0	0	0	0	0	0	0
10. Florida FL	N	0	0	0	0	0	0	0	0
11. Georgia GA	N	0	0	0	0	0	0	0	0
12. Hawaii HI	N	0	0	0	0	0	0	0	0
13. Idaho ID	N	0	0	0	0	0	0	0	0
14. Illinois IL	N	0	0	0	0	0	0	0	0
15. Indiana IN	N	0	0	0	0	0	0	0	0
16. Iowa IA	N	0	0	0	0	0	0	0	0
17. Kansas KS	N	0	0	0	0	0	0	0	0
18. Kentucky KY	N	0	0	0	0	0	0	0	0
19. Louisiana LA	N	0	0	0	0	0	0	0	0
20. Maine ME	N	0	0	0	0	0	0	0	0
21. Maryland MD	N	0	0	0	0	0	0	0	0
22. Massachusetts MA	N	0	0	0	0	0	0	0	0
23. Michigan MI	N	0	0	0	0	0	0	0	0
24. Minnesota MN	N	0	0	0	0	0	0	0	0
25. Mississippi MS	N	0	0	0	0	0	0	0	0
26. Missouri MO	N	0	0	0	0	0	0	0	0
27. Montana MT	N	0	0	0	0	0	0	0	0
28. Nebraska NE	N	0	0	0	0	0	0	0	0
29. Nevada NV	N	0	0	0	0	0	0	0	0
30. New Hampshire NH	N	0	0	0	0	0	0	0	0
31. New Jersey NJ	N	0	0	0	0	0	0	0	0
32. New Mexico NM	N	0	0	0	0	0	0	0	0
33. New York NY	N	0	0	0	0	0	0	0	0
34. North Carolina NC	N	0	0	0	0	0	0	0	0
35. North Dakota ND	N	0	0	0	0	0	0	0	0
36. Ohio OH	L	0	118,926,244	283,567,940	0	0	0	402,494,184	0
37. Oklahoma OK	N	0	0	0	0	0	0	0	0
38. Oregon OR	N	0	0	0	0	0	0	0	0
39. Pennsylvania PA	N	0	0	0	0	0	0	0	0
40. Rhode Island RI	N	0	0	0	0	0	0	0	0
41. South Carolina SC	N	0	0	0	0	0	0	0	0
42. South Dakota SD	N	0	0	0	0	0	0	0	0
43. Tennessee TN	N	0	0	0	0	0	0	0	0
44. Texas TX	N	0	0	0	0	0	0	0	0
45. Utah UT	N	0	0	0	0	0	0	0	0
46. Vermont VT	N	0	0	0	0	0	0	0	0
47. Virginia VA	N	0	0	0	0	0	0	0	0
48. Washington WA	N	0	0	0	0	0	0	0	0
49. West Virginia WV	N	0	0	0	0	0	0	0	0
50. Wisconsin WI	N	0	0	0	0	0	0	0	0
51. Wyoming WY	N	0	0	0	0	0	0	0	0
52. American Samoa AS	N	0	0	0	0	0	0	0	0
53. Guam GU	N	0	0	0	0	0	0	0	0
54. Puerto Rico PR	N	0	0	0	0	0	0	0	0
55. U.S. Virgin Islands VI	N	0	0	0	0	0	0	0	0
56. Northern Mariana Islands MP	N	0	0	0	0	0	0	0	0
57. Canada CAN	N	0	0	0	0	0	0	0	0
58. Aggregate Other alien OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX	0	118,926,244	283,567,940	0	0	0	402,494,184	0
60. Reporting entity contributions for Employee Benefit Plans	XXX	0	0	0	0	0	0	0	0
61. Total (Direct Business)	(a) 1	0	118,926,244	283,567,940	0	0	0	402,494,184	0
DETAILS OF WRITE-INS									
58001.		0	0	0	0	0	0	0	0
58002.		0	0	0	0	0	0	0	0
58003.		0	0	0	0	0	0	0	0
58998. Summary of remaining write-ins for line 58 from overflow page		0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above)		0	0	0	0	0	0	0	0

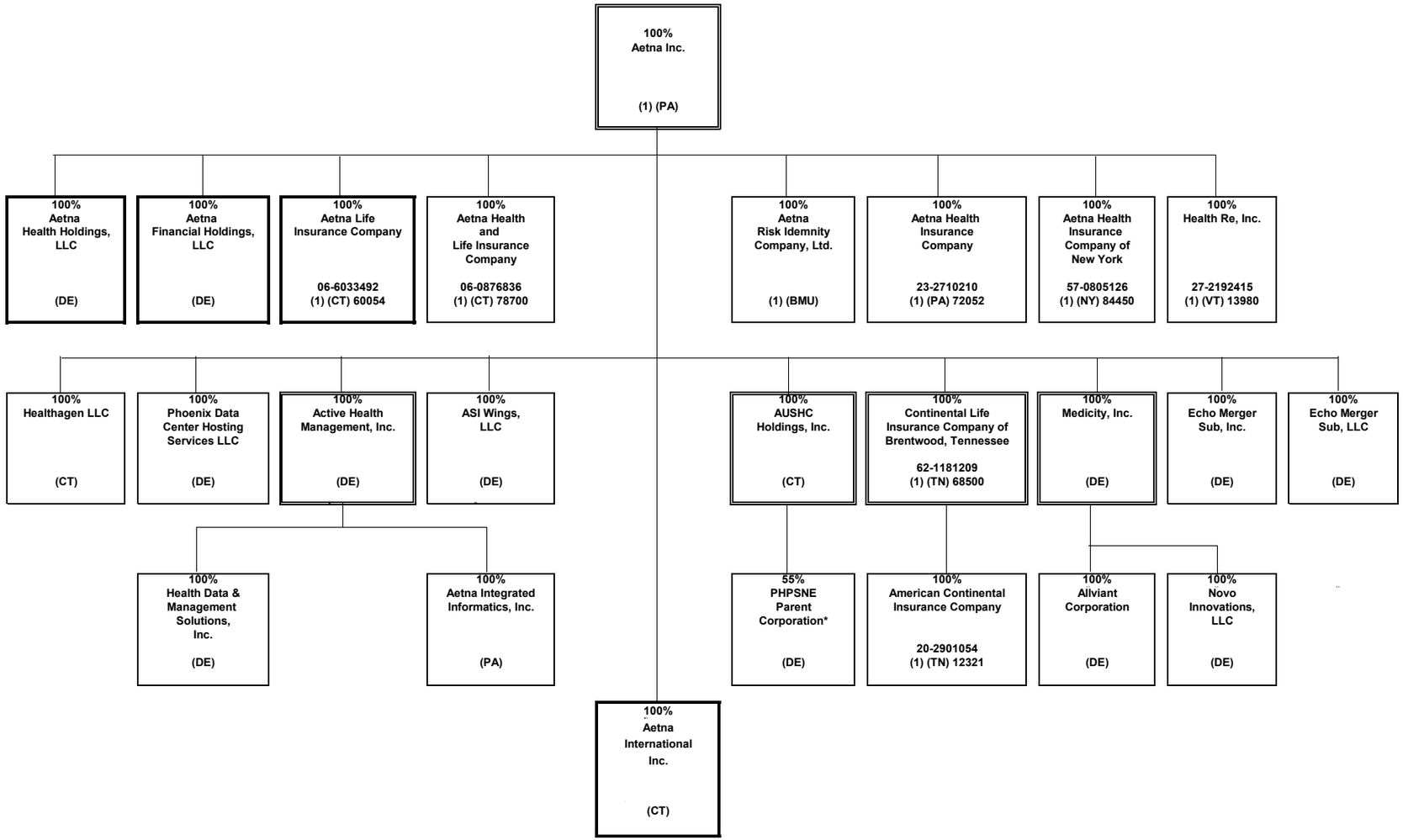
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;

(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

(a) Insert the number of L responses except for Canada and Other Alien.

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

PART 1 - ORGANIZATIONAL CHART

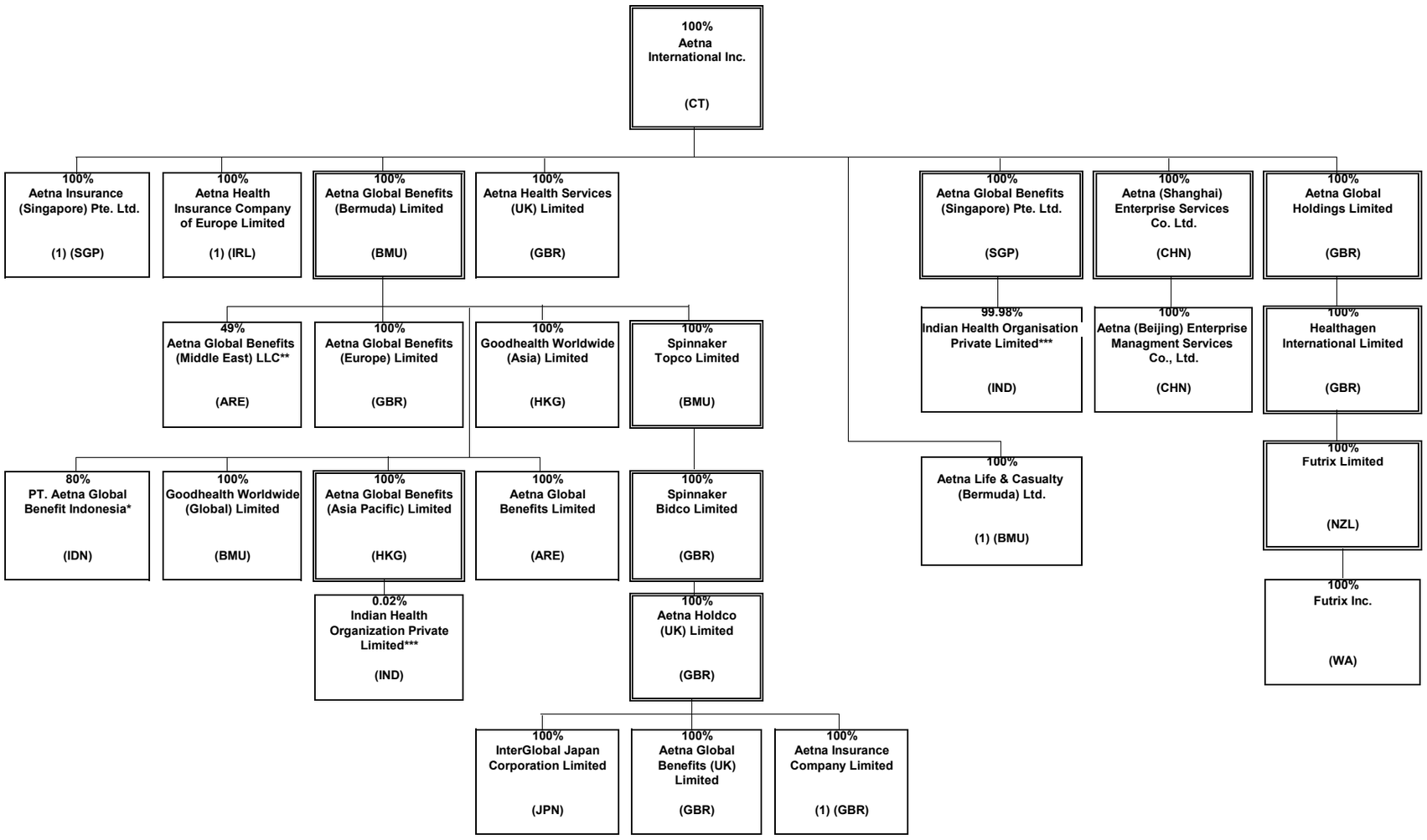


(1) Insurers/HMO's
Percentages are rounded to the nearest whole percent and based on ownership of voting rights.
Double borders indicate entity has subsidiaries shown on the same page.
Bold borders indicate entity has subsidiaries shown on a separate page.

*55% is owned by AUSHC Holdings, Inc. and 45% is owned by third parties.

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

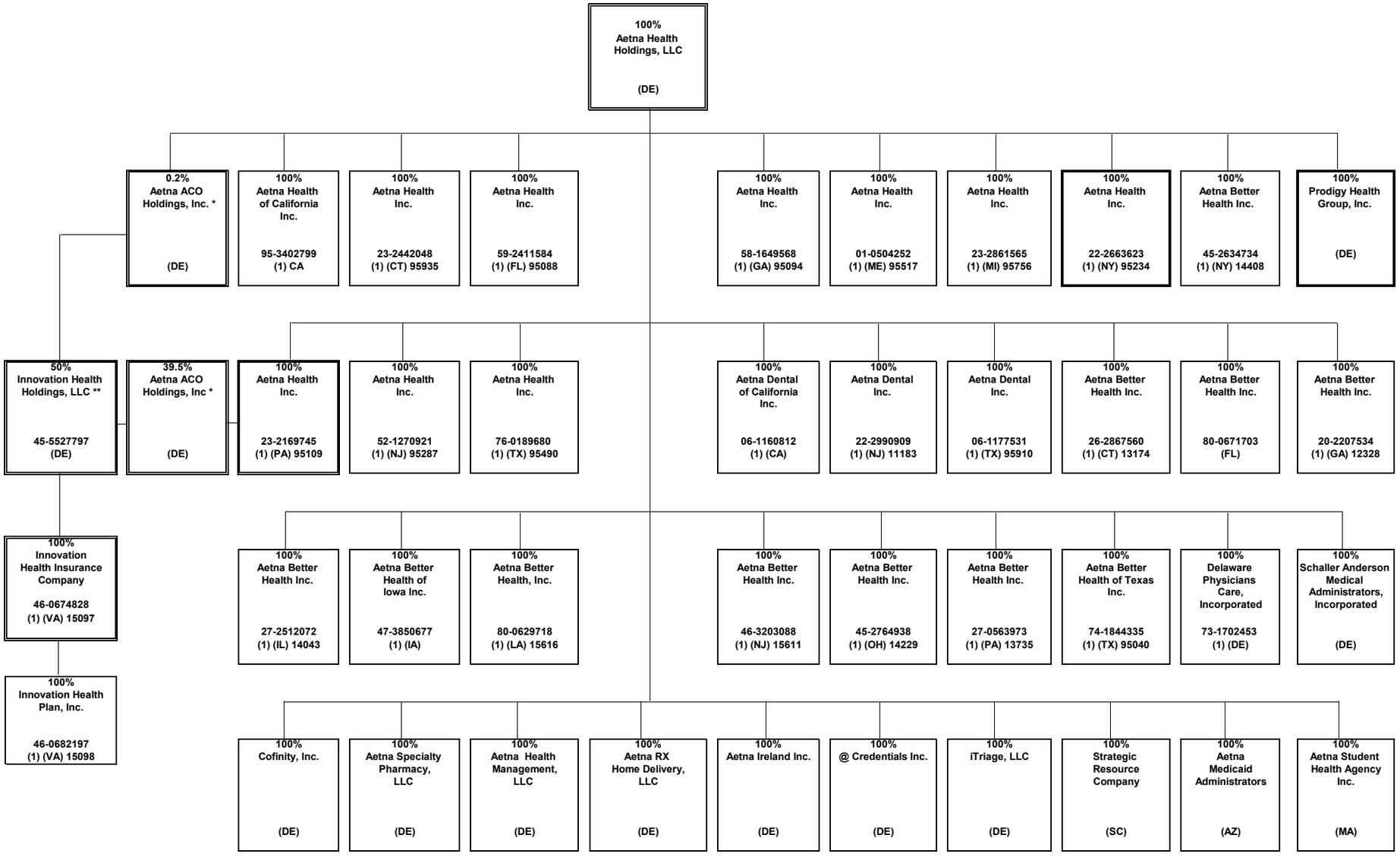
PART 1 - ORGANIZATIONAL CHART



*Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Suhatsyah Rivai, Aetna's Nominee.
** Aetna Global Benefits (Bermuda) Limited owns 49% and 51% is owned by Euro Gulf LLC, Aetna's Nominee.
*** Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.

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

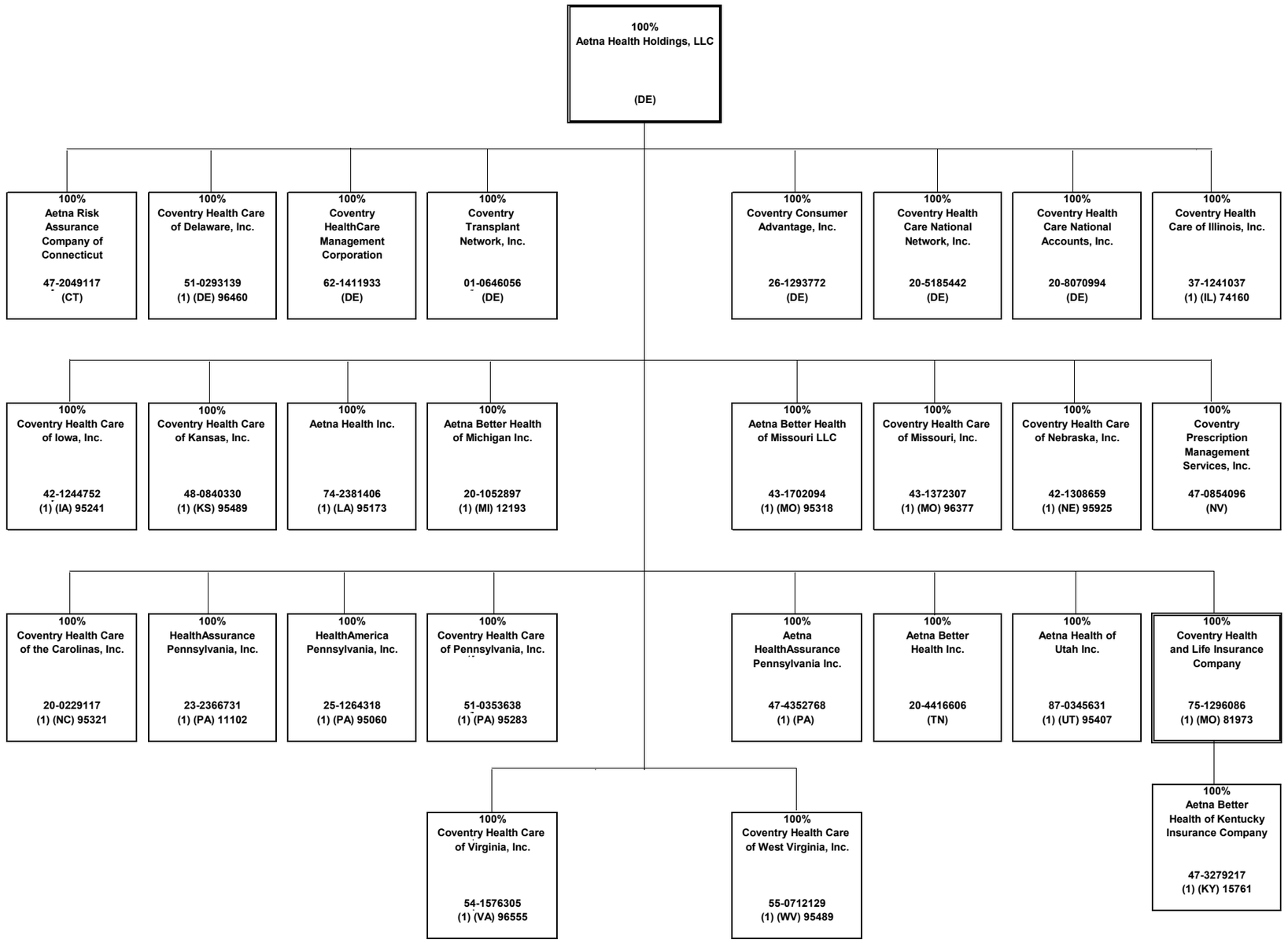
PART 1 - ORGANIZATIONAL CHART



* Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 198 shares and Aetna Health Holdings, LLC owns 1 share.
** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.

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

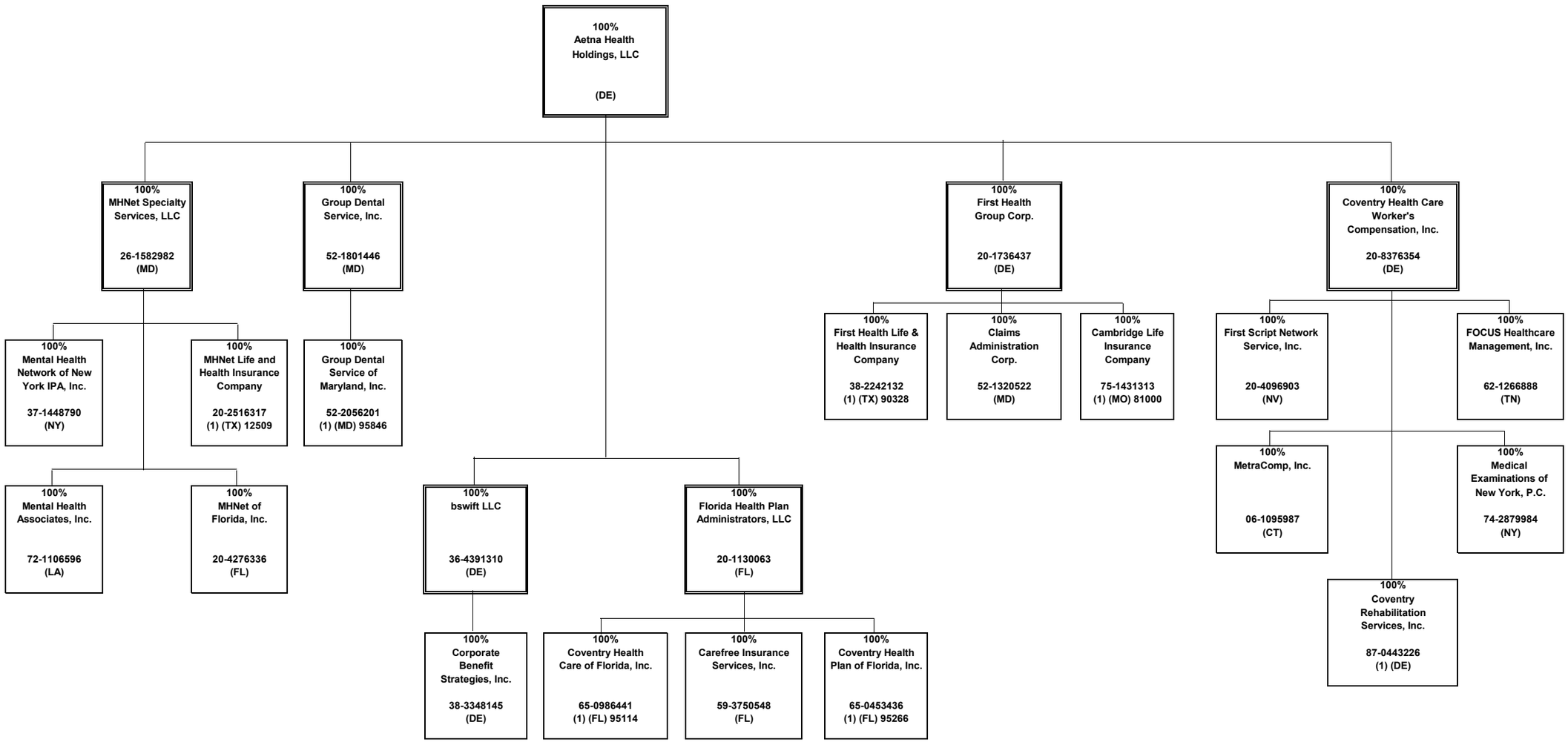
PART 1 - ORGANIZATIONAL CHART



Q15.3

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

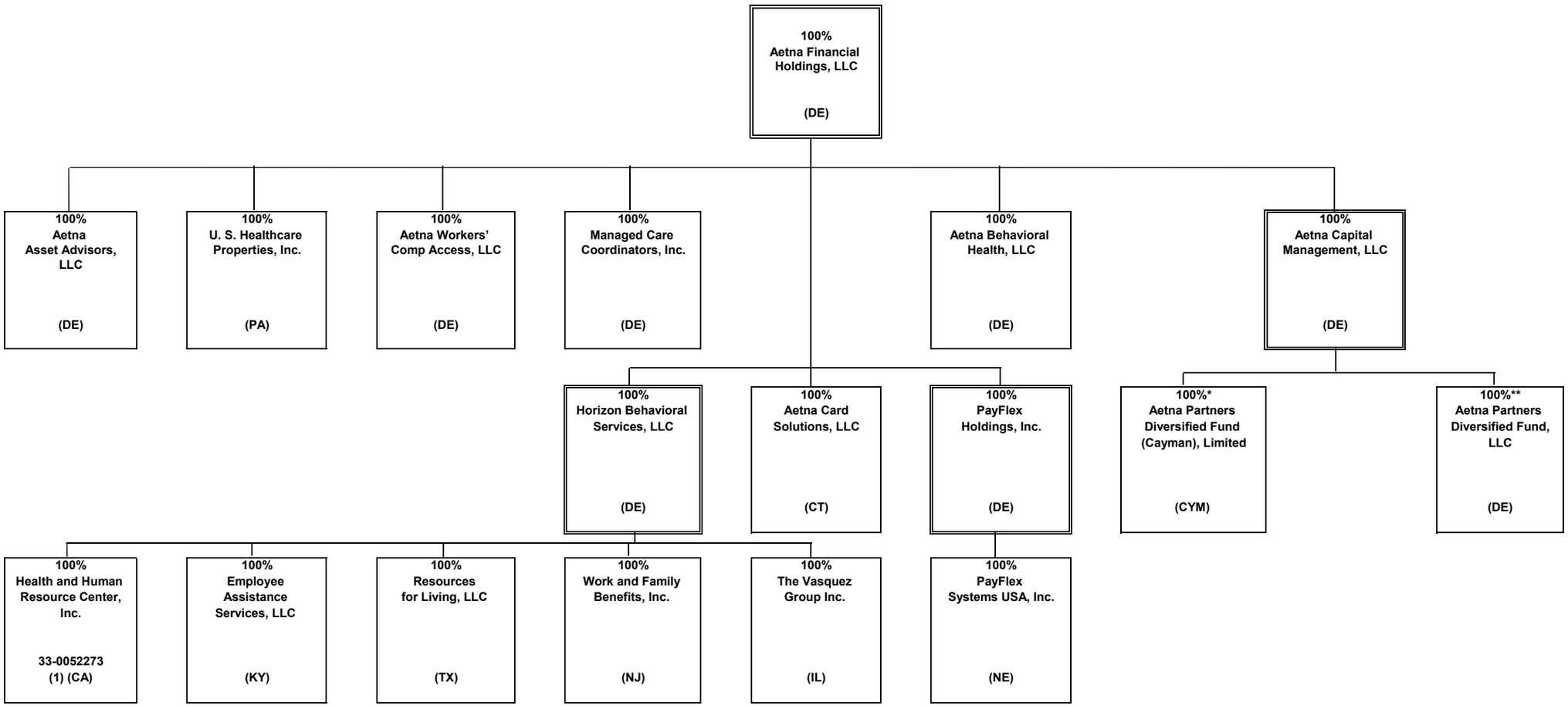
PART 1 - ORGANIZATIONAL CHART



Q15.4

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

PART 1 - ORGANIZATIONAL CHART

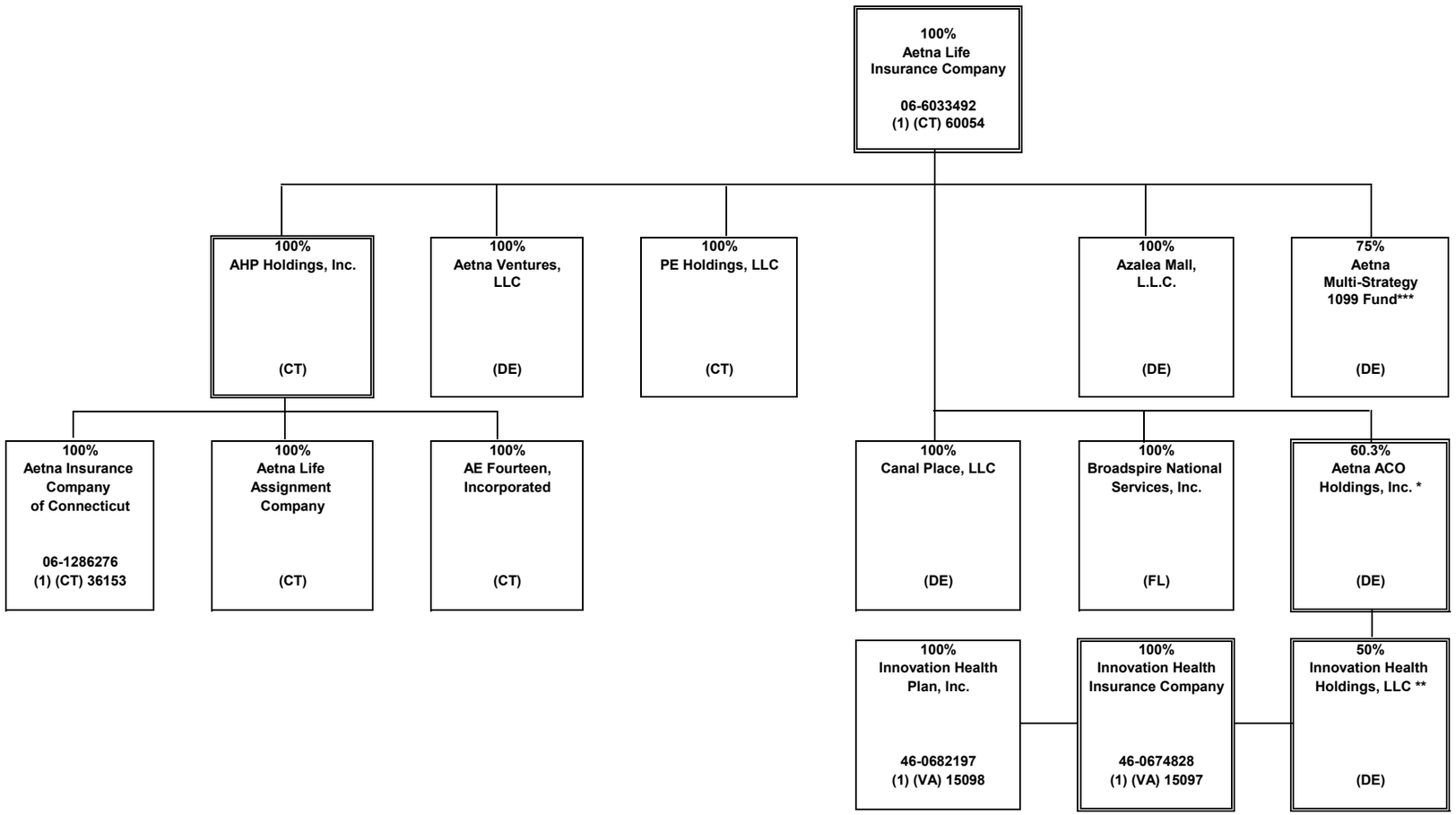


* Aetna Life Insurance Company owns the Class C participating shares of Aetna Partners Diversified Fund (Cayman), Limited.

** Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing member interests of Aetna Partners Diversified Fund, LLC.

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

PART 1 - ORGANIZATIONAL CHART

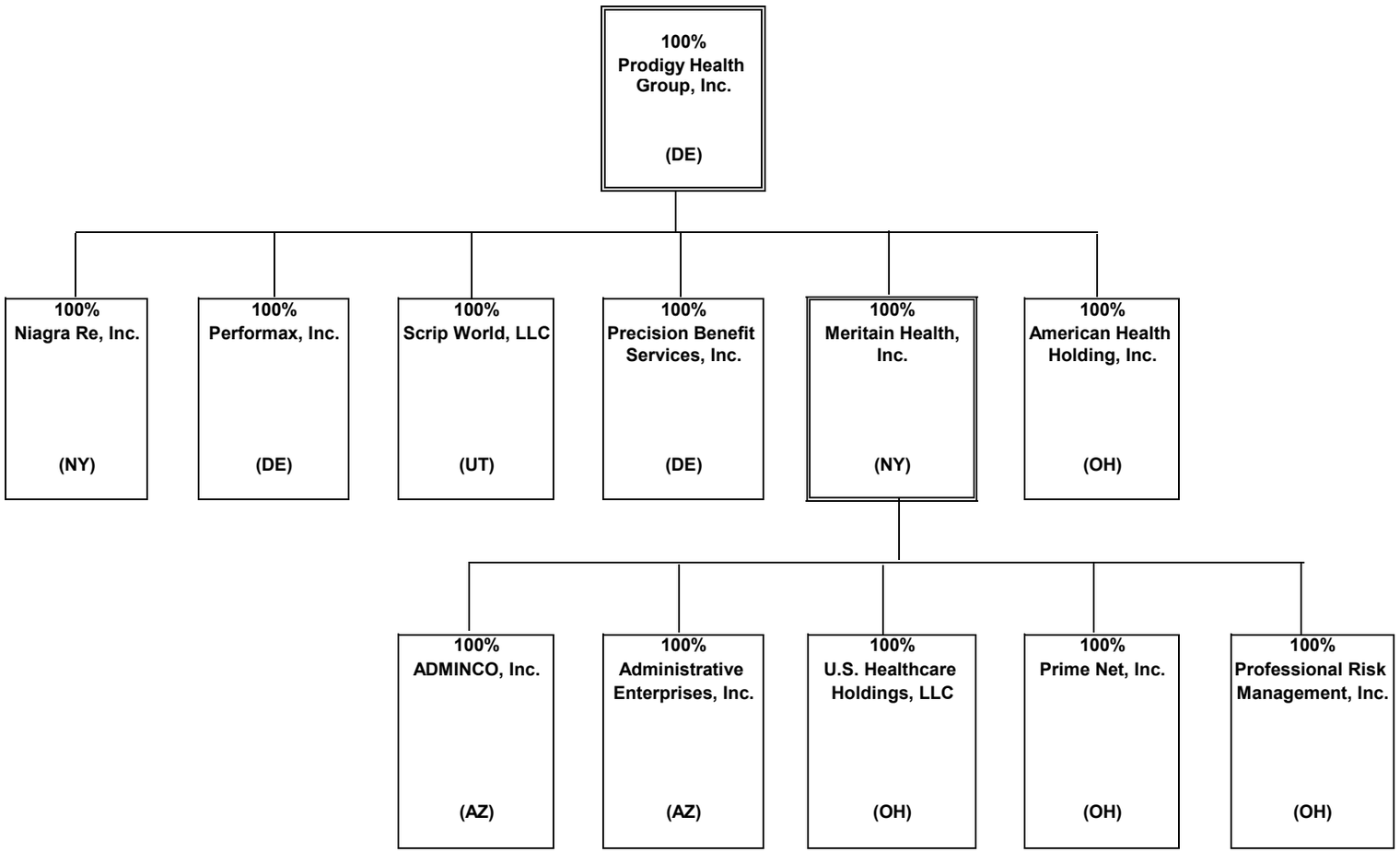


Q15.6

* Aetna Life Insurance Company owns 302 shares, Aetna Health Inc. (PA) owns 198 shares and Aetna Health Holdings, LLC owns 1 share.
** Innovation Health Holdings, LLC is 50% owned by Aetna ACO Holdings, Inc. and 50% owned by Inova Health System Foundation, an unaffiliated company.
***75% is invested and owned by Aetna Life Insurance Company and 25% is invested and owned by external accredited investors.

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

PART 1 - ORGANIZATIONAL CHART



SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
Members														
0001	AETNA INC	00000	23-2229683	3060706	1122304	N	Aetna Inc	PA	UIP			0.000		0
0001	AETNA INC	00000	30-0123754	0	0		Aetna Health Holdings, LLC	DE	UDP	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	0.200	Aetna Inc	4
0001	AETNA INC	00000	45-5527797	0	0		Innovation Health Holdings, LLC	DE	NIA	Aetna ACO Holdings, Inc	Ownership	50.000	Aetna Inc	7
0001	AETNA INC	15097	46-0674828	0	0		Innovation Health Insurance Company	VA	IA	Innovation Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	15098	46-0682197	0	0		Innovation Health Plan, Inc	VA	IA	Innovation Health Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	95-3402799	0	0		Aetna Health of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95935	23-2442048	0	0		Aetna Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95088	59-2411584	0	0		Aetna Health Inc	FL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95094	58-1649568	0	0		Aetna Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95517	01-0504252	0	0		Aetna Health Inc	ME	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95756	23-2861565	0	0		Aetna Health Inc	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95287	52-1270921	0	0		Aetna Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95234	22-2663623	0	0		Aetna Health Inc	NY	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	14408	45-2634734	0	0		Aetna Better Health Inc	NY	IA	Aetna Health Inc. (NY)	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95109	23-2169745	0	0		Aetna Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc	DE	NIA	Aetna Health Inc. (PA)	Ownership	39.500	Aetna Inc	4
0001	AETNA INC	95490	76-0189680	0	0		Aetna Health Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95040	74-1844335	0	0		Aetna Better Health of Texas Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	12328	20-2207534	0	0		Aetna Better Health Inc	GA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1160812	0	0		Aetna Dental of California Inc	CA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	11183	22-2990909	0	0		Aetna Dental Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95910	06-1177531	0	0		Aetna Dental Inc	TX	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	30-0123760	0	0		Aetna Rx Home Delivery, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	13-3670795	0	0		Aetna Health Management, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	22-3187443	0	0		Aetna Ireland Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	57-1209768	0	0		Aetna Specialty Pharmacy, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-1274723	0	0		Cofinity, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	23-2671370	0	0		@Credentials Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	57-0640344	0	0		Strategic Resource Company	SC	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	13735	27-0563973	0	0		Aetna Better Health Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	13174	26-2867560	0	0		Aetna Better Health Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	14043	27-2512072	0	0		Aetna Better Health Inc	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	47-3850677	0	0		Aetna Better Health of Iowa Inc	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	15616	80-0629718	0	0		Aetna Better Health, Inc	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	80-0671703	0	0		Aetna Better Health Inc	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0

Q16

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
0001	AETNA INC	14229	25-2764938	0	0		Aetna Better Health Inc	OH		Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	15611	46-3203088	0	0		Aetna Better Health Inc	NJ	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	04-2708160	0	0		Aetna Student Health Agency Inc	MA	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	73-1702453	0	0		Delaware Physicians Care, Incorporated	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	01-0826783	0	0		Schaller Anderson Medical Administrators, Incorporated	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	86-0842559	0	0		Aetna Medicaid Adminstrators LLC	AZ	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	45-2944270	0	0		iTriage, LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	16-1471176	0	0		Prodigy Health Group, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-0438576	0	0		Niagara Re, Inc	NY	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	52-2200070	0	0		Performax, Inc	DE	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	87-0632355	0	0		Scrip World, LLC	UT	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	27-1760756	0	0		Precision Benefit Services, Inc	DE	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	31-1368946	0	0		American Health Holding, Inc	OH	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	16-1264154	0	0		Meritain Health, Inc	NY	NIA	Prodigy Health Group, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	86-0537707	0	0		ADMINCO, Inc	AZ	NIA	Meritain Health, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	86-0527428	0	0		Administrative Enterprises, Inc	AZ	NIA	Meritain Health, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	16-1684061	0	0		U.S. Healthcare Holdings, LLC	OH	NIA	Meritain Health, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	34-1670299	0	0		Prime Net, Inc	OH	NIA	Meritain Health, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	34-1348032	0	0		Professional Risk Management, Inc	OH	NIA	Meritain Health, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	68500	62-1181209	0	0		Continental Life Insurance Company of Brentwood, Tennessee	TN	IA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	12321	20-2901054	0	0		American Continental Insurance Company	TN	IA	Continental Life Insurance Company of Brentwood, Tennessee	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	60054	06-6033492	0	0		Aetna Life Insurance Company	CT	IA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	45-4901541	0	0		Aetna ACO Holdings, Inc	DE	NIA	Aetna Life Insurance Company	Ownership	60.300	Aetna Inc	4
0001	AETNA INC	00000	06-1270755	0	0		AHP Holdings, Inc	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	36153	06-1286276	0	0		Aetna Insurance Company of Connecticut	CT	IA	AHP Holdings, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1028469	0	0		AE Fourteen, Incorporated	CT	NIA	AHP Holdings, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1373153	0	0		Aetna Life Assignment Company	CT	NIA	AHP Holdings, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-3678339	0	0		PE Holdings, LLC	CT	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1423207	0	0		Azalea Mall, L.L.C	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Canal Place, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-3180700	0	0		Aetna Ventures, LLC	DE	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	59-2108747	0	0		Broadspire National Services, Inc	FL	NIA	Aetna Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Multi-Strategy 1099 Fund	DE	NIA	Aetna Life Insurance Company	Ownership	75.000	Aetna Inc	9
0001	AETNA INC	00000	41-2035961	0	0		Aetna Financial Holdings, LLC	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	26-2030792	0	0		Aetna Asset Advisors, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	23-2354500	0	0		U.S. Healthcare Properties, Inc	PA	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	38-3704481	0	0		Aetna Capital Management, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0

Q16.1

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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0001	AETNA INC	00000	11-3667142	0	1314522		Aetna Partners Diversified Fund, LLC	DE	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc	1
0001	AETNA INC	00000		0	1460020		Aetna Partners Diversified Fund (Cayman), Limited	CYM	NIA	Aetna Capital Management, LLC	Ownership	100.000	Aetna Inc	2
0001	AETNA INC	00000	20-0446676	0	0		Aetna Workers' Comp Access, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-0446713	0	0		Aetna Behavioral Health, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	23-2670015	0	0		Managed Care Coordinators, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	59-3269144	0	0		Horizon Behavioral Services, LLC	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	61-1193498	0	0		Employee Assistance Services, LLC	KY	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	33-0052273	0	0		Health and Human Resource Center, Inc.	CA	IA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	75-2420973	0	0		Resources for Living, LLC	TX	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	36-3681261	0	0		The Vasquez Group Inc.	IL	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	22-3178125	0	0		Work and Family Benefits, Inc.	NJ	NIA	Horizon Behavioral Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	27-1773021	0	0		Aetna Card Solutions, LLC	CT	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-5216478	0	0		PayFlex Holdings, Inc.	DE	NIA	Aetna Financial Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	91-1774434	0	0		PayFlex Systems USA, Inc.	NE	NIA	PayFlex Holdings, Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	78700	06-0876836	0	0		Aetna Health and Life Insurance Company	CT	IA	Aetna Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	72052	23-2710210	0	0		Aetna Health Insurance Company	PA	IA	Aetna Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	84450	57-0805126	0	0		Aetna Health Insurance Company of New York	NY	IA	Aetna Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	98-0166872	0	0		Aetna Risk Indemnity Company, LTD	BMU	IA	Aetna Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1571642	0	0		Aetna International Inc.	CT	NIA	Aetna Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	98-0211470	0	0		Aetna Life & Casualty (Bermuda) Ltd.	BMU	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Health Services (UK) Limited	GBR	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Insurance (Signapore) Pte. Ltd.	SGP	IA	Aetna International Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Benefits (Bermuda) Limited	BMU	NIA	Aetna International Inc.	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Goodhealth Worldwide (Global) Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Benefits (Europe) Limited	BGR	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Goodhealth Worldwide (Asia) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Benefits Limited	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		PT. Aetna Global Benefits Indonesia	IDN	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	80.000	Aetna Inc	5
0001	AETNA INC	00000		0	0		Aetna Global Benefits (Middle East) LLC	ARE	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	49.000	Aetna Inc	6
0001	AETNA INC	00000		0	0		Aetna Global Benefits (Asia Pacific) Limited	HKG	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Spinnaker Topco Limited	BMU	NIA	Aetna Global Benefits (Bermuda) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Spinnaker Bidco Limited	GBR	NIA	Spinnaker Topco Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Holdco (UK) Limited	GBR	NIA	Spinnaker Bidco Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		InterGlobal Japan Corporation Limited	JPN	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Benefits (UK) Limited	GBR	NIA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Insurance Company Limited	GBR	IA	Aetna Holdco (UK) Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Asia Pacific) Limited	Ownership	0.020	Aetna Inc	3

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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0001	AETNA INC	00000		0	0		Aetna Health Insurance Company of Europe Limited	IRL	IA	Aetna International Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna (Shanghai) Enterprise Services Co. Ltd	CHN	NIA	Aetna International Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna (Beijing) Enterprise Management Services Co., Ltd	CHN	NIA	Aetna (Shanghai) Enterprise Services Co. Ltd	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Benefits (Singapore) PTE. LTD	SGP	NIA	Aetna International Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Indian Health Organisation Private Limited	IND	NIA	Aetna Global Benefits (Singapore) PTE, LTD	Ownership	99.980	Aetna Inc	3
0001	AETNA INC	00000	22-2578985	0	0		AUSHC Holdings, Inc	CT	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Aetna Global Holdings Limited	GBR	NIA	Aetna International Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Healthagen International Limited	GBR	NIA	Aetna Global Holdings Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Futrix Limited	NZL	NIA	Healthagen International Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000		0	0		Futrix Inc	NZL	NIA	Futrix Limited	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1182176	0	0		PHPSNE Parent Corporation	DE	NIA	AUSHC Holdings, Inc	Ownership	55.000	Aetna Inc	8
0001	AETNA INC	00000	52-2182411	0	0		Active Health Management, Inc	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	47-0970432	0	0		Health Data & Management Solutions, Inc	DE	NIA	Active Health Management, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	23-2604867	0	0		Aetna Integrated Informatics, Inc	PA	NIA	Active Health Management, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	13980	27-2192415	0	0		Health Re, Inc	VT	IA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	81-0579372	0	0		Phoenix Data Center Hosting Services, LLC	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	46-2469464	0	0		Healthagen LLC	CT	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	51-0029326	0	0		ASI Wings, L.L.C	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	33-0807547	0	0		Medicity, Inc	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	0	0	0		Echo Merger Sub, Inc	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	0	0	0		Echo Merger Sub, LLC	DE	NIA	Aetna Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	27-0259978	0	0		Novo Innovations, LLC	DE	NIA	Medicity Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	27-1170966	0	0		Allviant Corporation	DE	NIA	Medicity Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	81973	75-1296086	0	0		Coventry Health and Life Insurance Company	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	15761	47-3279217	0	0		Aetna Better Health of Kentucky Insurance Company	KY	IA	Coventry Health and Life Insurance Company	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	96460	51-0293139	0	0		Coventry Health Care of Delaware, Inc	DE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	52-1801446	0	0		Group Dental Service, Inc	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95846	52-2056201	0	0		Group Dental Service of Maryland, Inc	MD	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95283	51-0353638	0	0		Coventry Health Care of Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95241	42-1244752	0	0		Coventry Health Care of Iowa, Inc	IA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95925	42-1308659	0	0		Coventry Health Care of Nebraska, Inc	NE	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	47-2049117	0	0		Aetna Risk Assurance Company of Connecticut Inc	CT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95173	74-2381406	0	0		Aetna Health Inc	LA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95060	25-1264318	0	0		HealthAmerica Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	11102	23-2366731	0	0		HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	47-0854096	0	0		Coventry Prescription Management Services, Inc	NV	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	96555	54-1576305	0	0		Coventry Health Care of Virginia, Inc	VA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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0001	AETNA INC	00000	01-0646056	0	0		Coventry Transplant Network, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	96377	43-1372307	0	0		Coventry Health Care of Missouri, Inc	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95318	43-1702094	0	0		Aetna Better Health of Missouri LLC	MO	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95408	55-0712129	0	0		Coventry Health Care of West Virginia, Inc	WV	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95321	20-0229117	0	0		Coventry Health Care of the Carolinas, Inc	NC	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	62-1411933	0	0		Coventry HealthCare Management Corporation	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	47-4352768	0	0		Aetna HealthAssurance Pennsylvania, Inc	PA	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95489	48-0840330	0	0		Coventry Health Care of Kansas, Inc	KS	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	12193	20-1052897	0	0		Aetna Better Health of Michigan Inc	MI	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95407	87-0345631	0	0		Aetna Health of Utah Inc	UT	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-4416606	0	0		Aetna Better Health Inc	TN	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	74160	37-1241037	0	0		Coventry Health Care of Illinois, Inc	IL	IA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-8070994	0	0		Coventry Health Care National Accounts, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-5185442	0	0		Coventry Health Care National Network, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	26-1293772	0	0		Coventry Consumer Advantage, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-8376354	0	0		Coventry Health Care Workers' Compensation, Inc	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-4096903	0	0		First Script Network Service, Inc	NV	NIA	Coventry Health Care Workers' Compensation, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	06-1095987	0	0		MetraComp, Inc	CT	NIA	Coventry Health Care Workers' Compensation, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	74-2879984	0	0		Medical Examinations of New York, P.C	NY	NIA	Coventry Health Care Workers' Compensation, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	62-1266888	0	0		FOCUS Healthcare Management, Inc	TN	NIA	Coventry Health Care Workers' Compensation, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	87-0443226	0	0		Coventry Rehabilitation Services, Inc	DE	NIA	Coventry Health Care Workers' Compensation, Inc	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-1736437	0	0		First Health Group Corp	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	90328	38-2242132	0	0		First Health Life & Health Insurance Company	TX	IA	First Health Group Corp	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	52-1320522	0	0		Claims Administration Corp	MD	NIA	First Health Group Corp	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	81000	75-1431313	0	0		Cambridge Life Insurance Company	MO	IA	First Health Group Corp	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-1130063	0	0		Florida Health Plan Administrators, LLC	FL	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95114	65-0986441	0	0		Coventry Health Care of Florida, Inc	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	95266	65-0453436	0	0		Coventry Health Plan of Florida, Inc	FL	IA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	59-3750548	0	0		Carefree Insurance Services, Inc	FL	NIA	Florida Health Plan Administrators, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	36-4391310	0	0		bswift LLC	DE	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	38-3348145	0	0		Corporate Benefit Strategies, Inc	DE	NIA	bswift LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	26-1582982	0	0		MHNet Specialty Services, LLC	MD	NIA	Aetna Health Holdings, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	37-1448790	0	0		Mental Health Network of New York IPA, Inc	NY	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	12509	20-2516317	0	0		MHNet Life and Health Insurance Company	TX	IA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	72-1106596	0	0		Mental Health Associates, Inc	LA	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc	0
0001	AETNA INC	00000	20-4276336	0	0		MHNet of Florida, Inc	FL	NIA	MHNet Specialty Services, LLC	Ownership	100.000	Aetna Inc	0

SCHEDULE Y

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Asterisk	Explanation
1	Aetna Life Insurance Company and Aetna Health and Life Insurance Company own substantially all of the non-managing membership interests.
2	Aetna Life Insurance Company owns the Class C participating shares.
3	Aetna Global Benefits (Asia Pacific) Limited owns 0.019857% of Indian Health Organization Private Limited and Aetna Global Benefits (Singapore) Pte. Ltd. owns 99.980143%.
4	Aetna ACO Holdings, Inc. is owned by Aetna Life Insurance Company (60%), Aetna Health Inc. (PA) (39%) and Aetna Health Holdings, LLC (1%).
5	Aetna Global Benefits (Bermuda) Limited owns 80% and 20% is owned by Suhatsyah Rivai, Aetna's Nominee.
6	Aetna Global Benefits (Bermuda) Limited owns 49% and 51% is owned by Euro Gulf LLC, Aetna's Nominee.
7	Aetna ACO Holdings Inc. owns 50% and 50% is owned by Innovation Health System Foundation, an unaffiliated company.
8	55% is owned by AUSHC Holdings, Inc. The remaining 45% is owned by thirteen different hospitals (non-affiliates) which are shareholders with varying degrees of ownership.
9	75% is invested and owned by Aetna Life Insurance Company and 25% is invested and owned by external accredited investors.

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

Explanation:

1.

Bar Code:

Overflow Page for Write-Ins

NONE

SCHEDULE A - VERIFICATION

Real Estate

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	0	0
	2.2 Additional investment made after acquisition	0	0
3.	Current year change in encumbrances	0	0
4.	Total gain (loss) on disposals	0	0
5.	Deduct amounts received on disposals	0	0
6.	Total foreign exchange change in book/adjusted carrying value	0	0
7.	Deduct current year's other than temporary impairment recognized	0	0
8.	Deduct current year's depreciation	0	0
9.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10.	Deduct total nonadmitted amounts	0	0
11.	Statement value at end of current period (Line 9 minus Line 10)	0	0

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

		1 Year to Date	2 Prior Year Ended December 31
1.	Book value/recorded investment excluding accrued interest, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	0	0
	2.2 Additional investment made after acquisition	0	0
3.	Capitalized deferred interest and other	0	0
4.	Accrual of discount	0	0
5.	Unrealized valuation increase (decrease)	0	0
6.	Total gain (loss) on disposals	0	0
7.	Deduct amounts received on disposals	0	0
8.	Deduct amortization of premium and mortgage interest points and commitment fees	0	0
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest	0	0
10.	Deduct current year's other than temporary impairment recognized	0	0
11.	Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12.	Total valuation allowance	0	0
13.	Subtotal (Line 11 plus Line 12)	0	0
14.	Deduct total nonadmitted amounts	0	0
15.	Statement value at end of current period (Line 13 minus Line 14)	0	0

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	0	0
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition	0	0
	2.2 Additional investment made after acquisition	0	0
3.	Capitalized deferred interest and other	0	0
4.	Accrual of discount	0	0
5.	Unrealized valuation increase (decrease)	0	0
6.	Total gain (loss) on disposals	0	0
7.	Deduct amounts received on disposals	0	0
8.	Deduct amortization of premium and depreciation	0	0
9.	Total foreign exchange change in book/adjusted carrying value	0	0
10.	Deduct current year's other than temporary impairment recognized	0	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12.	Deduct total nonadmitted amounts	0	0
13.	Statement value at end of current period (Line 11 minus Line 12)	0	0

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1 Year to Date	2 Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year	39,956,741	505,587
2.	Cost of bonds and stocks acquired	162,644,720	42,180,996
3.	Accrual of discount	9,669	2,969
4.	Unrealized valuation increase (decrease)	0	0
5.	Total gain (loss) on disposals	123,544	12,319
6.	Deduct consideration for bonds and stocks disposed of	39,777,723	2,718,841
7.	Deduct amortization of premium	390,630	26,289
8.	Total foreign exchange change in book/adjusted carrying value	0	0
9.	Deduct current year's other than temporary impairment recognized	146,414	0
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	162,419,907	39,956,741
11.	Deduct total nonadmitted amounts	0	0
12.	Statement value at end of current period (Line 10 minus Line 11)	162,419,907	39,956,741

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	206,782,035	660,151,121	690,089,113	(2,308,799)	206,782,035	174,535,244	0	141,542,967
2. NAIC 2 (a)	11,693,749	5,041,215	0	1,979,813	11,693,749	18,714,777	0	3,990,214
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total Bonds	218,475,784	665,192,336	690,089,113	(328,986)	218,475,784	193,250,021	0	145,533,181
PREFERRED STOCK								
8. NAIC 1	0	0	0	0	0	0	0	0
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	218,475,784	665,192,336	690,089,113	(328,986)	218,475,784	193,250,021	0	145,533,181

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 $.....30,830,114; NAIC 2 $.....0; NAIC 3 $.....0; NAIC 4 $.....0; NAIC 5 $.....0; NAIC 6 $.....0.

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999	380	XXX	380	0	0

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,918	3,702
2. Cost of short-term investments acquired	3,905,959	96,193
3. Accrual of discount	0	0
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	3,907,497	97,977
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)	380	1,918
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	380	1,918

Sch. DB-Pt A-Verification
NONE

Sch. DB-Pt B-Verification
NONE

Sch. DB-Pt C-Sn 1
NONE

Sch. DB-Pt C-Sn 2
NONE

Sch. DB-Verification
NONE

SCHEDULE E- VERIFICATION

Cash Equivalents

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	105,574,522	2,249,944
2. Cost of cash equivalents acquired	1,512,826,004	1,007,161,721
3. Accrual of discount	220,559	80,639
4. Unrealized valuation increase (decrease)	0	0
5. Total gain (loss) on disposals	(83)	49
6. Deduct consideration received on disposals	1,587,791,268	903,917,831
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)	30,829,734	105,574,522
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	30,829,734	105,574,522

Sch. A-Pt 2
NONE

Sch. A-Pt 3
NONE

Sch. B-Pt 2
NONE

Sch. B-Pt 3
NONE

Sch. BA-Pt 2
NONE

Sch. BA-Pt 3
NONE

SCHEDULE D - PART 3

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

1 Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
Bonds - U.S. Government									
912828 K2 5	US TREASURY NOTE/BOND 0.750% 04/15/18		04/30/2015	ISI GROUP INC		12,935,000	13,000,000	4,262	1
912828 SY 7	US TREASURY NOTE/BOND 0.625% 05/31/17		05/28/2015	MIZUHO SECURITIES USA		13,000,000	13,000,000	40,179	1
912828 XH 8	US TREASURY NOTE/BOND 1.625% 06/30/20		06/30/2015	ISI GROUP INC		10,000,000	10,000,000	442	1
0599999. Total Bonds - U.S Government						35,935,000	36,000,000	44,883	XXX
Bonds - U.S. States, Territories and Possessions									
574193 EH 7	MARYLAND STATE OF ST & LOCAL FACS LOAN F		04/07/2015	MERRILL LYNCH-MUNI		15,234,000	15,000,000	31,250	1FE
882723 SR 1	TEXAS STATE OF REF TRANSPRTN COMMISSION		04/08/2015	MERRILL LYNCH-MUNI		9,774,207	7,950,000	13,250	1FE
1799999. Total Bonds - U.S. States, Territories and Possessions						25,008,207	22,950,000	44,500	XXX
Bonds - U.S. Special Revenue and Special Assessment									
13066Y SX 8	CALIFORNIA ST DEPT WTR RES PWR REF-SER 0		04/02/2015	JPM-CHASE		4,844,760	4,000,000	0	1FE
29270C G2 5	ENERGY NORTHWEST WASH ELEC REV REF PROJ		05/28/2015	Mesirow Financial		3,416,934	2,890,000	59,406	1FE
3199999. Total Bonds - U.S. Special Revenue and Special Assessment						8,261,694	6,890,000	59,406	XXX
Bonds - Industrial and Miscellaneous									
07177M AF 0	BAXALTA INC SR UNSECURED 2.000% 06/22/		06/18/2015	WARBURG		999,390	1,000,000	0	2FE
126650 CE 8	CVS CAREMARK CORP SR UNSECURED 2.250%		04/02/2015	CITIGROUP		1,531,410	1,500,000	5,250	2FE
49327M 2H 6	KEY BANK NA SR UNSECURED 1.700% 06/01/		05/27/2015	GOLDMAN SACHS & CO		1,997,840	2,000,000	0	1FE
565849 AN 6	MARATHON OIL CORP SR UNSECURED 2.700%		06/01/2015	CHASE SECURITIES		997,830	1,000,000	0	2FE
740189 AL 9	PRECISION CASTPARTS CORP SR UNSECURED		06/01/2015	CITIGROUP		1,999,800	2,000,000	0	1FE
00507U AK 7	ACTAVIS FUNDING SCS SR UNSECURED 1.850	F	04/02/2015	CHASE SECURITIES		1,512,585	1,500,000	2,004	2FE
3899999. Total Bonds - Industrial and Miscellaneous						9,038,855	9,000,000	7,254	XXX
8399997. Total Bonds - Part 3						78,243,756	74,840,000	156,043	XXX
8399999. Total Bonds						78,243,756	74,840,000	156,043	XXX
9999999. Total Bonds, Preferred and Common Stocks						78,243,756	XXX	156,043	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues:.....0.

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Desig-nation or Market Indicator (a)
Bonds - U.S. States, Territories and Possessions																					
13063C JF 8	CALIFORNIA ST VARIOUS PURPOSE 5.000% 1		05/20/2015	WARBURG DILLON READ		1,111,160	1,000,000	1,143,920	0	0	(595)	0	(595)	0	1,143,325	0	(32,165)	(32,165)	24,306	.12/01/2043	1FE
574193 EH 7	MARYLAND STATE OF ST & LOCAL FACS LOAN F		04/07/2015	MERRILL LYNCH-MUNI		12,735,576	12,500,000	12,695,000	0	0	0	0	0	0	12,695,000	0	40,575	40,575	26,042	.03/15/2027	1FE
882723 TC 3	TEXAS STATE OF REF TRANSPRTN COMMISSION.		05/01/2015	MERRILL LYNCH-MUNI		2,055,508	1,795,000	2,061,414	0	0	(768)	0	(768)	0	2,060,647	0	(5,138)	(5,138)	34,404	.10/01/2044	1FE
1799999. Total Bonds - U.S. States, Territories and Possessions						15,902,244	15,295,000	15,900,334	0	0	(1,363)	0	(1,363)	0	15,898,972	0	3,272	3,272	84,752	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																					
64971W PE 4	NEW YORK CITY NY TRANSITIONAL FUTURE TAX		04/07/2015	MORGAN STANLEY		3,527,534	2,890,000	3,487,276	0	0	(3,098)	0	(3,098)	0	3,484,179	0	43,355	43,355	11,239	.11/01/2027	1FE
3199999. Total Bonds - U.S. Special Revenue and Special Assessment						3,527,534	2,890,000	3,487,276	0	0	(3,098)	0	(3,098)	0	3,484,179	0	43,355	43,355	11,239	XXX	XXX
8399997. Total Bonds - Part 4						19,429,778	18,185,000	19,387,610	0	0	(4,461)	0	(4,461)	0	19,383,151	0	46,627	46,627	95,991	XXX	XXX
8399999. Total Bonds						19,429,778	18,185,000	19,387,610	0	0	(4,461)	0	(4,461)	0	19,383,151	0	46,627	46,627	95,991	XXX	XXX
9999999. Total Bonds, Preferred and Common Stocks						19,429,778	XXX	19,387,610	0	0	(4,461)	0	(4,461)	0	19,383,151	0	46,627	46,627	95,991	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: 0.

Sch. DB-Pt A-Sn 1
NONE

Sch. DB-Pt B-Sn 1
NONE

Sch. DB-Pt D-Sn 1
NONE

Sch. DB-Pt D-Sn 2
NONE

Sch. DL-Pt. 1
NONE

Sch. DL-Pt. 2
NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Bank of America..... Dallas, TX.....	.....	.....0.000	0	0	.....(1,368,666)	.....(3,823,009)	117,041	XXX
State Street Bank and Trust Company..... Boston, MA.....	.....	.....0.000	0	0	0	0	.....(7,000,000)	XXX
0199999. Total Open Depositories.....	XXX	XXX	0	0	.....(1,368,666)	.....(3,823,009)	.....(6,882,959)	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	0	0	.....(1,368,666)	.....(3,823,009)	.....(6,882,959)	XXX
0599999. Total Cash.....	XXX	XXX	0	0	.....(1,368,666)	.....(3,823,009)	.....(6,882,959)	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year
Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations							
ATLANTIC CITY ELECTRIC CP 3(A) 3		06/26/2015	0.400	07/09/2015	6,999,378	0	389
DIAMOND OFFSHORE DRILL CP 4(2) 144A		06/29/2015	0.450	07/06/2015	1,322,917	0	33
DISCOVERY COMMUNICATIONS CP 4(2) 144A		06/26/2015	0.430	07/10/2015	3,395,635	0	203
INTEGRYS ENERGY GROUP CP 4(2) 144A		06/26/2015	0.420	07/06/2015	4,399,743	0	257
INTEGRYS ENERGY GROUP CP 4(2) 144A		06/26/2015	0.420	07/06/2015	362,979	0	21
KROGER CO KROGER CO CP 4(2) 144A		06/30/2015	0.250	07/01/2015	2,170,000	0	15
MOHAWK INDUSTRIES INC CP 4(2) 144A		06/26/2015	0.430	07/09/2015	3,099,704	0	185
ONEOK PARTNERS LP CP 4(2) 144A		06/19/2015	0.680	07/13/2015	1,009,771	0	229
ONEOK PARTNERS LP CP 4(2) 144A		06/26/2015	0.650	07/16/2015	2,365,359	0	214
PPL ELECTRIC UTILITIES CP4(2) 144A		06/29/2015	0.400	07/13/2015	5,313,292	0	118
PITNEY BOWES INC CP 4(2) 144A		06/26/2015	0.450	07/10/2015	390,956	0	24
3299999. Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					30,829,734	0	1,688
3899999. Total - Industrial and Miscellaneous (Unaffiliated)					30,829,734	0	1,688
Total Bonds							
7799999. Subtotals - Issuer Obligations					30,829,734	0	1,688
8399999. Subtotals - Bonds					30,829,734	0	1,688
8699999. Total - Cash Equivalents					30,829,734	0	1,688