



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2018
OF THE CONDITION AND AFFAIRS OF THE

Cigna Dental Health of Ohio, Inc.

NAIC Group Code09010901NAIC Company Code47805Employer's ID Number59-2579774
(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

Licensed as business type:Other

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized06/17/1985Commenced Business11/06/1985

Statutory Home Office1300 East 9th StreetCleveland , OH, US 44114
(Street and Number)(City or Town, State, Country and Zip Code)

Main Administrative Office1571 Sawgrass Corporate Parkway Suite 140Sunrise , FL, US 33323954-514-6600
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Mail Address1571 Sawgrass Corporate Parkway Suite 140Sunrise , FL, US 33323
(Street and Number or P.O. Box)(City or Town, State, Country and Zip Code)

Primary Location of Books and Records1571 Sawgrass Corporate Parkway Suite 140Sunrise , FL, US 33323954-514-6600
(Street and Number)(City or Town, State, Country and Zip Code)(Area Code) (Telephone Number)

Internet Website Addresswww.cigna.com

Statutory Statement ContactAngela Collie954-514-6681
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OFFICERS

PresidentFrederick Eugene ScardelletteSecretaryAnna Krishtul

TreasurerScott Ronald LambertActuaryGregory Nicholas Malone

OTHER

Mark Paul Fleming, Vice PresidentJulie Ann Vayer, Vice PresidentLance Manuel Thomas, Vice President

Maureen Hardiman Ryan, Vice PresidentJoanne Ruth Hart, Vice PresidentKathleen Murphy O'Neil #, Vice President

DIRECTORS OR TRUSTEES

Frederick Eugene ScardelletteJulie Ann VayerJason Dean Meade

State of _____ SS:
County of _____

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

Frederick Eugene ScardelletteScott Ronald LambertAnna Krishtul
PresidentTreasurerSecretary

Subscribed and sworn to before me thisa. Is this an original filing? Yes [X] No []
day ofb. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	100,388		100,388	100,445
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
4.1 Properties occupied by the company (less \$				
encumbrances)			0	0
4.2 Properties held for the production of income (less				
\$ encumbrances)			0	0
4.3 Properties held for sale (less \$				
encumbrances)			0	0
5. Cash (\$143,936), cash equivalents				
(\$3,020,267) and short-term				
investments (\$)	3,164,203		3,164,203	1,940,132
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	3,264,591	0	3,264,591	2,040,577
13. Title plants less \$ charged off (for Title insurers				
only)			0	0
14. Investment income due and accrued	534		534	543
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	702,328	1,914	700,414	724,162
15.2 Deferred premiums, agents' balances and installments booked but				
deferred and not yet due (including \$				
earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and				
contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	70,898		70,898	0
18.2 Net deferred tax asset	1,643		1,643	1,643
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets				
(\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates	4,289		4,289	8,398
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and				
Protected Cell Accounts (Lines 12 to 25)	4,044,283	1,914	4,042,369	2,775,323
27. From Separate Accounts, Segregated Accounts and Protected Cell				
Accounts			0	0
28. Total (Lines 26 and 27)	4,044,283	1,914	4,042,369	2,775,323
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	0	0	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	351,031	29,340	380,371	298,306
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses	4,793		4,793	3,128
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act			0	0
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	17,906		17,906	18,645
9. General expenses due or accrued	222,480		222,480	99,363
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))			0	8,227
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
12. Amounts withheld or retained for the account of others.....			0	0
13. Remittances and items not allocated	2,626		2,626	2,802
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates			0	0
16. Derivatives			0	0
17. Payable for securities			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans			0	0
23. Aggregate write-ins for other liabilities (including \$ current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)	598,836	29,340	628,176	430,471
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	168,045
26. Common capital stock	XXX	XXX	100	100
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	273,258	273,258
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	3,140,835	1,903,449
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$)	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	3,414,193	2,344,852
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	4,042,369	2,775,323
DETAILS OF WRITE-INS				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	0	0	0	0
2501. PPACA Industry fee	XXX	XXX		168,045
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	XXX	XXX	0	168,045
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	246,349	248,312	497,897
2. Net premium income (including \$ non-health premium income).....	XXX	4,207,201	4,291,860	8,629,302
3. Change in unearned premium reserves and reserve for rate credits.....	XXX			
4. Fee-for-service (net of \$ medical expenses).....	XXX			
5. Risk revenue	XXX			
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	4,207,201	4,291,860	8,629,302
Hospital and Medical:				
9. Hospital/medical benefits				
10. Other professional services	65	2,150,283	2,151,312	4,237,576
11. Outside referrals	143,367	143,367	148,399	280,573
12. Emergency room and out-of-area				
13. Prescription drugs				
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)	143,432	2,293,650	2,299,711	4,518,149
Less:				
17. Net reinsurance recoveries				
18. Total hospital and medical (Lines 16 minus 17)	143,432	2,293,650	2,299,711	4,518,149
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ cost containment expenses		10,669	9,452	17,570
21. General administrative expenses		550,509	401,636	800,904
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)				0
23. Total underwriting deductions (Lines 18 through 22).....	143,432	2,854,828	2,710,799	5,336,623
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	1,352,373	1,581,061	3,292,679
25. Net investment income earned		18,352	7,661	20,608
26. Net realized capital gains (losses) less capital gains tax of \$2		9	(3)	(42)
27. Net investment gains (losses) (Lines 25 plus 26)	0	18,361	7,658	20,566
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$7)].....		(7)	438	438
29. Aggregate write-ins for other income or expenses	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	1,370,727	1,589,157	3,313,683
31. Federal and foreign income taxes incurred	XXX	300,874	556,206	1,159,248
32. Net income (loss) (Lines 30 minus 31)	XXX	1,069,853	1,032,951	2,154,435
DETAILS OF WRITE-INS				
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	2,344,852	2,192,163	2,192,163
34. Net income or (loss) from Line 32	1,069,853	1,032,951	2,154,435
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	0		(1,600)
39. Change in nonadmitted assets	(512)	(274)	(146)
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.....			
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.....			
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			(2,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	1,069,341	1,032,677	152,689
49. Capital and surplus end of reporting period (Line 33 plus 48)	3,414,193	3,224,840	2,344,852
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

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	4,229,698	4,259,607	8,590,983
2. Net investment income	18,417	7,725	20,722
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	4,248,115	4,267,332	8,611,705
5. Benefit and loss related payments	2,211,585	2,261,356	4,541,017
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	436,402	450,015	814,726
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	380,001	543,001	1,168,162
10. Total (Lines 5 through 9)	3,027,988	3,254,372	6,523,905
11. Net cash from operations (Line 4 minus Line 10)	1,220,127	1,012,960	2,087,800
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	0	0	0
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	11	(4)	(64)
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	11	(4)	(64)
13. Cost of investments acquired (long-term only):			
13.1 Bonds	0	0	0
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)	0	0	0
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)	11	(4)	(64)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	0	0	2,000,000
16.6 Other cash provided (applied)	3,933	4,062	(2,895)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,933	4,062	(2,002,895)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	1,224,071	1,017,018	84,841
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	1,940,132	1,855,291	1,855,291
19.2 End of period (Line 18 plus Line 19.1)	3,164,203	2,872,309	1,940,132

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

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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	41,737	0	0	0	0	41,737	0	0	0	0
2. First Quarter	40,975	0	0	0	0	40,975	0	0	0	0
3. Second Quarter	40,878					40,878				
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	246,349					246,349				
Total Member Ambulatory Encounters for Period:										
7. Physician	0									
8. Non-Physician	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (a)	4,207,201					4,207,201				
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	4,207,201					4,207,201				
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services.....	2,211,585					2,211,585				
18. Amount Incurred for Provision of Health Care Services	2,293,650					2,293,650				

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

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

[illegible]

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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 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical)					0	0
2. Medicare Supplement					0	0
3. Dental Only	291,217	1,920,368	9,083	371,288	300,300	298,306
4. Vision Only					0	0
5. Federal Employees Health Benefits Plan					0	0
6. Title XVIII - Medicare					0	0
7. Title XIX - Medicaid					0	0
8. Other health					0	0
9. Health subtotal (Lines 1 to 8)	291,217	1,920,368	9,083	371,288	300,300	298,306
10. Healthcare receivables (a)					0	0
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts					0	0
13. Totals (Lines 9-10+11+12)	291,217	1,920,368	9,083	371,288	300,300	298,306

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

Note 1. Summary of Significant Accounting Policies

Organization and Operation

Cigna Dental Health of Ohio, Inc. (“the Company”) is a health insuring corporation (HIC) which provides dental insurance services throughout the region. Principal products and services include managed care products and services. The Company is a wholly-owned subsidiary of Cigna Dental Health, Inc. (“the Parent”), which is a wholly-owned subsidiary of Connecticut General Corporation (“CGC”), which is an indirect wholly-owned subsidiary of Cigna Corporation (“Cigna”). Cigna is a global health services organization incorporated in Delaware.

The Company had two customers from which it earned 29% and 24% of total revenue, excluding investment income for the period ended June 30, 2018 and December 31, 2017. Individually, each of these customers amounted to greater than 10% of total revenue.

Proposed Acquisition of Express Scripts

On March 8, 2018, the Company’s ultimate parent entity, Cigna Corporation (Cigna), entered into an Agreement and Plan of Merger with Express Scripts Holding Company (“Express Scripts”) whereby, subject to certain terms and conditions, Cigna will acquire Express Scripts. Consummation of the acquisition is subject to certain customary conditions, including approval of both Cigna and Express Scripts shareholders, the receipt of certain necessary regulatory approvals and the absence of a legal restraint prohibiting the consummation of the merger. The merger is expected to be completed by December 31, 2018.

Health Care Reform Act Taxes and Fees

Federal legislation imposed a moratorium on the health insurance industry tax for 2017 and 2019. The industry tax is being assessed in 2018 and, under current law, will be imposed in 2020. The industry tax for the Company in 2018 is expected to approximate \$161,420 and was recorded at first quarter and adjusted at second quarter. Because this tax is not deductible for federal income tax purposes, it negatively impacted the Company’s effective tax rate for the six months ended June 30, 2018, and the Company expect this negative effect to continue throughout 2018.

A. Accounting Practices

The financial statements of the Company are presented in conformity with accounting practices prescribed or permitted by the State of Ohio Department of Insurance (“The Department”), which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (“GAAP”) and include management’s estimates and assumptions, such as those regarding dental costs and interest rates, that affect the recorded amounts. The National Association of Insurance Commissioners’ (NAIC) *Accounting Practices and Procedures Manual* (“NAIC SAP” or “SSAPs”) has been adopted as a component of prescribed or permitted practices by the State of Ohio (“The State”).

The principal differences between statutory-basis financial statements presented herein and those prepared on a GAAP basis include nonadmitted assets, deferred income taxes, unrealized appreciation (depreciation) on bonds, and bad debt allowances and expenses. These statutory accounting practices disallow certain assets from admission in the Statutory Balance Sheets. These nonadmitted assets, otherwise included on the Company's balance sheets prepared under GAAP, include receivables greater than 90 days past due and certain non-current assets. Under GAAP, bonds classified as available-for-sale are carried at fair value with the related unrealized appreciation (depreciation) recorded as a component of equity. Under statutory accounting principles, bonds are carried principally at amortized cost. Under GAAP, deferred taxes are recorded for any temporary differences between the tax basis of assets and liabilities to the extent it is more likely than not that the deferred tax assets are realizable, with changes in deferred tax assets and liabilities recorded as a component of net income tax expense. Under statutory accounting principles, the amount of deferred tax assets that may be admitted is generally limited based on the Realization Threshold Limitation Table in Statement of Statutory Accounting Principles (SSAP) No. 101, *Income Taxes, a Replacement of SSAP 10R and SSAP 10*. The net change in the deferred tax assets and liabilities is recognized as a separate component of changes in unassigned surplus.

A reconciliation of the Company’s net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State is shown below:

	SSAP#	F/S Page	F/S Line #	2018	2017
<u>NET INCOME</u>					
(1) State basis				\$ 1,069,853	\$ 2,154,435
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				-	-
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP				-	-
(4) NAIC SAP (1-2-3=4)				<u>\$ 1,069,853</u>	<u>\$ 2,154,435</u>
<u>SURPLUS</u>					
(5) State Basis				\$ 3,414,193	\$ 2,344,852
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP				-	-
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP				-	-
(8) NAIC SAP (5-6-7=8)				<u>\$ 3,414,193</u>	<u>\$ 2,344,852</u>

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

The Company maintained the minimum surplus required by state laws and regulatory agencies of \$250,000 as of June 30, 2018 and December 31, 2017. Minimum required surplus is the greater of \$250,000 or that amount required pursuant to the risk based capital provisions. Net worth is calculated as the Company's net worth less any required special contingency reserve.

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

The preparation of financial statements in conformity with NAIC SAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. NAIC SAP also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Significant estimates are disclosed throughout these Notes, however actual results could differ from those estimates.

C. Accounting Policy

The Company uses the following accounting policies:

- (1) Cash, Cash Equivalents and Short-term Investments: Cash equivalents consist of investments with original maturities three months or less from the time of purchase. Investments with original maturities of one year or less from the time of purchase are classified as short term. Cash equivalents and short-term investments are carried at cost.
- (2) Bonds: Bonds designated highest quality and high quality are carried at amortized cost. All other bonds are carried at the lower of cost or fair value. Amortization of bond premium or discount is calculated using the scientific (constant yield) interest method. Bonds containing call provisions are amortized to call date which produces the lowest asset value (yield to worst). Bonds are considered impaired and their cost basis is written down to fair value through net realized gains (losses), when management expects a decline in value to persist (i.e., the decline is other than temporary).

The Company holds no mandatory convertible securities or Securities Valuation Office (SVO) Identified bond Exchange-Traded Funds (ETFs).

- (3) Common Stocks: The Company holds no common stocks..
- (4) Preferred Stocks: The Company holds no preferred stocks.
- (5) Mortgage Loans: The Company holds no mortgage loans.
- (6) Loan-Backed Securities: The Company holds no loan-backed securities.
- (7) Investments in Subsidiaries, Controlled and Affiliated Entities ("SCA"): The Company holds no investments in subsidiaries, controlled and affiliated entities.
- (8) Joint Ventures, Partnerships and Limited Liability Companies: The Company holds no investments in joint ventures, controlled and affiliated entities.
- (9) Derivatives: The Company has no derivative instruments.
- (10) Premium Deficiency Reserves: The Company anticipates investment income as a factor in its premium deficiency calculations.
- (11) Claims Unpaid and Unpaid Claims Adjustment Expenses: Claims unpaid and unpaid claims adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined. Management develops these estimates using actuarial methods based upon historical data for claim payment patterns, cost trends, product mix, seasonality, utilization of dental care services and other relevant factors. When estimates change, the Company records the adjustment in dental expenses in the period the change in estimate occurs. Unpaid claim adjustment expenses represents a reserve for additional administrative expenses associated with unpaid dental claims that are in the process of settlement, as well as those that have been incurred but not yet reported. This reserve is based on the historical relationship between claims handling expenses and incurred claims.
- (12) Net Investment Income: When interest and principal payments on investments are current, the Company recognizes interest income when it is earned. The Company stops recognizing interest income on bonds when interest payments are 90 days past due. Investment income on these investments is only recognized when interest payments are received. See Note 7 for further information.
- (13) Investment Gains and Losses: Unrealized capital gains and losses on investments carried at fair value are reflected directly in unassigned surplus. Realized capital gains and losses resulting from sales, investment asset write-downs and changes in valuation reserves are based on specifically identified assets and are recognized in net income.
- (14) Nonadmitted Assets: In accordance with NAIC SAP, certain assets or certain portions of assets are excluded from the Company's admitted assets on its Statutory Balance Sheet through a direct charge to unassigned surplus. Certain assets are limited by factors, such as percentage of surplus, as to the amounts that qualify as admitted assets. Such assets may include deferred tax assets.

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

- (15) Income Taxes: The Company is included in the consolidated United States federal income tax return filed by Cigna. Pursuant to the Tax Sharing Agreement with Cigna, federal income taxes are allocated to the Company as if it were filing on a separate return basis. The tax benefit of net operating losses, capital losses and tax credits are funded to the extent they reduce the consolidated federal income tax liability. The Company generally recognizes deferred income taxes when assets and liabilities have different values for financial statement and tax reporting purposes (temporary difference). Limitations of the admitted amount of the deferred tax asset are calculated in accordance with SSAP No. 101. See Note 9 for more detailed information about the Company's income taxes.
- (16) Provider Incentives and Other Risk Sharing Arrangements: The Company contracts with dentists or provider groups to provide dental services to its members. The Company pays capitation or negotiated fees for defined services provided by the dentists. The Company and dentists have not entered into incentive sharing agreements.
- (17) Premium Revenue: Amounts charged for dental care services are recognized as revenue in the month for which customers are entitled to dental care. Unearned premiums represent that portion of premiums received which are applicable to the unexpired terms of contracts in force.
- (18) Section 9010 Insurer Fee: Effective January 1, 2014, the Company adopted SSAP 106, *Affordable Care Act* ("ACA") *Section 9010 Assessment*, for the annual health insurance industry fee imposed under Section 9010 of the ACA. Federal legislation imposed a moratorium on the ACA Section 9010 insurer fee for 2017 and 2019.

Note 2. Accounting Changes and Corrections of Errors

No changes in accounting principles or corrections of errors have been recorded.

Note 3. Business Combinations and Goodwill

The Company was not party to a business combination, and does not carry goodwill in its statutory balance sheets.

Note 4. Discontinued Operations

The Company did not discontinue any operations.

Note 5. Investments

- A. The Company has no mortgage loans.
- B. The Company has no debt restructuring.
- C. The Company has no reverse mortgages.
- D. The Company has no loan-backed securities.
- E. The Company has no dollar repurchase agreements or securities lending transactions.
- F. The Company has no repurchase agreement transactions accounted for as a securing borrowing.
- G. The Company has no reverse repurchase agreement transactions accounted for as a secured borrowing.
- H. The Company has no repurchase agreement transactions accounted for as a sale.
- I. The Company has no reverse repurchase agreement transactions accounted for as a sale.
- J. The Company has no real estate property investments.
- K. The Company has no low-income housing tax credits.
- L. Restricted Assets

- (1) Restricted Assets (Including Pledged):

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

	1	2	3	4	5	6	7
Restricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted From Prior Year	Increase/(Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted and Nonadmitted) Restricted to Total Asset (a)	Admitted Restricted to Total Admitted Assets (b)
A. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	-	-
B. Collateral held under security lending agreements	-	-	-	-	-	-	-
C. Subject to repurchase agreements	-	-	-	-	-	-	-
D. Subject to reverse repurchase agreements	-	-	-	-	-	-	-
E. Subject to dollar repurchase agreements	-	-	-	-	-	-	-
F. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-
G. Placed under option contracts	-	-	-	-	-	-	-
H. Letter stock or securities restricted as to sale - excluding Federal Home Loan Bank (FHLB) capital stock	-	-	-	-	-	-	-
I. FHLB capital stock	-	-	-	-	-	-	-
J. On deposit with states	100,388	100,445	(57)	-	100,388	2.48%	2.48%
K. On deposit with other regulatory bodies	-	-	-	-	-	-	-
L. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-
M. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-
N. Other restricted assets	-	-	-	-	-	-	-
O. Total restricted assets	\$ 100,388	\$ 100,445	\$ (57)	\$ -	\$ 100,388	2.48%	2.48%

(a) Column 1 divided by Asset Page, Column 1, Line 28
(b) Column 5 divided by Asset Page, Column 3, Line 28

(2) The Company has no assets pledged as collateral not captured in other categories.

(3) The Company has no other restricted assets.

(4) The Company holds no collateral received and reflected as assets.

- M. The Company has no working capital finance investments.
- N. The Company has no offsetting and netting of assets and liabilities related to derivatives, repurchase and reverse repurchase agreements or security borrowing and lending activities.
- O. The Company has no structured notes.
- P. The Company holds no 5* securities. NAIC 5* is a designation assigned by the SVO for certain obligations when an insurer certifies: (1) that documentation necessary to permit a full credit analysis of a security does not exist and (2) the issuer or obligor is current on all contracted interest and principal payments and (3) the insurer has an actual expectation of ultimate repayment of all contracted interest and principal.
- Q. The Company has no short sales.
- R. The Company has no prepayment penalty and acceleration fees.

Note 6. Joint Ventures, Partnerships and Limited Liability Companies

The Company has no investments in joint ventures, partnerships, or limited liability companies.

Note 7. Investment Income

- A. Due and accrued income is excluded from surplus on the following basis:
- Bonds – all investment income due and accrued with amounts that are over 90 days past due.
- B. No amounts due and accrued were excluded from the statutory statements.

Note 8. Derivative Instruments

The Company has no derivative instruments.

Note 9. Income Taxes

The Company’s income tax footnote disclosure has not changed significantly from the December 31, 2017 disclosure.

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

The Company had no significant changes during the current reporting period.

Note 11. Debt

The Company had no outstanding debt with third parties or outstanding federal home loan bank agreements.

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

The Company has no employees; instead Cigna Health and Life Insurance Company (CHLIC) employees, performed all functions on behalf of the dental plan.

CHLIC provides certain postretirement benefits to retired employees, spouses and other eligible dependents through a plan sponsored by Cigna. CHLIC also participates in a capital accumulation 401(k) plan sponsored by Cigna in which employee contributions are supplemented by the Company's matching contributions. The Company has no legal obligation for benefits under these plans. CHLIC allocates amounts to the Company based on salary ratios and member months. The Company's expense for such benefits is included within general administrative expenses.

Cigna froze its primary domestic defined benefit pension plans effective July 1, 2009. As a result, pension expense is no longer allocated to the Health plan.

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

- (1) The Company has 1,000 shares authorized, 100 shares issued and 100 shares outstanding, with a par value of \$1 per share as of June 30, 2018.
- (2) The Company has no preferred stock outstanding.
- (3) Without prior approval of its domiciliary commissioner, dividends to stockholders are limited by the laws of the Company's state of incorporation. The Department restricts dividend payments to the lesser of 10% of the prior year's surplus or prior year net investment income. Dividends may only be paid out of unassigned surplus, adjusted for a portion of cumulative unrealized capital gains. The Company has capacity to pay an ordinary dividend of \$2,154,435 in 2018, without prior approval.
- (4) The Company paid no dividend to the Parent as of June 30, 2018, and paid extra ordinary dividends of \$2,000,000 to the Parent during the year ended December 31, 2017.
- (5) The amount of ordinary dividends that may be paid out during any given period are subject to certain restrictions as specified by state statute.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- (7) No advances to surplus not repaid were outstanding.
- (8) The Company does not hold any stock, including stock of affiliated companies, for special purposes.
- (9) The Company had a change in balance of the special surplus funds of \$168,045 from the prior year due to the ACA Section 9010 Insurer Fee segregated surplus requirement.
- (10) The portion of unassigned funds (surplus) reduced by non-admitted asset values was \$1,914 and \$1,402 as of June 30, 2018 and December 31, 2017.
- (11) The Company has no outstanding surplus notes.
- (12) The Company has not restated due to a quasi-reorganization.
- (13) The Company has never been a party to a quasi-reorganization.

Note 14. Liabilities, Contingencies and Assessments

- A. The Company has no contingent commitments.
- B. The Company is not aware of any assessments, potential or accrued, that could have a material financial effect on the operations of the entity.
- C. The Company is not aware of any gain contingencies that should be disclosed in the statutory basis financial statements.
- D. The Company is not aware of any claims related to extra contractual obligations or bad faith losses stemming from lawsuits that should be disclosed in the statutory basis financial statements.
- E. The Company is not aware of any joint and several liabilities that should be disclosed in the statutory basis financial statements.

Litigation and Other Legal Matters

Cigna and its subsidiaries (including the Company, and collectively known as Cigna) are routinely involved in numerous claims, lawsuits, regulatory audits, investigations and other legal matters arising, for the most part, in the ordinary course of managing a global health services business. Except for the specific matters noted below, Cigna believes that the legal actions, regulatory matters, proceedings and investigations currently pending against it should not have a material adverse effect on Cigna's results of operations, financial condition or liquidity based upon our current knowledge and taking into consideration current accruals. Disputed tax matters arising from audits by the Internal Revenue Service ("IRS") or other state and foreign jurisdictions, including those resulting in litigation, are accounted for under the NAIC's accounting guidance for tax loss contingencies.

Pending litigation and legal or regulatory matters that Cigna has identified with a reasonably possible material loss are described below. When litigation and regulatory matters present loss contingencies that are both probable and estimable, Cigna accrues the estimated loss by a charge to shareholders' net income. The estimated loss is Cigna's best estimate of the probable loss at the time or an amount within a range of estimated losses reflecting the most likely outcome or the minimum amount of the range (if no amount is better than any other estimated amount in the range.) Cigna provides disclosure in the aggregate for material pending litigation and legal or regulatory matters, including accruals, range of loss, or a statement that such information cannot be estimated. Due to numerous uncertain factors presented in these cases, it is not possible to estimate an aggregate range of loss (if any) for these matters at this time. In light of the uncertainties involved in these matters, there is no assurance that their ultimate resolution will not exceed the amounts currently accrued. An adverse outcome in one or more of these matters could be material to Cigna's results of operations, financial condition or liquidity for any particular period.

Other Legal Matters

Litigation related to the Merger with Express Scripts. Following the announcement of Cigna's Merger Agreement with Express Scripts, putative class action complaints (collectively the "complaints") have been filed against Express Scripts and the Express Scripts board of directors. Certain of these complaints also include Cigna as defendant. The complaints allege that the registration statement filed in connection with the Merger (and certain amendments thereto) omitted material information in violation of Sections 14(a) and 20(a) of the Exchange Act, rendering the registration statement false and misleading. Among other remedies, the complaints seek to enjoin the Express Scripts special meeting and the closing of the Merger, as well as damages, costs and attorneys' fees. Cigna believes that the lawsuits are without merit.

Litigation related to the Merger with Anthem. In February 2017, Anthem filed a lawsuit in the Chancery Court against Cigna seeking (i) a temporary restraining order to enjoin Cigna from terminating and taking any action contrary to the terms of the merger agreement, (ii) specific performance compelling Cigna to comply with the merger agreement and (iii) damages.

On February 15, 2017, the Chancery Court granted Anthem's motion for a temporary restraining order and temporarily enjoined Cigna from terminating the merger agreement. In May 2017, the Chancery Court denied Anthem's motion for a preliminary injunction to enjoin Cigna from terminating the merger agreement but stayed its ruling pending Anthem's determination as to whether to seek an appeal. Anthem subsequently notified Cigna and the Chancery Court that it did not intend to appeal the Chancery Court's decision. As a result, the merger agreement was terminated.

The litigation between the parties remains pending. Trial is scheduled for 2019. Cigna believes in the merits of its claims and dispute Anthem's claims, and intends to vigorously defend and pursue their claims. The outcomes of lawsuits are inherently unpredictable, and Cigna may be unsuccessful in the ongoing litigation or any future claims or litigation.

Note 15. Leases

The Company is not a party to any lease agreements.

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

The Company does not hold any financial instruments with off-balance sheet risk or concentrations of credit risk.

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

The Company does not participate in any transfer of receivables, financial assets, or wash sales.

Note 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

The Company has no uninsured or partially insured plans.

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

- A. The Company has no Administrative Services Only (ASO) business.
- B. The Company has no Administrative Services Contract (ASC) business.
- C. The Company has no Medicare or Similarly Structured Cost Based Reimbursement Contract.

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

The Company has no direct premiums written or produced by managing agents or third-party administrators.

Note 20. Fair Value Measurements

A. Fair Value Measurements

Fair value is defined as the price at which an asset could be exchanged in an orderly transaction between market participants at the balance sheet date. The Company's financial assets have been classified based upon a hierarchy defined by SAP. The hierarchy gives the highest ranking to fair values determined using unadjusted quoted prices in active markets for identical assets and liabilities (Level 1) and the lowest ranking to fair values determined using methodologies and models with unobservable inputs (Level 3). An asset's or a liability's classification is based on the lowest level input that is significant to its measurement. For example, a financial asset or liability carried at fair value would be classified in Level 3 if unobservable inputs were significant to the instrument's fair value, even though the measurement may be derived using inputs that are both observable (Levels 1 and 2) and unobservable (Level 3).

- | | |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Level 1 | Inputs for instruments classified in Level 1 include unadjusted quoted prices for identical assets in active markets accessible at the measurement date. Active markets provide pricing data for trades occurring at least weekly and include exchanges and dealer markets. |
| Level 2 | Inputs for instruments classified in Level 2 include quoted prices for similar assets in active markets, quoted prices from those willing to trade in markets that are not active, or other inputs that are market observable or can be corroborated by market data for the term of the instrument. Such other inputs include market interest rates and volatilities, spreads and yield curves. An instrument is classified in Level 2 if the Company determines that unobservable inputs are insignificant. Level 2 assets primarily include corporate bonds valued using recent trades of similar securities or pricing models that discount future cash flows at estimated market interest rates. |
| Level 3 | Certain inputs for instruments classified in Level 3 are unobservable (supported by little or no market activity) and significant to their resulting fair value measurement. Unobservable inputs reflect the Company's best estimate of what hypothetical market participants would use to determine a transaction price for the asset or liability at the reporting date. |

Updates to SSAP 100 that became effective on January 1, 2018 allow the use of net asset value (NAV) as a practical expedient to fair value for investments in investment companies where there is no readily determinable fair value. There were no such investments owned by the Company for either period presented.

- 1. **Fair Value Measurements at Reporting Date** – None
- 2. **Fair Value Measurements in Level 3 of the Fair Value Hierarchy** – None
- 3. **Level 3 Transfers** – None
- 4. **Valuation Techniques and Inputs** – No financial instruments at fair value

B. Other Fair Value Disclosures

The Company provides additional fair value information in Notes 1 and 5.

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

C. Aggregate Fair Value of All Financial Instruments

The following tables provide the fair value, carrying value, and classification in the fair value hierarchy of the Company's financial instruments.

Financial Assets	Aggregate Fair Value	Admitted Assets	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Not Practicable (Carrying Value)	Net Asset Value (NAV) Included in Level 2
June 30, 2018							
Bonds	\$ 98,360	\$ 100,388	\$ 98,360	\$ -	\$ -	\$ -	-
Cash, Cash Equivalents, and Short-Term Investments	3,164,203	3,164,203	143,936	3,020,267	-	-	-
Total	\$ 3,262,563	\$ 3,264,591	\$ 242,296	\$ 3,020,267	\$ -	\$ -	-
December 31, 2017							
Bonds	\$ 100,047	\$ 100,445	\$ 100,047	\$ -	\$ -	\$ -	-
Cash, Cash Equivalents, and Short-Term Investments	1,940,132	1,940,132	40,331	1,899,801	-	-	-
Total	\$ 2,040,179	\$ 2,040,577	\$ 140,378	\$ 1,899,801	\$ -	\$ -	-

The following valuation methodologies and significant assumptions are used by the Company to determine fair value for each instrument.

Bonds

The Company estimates fair values using prices from third parties or internal pricing methods. Fair value estimates received from third-party pricing services are based on reported trade activity and quoted market prices when available, and other market information that a market participant may use to estimate fair value. Such other inputs include market interest rates and volatilities, spreads, and yield curves. The internal pricing methods are performed by the Company's investment professionals and generally involve using discounted cash flow analyses, incorporating current market inputs for similar financial instruments with comparable terms and credit quality, as well as other qualitative factors. In instances where there is little or no market activity for the same or similar instruments, the fair value is estimated using methods, models, and assumptions that the Company believes a hypothetical market participant would use to determine a current transaction price.

Cash, Cash Equivalents, and Short-Term Investments

Short-term investments, cash equivalents, and cash are carried at cost which approximates fair value. Short-term investments and cash equivalents are classified in Level 2, and cash is classified in Level 1.

D. Disclosures about Financial Instruments Not Practicable to Estimate Fair Value – None**Note 21. Other Items**

The Company has no extraordinary items, troubled debt restructurings, unusual items, business interruption insurance recoveries, state tax credits, subprime-mortgage-related risk exposure, retained asset accounts for beneficiaries, or insurance-linked securities contracts.

Note 22. Events Subsequent**Type I – Recognized Subsequent Events:**

Other than discussed below, the Company is not aware of any Type 1 or Type 2 event that occurred subsequent to the close of the books or accounts for these financial statements which would have had a material effect on the financial condition of the Company. In preparing these financials statements the Company has evaluated events that occurred between the balance sheet date and August 15, 2018.

Type II – Non recognized Subsequent Events:

The Company paid a dividend in the amount of \$800,000 on July 30, 2018 to its Parent. In preparing these financials, the Company has evaluated events that occurred between the balance sheet date and August 15, 2018.

Note 23. Reinsurance

The Company does not have reinsurance.

Note 24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. The Company has no estimated accrued retrospective premium adjustments.
- B. The Company has no recorded accrued retrospective premium.
- C. The Company has no net premiums written that are subject to retrospective rating features.
- D. The Company does not have Medical Loss Ratio Rebates Pursuant to the Public Health Services Act:
- E. Risk Sharing Provisions of the Affordable Care Act
 - (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk-sharing provisions? No
 - (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities, and Revenue for the Current Year is not applicable to the Company.
 - (3) Roll forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with reasons for adjustments to prior year balance are not applicable to the Company.

Note 25. Change in Incurred Claims and Claim Adjustment Expenses

Reserve for incurred claims and claims adjustment expenses attributable to insured events has increased by \$83,730 from \$301,434 at December 31, 2017 to \$385,164 at June 30, 2018 as a result of re-estimation of unpaid claims and claims adjustment expenses. This increase is generally the result of ongoing analysis of recent loss development trends. As of June 30, 2018 and December 31, 2017, there were no significant changes in the methodologies and assumptions used in calculating the liability for claims unpaid and unpaid claims adjustment expenses.

Note 26. Intercompany Pooling Arrangements

The Company had no intercompany pooling arrangements.

Note 27. Structured Settlements

The Company had no structured settlements.

Note 28. Health Care Receivables

The Company has no risk-sharing receivables.

Note 29. Participating Policies

The Company did not have any participating contracts.

Note 30. Premium Deficiency Reserves

The Company did not have any premium deficiency reserves.

Note 31. Anticipated Salvage and Subrogation

The Company does not anticipate any salvage or subrogation.

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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 [☒]
- 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 [☒]
- 2.2

If yes, date of change:
- 3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?

If yes, complete Schedule Y, Parts 1 and 1A.

Yes [☒] No [☐]
- 3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [☐] No [☒]
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [☒] No [☐]
- 3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

0000701221
- 4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [☐] No [☒]
- 4.2

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

1	2	3
Name of Entity	NAIC Company Code	State of Domicile
.....
5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), 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 [☒] N/A [☐]
- 6.1

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

12/31/2014
- 6.2

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

12/31/2014
- 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).

05/03/2016
- 6.4

By what department or departments?
Ohio Department of Insurance
- 6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [☐] No [☐] N/A [☒]
- 6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [☒] No [☐] N/A [☐]
- 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 [☒]
- 7.2

If yes, give full information:
- 8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [☐] No [☒]
- 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 [☒]
- 8.4

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

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

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(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.

Yes ☒ No ☐
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒
- 9.31

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

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☒ No ☐
- 10.2

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

\$.....4,289

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 ☒
- 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:

\$.....
13.

Amount of real estate and mortgages held in short-term investments:

\$.....
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes ☐ No ☒
- 14.2

If yes, please complete the following:
- | | 1 | 2 |
|-----------------------------------------------------------------------------------------------------|---------------------------------------------------|----------------------------------------------------|
| | Prior Year-End
Book/Adjusted
Carrying Value | Current Quarter
Book/Adjusted
Carrying Value |
| 14.21 Bonds | \$.....0 | \$..... |
| 14.22 Preferred Stock | \$.....0 | \$..... |
| 14.23 Common Stock | \$.....0 | \$..... |
| 14.24 Short-Term Investments | \$.....0 | \$..... |
| 14.25 Mortgage Loans on Real Estate | \$.....0 | \$..... |
| 14.26 All Other | \$.....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 | \$..... | \$..... |
- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes ☐ No ☒
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes ☐ No ☐

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

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

\$

0
- 16.2

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

\$

0
- 16.3

Total payable for securities lending reported on the liability page

\$

0

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 [] No [X]

- 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
JPMorgan Chase Bank, N.A.	4 Chase MetroTech Center Brooklyn, NY 11245

- 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)
The Bank of New York Mellon	One Wall Street, New York, NY 10286	This is a limited custodial arrangement that only allows for the holding/safekeeping of NAIC approved Mutual Funds or cash.

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

- 17.4 If yes, give full information relating thereto:

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

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

1 Name of Firm or Individual	2 Affiliation
Cigna Investments, Inc.	A

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

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

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105811	Cigna Investments, Inc.	Not Available	SEC	DS

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

- 18.2 If no, list exceptions:

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

Documentation necessary to permit a full credit analysis of the security does not exist.
- b.

Issuer or obligor is current on all contracted interest and principal payments.
- c.

The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5*GI securities? Yes [] No [X]

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.

Operating Percentages:

1.1 A&H loss percent

54.5 %

1.2 A&H cost containment percent

%

1.3 A&H expense percent excluding cost containment expenses

13.3 %
- 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

\$.
- 2.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 2.4

If yes, please provide the balance of the funds administered as of the reporting date

\$.
3.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [] No [X]
- 3.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [] No [X]

Showing All New Reinsurance Treaties - Current Year to Date

NONE

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories									
States, etc.	1	Direct Business Only							
	Active Status (a)	2	3	4	5	6	7	8	9
		Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1. Alabama	AL	N						0	
2. Alaska	AK	N						0	
3. Arizona	AZ	N						0	
4. Arkansas	AR	N						0	
5. California	CA	N						0	
6. Colorado	CO	N						0	
7. Connecticut	CT	N						0	
8. Delaware	DE	N						0	
9. District of Columbia	DC	N						0	
10. Florida	FL	N						0	
11. Georgia	GA	N						0	
12. Hawaii	HI	N						0	
13. Idaho	ID	N						0	
14. Illinois	IL	N						0	
15. Indiana	IN	N						0	
16. Iowa	IA	N						0	
17. Kansas	KS	N						0	
18. Kentucky	KY	N						0	
19. Louisiana	LA	N						0	
20. Maine	ME	N						0	
21. Maryland	MD	N						0	
22. Massachusetts	MA	N						0	
23. Michigan	MI	N						0	
24. Minnesota	MN	N						0	
25. Mississippi	MS	N						0	
26. Missouri	MO	N						0	
27. Montana	MT	N						0	
28. Nebraska	NE	N						0	
29. Nevada	NV	N						0	
30. New Hampshire	NH	N						0	
31. New Jersey	NJ	N						0	
32. New Mexico	NM	N						0	
33. New York	NY	N						0	
34. North Carolina	NC	N						0	
35. North Dakota	ND	N						0	
36. Ohio	OH	L	4,207,201					4,207,201	
37. Oklahoma	OK	N						0	
38. Oregon	OR	N						0	
39. Pennsylvania	PA	N						0	
40. Rhode Island	RI	N						0	
41. South Carolina	SC	N						0	
42. South Dakota	SD	N						0	
43. Tennessee	TN	N						0	
44. Texas	TX	N						0	
45. Utah	UT	N						0	
46. Vermont	VT	N						0	
47. Virginia	VA	N						0	
48. Washington	WA	N						0	
49. West Virginia	WV	N						0	
50. Wisconsin	WI	N						0	
51. Wyoming	WY	N						0	
52. American Samoa	AS	N						0	
53. Guam	GU	N						0	
54. Puerto Rico	PR	N						0	
55. U.S. Virgin Islands	VI	N						0	
56. Northern Mariana Islands	MP	N						0	
57. Canada	CAN	N						0	
58. Aggregate Other Aliens	OT	XXX	0	0	0	0	0	0	0
59. Subtotal	XXX	4,207,201	0	0	0	0	0	4,207,201	0
60. Reporting Entity Contributions for Employee Benefit Plans	XXX							0	
61. Totals (Direct Business)	XXX	4,207,201	0	0	0	0	0	4,207,201	0
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG.....1

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....0

N - None of the above - Not allowed to write business in the state.....56

R - Registered - Non-domiciled RRGs.....0

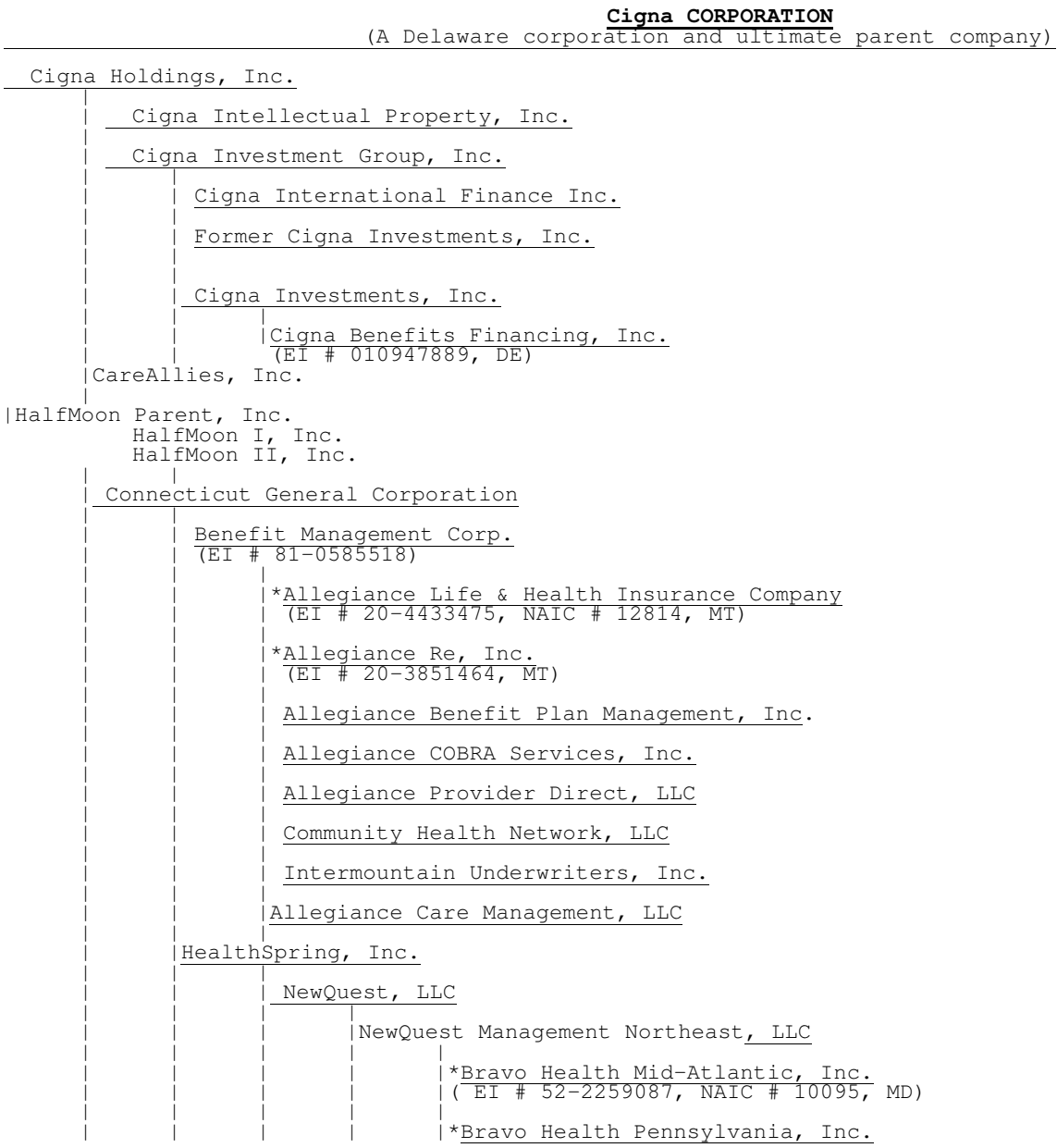
Q - Qualified - Qualified or accredited reinsurer.....0

All premiums written within the State of Ohio.

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

PART 1 -- ORGANIZATION CHART

The following is a listing identifying and indicating the interrelationships among all affiliated insurers (identified by an asterisk, and if such insurer is incorporated in the United States of America, by a Federal Employer Identification Number, NAIC Company Code and Jurisdiction of Incorporation) and all other affiliates, as of June 30, 2018:



STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

			(EI # 52-2363406, NAIC # 11254, PA)
			<u>*HealthSpring Life & Health Insurance Company</u> (EI # 20-8534298, NAIC # 12902, TX)
			<u>*HealthSpring of Florida, Inc.</u> (EI # 65-1129599, NAIC #11532, FL)
			<u>NewQuest Management of Illinois, LLC</u>
			<u>NewQuest Management of Florida, LLC</u>
			<u>HealthSpring Management of America, LLC</u>
			<u>NewQuest Management of West Virginia, LLC</u>
			<u>TexQuest, LLC</u>
			<u>HouQuest, LLC</u>
			<u>GulfQuest, LP</u>
			<u>NewQuest Management of Alabama, LLC</u>
			<u>HealthSpring USA, LLC</u>
			<u>Tennessee Quest, LLC</u>
			<u>HealthSpring Pharmacy Services, LLC</u>
			<u>HealthSpring Pharmacy of Tennessee, LLC</u>
			<u>Home Physicians Management, LLC</u>
			Alegis Care Services, LLC
			<u>*Cigna Arbor Life Insurance Company</u> (EI # 03-0452349, NAIC # 13733, CT)
			<u>Cigna Behavioral Health, Inc.</u>
			<u>Cigna Behavioral Health of California, Inc.</u> (EI# 94-3107309)
			<u>Cigna Behavioral Health of Texas, Inc.</u> (EI# 75-2751090)
			<u>MCC Independent Practice Association of New York, Inc.</u>
			<u>Cigna Dental Health, Inc.</u>
			<u>Cigna Dental Health of California, Inc.</u> (EI# 59-2600475, CA)
			<u>Cigna Dental Health of Colorado, Inc.</u> (EI# 59-2675861, NAIC # 11175, CO)
			<u>Cigna Dental Health of Delaware, Inc.</u> (EI# 59-2676987, NAIC # 95380, DE)
			<u>Cigna Dental Health of Florida, Inc.</u> (EI# 59-1611217, NAIC # 52021, FL)
			<u>Cigna Dental Health of Illinois, Inc.</u> (EI# 06-1351097, IL)

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

15.2

	<u>Cigna Dental Health of Kansas, Inc.</u> (EI# 59-2625350, NAIC # 52024, KS)
	<u>Cigna Dental Health of Kentucky, Inc.</u> (EI# 59-2619589, NAIC # 52108, KY)
	<u>Cigna Dental Health of Missouri, Inc.</u> (EI#06-1582068, NAIC # 11160, MO)
	<u>Cigna Dental Health of New Jersey, Inc.</u> (EI# 59-2308062, NAIC # 11167, NJ)
	<u>Cigna Dental Health of North Carolina, Inc.</u> (EI# 56-1803464 , NAIC # 95179, NC)
	<u>Cigna Dental Health of Ohio, Inc.</u> (EI# 59-2579774, NAIC # 47805, OH)
	<u>Cigna Dental Health of Pennsylvania, Inc.</u> (EI# 52-1220578, NAIC # 47041, PA)
	<u>Cigna Dental Health of Texas, Inc.</u> (EI# 59-2676977, NAIC # 95037, TX)
	<u>Cigna Dental Health of Virginia, Inc.</u> (EI# 52-2188914, NAIC # 52617, VA)
	<u>Cigna Dental Health Plan of Arizona, Inc.</u> (EI# 86-0807222, NAIC # 47013, AZ)
	<u>Cigna Dental Health of Maryland, Inc.</u> (EI#20-2844020, NAIC #48119, MD)
	<u>Cigna Health Corporation</u>
	<u>Healthsource, Inc.</u>
	<u>Cigna HealthCare of Arizona, Inc.</u> (EI# 86-0334392, NAIC#95125, AZ)
	<u>Cigna HealthCare of California, Inc.</u> (EI# 95-3310115, CA)
	<u>Cigna HealthCare of Colorado, Inc.</u> (EI# 84-1004500, NAIC # 95604, CO)
	<u>Cigna HealthCare of Connecticut, Inc.</u> (EI# 06-1141174, NAIC # 95660, CT)
	<u>Cigna HealthCare of Florida, Inc.</u> (EI# 59-2089259, NAIC # 95136, FL)
	<u>Cigna HealthCare of Illinois, Inc.</u> (EI# 36-3385638, NAIC # 95602, IL)
	<u>Cigna HealthCare of Maine, Inc.</u> (EI# 01-0418220, NAIC # 95447, ME)
	<u>Cigna HealthCare of Massachusetts, Inc.</u> (EI# 02-0402111, NAIC # 95220, MA)
	<u>Cigna HealthCare Mid-Atlantic, Inc.</u> (EI# 52-1404350, NAIC # 95599, MD)

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

	<u>Cigna HealthCare of New Hampshire, Inc.</u> (EI# 02-0387749, NAIC # 95493, NH)
	<u>Cigna HealthCare of New Jersey, Inc.</u> (EI# 22-2720890, NAIC # 95500, NJ)
	<u>Cigna HealthCare of Pennsylvania, Inc.</u> (EI# 23-2301807, NAIC # 95121, PA)
	<u>Cigna HealthCare of St. Louis, Inc.</u> (EI# 36-3359925, NAIC # 95635, MO)
	<u>Cigna HealthCare of Utah, Inc.</u> (EI# 62-1230908, NAIC # 95518, UT)
	<u>Cigna HealthCare of Georgia, Inc.</u> (EI# 58-1641057, NAIC # 96229, GA)
	<u>Cigna HealthCare of Texas, Inc.</u> (EI# 74-2767437, NAIC # 95383, TX)
	<u>Cigna HealthCare of Indiana, Inc.</u> (EI# 35-1679172, NAIC # 95525, IN)
	<u>Cigna HealthCare of Tennessee, Inc.</u> (EI# 62-1218053, NAIC # 95606, TN)
	<u>Cigna HealthCare of North Carolina, Inc.</u> (EI# 56-1479515, NAIC# 95132, NC)
	<u>Cigna HealthCare of South Carolina, Inc.</u> (EI# 06-1185590, NAIC # 95708, SC)
	<u>*Temple Insurance Company Limited</u>
	<u>Arizona Health Plan, Inc.</u>
	<u>Healthsource Properties, Inc.</u>
	<u>Managed Care Consultants, Inc.</u>
	<u>Cigna Benefit Technology Solutions, Inc.</u>
	<u>Sagamore Health Network, Inc.</u>
	<u>Cigna Healthcare Holdings, Inc.</u> (EI# 84-0985843)
	<u>Great-West Healthcare of Illinois, Inc.</u> (EI# 93-1174749, NAIC 95388, IL)
	<u>Cigna Healthcare, Inc.</u>
	<u>*Cigna Life Insurance Company of New York</u> (EI# 13-2556568, NAIC # 64548, NY)
	<u>*Connecticut General Life Insurance Company</u> (EI# 06-0303370, NAIC # 62308, CT)
	<u>CG Mystic Center LLC</u>
	<u>CG Mystic Land LLC</u>

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

<u>CG Skyline, LLC</u>
<u>Careallies, LLC</u>
<u>Cigna Onsite Health, LLC</u>
<u>Gillette Ridge Community Council, Inc.</u>
<u>Gillette Ridge Golf LLC</u>
<u>Hazard Center Investment Company LLC</u>
<u>Tel-Drug of Pennsylvania, LLC</u>
GRG Acquisitions LLC
<u>Cigna Affiliates Realty Investment Group, LLC</u> (EI# 27-5402196, DE)
<u>CR Longwood Investors, LP</u>
<u>ND/CR Longwood LLC</u>
<u>ARE/ND/CR Longwood LLC</u>
Secon Properties, LP
Transwestern Federal Holdings, L.L.C.
<u>Transwestern Federal, L.L.C.</u>
Market Street Residential Holdings LLC
<u>Arborpoint at Market Street LLC</u>
<u>Diamondview Tower CM-CG LLC</u>
<u>CR Washington Street Investors LP</u>
<u>Dulles Town Center Mall, LLC</u>
<u>ND/CR Unicorn LLC</u>
<u>AMD Apartments Limited Partnership</u>
<u>PUR Arbors Apartments Venture LLC</u>
<u>CG Seventh Street, LLC</u>
<u>Ideal Properties II LLC</u>
<u>Mallory Square Partners I, LLC</u>
<u>Houston Briar Forest Apartments Limited Partnership</u>
<u>Newtown Partners II, LP</u>
<u>Newtown Square GP LLC</u>

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

			<u>SB-SNH LLC</u>
			<u>680 Investors LLC</u>
			<u>685 New Hampshire LLC</u>
			<u>CGGL 18301 LLC</u>
			<u>222 Main Street Caring GP LLC</u>
			<u>222 Main Street Investors LP</u>
			<u>Notch 8 Residential, L.L.C.</u>
			<u>UVL, LLC</u>
			<u>3601 North Fairfax Drive Associates, LLC</u>
			CI Perris 151, LLC
			Lakehills CM - CG LLC
			Affiliated Hotel Subsidiary LLC
			CGGL 6280 LLC
			Berewick Apartments LLC
			CIG-LEI Ygnacio Associates LLC
			CGGL Orange Collection LLC
			CGGL Chapman LLC
			CGGL City Parkway LLC
			Heights at Bear Creek Venture LLC
			SOMA Apartments Venture LLC
			Arbor Heights Venture LLC
			CG/Wood ALTA 601, LLC
			CPI-CII 9171 Wilshire JV LLC
			9171 Wilshire CPI-CII LLC
			<u>CORAC LLC</u>
			<u>Henry on the Park Associates, LLC</u>
			<u>(EI 27-3582688, DE)</u>
			<u>*Cigna Health and Life Insurance Company</u>
			<u>(EI # 59-1031071, NAIC # 67369, CT)</u>
			<u>CarePlexus, LLC</u>
			<u>(EI# 45-2681649; DE)</u>
			<u>Cigna Corporate Services, LLC</u>
			<u>(EI 27-3396038, DE)</u>

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

	<u>Cigna Insurance Agency, LLC</u> (EI # 27-1903785, CT)
	<u>Ceres Sales of Ohio, LLC</u> (EI # 34-1970892, OH)
	<u>Cigna National Health Insurance Company</u> (EI # 34-0970995, NAIC # 61727, OH)
	<u>Provident American Life & Health Insurance Company</u> (EI # 23-1335885, NAIC # 67903, OH)
	<u>United Benefit Life Insurance Company</u> (EI # 75-2305400, NAIC # 65269, OH)
	<u>Loyal American Life Insurance Company</u> (EI # 63-0343428, NAIC # 65722, OH)
	<u>American Retirement Life Insurance Company</u> (EI # 59-2760189, NAIC # 88366, OH)
	<u>QualCare Alliance Networks, Inc.</u>
	<u>QualCare, Inc.</u>
	<u>Scibal Associates, Inc.</u>
	<u>QualCare Captive Insurance Company Inc., PCC</u>
	<u>QualCare Management Resources Limited Liability Company</u>
	<u>Health-Lynx, LLC</u>
	<u>Sterling Life Insurance Company</u> (EI # 13-1867829, NAIC # 77399, IL)
	<u>Olympic Health Management Systems, Inc.</u>
	<u>Olympic Health Management Services, Inc.</u>
	<u>WorldDoc, Inc.</u>
	<u>Omada Health, Inc.</u>
	<u>Cigna Ventures, LLC</u>
	<u>Cigna Health Management, Inc.</u> (EI# 23-1728483, DE)
	<u>Kronos Optimal Health Company</u> (20-8064696, AZ)
	<u>*Life Insurance Company of North America</u> (EI# 23-1503749, NAIC # 65498, PA)
	<u>*Cigna & CMB Life Insurance Company Limited</u> (remaining interest owned by an unaffiliated party)
	<u>Cigna & CMB Health Services Company, Ltd.</u>
	<u>Cigna Direct Marketing Company, Inc.</u>
	<u>Tel-Drug, Inc.</u>
	<u>Cigna Global Wellbeing Holdings Limited</u>
	<u>Cigna Global Wellbeing Solutions Limited</u>
	<u>Vielife Services, Inc.</u>
	<u>CG Individual Tax Benefit Payments, Inc.</u>

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

					<u>CG Life Pension Benefits Payments, Inc.</u>
					<u>CG LINA Pension Benefits Payments, Inc.</u>
					<u>Cigna Federal Benefits, Inc.</u>
					<u>Cigna Healthcare Benefits, Inc.</u>
					<u>Cigna Integratedcare, Inc.</u>
					<u>Cigna Managed Care Benefits Company</u>
					<u>Cigna Re Corporation</u>
					<u>Blodget & Hazard Limited</u>
					<u>Cigna Resource Manager, Inc.</u>
					<u>Connecticut General Benefit Payments, Inc.</u>
					<u>Healthsource Benefits, Inc.</u>
					<u>IHN, Inc.</u>
					<u>LINA Benefit Payments, Inc.</u>
					<u>Mediversal, Inc.</u>
					<u>Universal Claims Administration</u>
					<u>Brighter, Inc</u>
					<u>Patient Provider Alliance, Inc</u>
					<u>Cigna Global Holdings, Inc.</u>
					<u>Cigna International Corporation, Inc.</u>
					<u>Cigna International Services, Inc.</u>
					<u>Cigna International Marketing (Thailand) Limited</u>
					<u>CGO Participatos LTDA</u>
					<u>YCFM Servicos LTDA</u>
					<u>*Cigna Global Reinsurance Company, Ltd.</u>
					<u>Cigna Holdings Overseas, Inc.</u>
					<u>Cigna Bellevue Alpha LLC</u>
					<u>Cigna Linden Holdings, Inc.</u>
					<u>Cigna Laurel Holdings, Ltd.</u>
					<u>Cigna Palmetto Holdings, Ltd.</u>
					<u>Cigna Apac Holdings Limited</u>
					<u>Cigna Alder Holdings, LLC</u>
					<u>+Cigna Walnut Holdings, Ltd.</u>

15.8

[illegible]

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0901	Cigna Group		06-1059331	1591167	0000701221	US	Cigna Corporation	DE	UIP	Cigna Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1072796				Cigna Holdings, Inc.	DE	UIP	Cigna Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		82-4991898				HalfMoon Parent, Inc.	DE	NIA	Cigna Corporation	Ownership	100.000	Cigna Corporation		
.0901	Cigna Group		82-5339235				HalfMoon I, Inc.	DE	NIA	HalfMoon Parent, Inc.	Ownership	100.000	Cigna Corporation		
.0901	Cigna Group						HalfMoon II, Inc.	DE	NIA	HalfMoon Parent, Inc.	Ownership	100.000	Cigna Corporation		
.0901	Cigna Group		51-0402128				Cigna Intellectual Property, Inc.	DE	NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1095823				Cigna Investment Group, Inc.	DE	NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		52-0291385				Cigna International Finance, Inc.	DE	NIA	Cigna Investment Group, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-1914061				Former Cigna Investments, Inc	DE	NIA	Cigna Investment Group, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-0861092				Cigna Investments, Inc.	DE	NIA	Cigna Investment Group, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		01-0947889		0001489070		Cigna Benefits Financing, Inc.	DE	NIA	Cigna Investments, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		81-2760646				CareAllies, Inc.	DE	NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-0840391				Connecticut General Corporation	CT	UIP	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		81-0585518				Benefit Management Corp.	MT	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	12814	20-4433475				Allegiance Life & Health Insurance Company	MT	IA	Benefit Management Corp.	Ownership	94.000	Cigna Corporation	.N	
.0901	Cigna Group		20-3851464				Allegiance Re, Inc.	MT	IA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		81-0400550				Allegiance Benefit Plan Management, Inc.	MT	NIA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		71-0916514				Allegiance COBRA Services, Inc.	MT	NIA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Allegiance Provider Direct, LLC	MT	NIA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Community Health Network, LLC	MT	NIA	Benefit Management Corp.	Ownership	50.000	Cigna Corporation	.N	
.0901	Cigna Group		81-0425785				Intermountain Underwriters, Inc.	MT	NIA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Allegiance Care Management, LLC	MT	NIA	Benefit Management Corp.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-1821898		0001339553		HealthSpring, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		76-0628370				NewQuest, LLC	TX	NIA	HealthSpring, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		52-1929677				NewQuest Management Northeast, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	10095	52-2259087				Bravo Health Mid-Atlantic, Inc.	MD	IA	NewQuest Management Northeast, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	11254	52-2363406				Bravo Health Pennsylvania, Inc.	PA	IA	NewQuest Management Northeast, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	12902	20-8534298				HealthSpring Life & Health Insurance Company, Inc.	TX	IA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	11532	65-1129599				HealthSpring of Florida, Inc.	FL	IA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		77-0632665				NewQuest Management of Illinois, LLC	IL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-4954206				NewQuest Management of Florida, LLC	FL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-8647386				HealthSpring Management of America, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		45-0633893				NewQuest Management of West Virginia, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		75-3108527				TexQuest, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		75-3108521				HouQuest, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		76-0657035				GulfQuest, LP	TX	NIA	HouQuest, LLC	Ownership	99.000	Cigna Corporation	.N	
.0901	Cigna Group		33-1033586				NewQuest Management of Alabama, LLC	AL	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		72-1559530				HealthSpring USA, LLC	TN	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-5524622				Tennessee Quest, LLC	TN	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		26-2353476				HealthSpring Pharmacy Services, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		26-2353772				HealthSpring Pharmacy of Tennessee, LLC	DE	NIA	HealthSpring Pharmacy Services, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-4266628				Home Physicians Management, LLC	DE	NIA	NewQuest, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		35-2562415				Alegis Care Services, LLC	DE	NIA	Home Physicians Management, LLC	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	13733	03-0452349				Cigna Arbor Life Insurance Company	CT	IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		41-1648670				Cigna Behavioral Health, Inc.	MN	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		94-3107309				Cigna Behavioral Health of California, Inc.	CA	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		75-2751090				Cigna Behavioral Health of Texas, Inc.	TX	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group						MCC Independent Practice Association of New York, Inc.	NY	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1346406				York, Inc.	NY	NIA	Cigna Behavioral Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		59-2308055				Cigna Dental Health, Inc.	FL	UDP	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		59-2600475				Cigna Dental Health Of California, Inc.	CA	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	11175	59-2675861				Cigna Dental Health Of Colorado, Inc.	CO	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	95380	59-2676987				Cigna Dental Health Of Delaware, Inc.	DE	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	.N	

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0901	Cigna Group	52021	59-1611217				Cigna Dental Health Of Florida, Inc.	FL	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		06-1351097				Cigna Dental Health of Illinois, Inc.	IL	NIA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	52024	59-2625350				Cigna Dental Health Of Kansas, Inc.	KS	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	52108	59-2619589				Cigna Dental Health Of Kentucky, Inc.	KY	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	11160	06-1582068				Cigna Dental Health Of Missouri, Inc.	MO	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	11167	59-2308062				Cigna Dental Health Of New Jersey, Inc.	NJ	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95179	56-1803464				Cigna Dental Health Of North Carolina, Inc.	NC	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	47805	59-2579774				Cigna Dental Health Of Ohio, Inc.	OH		Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	47041	52-1220578				Cigna Dental Health Of Pennsylvania, Inc.	PA	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95037	59-2676977				Cigna Dental Health Of Texas, Inc.	TX	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	52617	52-2188914				Cigna Dental Health Of Virginia, Inc.	VA	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	47013	86-0807222				Cigna Dental Health Plan Of Arizona, Inc.	AZ	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	48119	59-2740468				Cigna Dental Health Of Maryland, Inc.	MD	IA	Cigna Dental Health, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		62-1312478				Cigna Health Corporation	DE	NIA	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		02-0387748		0000855587		Healthsource, Inc.	DE	NIA	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95125	86-0334392				Cigna HealthCare of Arizona, Inc.	AZ	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		95-3310115				Cigna HealthCare of California, Inc.	CA	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95604	84-1004500				Cigna HealthCare of Colorado, Inc.	CO	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95680	06-1141174				Cigna HealthCare of Connecticut, Inc.	CT	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95136	59-2089259				Cigna HealthCare of Florida, Inc.	FL	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95602	36-3385638				Cigna HealthCare of Illinois, Inc.	IL	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		01-0418220				Cigna HealthCare of Maine, Inc.	ME	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		02-0402111				Cigna HealthCare of Massachusetts, Inc.	MA	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		52-1404350				Cigna HealthCare Mid-Atlantic, Inc.	MD	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95493	02-0387749				Cigna HealthCare of New Hampshire, Inc.	NH	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95500	22-2720890				Cigna HealthCare of New Jersey, Inc.	NJ	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		23-2301807				Cigna HealthCare of Pennsylvania, Inc.	PA	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95635	36-3359925				Cigna HealthCare of St. Louis, Inc.	MO	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		62-1230908				Cigna HealthCare of Utah, Inc.	UT	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	96229	58-1641057				Cigna HealthCare of Georgia, Inc.	GA	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95383	74-2767437				Cigna HealthCare of Texas, Inc.	TX	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95525	35-1679172				Cigna HealthCare of Indiana, Inc.	IN	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95606	62-1218053				Cigna HealthCare of Tennessee, Inc.	TN	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95132	56-1479515				Cigna HealthCare of North Carolina, Inc.	NC	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	95708	06-1185590				Cigna HealthCare of South Carolina, Inc.	SC	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		00-0000000				Temple Insurance Company Limited	BMU	IA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		86-3581583				Arizona Health Plan, Inc.	AZ	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		02-0467679				Healthsource Properties, Inc.	NH	NIA	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		00-0000000				Managed Care Consultants, Inc.	NV	NIA	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		02-0515554				Cigna Benefit Technology Solutions, Inc.	DE	NIA	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		35-1641636				Sagamore Health Network, Inc.	IN	NIA	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		84-0985843				Cigna Healthcare Holdings, Inc.	CO	NIA	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		93-1174749				Great-West Healthcare of Illinois, Inc.	IL	NIA	Cigna Healthcare Holdings, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		02-0495422				Cigna Healthcare, Inc.	VT	NIA	Cigna Healthcare Holdings, Inc.	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	64548	13-2556568	3281743			Cigna Life Insurance Company of New York	NY	IA	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group	62308	06-0303370		0000023419		Connecticut General Life Insurance Company	CT	IA	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		45-3481107				CG Mystic Center LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		45-3481241				CG Mystic Land LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		20-3870049				CG Skyline, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
.0901	Cigna Group		26-0180898				CareAllies, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percen- tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi- ciliary Loca- tion	Relation- ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)					
0901	Cigna Group		32-0222252				Cigna Onsite Health, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	Y	
0901	Cigna Group		00-0000000				Gillette Ridge Community Council, Inc.	CT	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		20-3700105				Gillette Ridge Golf, LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		52-2149519				Hazard Center Investment Company LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		23-3074013				TEL-DRUG of Pennsylvania, L.L.C.	PA	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	Y	
0901	Cigna Group		00-0000000				GRG Acquisitions LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		27-5402196				Cigna Affiliates Realty Investment Group LLC	DE	NIA	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				CR Longwood Investors L.P.	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	27.030	Charles River Realty Longwood, LLC (non-affiliate)	N	
0901	Cigna Group		00-0000000				ND/CR Longwood LLC	DE	NIA	CR Longwood Investors L.P.	Ownership	95.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				ARE/ND/CR Longwood LLC	DE	NIA	ND / CR Longwood LLC	Ownership	35.000	ARE-MA Region No. 41, LLC (non-affiliate)	N	
0901	Cigna Group		00-0000000				Secon Properties, LP	CA	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	50.000	South Coast Plaza Associates, LLC (non-affiliate)	N	
0901	Cigna Group		00-0000000				Transwestern Federal Holdings, L.L.C.	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	7.616	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Transwestern Federal, L.L.C.	DE	NIA	Transwestern Federal Holdings, L.L.C.	Ownership	7.616	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Market Street Residential Holdings LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Arborpoint at Market Street LLC	DE	NIA	Market Street Residential Holdings LLC	Ownership	100.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Diamondview Tower CM-CG LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	90.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				CR Washington Street Investors LP	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	33.820	Charles River Washington Street LLC (non-affiliate)	N	
0901	Cigna Group		00-0000000				Dulles Town Center Mall, LLC	VA	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	50.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				ND/CR Unicorn LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	70.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				AMD Apartments Limited Partnership	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				PUR Arbors Apartments Venture LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	87.500	Cigna Corporation	N	
0901	Cigna Group		00-0000000				CG Seventh Street LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	87.500	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Ideal Properties II LLC	CA	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	N	
0901	Cigna Group		80-0908244				Mallory Square Partners I, LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Houston Briar Forest Apartments Limited Partnership	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	80.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Newtown Partners II, LP	MD	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	71.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				Newtown Square GP LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	50.000	Cigna Corporation and Newtown Square	N	
0901	Cigna Group		00-0000000				SB-SNH LLC	DE	NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	85.000	Cigna Corporation	N	
0901	Cigna Group		00-0000000				680 Investors LLC	CA	NIA	SB-SNH LLC	Ownership	85.000	Cigna Corporation	N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Percen- tage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi- ciliary Loca- tion	Relation- ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)					
..0901	Cigna Group		00-0000000				685 New Hampshire LLC	..CA	..NIA	SB-SNH LLC	Ownership.....	85.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				CGGL 18301 LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				222 Main Street CARING GP LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				222 Main Street Investors LP	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Notch 8 Residential, L.L.C.	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	85.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				UVL, LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	71.400	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				3601 North Fairfax Drive Associates, LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		47-4235739				CI Perris 151, LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	75.000	Cigna Corporation	..N	
..0901	Cigna Group		47-4375626				Lakehills CM-CG LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		30-0939067				Affiliated Hotel Subsidiary	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		81-2481274				CGGL 6280 LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		81-2650133				Berewick Apartments LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	85.000	Cigna Corporation	..N	
..0901	Cigna Group		81-3389374				CIG-LEI Ygnacio Associates LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		61-1797835				CGGL Orange Collection LLC	..DE	..NIA	LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		81-3281922				CGGL Chapman LLC	..DE	..NIA	CGGL Orange Collection LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		81-3313562				CGGL City Parkway LLC	..DE	..NIA	CGGL Orange Collection LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		81-4139432				Heights at Bear Creek Venture LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		82-1732483				SOMA Apartments Venture LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		82-3315524				Arbor Heights Venture LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		82-1280312				CG/Wood ALTA 601, LLC	..DE	..NIA	LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		82-4936006				CPI-CII 9171 Wilshire JV LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		82-4794800				9171 Wilshire CPI-CII LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	..N	
..0901	Cigna Group		27-0268530				CORAC, LLC	..DE	..NIA	Connecticut General Life Insurance Company	Ownership.....	50.000	Cigna Corporation	..N	
..0901	Cigna Group		27-3582688				Henry on the Park Associates, LLC	..DE	..NIA	Corac, LLC	Ownership.....	80.000	Cigna Corporation	..N	
..0901	Cigna Group	67369	59-1031071				Cigna Health and Life Insurance Company	..CT	..NIA	Connecticut General Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		45-2681649				CarePlexus, LLC	..DE	..NIA	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		27-3396038				Cigna Corporate Services, LLC	..DE	..NIA	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		27-1903785				Cigna Insurance Agency, LLC	..CT	..NIA	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group		34-1970892				Ceres Sales of Ohio, LLC	..OH	..NIA	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..Y	
..0901	Cigna Group	61727	34-0970995				Cigna National Health Insurance Company	..OH	..IA	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	
..0901	Cigna Group	67903	23-1335885				Provident American Life & Health Insurance Company	..OH	..IA	Cigna National Health Insurance Company	Ownership.....	100.000	Cigna Corporation	..N	

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0901	Cigna Group	65269	75-2305400				United Benefit Life Insurance Company	.OH	.IA	Provident American Life and Health Insurance Company	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	65722	63-0343428				Loyal American Life Insurance Company	.OH	.IA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	88366	59-2760189				American Retirement Life Insurance Company	.OH	.IA	Loyal American Life Insurance Company	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-3744987				QualCare Alliance Networks, Inc.	.NJ	.NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	.Y	
.0901	Cigna Group		22-3129563				QualCare, Inc.	.NJ	.NIA	QualCare Alliance Networks, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		22-2483867				Scibal Associates, Inc.	.NJ	.NIA	QualCare Alliance Networks, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		46-1634843				QualCare Captive Insurance Company Inc., PCC	.NJ	.NIA	QualCare Alliance Networks, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		46-1801639				QualCare Management Resources Limited Liability Company	.NJ	.NIA	QualCare Alliance Networks, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		46-2086778				Health-Lynx, LLC		.NIA	QualCare Alliance Networks, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	77399	13-1867829		0001259055		Sterling Life Insurance Company	.IL	.IA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		91-1500758				Olympic Health Management Systems, Inc.	.IA	.NIA	Sterling Life Insurance Company	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		91-1599329				Olympic Health Management Services, Inc.	.IA	.NIA	Olympic Health Management Systems, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		88-0455414		0001462078		WorldDoc, Inc.	.NV	.NIA	Cigna Health and Life Insurance Company	Ownership	20.000	Cigna Corporation	.N	
.0901	Cigna Group		45-2355015		0001611115		Omada Health, Inc.	.DE	.NIA	Cigna Health and Life Insurance Company	Ownership	7.693	Cigna Corporation	.N	
.0901	Cigna Group						Cigna Ventures, LLC	.DE	.NIA	Cigna Health and Life Insurance Company	Ownership	100.000	Cigna Corporation		
.0901	Cigna Group		23-1728483				Cigna Health Management, Inc	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		20-8064696				Kronos Optimal Health Company	.AZ	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group	65498	23-1503749		0000059361		Life Insurance Company of North America	.PA	.IA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna & CMB Life Insurance Company Limited	.CHN	.IA	Life Insurance Company of North America	Ownership	50.000	Cigna Corporation	.Y	
.0901	Cigna Group		00-0000000				Cigna & CMB Life Insurance Company Limited			Cigna & CMB Life Insurance Company Limited					
.0901	Cigna Group		00-0000000				Cigna & CMB Health Services Company, Ltd.	.CHN	.NIA		Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		58-1136865				Cigna Direct Marketing Company, Inc.	.DE	.NIA	Life Insurance Company of North America	Ownership	100.000	Cigna Corporation	.Y	
.0901	Cigna Group		46-0427127				Tel-Drug, Inc.	.SD	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Global Wellbeing Holdings Limited	.GBR	.NIA	Connecticut General Corporation	Ownership	70.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Global Wellbeing Solutions Limited	.GBR	.NIA	Cigna Global Wellbeing Holdings Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		98-0463704				Vielife Services, Inc.	.DE	.NIA	Cigna Global Wellbeing Holdings Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1332403				CG Individual Tax Benefits Payments, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1332405				CG Life Pension Benefits Payments, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1332401				CG LINA Pension Benefits Payments, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		62-1724116				Cigna Federal Benefits, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-2741293				Cigna Healthcare Benefits, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-2924152				Cigna Integratedcare, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-2741294				Cigna Managed Care Benefits Company	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1071502				Cigna RE Corporation	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1522976				Blodgett & Hazard Limited		.NIA	Cigna Re Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1567902				Cigna Resource Manager, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1252419				Connecticut General Benefit Payments, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1533555				Healthsource Benefits, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		35-2041388				IHN, Inc.	.IN	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		06-1252418				LINA Benefit Payments, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		88-0334401				Mediversal, Inc.	.NV	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		88-0344624				Universal Claims Administration	.MT	.NIA	Mediversal, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		27-1713977				Brighter, Inc.	.DE	.NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		80-0818758				Patienter Provider Alliance, Inc.	.DE	.NIA	Brighter, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		51-0389196				Cigna Global Holdings, Inc.	.DE	.NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		51-0111677				Cigna International Corporation, Inc.	.DE	.NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-2610178				Cigna International Services, Inc.	.DE	.NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group						Cigna International Marketing (Thailand) Limited	.THA	.NIA	Cigna Global Holdings, Inc.	Ownership	99.900	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				CGO PARTICIPATOS LTDA.	.BRA	.NIA	Cigna Global Holdings, Inc.	Ownership	99.780	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				YCFM Servicios LTDA	.BRA	.NIA	Cigna Global Holdings, Inc.	Ownership	56.020	Cigna Corporation	.N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
.0901	Cigna Group		AA-3190987				Cigna Global Reinsurance Company, Ltd.	.BMJ	.IA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		23-3009279				Cigna Holdings Overseas, Inc.	.DE	.NIA	Cigna Global Reinsurance Company, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Bellevue Alpha LLC	.DE	.NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		46-4110289				Cigna Linden Holdings, Inc.	.DE	.NIA	Cigna Holdings Overseas, Inc.	Ownership	80.000	Cigna Corporation	.N	
.0901	Cigna Group		98-1146864				Cigna Laurel Holdings, Ltd.	.BMJ	.NIA	Cigna Linden Holdings, Inc.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Palmetto Holdings, Ltd.	.BMJ	.NIA	Cigna Laurel Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Apac Holdings Limited	.BMJ	.NIA	Cigna Palmetto Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Alder Holdings, LLC	.DE	.NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Walnut Holdings, Ltd.	.GBR	.NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		98-1137759				Cigna Chestnut Holdings, Ltd.	.GBR	.NIA	Cigna Walnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Nederland Gamma B.V.	.NLD	.NIA	Cigna Walnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Finans Emeklilik Ve Hayat A.S.	.TUR	.NIA	Cigna Nederland Gamma, B.V.	Ownership	51.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				LINA Life Insurance Company of Korea		.IA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna International Services Australia Pty Ltd	.AUS	.NIA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Hong Kong Holdings Company Limited	.HKG	.NIA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Data Services (Shanghai) Company Limited	.CHN	.NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna HLA Technology Services Limited	.HKG	.NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Worldwide General Insurance Company Limited	.HKG	.IA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Worldwide Life Insurance Company Limited	.HKG	.IA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna International Health Services Sdn. Bhd.	.MYS	.NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Life Insurance New Zealand Limited	.NZL	.IA	Bhd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		11-9599164				Grown Ups New Zealand Limited	.NZL	.NIA	Cigna Life Insurance New Zealand Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		AA-1560515				Cigna Life Insurance Company of Canada	.CAN	.IA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Korea Chusik Heosa (English Translation: Cigna Korea Company Limited)		.NIA	Cigna Chestnut Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				LINA Financial Service		.NIA	Cigna Korea Chusik Heosa	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				RHP (Thailand) Limited	.THA	.NIA	Cigna Apac Holdings Limited	Ownership	49.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Brokerage & Marketing (Thailand) Limited	.THA	.NIA	RHP Thailand Limited	Ownership	75.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				KDM (Thailand) Limited	.THA	.NIA	RHP Thailand Limited	Ownership	99.900	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Insurance Public Company Limited	.THA	.IA	KDM Thailand Limited	Ownership	75.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Taiwan Life Assurance Company Limited	.TWN	.IA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		98-1154657				Cigna Myrtle Holdings, Ltd.	.MLT	.NIA	Cigna Apac Holdings Limited	Ownership	50.540	Cigna Corporation	.N	
.0901	Cigna Group		98-1155943				Cigna Elmwood Holdings, SPRL	.BEL	.NIA	Cigna Myrtle Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		98-1181787				Cigna Beechwood Holdings	.BEL	.NIA	Cigna Elmwood Holdings, SPRL	Ownership	51.000	Cigna Corporation	.N	
.0901	Cigna Group		AA-1240009				Cigna Life Insurance Company of Europe S.A.-N.V.	.BEL	.IA	Cigna Beechwood Holdings	Ownership	99.993	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Europe Insurance Company S.A.-N.V.	.BEL	.IA	Cigna Beechwood Holdings	Ownership	99.999	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna European Services (UK) Limited	.GBR	.NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				CIGNA 2000 UK Pension LTD		.NIA	Cigna European Services (UK) Limited	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Oak Holdings, Ltd.	.GBR	.NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Willow Holdings, Ltd.	.GBR	.NIA	Cigna Oak Holdings, Ltd.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				FirstAssist Administration Limited	.GBR	.NIA	Cigna Willow Holdings, LTD.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Legal Protection U.K. Ltd.	.GBR	.NIA	Cigna Willow Holdings, LTD.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna Insurance Services (Europe) Limited	.GBR	.NIA	Cigna Willow Holdings, LTD.	Ownership	100.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna International Health Services, BVBA	.BEL	.NIA	Cigna Elmwood Holdings, SPRL	Ownership	51.000	Cigna Corporation	.N	
.0901	Cigna Group		00-0000000				Cigna International Health Services, LLC	.FL	.NIA	Cigna International Health Services, BVBA	Ownership	100.000	Cigna Corporation	.N	

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Y/N)	*
..0901	Cigna Group		00-0000000				Cigna International Health Services Kenya Limited	..KEN	..NIA	Cigna International Health Services, BVBA	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Sequoia Holdings SPRL	..BEL	..NIA	Cigna Myrtle Holdings, Ltd.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group						Cigna Cedar Holdings, Ltd.	..MLT	..NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Insurance Middle East S.A.L.	..LBN	..IA	Cigna Cedar Holdings, Ltd.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Insurance Management Services (DIFC), Ltd.	..ARE	..NIA	Cigna Apac Holdings Limited	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Magnolia Holdings, Ltd.	..BMU	..NIA	Cigna Palmetto Holdings, Ltd.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group						Cigna Turkey Danismanlik Hizmetleri, A.S. (English translation: Cigna Turkey Consultancy Services, A.S.)	..TUR	..NIA	Cigna Magnolia Holdings, Ltd.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Nederland Alpha Cooperatief U.A.	..NLD	..NIA	Cigna Holdings Overseas, Inc.	Ownership	99.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Nederland Beta B.V.	..NLD	..NIA	Cigna Nederland Alpha Cooperatief U.A.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Health Solution India Pvt. Ltd.	..IND	..NIA	Cigna Holdings Overseas, Inc.	Ownership	99.000	Cigna Corporation	..N	
..0901	Cigna Group		46-4099800				Cigna Poplar Holdings, Inc.	..DE	..NIA	Cigna Holdings Overseas, Inc.	Ownership	100.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				PT GAR Indonesia	..IDN	..NIA	Cigna Holdings Overseas, Inc.	Ownership	99.160	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				PT PGU Indonesia	..IDN	..NIA	PT GAR Indonesia	Ownership	99.990	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Global Insurance Company Limited	..GGY	..IA	Cigna Holdings Overseas, Inc.	Ownership	99.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				CignaTTK Health Insurance Company Limited	..IND	..IA	Cigna Holdings Overseas, Inc.	Ownership	49.000	TTK (non-affiliate)	..N	
..0901	Cigna Group	90859	23-2088429				Cigna Worldwide Insurance Company	..DE	..IA	Cigna Global Reinsurance Company, Ltd.	Ownership	100.000	Cigna Corporation	..Y	
..0901	Cigna Group		AA-5360003				PT. Asuransi Cigna	..IDN	..IA	Cigna Worldwide Insurance Company	Ownership	80.000	Cigna Corporation	..N	
..0901	Cigna Group		00-0000000				Cigna Teak Holdings, LLC	..DE	..NIA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	..N	

Asterisk	Explanation

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

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. Not Applicable to the Company

Bar Code:

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



SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	100,444	100,558
2. Cost of bonds and stocks acquired		
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration for bonds and stocks disposed of		
7. Deduct amortization of premium	56	114
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	100,388	100,444
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	100,388	100,444

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	2,701,963	12,046,941	11,639,767	11,517	2,701,963	3,120,654	0	2,000,246
2. NAIC 2 (a)	0				0	0		
3. NAIC 3 (a)	0				0	0		
4. NAIC 4 (a)	0				0	0		
5. NAIC 5 (a)	0				0	0		
6. NAIC 6 (a)	0				0	0		
7. Total Bonds	2,701,963	12,046,941	11,639,767	11,517	2,701,963	3,120,654	0	2,000,246
PREFERRED STOCK								
8. NAIC 1	0				0	0		0
9. NAIC 2	0				0	0		0
10. NAIC 3	0				0	0		0
11. NAIC 4	0				0	0		0
12. NAIC 5	0				0	0		0
13. NAIC 6	0				0	0		0
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	2,701,963	12,046,941	11,639,767	11,517	2,701,963	3,120,654	0	2,000,246

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$ 3,020,267 ; NAIC 2 \$ 0 ; NAIC 3 \$ 0 NAIC 4 \$ 0 ; NAIC 5 \$ 0 ; NAIC 6 \$ 0

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

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

N O N E

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

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,899,801	1,799,797
2. Cost of cash equivalents acquired	18,614,090	30,665,931
3. Accrual of discount	19,066	21,568
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	12	(64)
6. Deduct consideration received on disposals	17,512,702	30,587,431
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	3,020,267	1,899,801
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	3,020,267	1,899,801

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

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

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

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

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

N O N E

Schedule D - Part 4 - Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed Of

N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

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

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

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	
					First Month	Second Month	Third Month	
Depository	Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
Fifth Third Cincinnati, OH					38,798	(11,134)	83,305	XXX
JP Morgan Chase Brooklyn, NY					6,069	454,235	60,631	XXX
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX						XXX
0199999. Totals - Open Depositories	XXX	XXX	0	0	44,867	443,101	143,936	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	0	0	44,867	443,101	143,936	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
0599999. Total - Cash	XXX	XXX	0	0	44,867	443,101	143,936	XXX

STATEMENT AS OF JUNE 30, 2018 OF THE CIGNA DENTAL HEALTH OF OH INC

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]