



Department  
of Insurance

Mike DeWine, Governor  
Jon Husted, Lt Governor

Tynesia Dorsey, Interim Director

## Electronic Filing Authenticity Affidavit

Office of Risk Assessment, 50 W Town Street, 3rd Floor - Suite 300, Columbus OH 43215  
614-644-2658 | 614-644-3256 (Fax) | insurance.ohio.gov

### Ohio Domestic Insurers Only

Company Name: Aetna Health of Ohio Inc.

NAIC No. 15805

We, the undersigned executive officers of Aetna Health of Ohio Inc. (herein referred to as the "Company"), an insurance company organized under the laws of Ohio, hereby certify that the documents indicated below by an "X" were filed electronically with the National Association of Insurance Commissioners ("NAIC") and that the electronic filing or filings, including ".PDF" filings, are exact copies of the original documents, except for formatting differences due to electronic filing. The original documents are maintained in this Company's office and are available for inspection upon request by the Ohio Department of Insurance for at least five years following the date of filing. An executed, notarized NAIC Annual Statement or Quarterly Statement jurat page or an original, notarized signature page (if this filing relates to a supplemental filing without a jurat page) attesting to the accuracy and authenticity of the corresponding NAIC Annual Statement or Quarterly Statement or supplemental schedule is attached to this Affidavit.

Company Type: ☐ Fraternal ☐ Title ☐ Property & Casualty ☐ Life & Health ☒ Health ☐ Other \_\_\_\_\_

#### Applicable documents:

- ☐ The documents referred to in the *General Instructions to the NAIC Checklist* as "Annual Statement Electronic Filing[s]," which include "the annual statement data and all supplements due March 1, per the *Annual Statement instructions*. This includes all detail investment schedules and other supplements for which the Annual Statement Instructions exempt printed detail."  
Date of filing with the NAIC: \_\_\_\_\_. ☐ An original jurat page is attached.  
☐ Original filing. ☐ Amended filing.
- ☐ The documents referred to in the *General Instructions to the NAIC Checklist* as "Risk-Based Capital Electronic Filing," which "includes all risk-based capital data" due March 1.  
Date of filing with the NAIC: \_\_\_\_\_. ☐ An original, notarized signature page is attached.  
☐ Original filing. ☐ Amended filing.
- ☐ The documents referred to in the *General Instructions to the NAIC Checklist* as "Supplemental Electronic Filing," which "includes all supplements due April 1, per the *Annual Statement Instructions*."  
Date of filing with the NAIC: \_\_\_\_\_.  
List of supplemental documents included in this Affidavit: \_\_\_\_\_.  
☐ All original notarized signature pages are attached, as applicable.  
☐ Original filing. ☐ Amended filing.
- ☒ The documents referred to in the *General Instructions to the NAIC Checklist* as "Quarterly Statement Electronic Filing," which "includes the complete quarterly statement data" due May 15, August 15, and November 15.  
Date of filing with the NAIC: 11/12/21.  
☒ Original filing. ☐ Amended filing.
- ☐ The documents referred to in the *General Instructions to the NAIC Checklist* as "Combined Annual Statement Electronic Filing," which "includes the required pages of the combined annual statement and the combined Insurance Expense Exhibit" due May 1.  
Date of filing with the NAIC: \_\_\_\_\_.
- ☐ The documents referred to in the *General Instructions to the NAIC Checklist* as "June. PDF Filing," which includes "the Audited Financial Statements" due June 1.  
Date of filing with the NAIC: \_\_\_\_\_.  
☐ Original filing. ☐ Amended filing.

Terry Jason Smith 10-19-21  
Signature Date

\_\_\_\_\_  
Signature Date

Robert Mark Kessler 11/8/21  
Signature Date

(Name) Terry Jason Smith  
(Title)\* Chief Executive Officer and President

(Name) Robert Mark Kessler  
(Title)\* Vice President and Secretary

(Name) Robert Joseph Parslow  
(Title)\* Principal Financial Officer and Controller

\*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)



Department  
of Insurance

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Jon Husted, Lt Governor

Tynesia Dorsey, Interim Director

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NAIC No. 15805

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Company Type: ☐ Fraternal ☐ Title ☐ Property & Casualty ☐ Life & Health ☒ Health ☐ Other \_\_\_\_\_

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Date of filing with the NAIC: \_\_\_\_\_.  
☐ Original filing. ☐ Amended filing.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Name) Terry Jason Smith  
(Title)\* Chief Executive Officer and President

Signature  Date 10/21/2021

(Name) Robert Mark Kessler  
(Title)\* Vice President and Secretary

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Name) Robert Joseph Parslow  
(Title)\* Principal Financial Officer and Controller

\*Signers must be principal executive officers of the Company (Chairman, President, CEO, CFO, Treasurer, Secretary)



# HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021  
OF THE CONDITION AND AFFAIRS OF THE

## Aetna Health of Ohio Inc.

NAIC Group Code	0001 (Current)	0001 (Prior)	NAIC Company Code	15805	Employer's ID Number	47-3850677
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		OH
Country of Domicile	United States of America					
Licensed as business type:	Health Maintenance Organization					
Is HMO Federally Qualified? Yes [ ] No [X]						
Incorporated/Organized	04/24/2015			Commenced Business 01/01/2020		
Statutory Home Office	7400 W. Campus Road (Street and Number)			New Albany, OH, US 43054 (City or Town, State, Country and Zip Code)		
Main Administrative Office	7400 W. Campus Road (Street and Number)			800-872-3862 (Area Code) (Telephone Number)		
	New Albany, OH, US 43054 (City or Town, State, Country and Zip Code)					
Mail Address	151 Farmington Avenue, RT21 (Street and Number or P.O. Box)			Hartford, CT, US 06156 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	7400 W. Campus Road (Street and Number)			800-872-3862 (Area Code) (Telephone Number)		
	New Albany, OH, US 43054 (City or Town, State, Country and Zip Code)					
Internet Website Address	www.aetna.com					
Statutory Statement Contact	Kim E. Roth (Name)			215-775-6508 (Area Code) (Telephone Number)		
	StatutoryReporting@aetna.com (E-mail Address)			860-282-7767 (FAX Number)		

### OFFICERS

President	Terry Jason Smith	Principal Financial Officer and Controller	Robert Joseph Parslow
Secretary	Robert Mark Kessler		

### OTHER

Kevin James Casey, Senior Investment Officer	Peter Keller, Assistant Controller	Bryan James Lane, Assistant Controller
Whitney Dorothy Lavoie, Assistant Controller	Scott David Miller, Assistant Controller	Bryan Sheppard Nazworth, Chief Financial Officer #
	Tracy Louise Smith, Vice President and Treasurer	

### DIRECTORS OR TRUSTEES

Debra Jean Bacon	Bryan Sheppard Nazworth #	Terry Jason Smith
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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.

Terry Jason Smith  
Chief Executive Officer and President

Robert Mark Kessler  
Vice President and Secretary

Robert Joseph Parslow  
Principal Financial Officer and Controller

State of..... California  
County of..... Riverside

State of..... Arizona  
County of..... Maricopa

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

Subscribed and sworn to before me this  
19 day of October, 2021

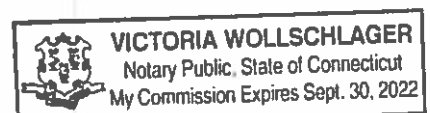
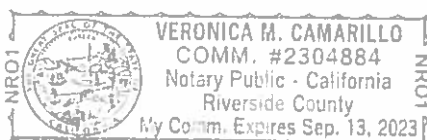
Subscribed and sworn to before me this  
\_\_\_ day of \_\_\_, 2021

Subscribed and sworn to before me this  
8 day of November, 2021

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)

NOTARY PUBLIC (Seal)



A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

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



# HEALTH QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2021  
OF THE CONDITION AND AFFAIRS OF THE

## Aetna Health of Ohio Inc.

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Organized under the Laws of	Ohio			State of Domicile or Port of Entry	OH	
Country of Domicile	United States of America					
Licensed as business type:	Health Maintenance Organization					
Is HMO Federally Qualified? Yes [ ] No [ X ]						
Incorporated/Organized	04/24/2015			Commenced Business	01/01/2020	
Statutory Home Office	7400 W. Campus Road (Street and Number)			New Albany, OH, US 43054 (City or Town, State, Country and Zip Code)		
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Secretary	Robert Mark Kessler		

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Terry Jason Smith Chief Executive Officer and President	Robert Mark Kessler Vice President and Secretary	Robert Joseph Parslow Principal Financial Officer and Controller
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State of..... California County of..... Riverside	State of..... Arizona County of..... Maricopa	State of..... Connecticut County of..... Hartford
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Subscribed and sworn to before me this ____ day of _____, 2021	Subscribed and sworn to before me this 21 day of October, 2021 Lisa M Lambert	Subscribed and sworn to before me this ____ day of _____, 2021
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NOTARY PUBLIC (Seal)	NOTARY PUBLIC (Seal)	NOTARY PUBLIC (Seal)
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- a. Is this an original filing? ..... Yes [ X ] No [ ]  
b. If no,  
1. State the amendment number .....  
2. Date filed .....  
3. Number of pages attached .....