



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2022  
OF THE CONDITION AND AFFAIRS OF THE

Cigna Insurance Company  
(Formerly United Benefit Life Insurance Company)

NAIC Group Code	0901 (Current)	0901 (Prior)	NAIC Company Code	65269	Employer's ID Number	75-2305400
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:	Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]					
Incorporated/Organized	06/26/1957			Commenced Business	08/13/1957	
Statutory Home Office	1300 East Ninth Street (Street and Number)			Cleveland, OH, US 44114 (City or Town, State, Country and Zip Code)		
Main Administrative Office	11501 Alterra Parkway, Suite 500 (Street and Number)					
	Austin, TX, US 78758 (City or Town, State, Country and Zip Code)			512-451-2224 (Area Code) (Telephone Number)		
Mail Address	11501 Alterra Parkway, Suite 500 (Street and Number or P.O. Box)			Austin, TX, US 78758 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	11501 Alterra Parkway, Suite 500 (Street and Number)					
	Austin, TX, US 78758 (City or Town, State, Country and Zip Code)			512-451-2224 (Area Code) (Telephone Number)		
Internet Website Address	www.CignaSupplementalBenefits.com					
Statutory Statement Contact	Renee Wilkins Feldman (Name)			512-531-1465 (Area Code) (Telephone Number)		
	CSBFinRpt@cigna.com (E-mail Address)			512-467-1399 (FAX Number)		

OFFICERS

President	Lindy Marie Hinman #	Secretary	Geneva Campbell Brown #
Treasurer and Chief Accounting Officer	Byron Keith Buescher	Chief Financial Officer and Chief Actuary	David Leroy Swanson

OTHER

David Lawrence Chambers, Vice President-Sales and Marketing	Mark Fleming, Vice President and Assistant Treasurer	Joanne Ruth Hart, Vice President and Assistant Treasurer
Scott Ronald Lambert, Vice President and Assistant Treasurer	Mark Edmund Ochal #, General Manager	Kathleen Murphy O'Neil, Vice President
Daniel Ernest Paffumi #, Appointed Actuary	Drew Jerome Reynolds, Vice President and Assistant Treasurer	

DIRECTORS OR TRUSTEES

Lindy Marie Hinman #	Tracy Lyn Labonte #	Mark Edmund Ochal #
David Leroy Swanson	James Yablecki	

State of	Pennsylvania	SS
County of	Philadelphia	

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.

Byron Keith Buescher Treasurer and Chief Accounting Officer	Geneva Campbell Brown Secretary	David Leroy Swanson Chief Financial Officer and Chief Actuary
Subscribed and sworn to before me this day of	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.....	



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0901

DURING THE YEAR 2022

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Alaska  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

NAIC Group Code 0901		LIFE INSURANCE			NAIC Company Code 65269	
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						
2. Annuity considerations .....						
3. Deposit-type contract funds .....			XXX		XXX	
4. Other considerations .....						
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4) .....						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3) .....						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts ..						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals .....						
DETAILS OF WRITE-INS						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0901

DURING THE YEAR 2022

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Arkansas  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF California  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
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1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Colorado  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Connecticut  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Delaware  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF District of Columbia  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Florida  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Georgia  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

DIRECT BUSINESS IN THE STATE OF Hawaii

NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022

NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$

Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$

Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons  
insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2022

NAIC Group Code 0901

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2022

NAIC Group Code 0901

NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Indiana  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Iowa  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees .....					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Kansas  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

DIRECT BUSINESS IN THE STATE OF Kentucky  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) ..					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0901

DURING THE YEAR 2022

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Maine  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Maryland  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Massachusetts  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Michigan  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Minnesota  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Mississippi  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Missouri  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Montana  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Nebraska  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Nevada  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2022

NAIC Group Code 0901

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF New Jersey  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF New Mexico  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF New York  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF North Carolina  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF North Dakota  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Ohio  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Oklahoma  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2022

NAIC Group Code 0901

NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Pennsylvania  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Rhode Island  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF South Carolina  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF South Dakota  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Tennessee  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise ..										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Texas  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Utah  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Vermont  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Virginia  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Washington  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF West Virginia  
NAIC Group Code 0901

DURING THE YEAR 2022  
NAIC Company Code 65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Wisconsin  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OF Wyoming  
NAIC Group Code 0901

LIFE INSURANCE

DURING THE YEAR 2022  
NAIC Company Code 65269

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX.		XXX.	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts ..					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
DETAILS OF WRITE-INS					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year .....			(a)							
21. Issued during year .....										
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies/certificates (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

DIRECT BUSINESS IN THE STATE OFGrand Total

NAIC Group Code0901

DURING THE YEAR2022

NAIC Company Code65269

LIFE INSURANCE					
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					
2. Annuity considerations					
3. Deposit-type contract funds		XXX.		XXX.	
4. Other considerations					
5. Totals (Sum of Lines 1 to 4)					
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit					
6.2 Applied to pay renewal premiums					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					
6.4 Other					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit					
7.2 Applied to provide paid-up annuities					
7.3 Other					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					
10. Matured endowments					
11. Annuity benefits					
12. Surrender values and withdrawals for life contracts					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid					
14. All other benefits, except accident and health					
15. Totals					
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pols. & Certifs.	Amount	No. of Ind.Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
16. Unpaid December 31, prior year										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full										
18.2 By payment on compromised claims										
18.3 Totals paid										
18.4 Reduction by compromise										
18.5 Amount rejected										
18.6 Total settlements										
19. Unpaid Dec. 31, current year (16+17-18.6)										
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year			(a)							
21. Issued during year										
22. Other changes to in force (Net)										
23. In force December 31 of current year			(a)							

(a) Includes Individual Credit Life Insurance prior year \$ , current year \$  
Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$ , current year \$  
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ , current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively renewable policies/certificates (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (sum of Lines 25.1 to 25.5)					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under indemnity only products

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

INTEREST MAINTENANCE RESERVE	
	1 Amount
1. Reserve as of December 31, Prior Year .....	22,646
2. Current year's realized pre-tax capital gains/(losses) of \$ ..... transferred into the reserve net of taxes of \$ .....	
3. Adjustment for current year's liability gains/(losses) released from the reserve .....	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) .....	22,646
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	4,689
6. Reserve as of December 31, current year (Line 4 minus Line 5)	17,957

AMORTIZATION				
	1	2	3	4
Year of Amortization	Reserve as of December 31, Prior Year	Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2022 .....	4,689			4,689
2. 2023 .....	4,932			4,932
3. 2024 .....	4,563			4,563
4. 2025 .....	3,651			3,651
5. 2026 .....	2,666			2,666
6. 2027 .....	1,607			1,607
7. 2028 .....	538			538
8. 2029 .....				
9. 2030 .....				
10. 2031 .....				
11. 2032 .....				
12. 2033 .....				
13. 2034 .....				
14. 2035 .....				
15. 2036 .....				
16. 2037 .....				
17. 2038 .....				
18. 2039 .....				
19. 2040 .....				
20. 2041 .....				
21. 2042 .....				
22. 2043 .....				
23. 2044 .....				
24. 2045 .....				
25. 2046 .....				
26. 2047 .....				
27. 2048 .....				
28. 2049 .....				
29. 2050 .....				
30. 2051 .....				
31. 2052 and Later				
32. Total (Lines 1 to 31)	22,646			22,646

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	1	2	3	4	5	6	
	Other Than Mortgage Loans	Mortgage Loans	Total (Cols. 1 + 2)	Common Stock	Real Estate and Other Invested Assets	Total (Cols. 4 + 5)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year .....							
2. Realized capital gains/(losses) net of taxes - General Account .....							
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....							
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....							
7. Basic contribution .....							
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....							
9. Maximum reserve .....							
10. Reserve objective .....							
11. 20% of (Line 10 - Line 8) .....							
12. Balance before transfers (Lines 8 + 11) .....							
13. Transfers .....							
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....							
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)							

ASSET VALUATION RESERVE  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
DEFAULT COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols.4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.		Exempt Obligations	2,779,319	XXX	XXX	2,779,319	0.0000		0.0000		0.0000	
2.1	1	NAIC Designation Category 1.A		XXX	XXX		0.0002		0.0007		0.0013	
2.2	1	NAIC Designation Category 1.B		XXX	XXX		0.0004		0.0011		0.0023	
2.3	1	NAIC Designation Category 1.C		XXX	XXX		0.0006		0.0018		0.0035	
2.4	1	NAIC Designation Category 1.D		XXX	XXX		0.0007		0.0022		0.0044	
2.5	1	NAIC Designation Category 1.E		XXX	XXX		0.0009		0.0027		0.0055	
2.6	1	NAIC Designation Category 1.F		XXX	XXX		0.0011		0.0034		0.0068	
2.7	1	NAIC Designation Category 1.G		XXX	XXX		0.0014		0.0042		0.0085	
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)		XXX	XXX		XXX		XXX		XXX	
3.1	2	NAIC Designation Category 2.A		XXX	XXX		0.0021		0.0063		0.0105	
3.2	2	NAIC Designation Category 2.B		XXX	XXX		0.0025		0.0076		0.0127	
3.3	2	NAIC Designation Category 2.C		XXX	XXX		0.0036		0.0108		0.0180	
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)		XXX	XXX		XXX		XXX		XXX	
4.1	3	NAIC Designation Category 3.A		XXX	XXX		0.0069		0.0183		0.0262	
4.2	3	NAIC Designation Category 3.B		XXX	XXX		0.0099		0.0264		0.0377	
4.3	3	NAIC Designation Category 3.C		XXX	XXX		0.0131		0.0350		0.0500	
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)		XXX	XXX		XXX		XXX		XXX	
5.1	4	NAIC Designation Category 4.A		XXX	XXX		0.0184		0.0430		0.0615	
5.2	4	NAIC Designation Category 4.B		XXX	XXX		0.0238		0.0555		0.0793	
5.3	4	NAIC Designation Category 4.C		XXX	XXX		0.0310		0.0724		0.1034	
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)		XXX	XXX		XXX		XXX		XXX	
6.1	5	NAIC Designation Category 5.A		XXX	XXX		0.0472		0.0846		0.1410	
6.2	5	NAIC Designation Category 5.B		XXX	XXX		0.0663		0.1188		0.1980	
6.3	5	NAIC Designation Category 5.C		XXX	XXX		0.0836		0.1498		0.2496	
6.4		Subtotal NAIC 5 (6.1+6.2+6.3)		XXX	XXX		XXX		XXX		XXX	
7.	6	NAIC 6		XXX	XXX		0.0000		0.2370		0.2370	
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	2,779,319	XXX	XXX	2,779,319	XXX		XXX		XXX	
PREFERRED STOCKS												
10.	1	Highest Quality		XXX	XXX		0.0005		0.0016		0.0033	
11.	2	High Quality		XXX	XXX		0.0021		0.0064		0.0106	
12.	3	Medium Quality		XXX	XXX		0.0099		0.0263		0.0376	
13.	4	Low Quality		XXX	XXX		0.0245		0.0572		0.0817	
14.	5	Lower Quality		XXX	XXX		0.0630		0.1128		0.1880	
15.	6	In or Near Default		XXX	XXX		0.0000		0.2370		0.2370	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX	

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Num- ber	NAIC Desig- nation	Description	1  Book/Adjusted Carrying Value	2  Reclassify Related Party Encumbrances	3  Add Third Party Encumbrances	4  Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5  Factor	6  Amount (Cols.4 x 5)	7  Factor	8  Amount (Cols. 4 x 7)	9  Factor	10  Amount (Cols. 4 x 9)
18.		SHORT-TERM BONDS										
		Exempt Obligations .....		XXX	XXX		0.0000		0.0000		0.0000	
19.1	1	NAIC Designation Category 1.A .....		XXX	XXX		0.0002		0.0007		0.0013	
19.2	1	NAIC Designation Category 1.B .....		XXX	XXX		0.0004		0.0011		0.0023	
19.3	1	NAIC Designation Category 1.C .....		XXX	XXX		0.0006		0.0018		0.0035	
19.4	1	NAIC Designation Category 1.D .....		XXX	XXX		0.0007		0.0022		0.0044	
19.5	1	NAIC Designation Category 1.E .....		XXX	XXX		0.0009		0.0027		0.0055	
19.6	1	NAIC Designation Category 1.F .....		XXX	XXX		0.0011		0.0034		0.0068	
19.7	1	NAIC Designation Category 1.G .....		XXX	XXX		0.0014		0.0042		0.0085	
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7) .....		XXX	XXX		XXX		XXX		XXX	
20.1	2	NAIC Designation Category 2.A .....		XXX	XXX		0.0021		0.0063		0.0105	
20.2	2	NAIC Designation Category 2.B .....		XXX	XXX		0.0025		0.0076		0.0127	
20.3	2	NAIC Designation Category 2.C .....		XXX	XXX		0.0036		0.0108		0.0180	
20.4		Subtotal NAIC 2 (20.1+20.2+20.3) .....		XXX	XXX		XXX		XXX		XXX	
21.1	3	NAIC Designation Category 3.A .....		XXX	XXX		0.0069		0.0183		0.0262	
21.2	3	NAIC Designation Category 3.B .....		XXX	XXX		0.0099		0.0264		0.0377	
21.3	3	NAIC Designation Category 3.C .....		XXX	XXX		0.0131		0.0350		0.0500	
21.4		Subtotal NAIC 3 (21.1+21.2+21.3) .....		XXX	XXX		XXX		XXX		XXX	
22.1	4	NAIC Designation Category 4.A .....		XXX	XXX		0.0184		0.0430		0.0615	
22.2	4	NAIC Designation Category 4.B .....		XXX	XXX		0.0238		0.0555		0.0793	
22.3	4	NAIC Designation Category 4.C .....		XXX	XXX		0.0310		0.0724		0.1034	
22.4		Subtotal NAIC 4 (22.1+22.2+22.3) .....		XXX	XXX		XXX		XXX		XXX	
23.1	5	NAIC Designation Category 5.A .....		XXX	XXX		0.0472		0.0846		0.1410	
23.2	5	NAIC Designation Category 5.B .....		XXX	XXX		0.0663		0.1188		0.1980	
23.3	5	NAIC Designation Category 5.C .....		XXX	XXX		0.0836		0.1498		0.2496	
23.4		Subtotal NAIC 5 (23.1+23.2+23.3) .....		XXX	XXX		XXX		XXX		XXX	
24.	6	NAIC 6 .....		XXX	XXX		0.0000		0.2370		0.2370	
25.		Total Short-Term Bonds (18+19.8+20.4+21.4+22.4+23.4+24) .....		XXX	XXX		XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.		Exchange Traded .....		XXX	XXX		0.0005		0.0016		0.0033	
27.	1	Highest Quality .....		XXX	XXX		0.0005		0.0016		0.0033	
28.	2	High Quality .....		XXX	XXX		0.0021		0.0064		0.0106	
29.	3	Medium Quality .....		XXX	XXX		0.0099		0.0263		0.0376	
30.	4	Low Quality .....		XXX	XXX		0.0245		0.0572		0.0817	
31.	5	Lower Quality .....		XXX	XXX		0.0630		0.1128		0.1880	
32.	6	In or Near Default .....		XXX	XXX		0.0000		0.2370		0.2370	
33.		Total Derivative Instruments .....		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	2,779,319	XXX	XXX	2,779,319	XXX		XXX		XXX	

ASSET VALUATION RESERVE (Continued)  
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS  
DEFAULT COMPONENT

Line Num- ber	NAIC Desig- nation	Description	1  Book/Adjusted Carrying Value	2  Reclassify Related Party Encumbrances	3  Add Third Party Encumbrances	4  Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5  Factor	6  Amount (Cols.4 x 5)	7  Factor	8  Amount (Cols. 4 x 7)	9  Factor	10  Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
36.		Farm Mortgages - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
37.		Farm Mortgages - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
38.		Farm Mortgages - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
39.		Farm Mortgages - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
40.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
41.		Residential Mortgages - All Other .....			XXX		0.0015		0.0034		0.0046	
42.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0007		0.0011	
43.		Commercial Mortgages - All Other - CM1 - Highest Quality .....			XXX		0.0011		0.0057		0.0074	
44.		Commercial Mortgages - All Other - CM2 - High Quality .....			XXX		0.0040		0.0114		0.0149	
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....			XXX		0.0069		0.0200		0.0257	
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....			XXX		0.0120		0.0343		0.0428	
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....			XXX		0.0183		0.0486		0.0628	
		Overdue, Not in Process:										
48.		Farm Mortgages .....			XXX		0.0480		0.0868		0.1371	
49.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
50.		Residential Mortgages - All Other .....			XXX		0.0029		0.0066		0.0103	
51.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0006		0.0014		0.0023	
52.		Commercial Mortgages - All Other .....			XXX		0.0480		0.0868		0.1371	
		In Process of Foreclosure:										
53.		Farm Mortgages .....			XXX		0.0000		0.1942		0.1942	
54.		Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
55.		Residential Mortgages - All Other .....			XXX		0.0000		0.0149		0.0149	
56.		Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0046		0.0046	
57.		Commercial Mortgages - All Other .....			XXX		0.0000		0.1942		0.1942	
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)			XXX		XXX		XXX		XXX	
59.		Schedule DA Mortgages			XXX		0.0034		0.0114		0.0149	
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)			XXX		XXX		XXX		XXX	

Asset Valuation Reserve - Equity Component  
**N O N E**

Asset Valuation Reserve - Replications (Synthetic) Assets  
**N O N E**

Schedule F - Claims  
**N O N E**

Schedule H - Part 1 - Analysis of Underwriting Operations  
**N O N E**

Schedule H - Part 2 - Reserves and Liabilities  
**N O N E**

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities  
**N O N E**

Schedule H - Part 4 - Reinsurance  
**N O N E**

Schedule H - Part 5 - Health Claims  
**N O N E**

Schedule S - Part 1 - Section 1  
**N O N E**

Schedule S - Part 1 - Section 2  
**N O N E**

Schedule S - Part 2  
**N O N E**

Schedule S - Part 3 - Section 1  
**N O N E**

Schedule S - Part 3 - Section 2  
**N O N E**

Schedule S - Part 4  
**N O N E**

Schedule S - Part 4 - Bank Footnote

**N O N E**

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

Schedule S - Part 6

**N O N E**

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	3,055,020		3,055,020
2. Reinsurance (Line 16) .....			
3. Premiums and considerations (Line 15) .....			
4. Net credit for ceded reinsurance .....	XXX		
5. All other admitted assets (balance) .....	34,805		34,805
6. Total assets excluding Separate Accounts (Line 26) .....	3,089,825		3,089,825
7. Separate Account assets (Line 27) .....			
8. Total assets (Line 28)	3,089,825		3,089,825
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....			
10. Liability for deposit-type contracts (Line 3) .....			
11. Claim reserves (Line 4) .....			
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....			
13. Premium & annuity considerations received in advance (Line 8) .....			
14. Other contract liabilities (Line 9) .....	17,957		17,957
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....			
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			
19. All other liabilities (balance) .....	8,764		8,764
20. Total liabilities excluding Separate Accounts (Line 26) .....	26,721		26,721
21. Separate Account liabilities (Line 27) .....			
22. Total liabilities (Line 28) .....	26,721		26,721
23. Capital & surplus (Line 38) .....	3,063,104	XXX	3,063,104
24. Total liabilities, capital & surplus (Line 39)	3,089,825		3,089,825
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....			
26. Claim reserves .....			
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....			
30. Other contract liabilities .....			
31. Reinsurance ceded assets .....			
32. Other ceded reinsurance recoverables .....			
33. Total ceded reinsurance recoverables .....			
34. Premiums and considerations .....			
35. Reinsurance in unauthorized companies .....			
36. Funds held under reinsurance treaties with unauthorized reinsurers .....			
37. Reinsurance with Certified Reinsurers .....			
38. Funds held under reinsurance treaties with Certified Reinsurers .....			
39. Other ceded reinsurance payables/offsets .....			
40. Total ceded reinsurance payable/offsets .....			
41. Total net credit for ceded reinsurance			

SCHEDULE T - PART 2  
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			Direct Business Only			
			1	2	3	4
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)
						5
						Deposit-Type Contracts
						6
						Totals
1.	Alabama .....	AL				
2.	Alaska .....	AK				
3.	Arizona .....	AZ				
4.	Arkansas .....	AR				
5.	California .....	CA				
6.	Colorado .....	CO				
7.	Connecticut .....	CT				
8.	Delaware .....	DE				
9.	District of Columbia .....	DC				
10.	Florida .....	FL				
11.	Georgia .....	GA				
12.	Hawaii .....	HI				
13.	Idaho .....	ID				
14.	Illinois .....	IL				
15.	Indiana .....	IN				
16.	Iowa .....	IA				
17.	Kansas .....	KS				
18.	Kentucky .....	KY				
19.	Louisiana .....	LA				
20.	Maine .....	ME				
21.	Maryland .....	MD				
22.	Massachusetts .....	MA				
23.	Michigan .....	MI				
24.	Minnesota .....	MN				
25.	Mississippi .....	MS				
26.	Missouri .....	MO				
27.	Montana .....	MT				
28.	Nebraska .....	NE				
29.	Nevada .....	NV				
30.	New Hampshire .....	NH				
31.	New Jersey .....	NJ				
32.	New Mexico .....	NM				
33.	New York .....	NY				
34.	North Carolina .....	NC				
35.	North Dakota .....	ND				
36.	Ohio .....	OH				
37.	Oklahoma .....	OK				
38.	Oregon .....	OR				
39.	Pennsylvania .....	PA				
40.	Rhode Island .....	RI				
41.	South Carolina .....	SC				
42.	South Dakota .....	SD				
43.	Tennessee .....	TN				
44.	Texas .....	TX				
45.	Utah .....	UT				
46.	Vermont .....	VT				
47.	Virginia .....	VA				
48.	Washington .....	WA				
49.	West Virginia .....	WV				
50.	Wisconsin .....	WI				
51.	Wyoming .....	WY				
52.	American Samoa .....	AS				
53.	Guam .....	GU				
54.	Puerto Rico .....	PR				
55.	U.S. Virgin Islands .....	VI				
56.	Northern Mariana Islands .....	MP				
57.	Canada .....	CAN				
58.	Aggregate Other Alien .....	OT				
59.	Total					

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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? (Yes/No)	*
.0901...	Cigna Group		46-2332355				1EQ Inc. (d/b/a Babyscripts)	..DE....	..NIA.....	Cigna Ventures, LLC	Ownership.....	..10.100...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		88-1945947				73 Pond Street Apartments Venture, L.L.C.	..DE....	..NIA.....	CARING Waltham Investor LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				680 Investors LLC	..CA....	..NIA.....	SB-SNH LLC	Ownership.....	..85.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				685 New Hampshire LLC	..CA....	..NIA.....	SB-SNH LLC	Ownership.....	..85.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		82-4794800				9171 Wilshire CPI-CII LLC	..DE....	..NIA.....	CPI-CII 9171 Wilshire JV LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		86-1712743				ABL Apartments Venture, L.L.C.	..DE....	..NIA.....	CARING ABS Investor LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		88-4202407				ABL Holding Co., L.L.C.	..DE....	..NIA.....	CARING Brinkman Investor LLC	Ownership.....	..73.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		88-3747773				ABL Townhomes Venture, L.L.C.	..DE....	..NIA.....	CARING Brinkman Investor LLC	Ownership.....	..75.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		85-1046126				ABS Apartments Venture, L.L.C.	..DE....	..NIA.....	CARING ABS Investor LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		11-3358535				Accredo Health Group, Inc.	..DE....	..NIA.....	Accredo Health, Incorporated	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		55-0894449				Accredo Health, Incorporated	..DE....	..NIA.....	Medco Health Solutions, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		87-4355549				AGA Apartments Venture, L.L.C.	..DE....	..NIA.....	CARING Galleria Investor LLC	Ownership.....	..70.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		13-3888838				AHG of New York, Inc.	..NY....	..NIA.....	Accredo Health, Incorporated	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		75-3040465				Airport Holdings, LLC	..NJ....	..NIA.....	Express Scripts, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		35-2562415				Alegis Care Services, LLC	..DE....	..NIA.....	Home Physicians Management, LLC	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		85-0909305				Alegis Care Services of Colorado, LLC	..CO....	..NIA.....	Home Physicians Management, LLC	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		81-0400550				Allegiance Benefit Plan Management, Inc.	..MT....	..NIA.....	Benefit Management Corp.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		03-0507057				Allegiance Care Management, LLC	..MT....	..NIA.....	Benefit Management Corp.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		71-0916514				Allegiance COBRA Services, Inc.	..MT....	..NIA.....	Benefit Management Corp.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group	12814	20-4433475				Allegiance Life & Health Insurance Company	..MT....	..IA.....	Benefit Management Corp.	Ownership.....	..95.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		26-2201582				Allegiance Provider Direct, LLC	..MT....	..NIA.....	Benefit Management Corp.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		20-3851464				Allegiance Re, Inc.	..MT....	..IA.....	Benefit Management Corp.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group	88366	59-2760189				American Retirement Life Insurance Company	..OH....	..IA.....	Loyal American Life Insurance Company	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		87-4023291				AOP II Apartments Venture, L.L.C.	..DE....	..IA.....	CARING Optimist Park II Investor LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
							Cigna Affiliates Realty Investment Group, LLC								
.0901...	Cigna Group		82-3315524				Arbor Heights Venture LLC	..DE....	..NIA.....	LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		46-4080861				AristaMD, Inc.	..DE....	..NIA.....	Cigna Ventures, LLC	Ownership.....	..11.100...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		86-3581583				Arizona Health Plan, Inc.	..AZ....	..NIA.....	Healthsource, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				Ascent Health Services LLC	..DE....	..NIA.....	Cigna Spruce Holdings GmbH	Ownership.....	..80.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		86-1750832				ASM Apartments Venture, L.L.C.	..DE....	..NIA.....	CARING St. Matthew's Investor LLC	Ownership.....	..90.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		81-0585518				Benefit Management Corp.	..MT....	..NIA.....	Connecticut General Corporation	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
							Cigna Affiliates Realty Investment Group, LLC								
.0901...	Cigna Group		81-2650133				Berewick Apartments LLC	..DE....	..NIA.....	LLC	Ownership.....	..85.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		43-1815573				Biopartners in Care, Inc.	..MO....	..NIA.....	Accredo Health, Incorporated	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group	10095	52-2259087				Bravo Health Mid-Atlantic, Inc.	..MD....	..IA.....	NewQuest Management Northeast, LLC	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group	11524	52-2363406				Bravo Health Pennsylvania, Inc.	..PA....	..IA.....	NewQuest Management Northeast, LLC	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				Breakthrough Behavioral, Inc.	..DE....	..IA.....	MDLive, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				Breakthrough Behavioral of Texas, Inc.	..TX....	..IA.....	Breakthrough Behavioral, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		27-1713977				Brighter, Inc.	..DE....	..NIA.....	Connecticut General Corporation	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		46-4918521				Buoy Health, Inc.	..DE....	..NIA.....	Cigna Ventures, LLC	Ownership.....	..12.200...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		47-4991296				Bright Health Group, Inc.	..DE....	..NIA.....	Cigna Health and Life Insurance Company	Ownership.....	..15.500...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		61-1162797				Care Continuum, Inc.	..KY....	..NIA.....	SpectraCare Health Care Ventures, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
							CareAllies Accountable Care Collaborative LLC								
.0901...	Cigna Group		85-0954556				CareAllies Accountable Care Network LLC	..DE....	..NIA.....	CareAllies, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		85-0935554				CareAllies Accountable Care Network LLC	..DE....	..NIA.....	CareAllies, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		00-0000000				CareAllies Accountable Care Solutions LLC	..DE....	..NIA.....	CareAllies, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
.0901...	Cigna Group		26-0180898				CareAllies, Inc.	..DE....	..NIA.....	Cigna Holdings, Inc.	Ownership.....	..100.000...	Cigna Corporation	....NO.....	
							Connecticut General Life Insurance Company								
.0901...	Cigna Group		81-2760646				CareAllies, LLC	..DE....	..NIA.....		Ownership.....	..100.000...	Cigna Corporation	....NO.....	

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 Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0901 ...	Cigna Group .....	.... 10144 ....	20-1089572 ..	.....	.....	.....	CareCore NJ, LLC .....	.. NJ.....	..... IA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	45-2681649 ..	.....	.....	.....	CarePlexus, LLC .....	.. DE.....	..... NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-1400586 ..	.....	.....	.....	CARING 18th & Salmon Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2562994 ..	.....	.....	.....	CARING 500 Ygnacio Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-1960231 ..	.....	.....	.....	CARING 3130 Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2318410 ..	.....	.....	.....	CARING 9171 Wilshire Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-4247420 ..	.....	.....	.....	CARING ABS Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2851501 ..	.....	.....	.....	CARING Alta Duraleigh Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2851501 ..	.....	.....	.....	CARING Alta Englewood Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2966766 ..	.....	.....	.....	CARING Alta Leander Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2563284 ..	.....	.....	.....	CARING Alta Woodson Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2966766 ..	.....	.....	.....	CARING Avondale Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-1992977 ..	.....	.....	.....	CARING Berwyn Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-1885283 ..	.....	.....	.....	CARING Brinkman Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	32-0570889 ..	.....	.....	.....	CARING Capitol Hill GP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	37-1903297 ..	.....	.....	.....	CARING Capitol Hill LP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2851364 ..	.....	.....	.....	CARING Century Plaza Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-4265529 ..	.....	.....	.....	CARING Deco Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2912145 ..	.....	.....	.....	CARING Elan I Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-0928526 ..	.....	.....	.....	CARING Elan II Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-3701937 ..	.....	.....	.....	CARING Firestone Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-4803572 ..	.....	.....	.....	CARING Galleria Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	CARING JA Lofts Investor LP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	CARING JA Lofts Investor GP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2318233 ..	.....	.....	.....	CARING Heights at Bear Creek Investor LLC ...	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-1400482 ..	.....	.....	.....	CARING Hillcrest Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-4410554 ..	.....	.....	.....	CARING IBP Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	.... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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? (Yes/No)	*
. 0901 ...	Cigna Group .....	.....	85-1961034 ..	.....	.....	.....	CARING Interbay Investor GP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-1984627 ..	.....	.....	.....	CARING Interbay Investor LP LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2339522 ..	.....	.....	.....	CARING Mallory Square Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-4265529 ..	.....	.....	.....	CARING Montclair Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2563138 ..	.....	.....	.....	CARING Soma Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2633790 ..	.....	.....	.....	CARING Alexan Enclave Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2633886 ..	.....	.....	.....	CARING Orange Collection Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-2627703 ..	.....	.....	.....	CARING Optimist Park II Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-2031777 ..	.....	.....	.....	CARING Slabtown Investor, LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-8294933 ..	.....	.....	.....	CARING South Coast Subsidiary LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-1942593 ..	.....	.....	.....	CARING St. Matthew's Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	88-2074593 ..	.....	.....	.....	CARING Waltham Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	38-4085763 ..	.....	.....	.....	CARING Westcore Holding Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-3646420 ..	.....	.....	.....	CARING Westcore Holding II Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-3923178 ..	.....	.....	.....	CARING XR International Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-4317078 ..	.....	.....	.....	CARING XR 2 International Investor LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-1843578 ..	.....	.....	.....	CGGL XR 2 International JV LLC .....	.. DE.....	..... NIA.....	CARING XR 2 International Investor LLC ...	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-1843578 ..	.....	.....	.....	CGGL XR 2 International Mezz LLC .....	.. DE.....	..... NIA.....	CARING XR 2 International Investor LLC ...	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	45-2604992 ..	.....	.....	.....	CCN MNO, LLC .....	.. NY.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	33-1039759 ..	.....	.....	.....	CCN-WNY IPA, LLC .....	.. NY.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	34-1970892 ..	.....	.....	.....	Ceres Sales of Ohio, LLC .....	.. OH.....	..... NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	06-1332403 ..	.....	.....	.....	CG Individual Tax Benefit Payments, Inc. ....	.. DE.....	..... NIA.....	Connecticut General Corporation .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	06-1332405 ..	.....	.....	.....	CG Life Pension Benefits Payments, Inc. ....	.. DE.....	..... NIA.....	Connecticut General Corporation .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	06-1332401 ..	.....	.....	.....	CG LINA Pension Benefits Payments, Inc. ....	.. DE.....	..... NIA.....	Connecticut General Corporation .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-2083351 ..	.....	.....	.....	CG-AQ 477 South Market Street LLC .....	.. DE.....	..... NIA.....	CARING Firestone Investor LLC .....	Ownership.....	.. 85.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-4773972 ..	.....	.....	.....	CG-LEDO IBP Venture LLC .....	.. DE.....	..... NIA.....	CARING IBP Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-4747045 ..	.....	.....	.....	CG-LEDO IBP I LLC .....	.. DE.....	..... NIA.....	CARING IBP Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-4755025 ..	.....	.....	.....	CG-LEDO IBP II LLC .....	.. DE.....	..... NIA.....	CARING IBP Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-2993316 ..	.....	.....	.....	CG-Muller 550 Winchester, LLC .....	.. DE.....	..... NIA.....	CARING Century Plaza Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	45-5499889 ..	.....	.....	.....	CG Seventh Street, LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 87.500 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-0734624 ..	.....	.....	.....	CG/Wood Alta Duraleigh, LLC .....	.. DE.....	..... NIA.....	CARING Alta Duraleigh Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-0655107 ..	.....	.....	.....	CG/Wood Alta Duraleigh Owner, LLC .....	.. DE.....	..... NIA.....	CARING Alta Duraleigh Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-2928410 ..	.....	.....	.....	CG/Wood Alta Duraleigh Townhome, LLC .....	.. DE.....	..... NIA.....	CARING Alta Duraleigh Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group .....	.....	82-1280312 ..	.....	.....	.....	CG/Wood Alta 601, LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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? (Yes/No)	*
.0901	Cigna Group		85-2233381				CG/Wood Alta Leander Station, LLC	..DE	..NIA	CARING Alta Leander Investor LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		81-3313562				CGGL City Parkway LLC	..DE	..NIA	CGGL Orange Collection LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		61-1797835				CGGL Orange Collection LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				CGGL Orange Collection Mezz LLC	..DE	..NIA	CARING Orange Collection Investor LLC	Ownership	..100.000	Cigna corporation	..NO	
.0901	Cigna Group		84-1921719				CGGL XR International LLC	..DE	..NIA	CARING XR International Investor LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		84-1843578				CGGL XR 2 International LLC	..DE	..NIA	CARING XR 2 International Investor LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		59-3466707				Chiro Alliance Corporation	..FL	..NIA	eviCore healthcare MSI, LLC	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		81-3389374				CIG-LEI Ygnacio Associates LLC	..DE	..NIA	Cigna Affiliates Realty Investment Group, LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		86-2964997				CI-GS Elan Everett Phase I, LLC	..DE	..NIA	CARING Elan I Investor, LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		86-3726159				CI-GS Elan Everett Phase II, LLC	..DE	..NIA	CARING Elan II Investor, LLC	Ownership	..39.000	Cigna Corporation	..NO	
.0901	Cigna Group		82-4774243				CI-GS Portland, LLC	..DE	..NIA	CARING 18th & Salmon Investor LLC	Ownership	..86.200	cigna Corporation	..NO	
.0901	Cigna Group		82-1612980				CI-GS Hillcrest LLC	..DE	..NIA	CARING Hillcrest Investor LLC	Ownership	..90.000	Cigna Corporation	..NO	
.0901	Cigna Group		88-3907567				CI-GS Slabtown, LLC	..DE	..NIA	CARING Slabtown Investor LLC	Ownership	..85.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna & CMB Asset Management Company Limited	..CHN	..NIA	Cigna & CMB Life Insurance Company Limited	Ownership	..87.350	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna & CMB Health Services Company, Ltd.	..CHN	..NIA	Cigna & CMB Life Insurance Company Limited	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna & CMB Life Insurance Company Limited	..CHN	..IA	Cigna Health and Life Insurance Company	Ownership	..50.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				CIGNA 2000 UK Pension LTD	..GBR	..NIA	Cigna European Services (UK) Limited	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		27-5402196				Cigna Affiliates Realty Investment Group, LLC	..DE	..NIA	Connecticut General Life Insurance Company	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna Alder Holdings, LLC	..DE	..NIA	Cigna Apac Holdings, Ltd.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna Apac Holdings, Ltd.	..BMU	..NIA	Cigna Palmetto Holdings, Ltd.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	13733	03-0452349				Cigna Arbor Life Insurance Company	..CT	..IA	Connecticut General Corporation	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		98-1181787				Cigna Beechwood Holdings	..BEL	..NIA	Cigna Elmwood Holdings, SPRL	Ownership	..51.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna Bellevue Alpha LLC	..DE	..NIA	Cigna Holdings Overseas, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		02-0515554				Cigna Benefit Technology Solutions, Inc.	..DE	..NIA	Cigna Health Corporation	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		01-0947889		0001489070		Cigna Benefits Financing, Inc.	..DE	..NIA	Cigna Investments, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		00-0000000				Cigna Cedar Holdings, Ltd.	..MLT	..NIA	Cigna Apac Holdings, Ltd.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		98-1137759				Cigna Chestnut Holdings, Ltd.	..GBR	..NIA	Cigna Walnut Holdings, Ltd.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		27-3396038				Cigna Corporate Services, LLC	..DE	..NIA	Cigna Health and Life Insurance Company	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		82-4991898		1739940	US	Cigna Corporation (A Delaware corporation and ultimate parent company)	..DE	..UIP	Publicly Traded	Ownership	..100.000	Publicly Traded	..NO	
.0901	Cigna Group		00-0000000				Cigna Data Services (Shanghai) Company Limited	..CHN	..NIA	Cigna Hong Kong Holdings Company Limited	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		59-2600475				Cigna Dental Health Of California, Inc.	..CA	..NIA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	11175	59-2675861				Cigna Dental Health Of Colorado, Inc.	..CO	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	95380	59-2676987				Cigna Dental Health Of Delaware, Inc.	..DE	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	52021	59-1611217				Cigna Dental Health Of Florida, Inc.	..FL	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group		06-1351097				Cigna Dental Health of Illinois, Inc.	..IL	..NIA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	52024	59-2625350				Cigna Dental Health Of Kansas, Inc.	..KS	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	52108	59-2619589				Cigna Dental Health Of Kentucky, Inc.	..KY	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	48119	20-2844020				Cigna Dental Health Of Maryland, Inc.	..MD	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	11160	06-1582068				Cigna Dental Health Of Missouri, Inc.	..MO	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	11167	59-2308062				Cigna Dental Health Of New Jersey, Inc.	..NJ	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	95179	56-1803464				Cigna Dental Health Of North Carolina, Inc.	..NC	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	47805	59-2579774				Cigna Dental Health Of Ohio, Inc.	..OH	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	
.0901	Cigna Group	47041	52-1220578				Cigna Dental Health Of Pennsylvania, Inc.	..PA	..IA	Cigna Dental Health, Inc.	Ownership	..100.000	Cigna Corporation	..NO	

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.0901	Cigna Group	95037	59-2676977				Cigna Dental Health Of Texas, Inc.	TX	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	52617	52-2188914				Cigna Dental Health Of Virginia, Inc.	VA	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	47013	86-0807222				Cigna Dental Health Plan Of Arizona, Inc.	AZ	IA	Cigna Dental Health, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		59-2308055				Cigna Dental Health, Inc.	FL	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		58-1136865				Cigna Direct Marketing Company, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		98-1155943				Cigna Elmwood Holdings, SPRL	BEL	NIA	Cigna Myrtle Holdings, Ltd.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Europe Insurance Company S.A.-N.V.	BEL	IA	Cigna Beechwood Holdings	Ownership	99.999	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna European Services (UK) Limited	GBR	NIA	Cigna Elmwood Holdings, SPRL	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		62-1724116				Cigna Federal Benefits, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Formosa Management Services Company Limited	TWN	NIA	Cigna Walnut Holdings, Ltd.	Ownership	100.000	Cigna corporation	NO	
.0901	Cigna Group		51-0389196				Cigna Global Holdings, Inc.	DE	NIA	Cigna Holdings, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		68-0676638				Cigna Global Insurance Company Limited	GGY	IA	Cigna Holdings Overseas, Inc.	Ownership	99.990	Cigna Corporation	NO	
.0901	Cigna Group		98-0210110				Cigna Global Reinsurance Company, Ltd.	BMU	IA	Cigna Global Holdings, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Global Wellbeing Holdings Limited	GBR	NIA	Connecticut General Corporation	Ownership	70.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Global Wellbeing Solutions Limited	GBR	NIA	Cigna Global Wellbeing Holdings Limited	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	67369	59-1031071				Cigna Health and Life Insurance Company	CT	UDP	Connecticut General Life Insurance Company	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		62-1312478				Cigna Health Corporation	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		23-1728483				Cigna Health Management, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Health Solution India Pvt. Ltd.	IND	NIA	Cigna Holdings Overseas, Inc.	Ownership	99.900	Cigna Corporation	NO	
.0901	Cigna Group		23-2741293				Cigna Healthcare Benefits, Inc.	DE	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna Healthcare Eastern Technology Services Company	HKG	NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		84-0985843				Cigna Healthcare Holdings, Inc.	CO	NIA	Connecticut General Corporation	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95599	52-1404350				Cigna HealthCare Mid-Atlantic, Inc.	MD	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95125	86-0334392				Cigna HealthCare of Arizona, Inc.	AZ	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		95-3310115				Cigna HealthCare of California, Inc.	CA	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95604	84-1004500				Cigna HealthCare of Colorado, Inc.	CO	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95660	06-1141174				Cigna HealthCare of Connecticut, Inc.	CT	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95136	59-2089259				Cigna HealthCare of Florida, Inc.	FL	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	96229	58-1641057				Cigna HealthCare of Georgia, Inc.	GA	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95602	36-3385638				Cigna HealthCare of Illinois, Inc.	IL	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95525	35-1679172				Cigna HealthCare of Indiana, Inc.	IN	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95477	01-0418220				Cigna HealthCare of Maine, Inc.	ME	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95220	02-0402111				Cigna HealthCare of Massachusetts, Inc.	MA	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95493	02-0387749				Cigna HealthCare of New Hampshire, Inc.	NH	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95500	22-2720890				Cigna HealthCare of New Jersey, Inc.	NJ	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95132	56-1479515				Cigna HealthCare of North Carolina, Inc.	NC	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95121	23-2301807				Cigna HealthCare of Pennsylvania, Inc.	PA	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95708	06-1185590				Cigna HealthCare of South Carolina, Inc.	SC	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95635	36-3359925				Cigna HealthCare of St. Louis, Inc.	MO	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95606	62-1218053				Cigna HealthCare of Tennessee, Inc.	TN	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95383	74-2767437				Cigna HealthCare of Texas, Inc.	TX	IA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group	95518	62-1230908				Cigna HealthCare of Utah, Inc.	UT	NIA	Healthsource, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		02-0495422				Cigna Healthcare, Inc.	VT	NIA	Cigna Healthcare Holdings, Inc.	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		00-0000000				Cigna HLA Technology Services Company Limited	HKG	NIA	Cigna Hong Kong Holdings Company Limited	Ownership	100.000	Cigna Corporation	NO	
.0901	Cigna Group		06-1059331				Cigna Holding Company	DE	UIP	Cigna Corporation	Ownership	100.000	Cigna Corporation	NO	

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? (Yes/No)	*
.0901 ...	Cigna Group .....	.....	23-3009279 ..	.....	.....	.....	Cigna Holdings Overseas, Inc. ....	..DE....	..NIA.....	Cigna Global Reinsurance Company, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	06-1072796 ..	.....	.....	.....	Cigna Holdings, Inc. ....	..DE....	..UIP.....	Cigna Holding Company .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Hong Kong Holdings Company Limited .....	..HKG....	..NIA.....	Cigna Chestnut Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	27-1903785 ..	.....	.....	.....	Cigna Insurance Agency, LLC .....	..CT....	..NIA.....	Cigna Health and Life Insurance Company ... Provident American Life and Health Insurance Company .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	65269 .....	75-2305400 ..	.....	.....	.....	Cigna Insurance Company .....	..OH....	..RE.....	Insurance Company .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Insurance Management Services (DIFC), Ltd. ....	..ARE....	..NIA.....	Cigna Apac Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Insurance Middle East S.A.L. ....	..LBN....	..IA.....	Cigna Cedar Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Insurance Services (Europe) Limited ...	..GBR....	..NIA.....	Cigna Willow Holdings, LTD. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	23-2924152 ..	.....	.....	.....	Cigna Integratedcare, Inc. ....	..DE....	..NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	51-0402128 ..	.....	.....	.....	Cigna Intellectual Property, Inc. ....	..DE....	..NIA.....	Cigna Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	51-0111677 ..	.....	.....	.....	Cigna International Corporation, Inc. ....	..DE....	..NIA.....	Cigna Global Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	52-0291385 ..	.....	.....	.....	Cigna International Finance, Inc. ....	..DE....	..NIA.....	Cigna Investment Group, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna International Health Services Kenya Limited .....	..KEN....	..NIA.....	Cigna International Health Services, BVBA .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna International Health Services Sdn. Bhd. ....	..MYS....	..NIA.....	Cigna Hong Kong Holdings Company Limited ..	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna International Health Services, BVBA ...	..BEL....	..NIA.....	Cigna Elmwood Holdings, Ltd. ....	Ownership.....	51.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	30-0526216 ..	.....	.....	.....	Cigna International Health Services, LLC .....	..FL....	..NIA.....	Cigna International Health Services, BVBA .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna International Marketing (Thailand) Limited .....	..THA....	..NIA.....	Cigna Global Holdings, Inc. ....	Ownership.....	99.900 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna International Services Australia Pty Ltd. ....	..AUS....	..NIA.....	Cigna Chestnut Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	23-2610178 ..	.....	.....	.....	Cigna International Services, Inc. ....	..DE....	..NIA.....	Cigna Global Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	06-1095823 ..	.....	.....	.....	Cigna Investment Group, Inc. ....	..DE....	..NIA.....	Cigna Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	06-0861092 ..	.....	.....	.....	Cigna Investments, Inc. ....	..DE....	..NIA.....	Cigna Investment Group, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	98-1146864 ..	.....	.....	.....	Cigna Laurel Holdings, Ltd. ....	..BMU....	..NIA.....	Cigna Linden Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Legal Protection U.K. Ltd. ....	..GBR....	..NIA.....	Cigna Willow Holdings, LTD. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	AA-1560515 ..	.....	.....	.....	Cigna Life Insurance Company of Canada .....	..CAN....	..IA.....	Cigna Chestnut Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.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 .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	46-4110289 ..	.....	.....	.....	Cigna Linden Holdings, Inc. ....	..DE....	..NIA.....	Cigna Holdings Overseas, Inc. ....	Ownership.....	82.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	98-1232512 ..	.....	.....	.....	Cigna Magnolia Holdings, Ltd. ....	..BMU....	..NIA.....	Cigna Palmetto Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	23-2741294 ..	.....	.....	.....	Cigna Managed Care Benefits Company .....	..DE....	..NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	87-3374500 ..	.....	.....	.....	Cigna Management Company LLC .....	..DE....	..NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	98-1154657 ..	.....	.....	.....	Cigna Myrtle Holdings, Ltd. ....	..MLT....	..NIA.....	Cigna Apac Holdings, Ltd. ....	Ownership.....	74.560 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	61727 .....	34-0970995 ..	.....	.....	.....	Cigna National Health Insurance Company ....	..OH....	..UIP.....	Cigna Health and Life Insurance Company ...	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Nederland Gamma B.V. ....	..NLD....	..NIA.....	Cigna Walnut Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Oak Holdings, Ltd. ....	..GBR....	..NIA.....	Cigna Elmwood Holdings, SPRL .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	98-1232443 ..	.....	.....	.....	Cigna Palmetto Holdings, Ltd. ....	..BMU....	..NIA.....	Cigna Laurel Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	46-4099800 ..	.....	.....	.....	Cigna Poplar Holdings, Inc. ....	..DE....	..NIA.....	Cigna Holdings Overseas, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	06-1071502 ..	.....	.....	.....	Cigna RE Corporation .....	..DE....	..NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	06-1567902 ..	.....	.....	.....	Cigna Resource Manager, Inc. ....	..DE....	..NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Services Middle East FZE .....	..ARE....	..NIA.....	Cigna Cedar Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Spruce Holdings GmbH .....	..CHE....	..NIA.....	Cigna Chestnut Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Teak Holdings, LLC .....	..DE....	..NIA.....	Cigna Global Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Turkey Danismanlik Hizmetleri, A.S (A/K/A Cigna Turkey Consultancy Services, A.S.) .....	..TUR....	..NIA.....	Cigna Magnolia Holdings, Ltd. ....	Ownership.....	100.000 ...	Cigna Corporation .....	...NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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? (Yes/No)	*
. 0901 ...	Cigna Group .....	.....	83-1069280 ..	.....	.....	.....	Cigna Ventures, LLC .....	..DE.....	..NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Walnut Holdings, Ltd. ....	..GBR.....	..NIA.....	Cigna Apac Holdings, Ltd. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Willow Holdings, Ltd. ....	..GBR.....	..NIA.....	Cigna Oak Holdings, Ltd. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Cigna Worldwide General Insurance Company Limited .....	..HKG.....	..IA.....	Cigna Hong Kong Holdings Company Limited ..	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	90859 ..	23-2088429 ..	.....	.....	.....	Cigna Worldwide Insurance Company .....	..DE.....	..IA.....	Cigna Global Reinsurance Company, Ltd. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Claims and Risk Services Limited .....	..SAU.....	..IA.....	NAS Neuron Health Services, L.L.C. ....	Ownership.....	..50.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	ManipalCigna Health Insurance Company Limited .....	..IND.....	..IA.....	Cigna Holdings Overseas, Inc. ....	Ownership.....	..49.000 ...	TTK (non-affiliate) .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-1461840 ..	.....	.....	.....	Community Health Network, LLC .....	..MT.....	..NIA.....	Benefit Management Corp. ....	Ownership.....	..50.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	06-1252419 ..	.....	.....	.....	Connecticut General Benefit Payments, Inc. .	..DE.....	..NIA.....	Connecticut General Corporation .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	06-0840391 ..	.....	.....	.....	Connecticut General Corporation .....	..CT.....	..UIP.....	Cigna Holdings, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	62308 ..	06-0303370 ..	.....	0000023419 ..	.....	Connecticut General Life Insurance Company .	..CT.....	..UIP.....	Connecticut General Corporation .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	82-4936006 ..	.....	.....	.....	CPI-CII 9171 Wilshire JV LLC .....	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	..90.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	27-3555688 ..	.....	.....	.....	Cigna Affiliates Realty Investment Group, LLC .....	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	..90.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	27-3555688 ..	.....	.....	.....	CR Washington Street Investors LP .....	..DE.....	..NIA.....	Charles River Washington Street LLC (non-affiliate) .....	Ownership.....	..33.820 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	36-4369972 ..	.....	.....	.....	CuraScript, Inc. ....	..DE.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-1305728 ..	.....	.....	.....	Deco Apartments JV LLC .....	..DE.....	..NIA.....	CARING Deco Investor LLC .....	Ownership.....	..90.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-1334095 ..	.....	.....	.....	Deco Apartments Owner LLC .....	..DE.....	..NIA.....	CARING Deco Investor LLC .....	Ownership.....	..90.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	16-1526641 ..	.....	.....	.....	Diversified NY IPA, Inc. ....	..NY.....	..NIA.....	Diversified Pharmaceutical Services, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	41-1627938 ..	.....	.....	.....	Diversified Pharmaceutical Services, Inc. ...	..MN.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	27-3542089 ..	.....	.....	.....	Express Scripts Pharmaceutical Procurement LLC (90%) .....	..DE.....	..NIA.....	Express Scripts Pharmaceutical Procurement LLC (90%) .....	Ownership.....	..90.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Econdisc Contracting Solutions, LLC .....	..DE.....	..NIA.....	NAS Neuron Health Services, L.L.C. ....	Ownership.....	..64.999 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Egyptian Emirates Administration Services SAE .....	..EGY.....	..NIA.....	Express Scripts Canada Co. (99.9%); ESI-GP Canada, ULC (0.1%) .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	ESI Canada .....	..CAN.....	..NIA.....	Express Scripts Canada Co. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	ESI GP Canada ULC .....	..CAN.....	..NIA.....	Express Scripts Canada Co. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	43-1925556 ..	.....	.....	.....	ESI GP Holdings, Inc. ....	..DE.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	ESI GP2 Canada ULC .....	..CAN.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	74-2974964 ..	.....	.....	.....	ESI Mail Order Processing, Inc. (f/k/a NXI) ..	..DE.....	..NIA.....	Express Scripts Canada Co. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	43-1867735 ..	.....	.....	.....	ESI Mail Pharmacy Service, Inc. ....	..DE.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	43-1925562 ..	.....	.....	.....	Express Scripts, Inc. (82%); ESI-GP Holdings, Inc. (18%) .....	..DE.....	..NIA.....	Express Scripts, Inc. (82%); ESI-GP Holdings, Inc. (18%) .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	41-2006555 ..	.....	.....	.....	ESI Partnership .....	..MN.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	92-1016132 ..	.....	.....	.....	ESI Resources, Inc. ....	..DE.....	..NIA.....	ESI Partnership .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	94-3107309 ..	.....	.....	.....	ESSCH Holdings, Inc. ....	..DE.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	75-2751090 ..	.....	.....	.....	Evernorth Behavioral Health of California, Inc. ....	..CA.....	..NIA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	41-1648670 ..	.....	.....	.....	Evernorth Behavioral Health of Texas, Inc. .	..TX.....	..NIA.....	Evernorth Behavioral Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	86-1465626 ..	.....	.....	.....	Evernorth Behavioral Health, Inc. ....	..MN.....	..NIA.....	Evernorth Behavioral Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	32-0222252 ..	.....	.....	.....	Evernorth Behavioral Health, Inc. ....	..DE.....	..NIA.....	Connecticut General Corporation .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2732455 ..	.....	.....	.....	Evernorth Care Solutions, Inc. ....	..DE.....	..NIA.....	Evernorth Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2759151 ..	.....	.....	.....	Evernorth Direct Health, LLC .....	..DE.....	..NIA.....	Evernorth Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-2717903 ..	.....	.....	.....	Evernorth Enterprise Services, Inc. ....	..DE.....	..NIA.....	Evernorth Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	46-4676347 ..	.....	.....	.....	Evernorth Sales Operations, Inc. ....	..DE.....	..NIA.....	Cigna Corporation .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	62-1615395 ..	.....	.....	.....	Evernorth Strategic Development, Inc. ....	..DE.....	..NIA.....	Cigna Corporation .....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	27-3175443 ..	.....	.....	.....	eviCore 1, LLC .....	..DE.....	..NIA.....	Evernorth Health, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	13918 ..	.....	.....	.....	eviCore healthcare MSI, LLC .....	..TN.....	..NIA.....	MedSolutions Holdings, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....
. 0901 ...	Cigna Group .....	.....	27-3175443 ..	.....	.....	.....	Express Reinsurance Company .....	..MO.....	..IA.....	Express Scripts, Inc. ....	Ownership.....	..100.000 ...	Cigna Corporation .....	...NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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? (Yes/No)	*
. 0901 ...	Cigna Group	.....	41-2063830 ..	.....	.....	.....	Express Scripts Administrators LLC .....	.. DE.....	.. NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Canada Co. ....	.. CAN.....	.. NIA.....	Express Scripts Canada Holding Co. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	43-1942542 ..	.....	.....	.....	Express Scripts Canada Holding Co. ....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	27-1490640 ..	.....	.....	.....	Express Scripts Canada Holding, LLC .....	.. DE.....	.. NIA.....	Express Scripts Canada Holding Co. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Canada Services .....	.. CAN.....	.. NIA.....	Express Scripts Canada Co. (99.9%); ESI- GP2 Canada, ULC (0.1%) .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Canada Wholesale .....	.. CAN.....	.. NIA.....	Express Scripts Canada Co. (99.9%); ESI- GP2 Canada, ULC (0.1%) .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	84-5003423 ..	.....	.....	.....	Partners, Inc. ....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	45-2884094 ..	.....	.....	.....	Evernorth Health, Inc. ....	.. DE.....	.. NIA.....	Cigna Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	20-5826948 ..	.....	.....	.....	Express Scripts Pharmaceutical Procurement, LLC .....	.. DE.....	.. NIA.....	ESI Mail Pharmacy Service, Inc. (50%); Express Scripts, Inc. (50%) .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Pharmacy Atlantic, Ltd. ....	.. CAN.....	.. NIA.....	Express Scripts Canada Services .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Pharmacy Central, Ltd. ....	.. CAN.....	.. NIA.....	Express Scripts Canada Services .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Pharmacy Ontario, Ltd. ....	.. CAN.....	.. NIA.....	Express Scripts Canada Services .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Express Scripts Pharmacy West, Ltd. ....	.. CAN.....	.. NIA.....	Express Scripts Canada Services .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	30-0789911 ..	.....	.....	.....	Express Scripts Pharmacy, Inc. ....	.. DE.....	.. NIA.....	Medco Health Services, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	22-3114423 ..	.....	.....	.....	Express Scripts Sales Operations, Inc. ....	.. NJ.....	.. NIA.....	ESI Mail Pharmacy Service, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	20-3126104 ..	.....	.....	.....	Express Scripts Senior Care Holdings LLC ...	.. DE.....	.. NIA.....	ESSCH Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	20-3126075 ..	.....	.....	.....	Express Scripts Senior Care, Inc. ....	.. DE.....	.. NIA.....	ESSCH Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	43-1832983 ..	.....	.....	.....	Express Scripts Services Co. ....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	43-1869712 ..	.....	.....	.....	Express Scripts Specialty Distribution Services, Inc. ....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	22-2230703 ..	.....	.....	.....	Express Scripts Strategic Development, Inc. Express Scripts Utilization Management Company .....	.. NJ.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	43-1869714 ..	.....	.....	.....	Company .....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	43-1420563 ..	.....	.....	.....	Express Scripts, Inc. ....	.. DE.....	.. NIA.....	Evernorth Health, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	FirstAssist Administration Limited .....	.. GBR.....	.. NIA.....	Cigna Willow Holdings, LTD. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	23-1914061 ..	.....	.....	.....	Former Cigna Investments, Inc. ....	.. DE.....	.. NIA.....	Cigna Investment Group, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	88-3762943 ..	.....	.....	.....	Forsyth Health, LLC .....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	02-0523249 ..	.....	.....	.....	Freco, Inc. ....	.. FL.....	.. NIA.....	Priority Healthcare Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	20-3229217 ..	.....	.....	.....	Freedom Service Company, LLC .....	.. FL.....	.. NIA.....	Lynnfield Drug, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	Gillette Ridge Community Council, Inc. ....	.. CT.....	.. NIA.....	Connecticut General Life Insurance Company	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	20-3700105 ..	.....	.....	.....	Gillette Ridge Golf, LLC .....	.. DE.....	.. NIA.....	Connecticut General Life Insurance Company	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	95388	93-1174749 ..	.....	.....	.....	Great-West Healthcare of Illinois, Inc. ....	.. IL.....	.. NIA.....	Cigna Healthcare Holdings, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	00-0000000 ..	.....	.....	.....	GRG Acquisitions LLC .....	.. DE.....	.. NIA.....	Connecticut General Life Insurance Company	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	76-0657035 ..	.....	.....	.....	GulfQuest, LP .....	.. TX.....	.. NIA.....	HouQuest, LLC .....	Ownership.....	99.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	87-3650143 ..	.....	.....	.....	Hartford Community Lender Holding LLC .....	.. DE.....	.. NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	87-3686301 ..	.....	.....	.....	Hartford Community Lender I LLC .....	.. DE.....	.. NIA.....	Hartford Community Lender Holding LLC ...	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	52-2149519 ..	.....	.....	.....	Hazard Center Investment Company LLC .....	.. DE.....	.. NIA.....	Connecticut General Life Insurance Company	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	04-2992335 ..	.....	.....	.....	Healthbridge Reimbursement & Product Support, Inc. ....	.. MA.....	.. NIA.....	Priority Healthcare Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	26-2159005 ..	.....	.....	.....	Healthbridge, Inc. ....	.. DE.....	.. NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	46-2086778 ..	.....	.....	.....	Health-Lynx, LLC .....	.. NJ.....	.. NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
. 0901 ...	Cigna Group	.....	06-1533555 ..	.....	.....	.....	Healthsource Benefits, Inc. ....	.. DE.....	.. NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....

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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 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? (Yes/No)	*
.0901	Cigna Group		02-0467679				Healthsource Properties, Inc.	..NH.....	..NIA.....	Healthsource, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		02-0387748		0000855587		Healthsource, Inc.	..DE.....	..NIA.....	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group	12902	20-8534298				HealthSpring Life & Health Insurance Company, Inc.	..TX.....	..IA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		20-8647386				HealthSpring Management of America, LLC	..DE.....	..NIA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group	11532	65-1129599				HealthSpring of Florida, Inc.	..FL.....	..IA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		26-2353772				HealthSpring Pharmacy of Tennessee, LLC	..DE.....	..NIA.....	HealthSpring Pharmacy Services, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		26-2353476				HealthSpring Pharmacy Services, LLC	..DE.....	..NIA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		72-1559530				HealthSpring USA, LLC	..TN.....	..NIA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		20-1821898		0001339553		HealthSpring, Inc.	..DE.....	..NIA.....	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		81-4139432				Heights at Bear Creek Borrower LLC	..DE.....	..NIA.....	CARING Heights At Bear Creek Investor LLC	Ownership.....	80.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		81-4139432				Heights at Bear Creek Mezzanine LLC	..DE.....	..NIA.....	CARING Heights At Bear Creek Investor LLC	Ownership.....	80.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		81-4139432				Heights at Bear Creek Venture LLC	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		20-4266628				Home Physicians Management, LLC	..DE.....	..NIA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		75-3108521				HouQuest, LLC	..DE.....	..NIA.....	NewQuest, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		37-1708015				Houston Briar Forest Apartments Limited Partnership	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	80.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		95-4838551				Ideal Properties II LLC	..CA.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	85.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		35-2041388				IHN, Inc.	..IN.....	..NIA.....	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				Independent Health Information Technology Services L.L.C.	..ARE.....	..NIA.....	NAS Neuron Health Services, L.L.C.	Ownership.....	50.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		82-1655179				Innovative Product Alignment, LLC	..DE.....	..NIA.....	Express Scripts, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		82-0658250				Inside RX, LLC	..DE.....	..NIA.....	Express Scripts, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		81-0425785				Intermountain Underwriters, Inc.	..MT.....	..NIA.....	Benefit Management Corp.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				International Pharmaceutical Solutions, GmbH	..CHE.....	..NIA.....	Cigna Holdings Overseas, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		84-3406799				JA Lofts Holdings, LLC	..DE.....	..NIA.....	JA Lofts JV Limited Partnership	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		84-3395923				JA Lofts JV Limited Partnership	..DE.....	..NIA.....	CARING JA Lofts Investor LP LLC	Ownership.....	90.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				Kuwait Emirates Administration Services WLL	..KIWT.....	..NIA.....	NAS Administrative Services Company LLC	Ownership.....	90.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		20-8064696				Kronos Optimal Health Company	..AZ.....	..NIA.....	Connecticut General Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		47-5292506				L&C Investments, LLC	..DE.....	..NIA.....	Express Scripts, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		47-4375626				Lakehills CM-CG LLC	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	90.000	Cigna Corporation	....NO.....	
.0901	Cigna Group	65722	63-0343428				Loyal American Life Insurance Company	..OH.....	..IA.....	Cigna Health and Life Insurance Company	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		58-2593075				Lynnfield Compounding Center, Inc.	..FL.....	..NIA.....	Priority Healthcare Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		04-3546044				Lynnfield Drug, Inc.	..FL.....	..NIA.....	Priority Healthcare Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		27-1506930				MAH Pharmacy, LLC	..DE.....	..NIA.....	Medco Health Solutions, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		80-0908244				Mallory Square Partners I, LLC	..DE.....	..NIA.....	Cigna Affiliates Realty Investment Group, LLC	Ownership.....	80.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		88-0241365				Managed Care Consultants, Inc.	..NV.....	..NIA.....	Cigna Health Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		51-0500147				Matrix GPO, LLC	..IN.....	..NIA.....	Priority Healthcare Corporation	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		59-3720653				Matrix Healthcare Services, Inc.	..FL.....	..NIA.....	MyMatrixx Holdings, LLC	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		06-1346406				MCC Independent Practice Association of New York, Inc.	..NY.....	..NIA.....	Evernorth Health, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		45-4937055				MDLive, Inc.	..DE.....	..NIA.....	Evernorth Health, Inc.	Ownership.....	97.230	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				MDLive LLC	..DE.....	..NIA.....	MDLive, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				MDLivevisit, LLC	..FL.....	..NIA.....	MDLive, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	
.0901	Cigna Group		00-0000000				MDLive Provider Services, LLC	..FL.....	..NIA.....	MDLive, Inc.	Ownership.....	100.000	Cigna Corporation	....NO.....	

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.0901 ...	Cigna Group .....	34720 ....	13-3506395 ..	.....	.....	.....	Medco Containment Insurance Company of NY ...	.. NY.....	..... IA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	63762 ....	42-1425239 ..	.....	.....	.....	Medco Containment Life Insurance Company ....	.. PA.....	..... IA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	27-3709630 ..	.....	.....	.....	Medco Europe II, LLC .....	.. DE.....	..... NIA.....	Medco Europe, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	46-2166374 ..	.....	.....	.....	Medco Europe, LLC .....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	84-5017653 ..	.....	.....	.....	Medco Health Information Network Partners, Inc. ....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	81-0616525 ..	.....	.....	.....	Medco Health Puerto Rico, LLC .....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	26-3544786 ..	.....	.....	.....	Medco Health Services, Inc. ....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	22-3461740 ..	.....	.....	.....	Medco Health Solutions, Inc. ....	.. DE.....	..... NIA.....	Evernorth Health, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	88-0334401 ..	.....	.....	.....	Mediversal, Inc. ....	.. NV.....	..... NIA.....	Connecticut General Corporation .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	27-3801345 ..	.....	.....	.....	MedSolutions Holdings, Inc. ....	.. DE.....	..... NIA.....	eviCore 1, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	87-2810715 ..	.....	.....	.....	Montclair 11 Pine Operating Company LLC .....	.. DE.....	..... NIA.....	CARING Montclair Investor LLC .....	Ownership.....	90.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	87-2790325 ..	.....	.....	.....	Montclair 11 Pine Urban Renewal LLC .....	.. DE.....	..... NIA.....	CARING Montclair Investor LLC .....	Ownership.....	90.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	87-2772585 ..	.....	.....	.....	Montclair Residences JV LLC .....	.. DE.....	..... NIA.....	CARING Montclair Investor LLC .....	Ownership.....	90.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	32-0071543 ..	.....	.....	.....	MSI Health Organization of Texas, Inc. ....	.. TX.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	27-5492993 ..	.....	.....	.....	MSI HT, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	27-5493148 ..	.....	.....	.....	MSI LT, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	27-5493321 ..	.....	.....	.....	MSI SAR-GW, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	86-1090522 ..	.....	.....	.....	MSIAZ I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-1749733 ..	.....	.....	.....	MSICA I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-1222347 ..	.....	.....	.....	MSICO I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	55-0840800 ..	.....	.....	.....	MSIFL, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	26-0181185 ..	.....	.....	.....	MSIMD I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	74-3122235 ..	.....	.....	.....	MSINC I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	11-3715243 ..	.....	.....	.....	MSINH II, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	03-0524694 ..	.....	.....	.....	MSINH, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-1749446 ..	.....	.....	.....	MSINJ I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-1761914 ..	.....	.....	.....	MSINV I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	55-0840806 ..	.....	.....	.....	MSISC II, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	26-0336736 ..	.....	.....	.....	MSIVT I, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-2536458 ..	.....	.....	.....	MSIWA, LLC .....	.. TN.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	36-4833284 ..	.....	.....	.....	MyM Technology Services, LLC .....	.. FL.....	..... NIA.....	MyMatrixx Holdings, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	82-1350878 ..	.....	.....	.....	myMatrixx Holdings, LLC .....	.. DE.....	..... NIA.....	Express Scripts, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	46-2589799 ..	.....	.....	.....	myMatrixx-B, LLC .....	.. FL.....	..... NIA.....	Matrix Healthcare Services, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	NAS Administrative Services Company LLC .....	.. ARE.....	..... NIA.....	NAS Neuron Health Services, L.L.C. ....	Ownership.....	99.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	NAS Neuron Health Services, L.L.C. ....	.. ARE.....	..... NIA.....	Cigna Chestnut Holdings, Ltd. ....	Ownership.....	34.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	NAS United SPV .....	.. CYM.....	..... NIA.....	NAS Neuron Health Services, L.L.C. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Neuron LLC .....	.. ARE.....	..... NIA.....	NAS Neuron Health Services, L.L.C. ....	Ownership.....	99.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	52-1929677 ..	.....	.....	.....	NewQuest Management Northeast, LLC .....	.. DE.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	33-1033586 ..	.....	.....	.....	NewQuest Management of Alabama, LLC .....	.. AL.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	20-4954206 ..	.....	.....	.....	NewQuest Management of Florida, LLC .....	.. FL.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	77-0632665 ..	.....	.....	.....	NewQuest Management of Illinois, LLC .....	.. IL.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	45-0633893 ..	.....	.....	.....	NewQuest Management of West Virginia, LLC ...	.. DE.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	76-0628370 ..	.....	.....	.....	NewQuest, LLC .....	.. TX.....	..... NIA.....	HealthSpring, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	82-5244890 ..	.....	.....	.....	Octave Health Group, Inc. ....	.. DE.....	..... NIA.....	Cigna Ventures, LLC .....	Ownership.....	10.100 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	91-1599329 ..	.....	.....	.....	Olympic Health Management Services, Inc. ....	.. WA.....	..... NIA.....	Olympic Health Management Systems, Inc. ...	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	91-1500758 ..	.....	.....	.....	Olympic Health Management Systems, Inc. ....	.. WA.....	..... NIA.....	Sterling Life Insurance Company .....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	80-0818758 ..	.....	.....	.....	Patient Provider Alliance, Inc. ....	.. DE.....	..... NIA.....	Brighter, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....
.0901 ...	Cigna Group .....	.....	35-1927379 ..	.....	.....	.....	Priority Healthcare Corporation .....	.. IN.....	..... NIA.....	CuraScript, Inc. ....	Ownership.....	100.000 ...	Cigna Corporation .....	... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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 Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0901 ...	Cigna Group .....	.....	59-3761140 ..	.....	.....	.....	Priority Healthcare Distribution, Inc. ....	.. FL.....	..... NIA.....	Priority Healthcare Corp .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	..... 67903 ...	23-1335885 ..	.....	.....	.....	Provident American Life & Health Insurance Company .....	.. OH.....	..... UDP.....	Cigna National Health Insurance Company ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	PT GAR Indonesia .....	.. IDN.....	..... NIA.....	Cigna Holdings Overseas, Inc. ....	Ownership.....	.. 99.160 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	45-5046449 ..	.....	.....	.....	PUR Arbors Apartments Venture LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 87.500 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	46-1801639 ..	.....	.....	.....	QualCare Management Resources Limited Liability Company .....	.. NJ.....	..... NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Qualient Pharmaceuticals Holdings LP .....	.. CYM.....	..... NIA.....	Cigna Spruce Holdings GmbH .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Qualient Pharmaceuticals Health LLC .....	.. CYM.....	..... NIA.....	Qualient Pharmaceuticals Holdings LP .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	45-5569416 ..	.....	.....	.....	QPID Health, LLC .....	.. DE.....	..... NIA.....	eviCore healthcare MSI, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	83-1460134 ..	.....	.....	.....	Rise-CG Capitol Hill, LP .....	.. DE.....	..... NIA.....	CARING Capitol Hill LP LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3254168 ..	.....	.....	.....	Rise-CG JA Lofts Limited Partnership .....	.. DE.....	..... NIA.....	JA Lofts Holdings, LLC (.5%); JA Lofts JV Limited Partnership (99.5%) .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	35-1641636 ..	.....	.....	.....	Sagamore Health Network, Inc. ....	.. IN.....	..... NIA.....	Cigna Health Corporation .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	46-3593103 ..	.....	.....	.....	SB-SNH LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 85.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	95-2876207 ..	.....	.....	.....	Secon Properties, LP .....	.. CA.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 50.000 ...	South Coast Plaza Associates, LLC (non-affiliate) .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	82-1732483 ..	.....	.....	.....	SOMA Apartments Venture LLC .....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	82-4405071 ..	.....	.....	.....	Specialty Products Acquisitions, LLC .....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	61-1317695 ..	.....	.....	.....	SpectraCare Health Care Ventures, Inc. ....	.. KY.....	..... NIA.....	SpectraCare, Inc. ....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	61-1147068 ..	.....	.....	.....	SpectraCare, Inc. ....	.. KY.....	..... NIA.....	Priority Healthcare Corp .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	..... 77399 ...	13-1867829 ..	.....	.....	.....	Sterling Life Insurance Company .....	.. IL.....	..... IA.....	Cigna Health and Life Insurance Company ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	47-2658932 ..	.....	.....	.....	Strategic Pharmaceutical Investments, LLC ...	.. DE.....	..... NIA.....	Priority Healthcare Corp .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	SureScripts, LLC .....	.. VA.....	..... NIA.....	Express Scripts, Inc. 16.7%/Medco Health Solutions, Inc. 16.7% .....	Ownership.....	.. 33.400 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-0903685 ..	.....	.....	.....	Swedesford Road Apartments, LLC .....	.. DE.....	..... NIA.....	CARING Berwyn Investor LLC .....	Ownership.....	.. 68.600 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	22-3474888 ..	.....	.....	.....	Systemed, LLC .....	.. DE.....	..... NIA.....	Medco Health Solutions, Inc. ....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	23-3074013 ..	.....	.....	.....	Tel-Drug of Pennsylvania, LLC .....	.. PA.....	..... NIA.....	Connecticut General Life Insurance Company .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	46-0427127 ..	.....	.....	.....	Tel-Drug, Inc. ....	.. SD.....	..... NIA.....	Connecticut General Corporation .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Temple Insurance Company Limited .....	.. BMJ.....	..... IA.....	Healthsource, Inc. ....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	20-5524622 ..	.....	.....	.....	Tennessee Quest, LLC .....	.. TN.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	75-3108527 ..	.....	.....	.....	TexQuest, LLC .....	.. DE.....	..... NIA.....	NewQuest, LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-1955731 ..	.....	.....	.....	The Flats at Interbay Holdings, LLC .....	.. DE.....	..... NIA.....	CARING Interbay Investor LP LLC .....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-1955075 ..	.....	.....	.....	The Flats at Interbay JV Limited Partnership .....	.. DE.....	..... NIA.....	CARING Interbay Investor LP LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	85-1962013 ..	.....	.....	.....	The Flats at Interbay Limited Partnership ...	.. DE.....	..... NIA.....	CARING Interbay Investor LP LLC .....	Ownership.....	.. 99.500 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	46-5264463 ..	.....	.....	.....	Trainer Rx, Inc. ....	.. DE.....	..... NIA.....	Cigna Ventures, LLC .....	Ownership.....	.. 19.400 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Transwestern Federal, L.L.C. ....	.. DE.....	..... NIA.....	Transwestern Federal Holdings, L.L.C. ....	Ownership.....	.. 7.616 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Transwestern Federal Holdings, L.L.C. ....	.. DE.....	..... NIA.....	Cigna Affiliates Realty Investment Group, LLC .....	Ownership.....	.. 7.616 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	88-0344624 ..	.....	.....	.....	Universal Claims Administration .....	.. NV.....	..... NIA.....	Mediversal, Inc. ....	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	98-0463704 ..	.....	.....	.....	Vielife Services, Inc. ....	.. DE.....	..... NIA.....	Cigna Global Wellbeing Holdings Limited ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Verify Solutions Group, Inc. ....	.. DE.....	..... NIA.....	Cigna Health and Life Insurance Company ...	Ownership.....	.. 100.000 ...	Cigna Corporation .....	.... YES.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Westcore CG AC, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Camelback, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Cedar Port, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Westcore CG Commerce, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	.. 90.000 ...	Cigna Corporation .....	.... NO.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

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 Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Dove Valley I, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Dove Valley II, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Eisenhower, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG II Eisenhower, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Fountain Lakes, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Gateway, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG I-35, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Navy, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Potomac Park, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Solano, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	84-3178563 ..	.....	.....	.....	Westcore CG Susana, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Westcore CG Venture, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding Investor LLC .....	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-3624928 ..	.....	.....	.....	Westcore CG Venture II, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding II Investor LLC ...	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-3624928 ..	.....	.....	.....	Westcore CG II AC, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding II Investor LLC ...	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-3624928 ..	.....	.....	.....	Westcore CG II Park 225, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding II Investor LLC ...	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	87-3624928 ..	.....	.....	.....	Westcore CG II Union Cross, LLC .....	.. DE.....	..... NIA.....	CARING Westcore Holding II Investor LLC ...	Ownership.....	..90.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	Willow DSP LLC .....	.. DE.....	..... NIA.....	Accredo Health, Incorporated .....	Ownership.....	..100.000 .....	Cigna Corporation .....	.... NO.....	.....
. 0901 ...	Cigna Group .....	.....	00-0000000 ..	.....	.....	.....	YCFM Servicios LTDA .....	..BRA.....	..... NIA.....	Cigna Global Holdings, Inc. ....	Ownership.....	..35.320 .....	Cigna Corporation .....	.... NO.....	.....

Asterisk	

NONE

SCHEDULE Y  
PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	46-2332355 .....	1EQ Inc. (d/b/a Babyscripts) .....										
	88-1945947 .....	73 Pond Street Apartments Venture, L.L.C. ....										
	00-0000000 .....	680 Investors LLC .....										
	00-0000000 .....	685 New Hampshire LLC .....										
	82-4794800 .....	9171 Wilshire CPI-CII LLC .....										
	86-1712743 .....	ABL Apartments Venture, L.L.C. ....										
	88-4202407 .....	ABL Holding Co., L.L.C. ....										
	88-3747773 .....	ABL Townhomes Venture, L.L.C. ....										
	85-1046126 .....	ABS Apartments Venture, L.L.C. ....										
	11-3358535 .....	Accredo Health Group, Inc. ....										
	55-0894449 .....	Accredo Health, Incorporated .....										
	87-4355549 .....	AGA Apartments Venture, L.L.C. ....										
	13-3888838 .....	AHG of New York, Inc. ....										
	75-3040465 .....	Airport Holdings, LLC .....										
	35-2562415 .....	Alegis Care Services, LLC .....										
	85-0909305 .....	Alegis Care Services of Colorado, LLC .....										
	81-0400550 .....	Allegiance Benefit Plan Management, Inc. ....	(10,000,000)				14,044,456				4,044,456	
	03-0507057 .....	Allegiance Care Management, LLC .....					78,609				78,609	
	71-0916514 .....	Allegiance COBRA Services, Inc. ....					536				536	
12814	20-4433475 .....	Allegiance Life & Health Insurance Company .....					(1,978,926)	595,552			(1,383,374)	63,699
	26-2201582 .....	Allegiance Provider Direct, LLC .....										
	20-3851464 .....	Allegiance Re, Inc. ....										
88366	59-2760189 .....	American Retirement Life Insurance Company .....		(40,000,000)			(18,703,142)				(58,703,142)	
	87-4023291 .....	AOP II Apartments Venture, L.L.C. ....										
	82-3315524 .....	Arbor Heights Venture LLC .....										
	46-4080861 .....	AristaMD, Inc. ....										
	86-3581583 .....	Arizona Health Plan, Inc. ....										
	00-0000000 .....	Ascent Health Services LLC .....					(384,803)				(384,803)	
	86-1750832 .....	ASM Apartments Venture, L.L.C. ....										
	81-0585518 .....	Benefit Management Corp. ....										
	81-2650133 .....	Berewick Apartments LLC .....										
	43-1815573 .....	Biopartners in Care, Inc. ....										
10095	52-2259087 .....	Bravo Health Mid-Atlantic, Inc. ....		42,000,000			(31,329,523)	(56,580)			10,613,897	
11524	52-2363406 .....	Bravo Health Pennsylvania, Inc. ....					(119,265,673)	(203,267)			(119,468,940)	
	00-0000000 .....	Breakthrough Behavioral, Inc. ....										
	00-0000000 .....	Breakthrough Behavioral of Texas, Inc. ....										
	27-1713977 .....	Brighter, Inc. ....					428,904				428,904	
	46-4918521 .....	Buoy Health, Inc. ....										
	47-4991296 .....	Bright Health Group, Inc. ....										
	61-1162797 .....	Care Continuum, Inc. ....										
	85-0954556 .....	CareAllies Accountable Care Collaborative LLC .....										

SCHEDULE Y  
PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	85-0935554 .....	CareAllies Accountable Care Network LLC .....										
	00-0000000 .....	CareAllies Accountable Care Solutions LLC .....										
	26-0180898 .....	CareAllies, Inc. ....	(28,000,000)				(13,851)				(28,013,851)	
	81-2760646 .....	CareAllies, LLC .....										
10144	20-1089572 .....	CareCore NJ, LLC .....					(23,012,322)				(23,012,322)	
	45-2681649 .....	CarePlexus, LLC .....										
	83-1400586 .....	CARING 18th & Salmon Investor LLC .....										
	83-2562994 .....	CARING 500 Ygnacio Investor LLC .....										
	84-1960231 .....	CARING 3130 Investor LLC .....										
	83-2318410 .....	CARING 9171 Wilshire Investor LLC .....										
	85-4247420 .....	CARING ABS Investor LLC .....										
	83-2851501 .....	CARING Alta Duraleigh Investor LLC .....										
	83-2851501 .....	CARING Alta Englewood Investor LLC .....										
	85-2966766 .....	CARING Alta Leander Investor LLC .....										
	83-2563284 .....	CARING Alta Woodson Investor LLC .....										
	85-2966766 .....	CARING Avondale Investor LLC .....										
	87-1992977 .....	CARING Berwyn Investor LLC .....										
	86-1885283 .....	CARING Brinkman Investor LLC .....										
	32-0570889 .....	CARING Capitol Hill GP LLC .....										
	37-1903297 .....	CARING Capitol Hill LP LLC .....										
	83-2851364 .....	CARING Century Plaza Investor LLC .....										
	85-4265529 .....	CARING Deco Investor LLC .....										
	85-2912145 .....	CARING Elan I Investor LLC .....										
	87-0928526 .....	CARING Elan II Investor LLC .....										
	83-3701937 .....	CARING Firestone Investor LLC .....										
	87-4803572 .....	CARING Galleria Investor LLC .....										
	00-0000000 .....	CARING JA Lofts Investor LP LLC .....										
	00-0000000 .....	CARING JA Lofts Investor GP LLC .....										
	83-2318233 .....	CARING Heights at Bear Creek Investor LLC .....										
	83-1400482 .....	CARING Hillcrest Investor LLC .....										
	84-4410554 .....	CARING IBP Investor LLC .....										
	85-1961034 .....	CARING Interbay Investor GP LLC .....										
	85-1984627 .....	CARING Interbay Investor LP LLC .....										
	83-2339522 .....	CARING Mallory Square Investor LLC .....										
	85-4265529 .....	CARING Montclair Investor LLC .....										
	83-2563138 .....	CARING Soma Investor LLC .....										
	83-2633790 .....	CARING Alexan Enclave Investor LLC .....										
	83-2633886 .....	CARING Orange Collection Investor LLC .....										
	86-2627703 .....	CARING Optimist Park II Investor LLC .....										
	87-2031777 .....	CARING Slabtown Investor, LLC .....										
	83-8294933 .....	CARING South Coast Subsidiary LLC .....										
	86-1942593 .....	CARING St. Matthew's Investor LLC .....										
	88-2074593 .....	CARING Waltham Investor LLC .....										

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	38-4085763	CARING Westcore Holding Investor LLC										
	87-3646420	CARING Westcore Holding II Investor LLC										
	83-3923178	CARING XR International Investor LLC										
	83-4317078	CARING XR 2 International Investor LLC										
	84-1843578	CGGL XR 2 International JV LLC										
	84-1843578	CGGL XR 2 International Mezz LLC										
	45-2604992	CCN NMO, LLC					(10,858)				(10,858)	
	33-1039759	CCN-WNY IPA, LLC					(10,962)				(10,962)	
	34-1970892	Ceres Sales of Ohio, LLC					(402)				(402)	
	06-1332403	CG Individual Tax Benefit Payments, Inc.										
	06-1332405	CG Life Pension Benefits Payments, Inc.										
	06-1332401	CG LINA Pension Benefits Payments, Inc.										
	84-2083351	CG-AQ 477 South Market Street LLC										
	84-4773972	CG-LEDO IBP Venture LLC										
	84-4747045	CG-LEDO IBP I LLC										
	84-4755025	CG-LEDO IBP II LLC										
	83-2993316	CG-Muller 550 Winchester, LLC										
	45-5499889	CG Seventh Street, LLC										
	85-0734624	CG/Wood Alta Duraleigh, LLC										
	85-0655107	CG/Wood Alta Duraleigh Owner, LLC										
	87-2928401	CG/Wood Alta Duraleigh Townhome, LLC										
	82-1280312	CG/Wood Alta 601, LLC										
	85-2233381	CG/Wood Alta Leander Station, LLC										
	81-3313562	CGGL City Parkway LLC										
	61-1797835	CGGL Orange Collection LLC										
	00-0000000	CGGL Orange Collection Mezz LLC										
	84-1921719	CGGL XR International LLC										
	84-1843578	CGGL XR 2 International LLC										
	59-3466707	Chiro Alliance Corporation										
	81-3389374	CIG-LEI Ygnacio Associates LLC										
	86-2964997	CI-GS Elan Everett Phase I, LLC										
	86-3726159	CI-GS Elan Everett Phase II, LLC										
	82-4774243	CI-GS Portland, LLC										
	82-1612980	CI-GS Hillcrest LLC										
	88-3907567	CI-GS Slabtown, LLC										
	00-0000000	Cigna & CMB Asset Management Company Limited										
	00-0000000	Cigna & CMB Health Services Company, Ltd.										
	00-0000000	Cigna & CMB Life Insurance Company Limited										
	00-0000000	CIGNA 2000 UK Pension LTD										
	27-5402196	Cigna Affiliates Realty Investment Group, LLC		171,856,136							171,856,136	
	00-0000000	Cigna Alder Holdings, LLC										

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

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	00-0000000	Cigna Apac Holdings, Ltd.										
13733	03-0452349	Cigna Arbor Life Insurance Company					(3,494)				(3,494)	
	98-1181787	Cigna Beechwood Holdings										
	00-0000000	Cigna Bellevue Alpha LLC										
	02-0515554	Cigna Benefit Technology Solutions, Inc.										
	01-0947889	Cigna Benefits Financing, Inc.					1,252,920				1,252,920	
	00-0000000	Cigna Cedar Holdings, Ltd.										
	98-1137759	Cigna Chestnut Holdings, Ltd.										
	27-3396038	Cigna Corporate Services, LLC										
	82-4991898	Cigna Corporation (A Delaware corporation and ultimate parent company)	3,135,000,000								3,135,000,000	
	00-0000000	Cigna Data Services (Shanghai) Company Limited										
	59-2600475	Cigna Dental Health Of California, Inc.	(14,500,000)				1,121,429				(13,378,571)	
11175	59-2675861	Cigna Dental Health Of Colorado, Inc.	(2,000,000)				(829,879)				(2,829,879)	
95380	59-2676987	Cigna Dental Health Of Delaware, Inc.					(11,119)				(11,119)	
52021	59-1611217	Cigna Dental Health Of Florida, Inc.	(9,000,000)				(3,595,791)				(12,595,791)	
	06-1351097	Cigna Dental Health of Illinois, Inc.										
52024	59-2625350	Cigna Dental Health Of Kansas, Inc.	(250,000)				(212,152)				(462,152)	
52108	59-2619589	Cigna Dental Health Of Kentucky, Inc.	(2,500,000)				(1,005,696)				(3,505,696)	
48119	20-2844020	Cigna Dental Health Of Maryland, Inc.	(3,000,000)				(858,879)				(3,858,879)	
11160	06-1582068	Cigna Dental Health Of Missouri, Inc.	(1,500,000)				(460,611)				(1,960,611)	
11167	59-2308062	Cigna Dental Health Of New Jersey, Inc.	(1,498,000)				(1,566,826)				(3,064,826)	
95179	56-1803464	Cigna Dental Health Of North Carolina, Inc.					(650,843)				(650,843)	
47805	59-2579774	Cigna Dental Health Of Ohio, Inc.	(1,250,000)				(884,223)				(2,134,223)	
47041	52-1220578	Cigna Dental Health Of Pennsylvania, Inc.										
			(2,400,000)				(467,259)				(2,867,259)	
95037	59-2676977	Cigna Dental Health Of Texas, Inc.	(8,500,000)				(3,893,012)				(12,393,012)	
52617	52-2188914	Cigna Dental Health Of Virginia, Inc.	(1,600,000)				(571,707)				(2,171,707)	
47013	86-0807222	Cigna Dental Health Plan Of Arizona, Inc.										
			(3,500,000)				4,759,577				1,259,577	
	59-2308055	Cigna Dental Health, Inc.	(6,502,000)				23,907,582				17,405,582	
	58-1136865	Cigna Direct Marketing Company, Inc.										
	98-1155943	Cigna Elmwood Holdings, SPRL										
	00-0000000	Cigna Europe Insurance Company S.A.-N.V.										
	00-0000000	Cigna European Services (UK) Limited										
	62-1724116	Cigna Federal Benefits, Inc.										
	00-0000000	Cigna Formosa Management Services Company Limited										
	51-0389196	Cigna Global Holdings, Inc.	(184,961,692)	119,000,000			(18,755)				(65,980,447)	
	68-0676638	Cigna Global Insurance Company Limited					(8,324,061)	(2,237,204)			(10,561,265)	
	98-0210110	Cigna Global Reinsurance Company, Ltd.	37,000,000				(79,730)	(68,728,375)			(31,808,105)	(182,113,537)
	00-0000000	Cigna Global Wellbeing Holdings Limited										
	00-0000000	Cigna Global Wellbeing Solutions Limited										

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

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.....67369 .....	59-1031071 .....	Cigna Health and Life Insurance Company .....	.....(1,493,193,074) .....	.....(243,399,283) .....	.....	.....	.....(95,237,748) .....	.....53,979,341 .....	.....	.....	.....(1,777,850,764) .....	.....173,274,050 .....
.....	62-1312478 .....	Cigna Health Corporation .....	.....(14,000,000) .....	.....	.....	.....	.....90,570,713 .....	.....	.....	.....	.....76,570,713 .....	.....
.....	23-1728483 .....	Cigna Health Management, Inc. ....	.....	.....75,000,000 .....	.....	.....	.....24,029,474 .....	.....	.....	.....	.....99,029,474 .....	.....
.....	00-0000000 .....	Cigna Health Solution India Pvt. Ltd. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	23-2741293 .....	Cigna Healthcare Benefits, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Cigna Healthcare Eastern Technology Services Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-0985843 .....	Cigna Healthcare Holdings, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....95599 .....	52-1404350 .....	Cigna HealthCare Mid-Atlantic, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....95125 .....	86-0334392 .....	Cigna HealthCare of Arizona, Inc. ....	.....	.....	.....	.....	.....(26,380,737) .....	.....488,754 .....	.....	.....	.....(25,891,983) .....	.....586,999 .....
.....	95-3310115 .....	Cigna HealthCare of California, Inc. ....	.....(9,000,000) .....	.....	.....	.....	.....(27,380,310) .....	.....5,664,132 .....	.....	.....	.....(30,716,178) .....	.....3,961,976 .....
.....95604 .....	84-1004500 .....	Cigna HealthCare of Colorado, Inc. ....	.....	.....9,000,000 .....	.....	.....	.....(8,153,699) .....	.....(35,565) .....	.....	.....	.....810,736 .....	.....14,703 .....
.....95660 .....	06-1141174 .....	Cigna HealthCare of Connecticut, Inc. ....	.....	.....	.....	.....	.....(675,816) .....	.....(855) .....	.....	.....	.....(676,671) .....	.....299 .....
.....95136 .....	59-2089259 .....	Cigna HealthCare of Florida, Inc. ....	.....	.....	.....	.....	.....(381,358) .....	.....(81,810) .....	.....	.....	.....(463,168) .....	.....26,633 .....
.....96229 .....	58-1641057 .....	Cigna HealthCare of Georgia, Inc. ....	.....	.....170,000,000 .....	.....	.....	.....(65,137,149) .....	.....6,351,021 .....	.....	.....	.....111,213,872 .....	.....13,004 .....
.....95602 .....	36-3385638 .....	Cigna HealthCare of Illinois, Inc. ....	.....	.....	.....	.....	.....(11,163,690) .....	.....941,278 .....	.....	.....	.....(10,222,412) .....	.....677,061 .....
.....95525 .....	35-1679172 .....	Cigna HealthCare of Indiana, Inc. ....	.....	.....	.....	.....	.....(7,323) .....	.....(795) .....	.....	.....	.....(8,118) .....	.....345 .....
.....95477 .....	01-0418220 .....	Cigna HealthCare of Maine, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....95220 .....	02-0402111 .....	Cigna HealthCare of Massachusetts, Inc. ..	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....95493 .....	02-0387749 .....	Cigna HealthCare of New Hampshire, Inc. ..	.....	.....	.....	.....	.....(6,023) .....	.....	.....	.....	.....(6,023) .....	.....
.....95500 .....	22-2720890 .....	Cigna HealthCare of New Jersey, Inc. ....	.....(5,500,000) .....	.....	.....	.....	.....(13,504) .....	.....(1,890) .....	.....	.....	.....(5,515,394) .....	.....1,288,978 .....
.....95132 .....	56-1479515 .....	Cigna HealthCare of North Carolina, Inc. ..	.....	.....22,000,000 .....	.....	.....	.....(50,180,992) .....	.....1,998,941 .....	.....	.....	.....(26,182,051) .....	.....4,580 .....
.....95121 .....	23-2301807 .....	Cigna HealthCare of Pennsylvania, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....95708 .....	06-1185590 .....	Cigna HealthCare of South Carolina, Inc. ..	.....	.....	.....	.....	.....(10,967,141) .....	.....(2,985) .....	.....	.....	.....(10,970,126) .....	.....1,111 .....
.....95635 .....	36-3359925 .....	Cigna HealthCare of St. Louis, Inc. ....	.....	.....	.....	.....	.....(2,687,357) .....	.....(34,530) .....	.....	.....	.....(2,721,887) .....	.....11,813 .....
.....95606 .....	62-1218053 .....	Cigna HealthCare of Tennessee, Inc. ....	.....	.....	.....	.....	.....(2,311,538) .....	.....	.....	.....	.....(2,311,538) .....	.....173,840 .....
.....95383 .....	74-2767437 .....	Cigna HealthCare of Texas, Inc. ....	.....(7,500,000) .....	.....60,000,000 .....	.....	.....	.....(4,399,408) .....	.....1,960,390 .....	.....	.....	.....50,060,982 .....	.....360,355 .....
.....95518 .....	62-1230908 .....	Cigna HealthCare of Utah, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	02-0495422 .....	Cigna Healthcare, Inc. ....	.....	.....	.....	.....	.....13,330 .....	.....	.....	.....	.....13,330 .....	.....
.....	00-0000000 .....	Cigna HLA Technology Services Company Limited .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	06-1059331 .....	Cigna Holding Company .....	.....83,300,000 .....	.....	.....	.....	.....(6,550) .....	.....	.....	.....	.....83,293,450 .....	.....
.....	23-3009279 .....	Cigna Holdings Overseas, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	06-1072796 .....	Cigna Holdings, Inc. ....	.....101,661,692 .....	.....(1,227,000,000) .....	.....	.....	.....(82,801) .....	.....	.....	.....	.....(1,125,421,109) .....	.....
.....	00-0000000 .....	Cigna Hong Kong Holdings Company Limited ..	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	27-1903785 .....	Cigna Insurance Agency, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....65269 .....	75-2305400 .....	Cigna Insurance Company .....	.....	.....	.....	.....	.....(27,046) .....	.....	.....	.....	.....(27,046) .....	.....
.....	00-0000000 .....	Cigna Insurance Management Services (DIFC), Ltd. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Cigna Insurance Middle East S.A.L. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Cigna Insurance Services (Europe) Limited ..	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	23-2924152 .....	Cigna Integratedcare, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	51-0402128 .....	Cigna Intellectual Property, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	51-0111677 .....	Cigna International Corporation, Inc. ....	.....	.....	.....	.....	.....(7,628,030) .....	.....	.....	.....	.....(7,628,030) .....	.....

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	52-0291385 .....	Cigna International Finance, Inc. ....										
	00-0000000 .....	Cigna International Health Services Kenya Limited .....										
	00-0000000 .....	Cigna International Health Services Sdn. Bhd. ....										
	00-0000000 .....	Cigna International Health Services, BVBA .....										
	30-0526216 .....	Cigna International Health Services, LLC ..										
	00-0000000 .....	Cigna International Marketing (Thailand) Limited .....										
	00-0000000 .....	Cigna International Services Australia Pty Ltd. ....										
	23-2610178 .....	Cigna International Services, Inc. ....										
	06-1095823 .....	Cigna Investment Group, Inc. ....					(1,232)				(1,232)	
	06-0861092 .....	Cigna Investments, Inc. ....					48,880,958				48,880,958	
	98-1146864 .....	Cigna Laurel Holdings, Ltd. ....										
	00-0000000 .....	Cigna Legal Protection U.K. Ltd. ....										
	AA-1560515 .....	Cigna Life Insurance Company of Canada ....					(6,916,463)				(6,916,463)	
	AA-1240009 .....	Cigna Life Insurance Company of Europe S.A.-N.V. ....					(3,589)				(3,589)	
	46-4110289 .....	Cigna Linden Holdings, Inc. ....										
	98-1232512 .....	Cigna Magnolia Holdings, Ltd. ....										
	23-2741294 .....	Cigna Managed Care Benefits Company .....					24,431,542				24,431,542	
	89-3374500 .....	Cigna Management Company LLC .....	(1,050,000,000)								(1,050,000,000)	
	98-1154657 .....	Cigna Myrtle Holdings, Ltd. ....										
61727	34-0970995 .....	Cigna National Health Insurance Company ..	3,253,804	746,196			(16,049,058)				(12,049,058)	
	00-0000000 .....	Cigna Nederland Gamma B.V. ....										
	00-0000000 .....	Cigna Oak Holdings, Ltd. ....										
	98-1232443 .....	Cigna Palmetto Holdings, Ltd. ....										
	46-4099800 .....	Cigna Poplar Holdings, Inc. ....										
	06-1071502 .....	Cigna RE Corporation .....		100,000							100,000	
	06-1567902 .....	Cigna Resource Manager, Inc. ....										
	00-0000000 .....	Cigna Services Middle East FZE .....										
	00-0000000 .....	Cigna Spruce Holdings GmbH .....										
	00-0000000 .....	Cigna Teak Holdings, LLC .....										
	00-0000000 .....	Cigna Turkey Danismanlik Hizmetleri, A.S (A/K/A Cigna Turkey Consultancy Services, A.S.) .....										
	83-1069280 .....	Cigna Ventures, LLC .....		113,638,329							113,638,329	
	00-0000000 .....	Cigna Walnut Holdings, Ltd. ....										
	00-0000000 .....	Cigna Willow Holdings, Ltd. ....										
	00-0000000 .....	Cigna Worldwide General Insurance Company Limited .....										
90859	23-2088429 .....	Cigna Worldwide Insurance Company .....	(37,000,000)				120,000				(36,880,000)	1,717,790

SCHEDULE Y  
PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	00-0000000	Claims and Risk Services Limited										
	00-0000000	ManipalCigna Health Insurance Company Limited										
	84-1461840	Community Health Network, LLC										
	06-1252419	Connecticut General Benefit Payments, Inc.										
	06-0840391	Connecticut General Corporation		74,900,000			(3,125)				74,896,875	
62308	06-0303370	Connecticut General Life Insurance Company	(70,000,000)	1,170,065			(16,256,120)	(595,552)			(85,681,607)	(63,699)
	82-4936006	CPI-CII 9171 Wilshire JV LLC										
	27-3555688	CR Washington Street Investors LP										
	36-4369972	CuraScript, Inc.										
	86-1305728	Deco Apartments JV LLC										
	86-1334095	Deco Apartments Owner LLC										
	16-1526641	Diversified NY IPA, Inc.										
	41-1627938	Diversified Pharmaceutical Services, Inc.										
	27-3542089	Econdisc Contracting Solutions, LLC										
	00-0000000	Egyptian Emirates Administration Services SAE										
	00-0000000	ESI Canada										
	00-0000000	ESI GP Canada ULC										
	43-1925556	ESI GP Holdings, Inc.										
	00-0000000	ESI GP2 Canada ULC										
	74-2974964	ESI Mail Order Processing, Inc. (f/k/a NXI)										
	43-1867735	ESI Mail Pharmacy Service, Inc.										
	43-1925562	ESI Partnership										
	41-2006555	ESI Resources, Inc.										
	92-1016132	ESSCH Holdings, Inc.										
	94-3107309	Evernorth Behavioral Health of California, Inc.					(49,340)				(49,340)	
	75-2751090	Evernorth Behavioral Health of Texas, Inc.					(196,274)				(196,274)	
	41-1648670	Evernorth Behavioral Health, Inc.	(135,000,000)				(144,462,992)				(279,462,992)	
	86-1465626	Evernorth Care Solutions, Inc.										
	32-0222252	Evernorth Direct Health, LLC					(7,114)				(7,114)	
	85-2732455	Evernorth Enterprise Services, Inc.										
	85-2759151	Evernorth Sales Operations, Inc.										
	85-2717903	Evernorth Strategic Development, Inc.										
	46-4676347	eviCore 1, LLC										
	62-1615395	eviCore healthcare MSI, LLC					22,996,578				22,996,578	
13918	27-3175443	Express Reinsurance Company										
	41-2063830	Express Scripts Administrators LLC										
	00-0000000	Express Scripts Canada Co.										

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	43-1942542	Express Scripts Canada Holding Co.										
	27-1490640	Express Scripts Canada Holding, LLC										
	00-0000000	Express Scripts Canada Services										
	00-0000000	Express Scripts Canada Wholesale										
	84-5003423	Express Scripts Health Information Network Partners, Inc.										
	45-2884094	Evernorth Health, Inc.					(398,329)				(398,329)	
	20-5826948	Express Scripts Pharmaceutical Procurement, LLC										
	00-0000000	Express Scripts Pharmacy Atlantic, Ltd.										
	00-0000000	Express Scripts Pharmacy Central, Ltd.										
	00-0000000	Express Scripts Pharmacy Ontario, Ltd.										
	00-0000000	Express Scripts Pharmacy West, Ltd.										
	30-0789911	Express Scripts Pharmacy, Inc.										
	22-3114423	Express Scripts Sales Operations, Inc.										
	20-3126104	Express Scripts Senior Care Holdings, Inc.										
	20-3126075	Express Scripts Senior Care, Inc.										
	43-1832983	Express Scripts Services Co.										
	43-1869712	Express Scripts Specialty Distribution Services, Inc.										
	22-2230703	Express Scripts Strategic Development, Inc.										
	43-1869714	Express Scripts Utilization Management Company										
	43-1420563	Express Scripts, Inc.					98,890,987				98,890,987	
	00-0000000	FirstAssist Administration Limited										
	23-1914061	Former Cigna Investments, Inc.					(54,237)				(54,237)	
	88-3762943	Forsyth Health, LLC										
	02-0523249	Freco, Inc.										
	20-3229217	Freedom Service Company, LLC										
	00-0000000	Gillette Ridge Community Council, Inc.										
	20-3700105	Gillette Ridge Golf, LLC										
95388	93-1174749	Great-West Healthcare of Illinois, Inc.										
	00-0000000	GRG Acquisitions LLC		(72,173)							(72,173)	
	76-0657035	GulfQuest, LP					340,006,266				340,006,266	
	87-3650143	Hartford Community Lender Holding LLC										
	87-3686301	Hartford Community Lender I LLC										
	52-2149519	Hazard Center Investment Company LLC										
	04-2992335	Healthbridge Reimbursement & Product Support, Inc.										
	26-2159005	Healthbridge, Inc.										
	46-2086778	Health-Lynx, LLC										
	06-1533555	Healthsource Benefits, Inc.										
	02-0467679	Healthsource Properties, Inc.										

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	02-0387748	Healthsource, Inc.	22,000,000	640,000,000			(1,190)				661,998,810	
12902	20-8534298	HealthSpring Life & Health Insurance Company, Inc.	150,000,000				(654,786,017)				(504,786,017)	
	20-8647386	HealthSpring Management of America, LLC	220,000,000				204,221,778				424,221,778	
11532	65-1129599	HealthSpring of Florida, Inc.		15,000,000			(54,567,289)				(39,567,289)	
	26-2353772	HealthSpring Pharmacy of Tennessee, LLC										
	26-2353476	HealthSpring Pharmacy Services, LLC										
	72-1559530	HealthSpring USA, LLC					188,340,537				188,340,537	
	20-1821898	HealthSpring, Inc.					(401,898)				(401,898)	
	81-4139432	Heights at Bear Creek Borrower LLC										
	81-4139432	Heights at Bear Creek Mezzanine LLC										
	81-4139432	Heights at Bear Creek Venture LLC										
	20-4266628	Home Physicians Management, LLC										
	75-3108521	HouQuest, LLC										
	37-1708015	Houston Briar Forest Apartments Limited Partnership										
	95-4838551	Ideal Properties II LLC										
	35-2041388	IHN, Inc.					(1,482)				(1,482)	
	00-0000000	Independent Health Information Technology Services L.L.C.										
	82-1655179	Innovative Product Alignment, LLC										
	82-0658250	Inside RX, LLC										
	81-0425785	Intermountain Underwriters, Inc.					16,757				16,757	
	00-0000000	International Pharmaceutical Solutions, GmbH										
	84-3406799	JA Lofts Holdings, LLC										
	84-3395923	JA Lofts JV Limited Partnership										
	00-0000000	Kuwait Emirates Administration Services WLL										
	20-8064696	Kronos Optimal Health Company					(2,608)				(2,608)	
	47-5292506	L&C Investments, LLC										
	47-4375626	Lakehills CM-CG LLC										
65722	63-0343428	Loyal American Life Insurance Company	(21,017,979)	(3,982,021)			(72,873,882)				(97,873,882)	
	58-2593075	Lynnfield Compounding Center, Inc.										
	04-3546044	Lynnfield Drug, Inc.										
	27-1506930	MAH Pharmacy, LLC										
	80-0908244	Mallory Square Partners I, LLC										
	88-0241365	Managed Care Consultants, Inc.										
	51-0500147	Matrix GPO, LLC										
	59-3720653	Matrix Healthcare Services, Inc.										
	06-1346406	MCC Independent Practice Association of New York, Inc.					(24,264)				(24,264)	
	45-4937055	MDLive, Inc.										
	00-0000000	MDLive LLC										

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	00-0000000	MDLivevisit, LLC										
	00-0000000	MDLive Provider Services, LLC										
34720	13-3506395	Medco Containment Insurance Company of NY		90,000,000			(3,547,290)				86,452,710	
63762	42-1425239	Medco Containment Life Insurance Company	(32,300,000)				(109,402,181)				(141,702,181)	
	27-3709630	Medco Europe II, LLC										
	46-2166374	Medco Europe, LLC										
	84-5017653	Medco Health Information Network Partners, Inc.										
	81-0616525	Medco Health Puerto Rico, LLC										
	26-3544786	Medco Health Services, Inc.										
	22-3461740	Medco Health Solutions, Inc.	32,300,000	(90,000,000)							(57,700,000)	
	88-0334401	Mediversal, Inc.										
	27-3801345	MedSolutions Holdings, Inc.										
	87-2810715	Montclair 11 Pine Operating Company LLC										
	87-2810715	Montclair 11 Pine Urban Renewal LLC										
	87-2772585	Montclair Residences JV LLC										
	32-0071543	MSI Health Organization of Texas, Inc.					(2,015,236)				(2,015,236)	
	27-5492993	MSI HT, LLC										
	27-5493148	MSI LT, LLC										
	27-5493321	MSI SAR-GW, LLC										
	86-1090522	MSIAZ I, LLC										
	20-1749733	MSICA I, LLC										
	20-1222347	MSICO I, LLC										
	55-0840800	MSIFL, LLC										
	26-0181185	MSIMD I, LLC										
	74-3122235	MSINC I, LLC										
	11-3715243	MSINH II, LLC										
	03-0524694	MSINH, LLC										
	20-1749446	MSINJ I, LLC										
	20-1761914	MSINV I, LLC										
	55-0840806	MSISC II, LLC										
	26-0336736	MSIVT I, LLC										
	20-2536458	MSIWA, LLC										
	36-4833284	MyM Technology Services, LLC										
	82-1350878	myMatrixx Holdings, LLC										
	46-2589799	myMatrixx-B, LLC										
	00-0000000	NAS Administrative Services Company LLC										
	00-0000000	NAS Neuron Health Services, L.L.C.										
	00-0000000	NAS United SPV										
	00-0000000	Neuron LLC										
	52-1929677	NewQuest Management Northeast, LLC					191,223,519				191,223,519	
	33-1033586	NewQuest Management of Alabama, LLC					261,792,525				261,792,525	
	20-4954206	NewQuest Management of Florida, LLC					38,704,353				38,704,353	

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	77-0632665 .....	NewQuest Management of Illinois, LLC .....					35,618,531				35,618,531	
	45-0633893 .....	NewQuest Management of West Virginia, LLC .....										
	76-0628370 .....	NewQuest, LLC .....	(590,000,000)				(1,323,856)				(591,323,856)	
	82-5244890 .....	Octave Health Group, Inc. ....										
	91-1599329 .....	Olympic Health Management Services, Inc. .										
	91-1500758 .....	Olympic Health Management Systems, Inc. .										
	80-0818758 .....	Patient Provider Alliance, Inc. ....										
	35-1927379 .....	Priority Healthcare Corporation .....										
	59-3761140 .....	Priority Healthcare Distribution, Inc. ....										
67903	23-1335885 .....	Provident American Life & Health Insurance Company .....	(3,253,804)	(746,196)			(174,085)				(4,174,085)	
	00-0000000 .....	PT GAR Indonesia .....										
	45-5046449 .....	PUR Arbors Apartments Venture LLC .....										
	46-1801639 .....	QualCare Management Resources Limited Liability Company .....										
	00-0000000 .....	Qualient Pharmaceuticals Holdings LP .....										
	00-0000000 .....	Qualient Pharmaceuticals Health LLC .....					(12,587)				(12,587)	
	45-5569416 .....	QPID Health, LLC .....										
	83-1460134 .....	Rise-CG Capitol Hill, LP .....										
	84-3254168 .....	Rise-CG JA Lofts Limited Partnership .....										
	35-1641636 .....	Sagamore Health Network, Inc. ....					967,340				967,340	
	46-3593103 .....	SB-SNH LLC .....										
	95-2876207 .....	Secon Properties, LP .....										
	82-1732483 .....	SOMA Apartments Venture LLC .....										
	82-4405071 .....	Specialty Products Acquisitions, LLC .....										
	61-1317695 .....	SpectraCare Health Care Ventures, Inc. ....										
	61-1147068 .....	SpectraCare, Inc. ....										
77399	13-1867829 .....	Sterling Life Insurance Company .....	(10,788,947)	788,947			(1,877,893)				(11,877,893)	
	47-2658932 .....	Strategic Pharmaceutical Investments, LLC .....										
	00-0000000 .....	SureScripts, LLC .....										
	87-0903685 .....	Swedesford Road Apartments, LLC .....										
	22-3474888 .....	Systemed, LLC .....										
	23-3074013 .....	Tel-Drug of Pennsylvania, LLC .....										
	46-0427127 .....	Tel-Drug, Inc. ....										
	00-0000000 .....	Temple Insurance Company Limited .....					(34,500)				(34,500)	
	20-5524622 .....	Tennessee Quest, LLC .....										
	75-3108527 .....	TexQuest, LLC .....										
	85-1955731 .....	The Flats at Interbay Holdings, LLC .....										
	85-1955075 .....	The Flats at Interbay JV Limited Partnership .....										
	85-1962013 .....	The Flats at Interbay Limited Partnership .....										
	46-5264463 .....	Trainer Rx, Inc. ....										

SCHEDULE Y

PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	00-0000000 .....	Transwestern Federal, L.L.C. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Transwestern Federal Holdings, L.L.C. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	88-0344624 .....	Universal Claims Administration .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	98-0463704 .....	Vielife Services, Inc. ....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Verity Solutions Group, Inc. ....	(25,000,000)	.....	.....	.....	(2,351)	.....	.....	.....	(25,002,351)	.....
.....	00-0000000 .....	Westcore CG AC, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Camelback, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Cedar Port, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Westcore CG Commerce, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Dove Valley I, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Dove Valley II, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Eisenhower, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG II Eisenhower, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Fountain Lakes, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Gateway, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG I-35, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Navy, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Potomac Park, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Solano, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	84-3178563 .....	Westcore CG Susana, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Westcore CG Venture, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	87-3624928 .....	Westcore CG Venture II, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	87-3624928 .....	Westcore CG II AC, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	87-3624928 .....	Westcore CG II Park 225, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	87-3624928 .....	Westcore CG II Union Cross, LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	Willow DSP LLC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
.....	00-0000000 .....	YCFM Servicios LTDA .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9999999 Control Totals								1	XXX		1	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Cigna Insurance Company (Formerly United Benefit Life Insurance Company)

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1	2	3	4	5	6	7	8
		Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control\ Affiliation of Column 2 Over Column 1 (Yes/No)		U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control\ Affiliation of Column 5 Over Column 6 (Yes/No)
Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party			
Allegiance Life & Health Insurance Company .....	Benefit Management Corp. ....	95.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
American Retirement Life Insurance Company .....	Loyal American Life Insurance Company .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Bravo Health Mid-Atlantic, Inc. ....	NewQuest Management Northeast, LLC .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Bravo Health Pennsylvania, Inc. ....	NewQuest Management Northeast, LLC .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
CareCore NJ, LLC .....	eviCore healthcare MSI, LLC .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Arbor Life Insurance Company .....	Connecticut General Corporation .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Colorado, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Delaware, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Florida, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Kansas, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Kentucky, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Maryland, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Missouri, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of New Jersey, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of North Carolina, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Ohio, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Pennsylvania, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Texas, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Of Virginia, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Dental Health Plan Of Arizona, Inc. ....	Cigna Dental Health, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Health and Life Insurance Company .....	Connecticut General Life Insurance Company .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare Mid-Atlantic, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Arizona, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Colorado, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Connecticut, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Florida, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Georgia, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Illinois, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Indiana, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Maine, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Massachusetts, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of New Hampshire, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of New Jersey, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of North Carolina, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Pennsylvania, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of South Carolina, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of St. Louis, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Tennessee, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Texas, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna HealthCare of Utah, Inc. ....	Healthsource, Inc. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
	Provident American Life and Health Insurance Company .....						
Cigna Insurance Company .....	.....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna National Health Insurance Company .....	Cigna Health and Life Insurance Company .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Cigna Worldwide Insurance Company .....	Cigna Global Reinsurance Company, Ltd. ....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....
Connecticut General Life Insurance Company .....	Connecticut General Corporation .....	100.000	NO.....	Cigna Corporation .....	Cigna Group .....	100.000	NO.....

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

1	2	3	4	5	6	7	8
		Ownership Percentage Column 2 of Column 1	Granted Disclaimer of Control\ Affiliation of Column 2 Over Column 1 (Yes/No)		U.S. Insurance Groups or Entities Controlled by Column 5	Ownership Percentage (Column 5 of Column 6)	Granted Disclaimer of Control\ Affiliation of Column 5 Over Column 6 (Yes/No)
Insurers in Holding Company	Owners with Greater Than 10% Ownership			Ultimate Controlling Party			
Express Reinsurance Company .....	Express Scripts, Inc. ....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Great-West Healthcare of Illinois, Inc. ....	Cigna Healthcare Holdings, Inc. ....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
HealthSpring Life & Health Insurance Company, Inc. .	NewQuest, LLC .....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
HealthSpring of Florida, Inc. ....	NewQuest, LLC .....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Loyal American Life Insurance Company .....	Cigna Health and Life Insurance Company .....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Medco Containment Insurance Company of NY .....	Medco Health Solutions, Inc. ....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Medco Containment Life Insurance Company .....	Medco Health Solutions, Inc. ....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Provident American Life & Health Insurance Company .	Cigna National Health Insurance Company .....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....
Sterling Life Insurance Company .....	Cigna Health and Life Insurance Company .....	100.000	.....NO.....	Cigna Corporation .....	Cigna Group .....	100.000	.....NO.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

MARCH FILING

	Responses
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....	YES
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....	YES
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1? .....	YES
4. Will an actuarial opinion be filed by March 1? .....	YES

APRIL FILING

5. Will Management’s Discussion and Analysis be filed by April 1? .....	YES
6. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) .....	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES

JUNE FILING

8. Will an audited financial report be filed by June 1? .....	YES
9. Will Accountant’s Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. 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.

MARCH FILING

10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ..	NO
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
14. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
16. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
17. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
18. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
19. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
20. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
22. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
23. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
24. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
25. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

26.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
27.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1? .....	NO
28.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1? (Not applicable to fraternal benefit societies) .....	NO
29.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1? .....	NO
30.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
31.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1? .....	NO
32.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1? .....	NO
33.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1? .....	NO
34.	Will the VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO
35.	Will the Health Care Receivables Supplement be filed with the state of domicile and the NAIC by March 1? .....	NO

APRIL FILING

36.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1? .....	YES
37.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....	NO
38.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) ..	NO
39.	Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....	NO
40.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? .....	NO
41.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? .....	NO
42.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? .....	NO
43.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? .....	NO
44.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1? .....	NO
45.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	NO
46.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	NO
47.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1? .....	NO

AUGUST FILING

48.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? .....	NO
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- Explanations:
- 10. Data for the supplement is not required to be filed.
  - 11. Data for the supplement is not required to be filed.
  - 12. Data for the supplement is not required to be filed.
  - 13. Data for the supplement is not required to be filed.
  - 14. Data for the supplement is not required to be filed.
  - 15. Data for the supplement is not required to be filed.
  - 16. Data for the supplement is not required to be filed.
  - 17. Data for the supplement is not required to be filed.
  - 18. Data for the supplement is not required to be filed.
  - 19. Data for the supplement is not required to be filed.
  - 20. Data for the supplement is not required to be filed.
  - 21. Data for the supplement is not required to be filed.
  - 22. Data for the supplement is not required to be filed.
  - 23. Data for the supplement is not required to be filed.
  - 24. Data for the supplement is not required to be filed.
  - 25. Data for the supplement is not required to be filed.
  - 26. Data for the supplement is not required to be filed.
  - 27. Data for the supplement is not required to be filed.
  - 28. Data for the supplement is not required to be filed.
  - 29. Data for the supplement is not required to be filed.
  - 30. Data for the supplement is not required to be filed.
  - 31. Data for the supplement is not required to be filed.
  - 32. Data for the supplement is not required to be filed.
  - 33. Data for the supplement is not required to be filed.
  - 34. Data for the supplement is not required to be filed.
  - 35. Data for the supplement is not required to be filed.
  - 37. Data for the supplement is not required to be filed.
  - 38. Data for the supplement is not required to be filed.
  - 39. Data for the supplement is not required to be filed.
  - 40. Data for the supplement is not required to be filed.
  - 41. Data for the supplement is not required to be filed.
  - 42. Data for the supplement is not required to be filed.
  - 43. Data for the supplement is not required to be filed.
  - 44. Data for the supplement is not required to be filed.
  - 45. Data for the supplement is not required to be filed.
  - 46. Data for the supplement is not required to be filed.
  - 47. Data for the supplement is not required to be filed.
  - 48. Data for the supplement is not required to be filed.

- Bar Codes:
- 10. SIS Stockholder Information Supplement [Document Identifier 420]



- 11. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



- 12. Trusteed Surplus Statement [Document Identifier 490]



- 13. Participating Opinion for Exhibit 5 [Document Identifier 371]
































- 14. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]



- 15. Actuarial Opinion on X-Factors [Document Identifier 442]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

16.	Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]	 <div>65269202244300000</div>
17.	Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]	 <div>65269202244400000</div>
18.	Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]	 <div>65269202244500000</div>
19.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]	 <div>65269202244600000</div>
20.	Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]	 <div>65269202244700000</div>
21.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]	 <div>65269202244800000</div>
22.	Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]	 <div>65269202244900000</div>
23.	C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]	 <div>65269202245000000</div>
24.	C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]	 <div>65269202245100000</div>
25.	Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]	 <div>65269202245200000</div>
26.	Modified Guaranteed Annuity Model Regulation [Document Identifier 453]	 <div>65269202245300000</div>
27.	Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]	 <div>65269202245400000</div>
28.	Workers' Compensation Carve-Out Supplement [Document Identifier 495]	 <div>65269202249500000</div>
29.	Supplemental Schedule O [Document Identifier 465]	 <div>65269202246500000</div>
30.	Medicare Part D Coverage Supplement [Document Identifier 365]	 <div>65269202236500000</div>
31.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 <div>65269202222400000</div>
32.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 <div>65269202222500000</div>
33.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 <div>65269202222600000</div>
34.	VM-20 Reserves Supplement [Document Identifier 456]	 <div>65269202245600000</div>
35.	Health Care Receivables Supplement [Document Identifier 470]	 <div>65269202247000000</div>
37.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 <div>65269202230600000</div>
38.	Credit Insurance Experience Exhibit [Document Identifier 230]	 <div>65269202223000000</div>
39.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 <div>65269202221000000</div>
40.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 <div>65269202221600000</div>
41.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 <div>65269202221700000</div>
42.	Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]	 <div>65269202243500000</div>
43.	Supplemental Term and Universal Life Insurance Reinsurance Exhibit [Document Identifier 345]	 <div>65269202234500000</div>
44.	Variable Annuities Supplement [Document Identifier 286]	 <div>65269202228600000</div>
45.	Executive Summary of the PBR Actuarial Report [Document Identifier 457]	 <div>65269202245700000</div>

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

46. Life Summary of the PBR Actuarial Report [Document Identifier 458]



47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



48. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



OVERFLOW PAGE FOR WRITE-INS

NONE